National Physical Activity Plan for the United States

The U.S. National Physical Activity Plan has a vision: One day, all Americans will be physically active and they will live, work, and play in environments that facilitate regular physical activity.

The Plan is a comprehensive set of policies, programs, and initiatives that aim to increase physical activity in all segments of the American population. The Plan is the product of a private-public sector collaborative. Hundreds of organizations are working together to change our communities in ways that will enable every American to be sufficiently physically active.

The Plan aims to create a national culture that supports physically active lifestyles. Its ultimate purpose is to improve health, prevent disease and disability, and enhance quality of life.
The U.S. National Physical Activity Plan is comprised of recommendations that are organized in eight societal sectors:

- Public Health
- Health Care
- Education
- Transportation, Land Use and Community Design
- Parks, Recreation, Fitness and Sports
- Business and Industry
- Volunteer and Non-Profit Organizations
- Mass Media

Each sector presents strategies aimed at promoting physical activity. Each strategy also outlines specific tactics that communities, organizations and agencies, and individuals can use to address the strategy. Recognizing that some strategies encompass multiple sectors, the Plan also has several overarching strategies.

The Plan is focused on initiatives that aim to increase physical activity. Reducing sedentary behavior is recognized to be an important public health goal, but is not the Plan’s specific objective.

A coordinating committee comprised of representatives from numerous organizational partners provided overall direction and guidance for the Plan. Working with the Coordinating Committee, Working Groups for each of the eight sectors developed the Plan’s strategies and tactics. An open public comment period garnered extensive comments and suggestions that were incorporated into the Plan.

In developing the Plan, the Coordinating Committee and Working Groups relied on several guiding principles:

- Use evidence to inform the Plan’s actions to promote physical activity.
- Include initiatives for all socio-demographic groups.
- Aim actions at local, state, federal, and institutional levels.
- Encourage the involvement of diverse stakeholders to guide the content of the Plan.
- Ground the Plan in the ecological model of health behavior.
- Ensure that the Plan’s initiatives reduce health disparities across socio-demographic groups.
- Present the Plan as a “living document” that is updated on a regular basis.
OVERARCHING STRATEGIES

Physical activity is one of the most important steps that people of all ages can take to improve their health. The leading national and global public health authorities – the U.S. Centers for Disease Control and Prevention, the U.S. Surgeon General, and the World Health Organization – all have called upon the United States to adopt a national physical activity plan.

In recent years, many individual communities and organizations have developed programs and initiatives to encourage increased physical activity. Despite these efforts, no significant increase in physical activity has occurred.

It is clear that a national and multi-pronged effort is needed to increase physical activity in the U.S. population. A design that encompasses eight societal sectors allows the Plan to lead such an effort. The Plan reaches out to diverse audiences and encourages the development of a wide range of innovative activities.

At the same time, having all eight sectors under one plan allows the Plan to take advantage of cross-sector synergies. As the Plan’s Coordinating Committee and Working Groups developed their strategies and tactics, several overarching strategies emerged. These strategies reflect priorities laid out in multiple sectors. Successfully addressing these strategies will do much to move the entire National Plan for Physical Activity forward.

**STRATEGY 1**
Launch a grassroots advocacy effort to mobilize public support for strategies and tactics included in the National Physical Activity Plan.

**STRATEGY 2**
Mount a national physical activity education program to educate Americans about effective behavioral strategies for increasing physical activity. Integrate the program’s design with other national health promotion and disease prevention education campaigns.

**STRATEGY 3**
Disseminate best practice physical activity models, programs, and policies to the widest extent practicable to ensure Americans can access strategies that will enable them to meet federal physical activity guidelines.

**STRATEGY 4**
Create a national resource center to disseminate effective tools for promoting of physical activity.

**STRATEGY 5**
Establish a center for physical activity policy development and research across all sectors of the National Physical Activity Plan.
PUBLIC HEALTH

Rationale and Strategies

Historically, the primary role of public health is to monitor, protect, and promote the public’s health. These functions complement the health care delivery system and community sectors. Chronic disease prevention and management has become an important public health focus in recent years.

Given the integral role of physical activity in maintaining good health and preventing disease, public health agencies, state health departments, public health professionals, public health professional societies, and institutions of higher learning can play major roles in carrying out the following strategies. In the context of the National Physical Activity Plan, the term “public health organization” is defined broadly to include public health agencies and non-government organizations.

STRATEGY 1
Develop and maintain an ethnically and culturally diverse public health workforce of both genders with competence and expertise in physical activity and health.

STRATEGY 2
Create, maintain, and leverage cross-sector partnerships and coalitions that implement effective strategies to promote physical activity. Partnerships should include representatives from public health; health care; education; parks, recreation, fitness, and sports; transportation, urban design, and community planning; business and industry; volunteer and non-profit organizations; faith communities; mass media; and organizations serving historically underserved and understudied populations.

STRATEGY 3
Engage in advocacy and policy development to elevate the priority of physical activity in public health practice, policy, and research.

STRATEGY 4
Disseminate tools and resources important to promoting physical activity, including resources that address the burden of disease due to inactivity, the implementation of evidence-based interventions, and funding opportunities for physical activity initiatives.

STRATEGY 5
Expand monitoring of policy and environmental determinants of physical activity and the levels of physical activity in communities (surveillance), and monitor the implementation of public health approaches to promoting active lifestyles (evaluation).
Public Health: Strategies and Tactics

STRATEGY 1: Develop and maintain an ethnically and culturally diverse public health workforce of both genders with competence and expertise in physical activity and health.

TACTICS

• Invest equitably in physical activity, commensurate with its value in promoting health and preventing and reducing chronic disease. Provide resources in state and local health agencies and programs for physical activity comparable to resources provided for tobacco and nutrition.

• Encourage the Centers for Disease Control and Prevention (CDC) and state health departments to provide sustainable funding for state and local health departments so that Physical Activity and Public Health Specialists can create and implement initiatives that promote physical activity.

• Create a physical activity and health unit in state health departments that functions as part of an integrated and coordinated approach to chronic disease prevention. Staff these units with physical activity practitioners who are specialists in physical activity and public health.

• Encourage professional societies in public health to adopt and disseminate core competencies for public health practitioners in physical activity, update the core competencies regularly, and increase the number of professionals who are certified Physical Activity and Public Health specialists.

• Support and expand training opportunities (e.g., Physical Activity and Public Health Course) based on core competencies for practitioners and paraprofessionals. Ensure interdisciplinary training such that physical activity and public health concepts are connected to other disciplines and also include leadership development and team-building. Augment the entry of physical activity professionals by engaging ethnic minority and disability organizations in public health, medicine, and related disciplines.

• Enhance academic programs with physical activity practitioner core competencies embedded into public health and other disciplines (e.g., health care) curricula.

• Increase the number of Master’s of Public Health (MPH) programs that provide training on physical activity and its promotion. Increase the number of graduates from these programs.

• Encourage CDC and the U.S. Department of Health and Human Services to invest in capacity building by supporting MPH and PhD programs, continuing medical education, short courses, and distance-based training for physical activity and public health through the Prevention Research Centers (PRCs) and other mechanisms.

• Expand recruitment, outreach, and training efforts (e.g., through scholarship programs sponsored by professional societies) to engage ethnic minority students, students with disabilities, and students representing groups at particular risk of physical inactivity.

• Encourage national and state public health associations to form physical activity sections within their organizations.
STRATEGY 2: Create, maintain, and leverage cross-sector partnerships and coalitions that implement effective strategies to promote physical activity. Partnerships should include representatives from public health; health care; education; parks, recreation, fitness, and sports; transportation, urban design, and community planning; business and industry; volunteer and non-profit organizations; faith communities; mass media; and organizations serving historically underserved and understudied populations.

TACTICS:
• Encourage public health professionals to both educate and learn from partners in order to strengthen the effectiveness of the partnership and the efforts of each member.
• Examine successful cross-sector partnerships to identify and incorporate key elements of success.
• Connect with agencies representing persons with disabilities and other populations affected by health disparities. Connect with “non-traditional” partners to increase the reach of interventions and encourage social capital. Engage members of the target audience.
• Provide sustained resources to local, state, and national public health agencies that support physical activity practitioners to act as conveners of multi-sector coalitions and to provide leadership for strategic partnerships.
• Encourage partnerships between local and state health agencies and scientists in academic and private settings to conduct community participatory research to facilitate the dissemination of evidence-based practices to promote physical activity.

STRATEGY 3: Engage in advocacy¹ and policy development to elevate the priority of physical activity in public health practice, policy, and research.

TACTICS
• Use the most current version of federal guidelines as a foundation for advocacy and policy development (e.g., 2008 Physical Activity Guidelines for Americans, the Physical Activity Guidelines Advisory Committee Report 2008, and Healthy People 2020).
• Ensure that the 2008 Physical Activity Guidelines are updated every five years.
• Encourage local, state, and national public health organizations to collaboratively engage in policy development and advocacy.
• Tailor policy messages for diverse audiences and settings. Identify and engage underserved populations. Target policy messages for each population, segment, and setting.
• Create a time-sensitive long- and short-term communication schedule for advocacy.
  o Identify and promote advocacy training opportunities for public health professionals.
• Work with diverse institutions’ advocacy teams to address overarching policies. Identify and promote advocacy training opportunities.
• Engage decision makers in funding research on policy development and evaluation of the effects of existing policies related to physical activity.
• Create an interdisciplinary policy and advocacy center to support advocacy efforts and policy development for physical activity in public health agencies and support advocacy efforts.
• Encourage health agencies to disseminate information on evidence-based policies related to physical activity by participating in advocacy networks, with emphasis on educating partners at local, state, and national levels.
• Develop a national physical activity report card that is informed by evidence and tracks actions taken and progress in reducing burden of disease due to inactivity in the United States.

• Engage community-based organizations that represent neighborhoods in policy development, accountability, and advocacy activities.

• Engage grassroots organizations that have demonstrated success in other public health arenas (e.g., tobacco control), and provide incentives for training and participation in population-based physical activity promotion.

• Develop an advocacy strategy for coordinated and appropriately funded physical activity research in multiple funding agencies.

1 Advocacy refers to educating decision makers at all levels while honoring the legal limitations associated with the use of public funds.

STRATEGY 4: Disseminate tools and resources important to promoting physical activity, including resources that address the burden of disease due to inactivity, the implementation of evidence-based interventions, and funding opportunities for physical activity initiatives.

TACTICS
• Identify and create tools and resources appropriate to supporting and advancing the work of physical activity practitioners and researchers.

• Support professional organizations in serving as repositories and clearinghouses for information on public health practices, tools and resources, including evidence-based and promising physical activity interventions and practices.

• Encourage CDC and professional societies to promote the use of existing tools and resources and identify promising practices, particularly those addressing the needs of underserved populations.

• Promote efforts by CDC, professional societies, and academic institutions to provide training and capacity building in the use, adaptation, and evaluation of evidence-based physical activity interventions.

• Fund public health professional societies, public health agencies, schools of public health, and other academic units engaged in physical activity research to develop tools and resources for policymakers and practitioners that supports the promotion of physical activity in communities.

• Ensure regular updates and dissemination of CDC’s Guide to Community Preventive Services physical activity intervention recommendations.

• Disseminate physical activity-promoting practices and policies targeted at agencies and professional societies outside of public health (e.g., youth-serving social services and non-profits in underserved communities).

• Identify and support expansion of culturally salient tools that build upon community assets to promote physical activity in ethnic minority, disabled, and other underserved populations.

STRATEGY 5: Expand monitoring of policy and environmental determinants of physical activity and the levels of physical activity in communities (surveillance), and monitor the implementation of public health approaches to promoting active lifestyles (evaluation).

TACTICS
• Increase networking and collaboration between practitioners, researchers, community-based organizations,
and advocates.

- Identify and promote a common set of measures that CDC can apply across diverse populations to track progress at state and national levels.
- Encourage CDC and the Physical Activity Policy Research Network (PAPRN) to define a common framework to evaluate policy and environmental change processes, outcomes, and impacts.
- Promote efforts by CDC and professional societies to build the capacity of practitioners to monitor key outcome measures of chosen interventions.
- Increase funding of CDC, Prevention Research Centers, PAPRN, and the National Institutes of Health to conduct research on policy development and its impact on physical activity.
- Regularly assess and report (e.g., national report card) on progress toward increasing physical activity and reducing physical inactivity.
- Improve and expand surveillance of physical activity and inactivity, including sedentary time, light activity, and fitness.
- Expand surveillance systems to monitor the status of environmental and policy determinants of physical activity and the disparities in resource availability and utilization.
- Expand surveillance systems to include the systematic assessment of physical activity and fitness levels of children and youth, including those from underserved communities.
- For relevant surveillance systems, include state-level reporting when feasible.
- Improve linkages between local policy and environmental change and national and state data collection systems.
- Create and expand relevant local surveillance or other physical activity data collection systems.
- Expand the ability of public health agencies and systems to provide health data that allows communities to understand the burden of inactivity in their communities, and to tailor approaches to increase physical activity to local circumstances.
HEALTH CARE

Rationale and Strategies

The health care sector is our Nation’s largest industry. It is comprised of all the people and physical resources devoted to providing health-related services to individuals.

Traditionally, health care has focused on diagnosing and treating illness and injury. However, as knowledge of the causes of premature disability and death has advanced, the health care sector has increasingly emphasized early intervention and prevention. In their work with individual patients, health care providers have a unique opportunity to encourage adults, children, and families to increase their daily physical activity. These providers and the health care organizations that support them have much to contribute in carrying out the following strategies.

**STRATEGY 1**
Make physical activity a patient “vital sign” that all health care providers assess and discuss with their patients.

**STRATEGY 2**
Establish physical inactivity as a treatable and preventable condition with profound health implications.

**STRATEGY 3**
Use a health care systems approach to promote physical activity and to prevent and treat physical inactivity.

**STRATEGY 4**
Reduce disparities in access to physical activity services in health care.

**STRATEGY 5**
Include physical activity education in the training of all health care professionals.

**STRATEGY 6**
Advocate at the local, state, and institutional levels for policies and programs that promote physical activity.
Health Care: Strategies and Tactics

STRATEGY 1: Make physical activity a patient “vital sign” that all health care providers assess and discuss with their patients.

TACTICS
• Ensure that all health care professional organizations encourage their members to assess patients’ physical activity and discuss ways to make progress toward meeting the Physical Activity Guidelines for Americans.
• Include fields for tracking patients’ physical activity in electronic medical records and electronic health records.
• Develop a Healthcare Effectiveness and Data Information Set (HEDIS) measure for physical activity.
• Encourage health care professionals to be role models for active lifestyles for patients.

STRATEGY 2: Establish physical inactivity as a treatable and preventable condition with profound health implications.

TACTICS
• Establish a payment system for physical inactivity diagnosis and treatment with International Classification of Disease (ICD) and Current Procedural Terminology (CPT) codes.
• Develop new service codes with Centers for Medicare & Medicaid Services (CMS).
• Ensure sufficient appropriate referral for services to qualified providers based on each individual patient’s needs.
• Ensure that all services include culturally salient patient education materials and counseling for physical activity.
• Encourage referral services to catalog community-based physical activity programs and resources.

STRATEGY 3: Use a health care systems approach to promote physical activity and to prevent and treat physical inactivity.

TACTICS
• Encourage health care systems and payors to prioritize physical activity and develop comprehensive approaches to physical activity promotion.
• Build upon successful programs already in place to create a central role for physical activity.
• Evaluate and promote effective practices and programs that encourage physical activity in partnership with insurers. For example, create patient incentives for demonstrating increased physical activity and fitness, such as co-payment waivers during chronic disease management visits.
• Expand research that identifies and evaluates best practices for physical activity in health care, particularly those effective in population segments at high risk of physical inactivity.
• Establish a national network of programs, providers and advocates for physical activity as a key component of the U.S. health system.
• Make low-cost, evidence-based cognitive and behavioral interventions widely available for referral by health
care providers to patients. These interventions can include high-tech approaches, such as Web resources and “smart phone” applications.

- Disseminate current best-practice guidelines for promoting physical activity in high risk subpopulations. Include approaches relevant to primary, secondary, and tertiary prevention.

**STRATEGY 4: Reduce disparities in access to physical activity services in health care.**

**TACTICS**
- Ensure groups at high risk for chronic disease and inactivity have equal or better access to physical activity services in clinical settings than the general patient population.
- Support health care organizations in educating patients about the importance of physical activity and in tracking the prevalence of physical inactivity.

**STRATEGY 5: Include physical activity education in the training of all health care professionals.**

**TACTICS**
- Add physical activity education to accreditation criteria.
- Add physical activity education to licensing exams.
- Include physical activity in continuing education professional development programs, using the recommendations of the most current Federal Physical Activity Guidelines for Americans.
- Train more facilitators and instructors from minority and underserved populations in physical activity promotion to enhance effectiveness with underserved groups.
- Offer provider incentives to attend continuing education on effective population physical activity promotion approaches.

**Strategy 6: Advocate at the local, state, and institutional levels for policies and programs that promote physical activity.**

**TACTICS**
- Encourage societies of health care professionals to expand their efforts to support physical activity policies and programs at local, state, and federal levels.
- Support societies of health care professionals in encouraging their members to promote physical activity in the communities in which they work and reside.
EDUCATION

Rationale and Strategies

In 2008, U.S. schools educated nearly 50 million children, from pre-kindergarten through grade 12. These children spent an average of 1,300 hours per year in school. Schools have a long history of addressing the health of children and adolescents, and physical activity – obtained through recess, physical education classes, and after-school programs – has traditionally been an integral component of this focus.

Today, however, schools are under intense pressure to improve academic standards. These pressures, combined with the trend toward children being driven to school and other factors, have reduced the amount of time children and adolescents are physically active during the school day.

Recent research indicates that physical activity actually has a positive impact on academic performance. These findings provide a critical impetus for teachers, coaches, school administrators, and school district officials to take a leadership role in carrying out the following strategies.

**STRATEGY 1**
Provide access to and opportunities for high-quality, comprehensive physical activity programs, anchored by physical education, in Pre-kindergarten through grade 12 educational settings. Ensure that the programs are physically active, inclusive, safe, and developmentally and culturally appropriate.

**STRATEGY 2**
Develop and implement state and school district policies requiring school accountability for the quality and quantity of physical education and physical activity programs.

**STRATEGY 3**
Develop partnerships with other sectors for the purpose of linking youth with physical activity opportunities in schools and communities.

**STRATEGY 4**
Ensure that early childhood education settings for children ages 0 to 5 years promote and facilitate physical activity.

**STRATEGY 5**
Provide access to and opportunities for physical activity before and after school.

**STRATEGY 6**
Encourage post-secondary institutions to provide access to physical activity opportunities, including physical activity courses, robust club and intramural programs, and adequate physical activity and recreation facilities.

**STRATEGY 7**
Encourage post-secondary institutions to incorporate population-focused physical activity promotion training in a range of disciplinary degree and certificate programs.
Education: Strategies and Tactics

STRATEGY 1: Provide access to and opportunities for high-quality, comprehensive physical activity programs, anchored by physical education, in Pre-kindergarten through grade 12 educational settings. Ensure that the programs are physically active, inclusive, safe, and developmentally and culturally appropriate.

TACTICS
• Advocate for increased federal funding of programs such as the Carol White Physical Education for Progress (PEP) grant program.
  o Include in funding criteria the development of state-of-the-art, comprehensive physical activity demonstration programs and pilot projects, and effective evaluation of those programs.
  o Include a preference for adoption of physical education (PE) and physical activity (PA) programs demonstrated to provide high amounts of physical activity.
  o Widely disseminate successful demonstration and pilot programs and those with practice-based evidence. Work with states to identify areas of great need, prioritizing funding efforts toward lower-resourced communities.
• Provide adequate funding for research that advances this strategy and all other education sector strategies.
• Require pre-service and continuing education for physical education and elementary classroom teachers to deliver high-quality physical education and physical activity programs.
• Provide continuing education classes and seminars for all teachers on state-of-the-art physical activities for children that provide information on adapting activities for children with disabilities, in classrooms and physical education settings.
• Encourage higher education institutions to train future teachers and school personnel on the importance of physical activity to academic achievement and success for students from Pre-kindergarten through grade 12.

STRATEGY 2: Develop and implement state and school district policies requiring school accountability for the quality and quantity of physical education and physical activity programs.

TACTICS
• Advocate for binding requirements for PreK-12 standards-based physical education that address state standards, curriculum time, class size, and employment of certified, highly qualified physical education teachers in accordance with national standards and guidelines, such as those published by the National Association for Sport and Physical Education (NASPE).
• Advocate for local, state and national standards that emphasize provision of high levels of physical activity in physical education (e.g. 50% of class time in moderate-to-vigorous activity).
• Enact federal legislation, such as the FIT Kids Act, to require school accountability for the quality and quantity of physical education and physical activity programs.
• Provide local, state and national funding to ensure that schools have the resources (e.g., facilities, equipment, appropriately trained staff) to provide high-quality physical education and activity programming. Designate the largest portion of funding for schools that are under-resourced. Work with states to identify areas of greatest need.
• Develop and implement state-level policies that require school districts to report on the quality and quantity of physical education and physical activity programs.

• Develop and implement a measurement and reporting system to determine the progress of states toward meeting this strategy. Include in this measurement and reporting system data to monitor the benefits and adaptations made or needed for children with disabilities.

• Require school districts to annually collect, monitor, and track students’ health-related fitness data, including Body Mass Index.

STRATEGY 3: Develop partnerships with other sectors for the purpose of linking youth with physical activity opportunities in schools and communities.

TACTICS
• Develop plans at local levels for leadership and collaboration across sectors, such as education, youth serving organizations, and parks and recreation.

• Develop and institute local policies and joint use agreements that facilitate shared use of physical activity facilities, such as school gyms and community recreation centers and programming.

• Prioritize efforts to target communities and schools by working with states to identify areas of greatest need.

• Develop partnerships with organizations that encourage citizen involvement, community mobilization, and volunteerism to link to and sustain community opportunities for physical activity.

STRATEGY 4: Ensure that early childhood education settings for children ages 0 to 5 years promote and facilitate physical activity.

TACTICS
• Develop policies that clearly define physical activity components for Head Start and other early childhood program providers.

• Develop and institute state-level standards for early childhood education programs that require the delivery of safe and appropriate physical activity programming.

• Work with community college systems to include physical activity training as part of childcare certification and early childhood training programs.

• Advocate for physical activity policies at childcare facilities that address the developmental needs of all children, including children with disabilities, those classified as obese, or children at high risk of inactivity.

STRATEGY 5: Provide access to and opportunities for physical activity before and after school.

TACTICS
• Support Safe Routes to School efforts to increase active transportation to and from school and support accommodations for children with disabilities.

• Encourage states to adopt standards for the inclusion of physical activity in after-school programs.

• Require a physical activity component in all state and federally funded after-school programs, including 21st Century Community Learning Centers.
• Work with community college systems to include physical activity training as part of early childhood and school-age childcare preparation programs.
• Subsidize the transportation and program costs of after-school programs through local, state, and federal sources.
• Provide resources for innovative pilot projects in the after-school setting.
• Encourage states to abide by national after-school accreditation standards on physical activity as applicable, and advance state licensure requirements in alignment with those standards.

STRATEGY 6: Encourage post-secondary institutions to provide access to physical activity opportunities, including physical activity courses, robust club and intramural programs, and adequate physical activity and recreation facilities.

TACTICS:
• Advocate for state and federal funding to ensure that post-secondary institutions have resources (e.g., facilities, equipment, staff) to provide quality physical activity programming.
• Develop and implement local policies and joint use agreements that allow students in post-secondary institutions to have access to physical activity facilities, such as school gyms and community recreation centers.
• Encourage USDE/CHEA accrediting agencies to require all institutions receiving Federal (Title IV) funding to hold a class focusing on the impact of physical inactivity, resources and opportunities for physical activity, and positive health behaviors such as an institutional graduation requirement.

STRATEGY 7: Encourage post-secondary institutions to incorporate populations-focused physical activity promotion training in a range of disciplinary degree and certificate programs.

TACTICS:
• Fund the development and pilot testing of population-based physical activity promotion curricula for relevant disciplines such as nursing, medicine, physical therapy, urban planning, education, library science, and lay health advisor.
• Incorporate modules of population-based physical activity into Board exams.
TRANSPORTATION, LAND USE, AND COMMUNITY DESIGN

Rationale and Strategies

Transportation systems, development patterns, and community design and planning decisions all can have profound effects on physical activity. People can lead healthier, more active lives if our communities are built to facilitate safe walking and biking and the use of public transportation, all considered forms of active transportation.

In 2001, the average American spent 64 minutes per day in a vehicle. Almost three quarters of Americans feel they currently have no choice but to drive as much as we do. Providing more transportation options can help us achieve our recommended levels of physical activity, while lowering pollution rates and increasing access to essential destinations like grocery stores, schools, jobs and health care services.

Changes to improve active transportation will require many individuals and agencies – transportation engineers, city planners, architects, schools, health professionals, government agencies at all levels, community advocates, citizens, and employers – to rethink the way we plan and develop our communities. This collaborative work can be guided by the following strategies and tactics.

**STRATEGY 1**
Increase accountability of project planning and selection to ensure infrastructure supporting active transportation and other forms of physical activity.

**STRATEGY 2**
Prioritize resources and provide incentives to increase active transportation and other physical activity through community design, infrastructure projects, systems, policies, and initiatives.

**STRATEGY 3**
Integrate land-use, transportation, community design and economic development planning with public health planning to increase active transportation and other physical activity.

**STRATEGY 4**
Increase connectivity and accessibility to essential community destinations to increase active transportation and other physical activity.
Transportation, Land Use, and Community Design

STRATEGY 1: Increase accountability of project planning and selection to ensure infrastructure supporting active transportation and other forms of physical activity.

TACTICS
- Support transportation agencies and planning organizations to establish performance measures for transportation plans that are specific to physical activity and health. This should include systematic measurement of all trips, including commute, school, and other trips as well as standardized reporting and recording of crash and injury data, for all travel modes including pedestrians, bicyclists, and transit riders.
- Support annual reporting by all schools of their transportation mode split.
- Support and integrate the use of health impact assessments in planning to inform activity-friendly design and development.
- Support increased accountability in planning to address equity and disparity issues, especially for vulnerable communities and vulnerable populations.

STRATEGY 2: Prioritize resources and provide incentives to increase active transportation and other physical activity through community design, infrastructure projects, systems, policies, and initiatives.

TACTICS:
- Support establishment of Federal and State “Offices of Active Transportation” to set standards and goals, dispense funding, monitor results, and administer programs for innovation and research in active transportation designs and policies.
- Develop a national technical assistance resource center for active community design.
- Support and increase incentives for community projects to create safe and accessible active transportation networks, including not just roadways with pedestrian, bicycle, and transit accommodation, but also networks of greenways, trails, and multi-use pathways.
- Support and increase incentives for the adoption of policies that support “complete streets” standards in the planning and development of transportation networks.
- Support and increase incentives for the adoption and expansion of “safe routes” initiatives such as “Safe Routes to School,” “Bike-to-Work,” and other active transportation programs.
- Increase incentives for locating public facilities (e.g., schools, parks, post offices, etc.) within convenient walking distance of major residential areas.
- Support the awarding of transportation funding based on the anticipated positive impact on active transportation levels and related benefits, such as safety improvements, congestion reduction, air quality enhancement, and overall health benefits.
- Create competitive grants or incentives to implement health impact assessments in planning processes as stand alone requirements or woven into existing permitting steps (such as transportation and environmental review).
- Create priority funding to revitalize economies in small and rural communities that integrate land-use, transportation, community design and economic development planning in projects that support increased physical activity and improved health outcomes.
• Institute a recognition and awards process that would create incentives for planning and projects that accommodate desired “standards of practice” that seek to create or enhance activity-friendly environments and systems.

• Support incentives for building owners or employers who provide facilities in workplaces (e.g., lockers, showers, bike parking) that support active commuting.

• Support public transit agencies and related partners in developing large-scale transit pass inclusion programs with employers.

• Support tax or other financial incentives for establishing community bicycle sharing programs.

• Support transportation agencies in developing research and pilot programs to develop market-based tools and to encourage more active transportation.

STRATEGY 3: Integrate land-use, transportation, community design and economic development planning with public health planning to increase active transportation and other physical activity.

TACTICS

• Develop standards to guide communities to develop integrated plans that incorporate land-use, transportation, community design, parks, trails and greenways, and economic development planning.

• Identify resources that will enable communities to prioritize and implement projects that demonstrate integrated approaches and create more mixed-use community settings.

• Develop standards for health impact assessments to be used in planning processes, including how HIAs can provide recommendations to increase positive health outcomes.

• Develop standards for small and rural local governments that guide integrated land-use, transportation, community design and economic development decisions to support increased physical activity and improved health outcomes.

• Support the development of standards and identification of “best practices” for the dissemination and adoption of “safe routes” initiatives such as “Safe Routes to School,” “Bike-to-Work,” and other active transportation programs.

STRATEGY 4: Increase connectivity and accessibility to essential community destinations to increase active transportation and other physical activity.

TACTICS

• Encourage adoption of “complete street” and “livable community” policies at the national, state, county and local levels to guide the planning, design, and development of activity-friendly communities and transportation systems that safely accommodate all users.

• Expand “Safe Routes” initiatives at national, state, county and local levels to enable safe walking and biking routes to a variety of destinations, especially to schools.

• Support federal and state education, transportation, and health agencies in the development of school siting policies that locate schools for maximum active transportation and other physical activity utilization.

• Enhance traffic safety in areas where persons are or could be more physically active (e.g., schools, parks, recreation areas).
• Improve access to public transportation.
• Identify standards and methods (e.g., CPTED – “Crime Prevention Through Environmental Design”) to enhance personal safety and increase physical activity.
PARKS, RECREATION, FITNESS, AND SPORTS

Rationale and Strategies

In recent years, the time available for leisure-time activity has increased, but this increase has come in small chunks and been spent in sedentary activities. Similarly, the time spent on leisure activities has risen but has been focused on activities that encourage sedentary behaviors.

Providing access, education, and resources that help people incorporate fun and meaningful physical activity into their daily lives can foster real change in the national level of physical activity. The parks, recreation, fitness, and sports sector has considerable capacity to encourage more people to be more active by pursuing the following strategies:

**STRATEGY 1**
Promote programs and facilities where people work, learn, live, play and worship (i.e., workplace, public, private, and non-profit recreational sites) to provide easy access to safe and affordable physical activity opportunities.

**STRATEGY 2**
Enhance the existing parks, recreation, fitness, and sports infrastructure to build capacity to disseminate policy and environmental interventions that promote physical activity.

**STRATEGY 3**
Use existing professional, amateur (Amateur Athletics Union, Olympics), and college (National Collegiate Athletics Association) athletics and sports infrastructures and programs to enhance physical activity opportunities in communities.

**STRATEGY 4**
Increase funding and resources for parks, recreation, fitness, and sports programs and facilities in areas of high need.

**STRATEGY 5**
Improve physical activity monitoring and surveillance capacity to gauge program effectiveness in parks, recreation, fitness, and sports settings based on geographic population representation and physical activity levels, not merely numbers served.

**STRATEGY 6**
Increase social marketing efforts to maximize use of recreations programs and facilities and promote co-benefits with environmental and other related approaches.
Parks, Recreation, Fitness, and Sports: Strategies and Tactics

STRATEGY 1: Promote programs and facilities where people work, learn, live, play and worship (i.e., workplace, public, private, and non-profit recreational sites) to provide easy access to safe and affordable physical activity opportunities.

TACTICS
• Adopt community strategies that improve access to and the safety and security of parks, recreation, fitness, and sports facilities, especially in low-resource and high-crime neighborhoods. Improve access to public-private recreational facilities in communities with limited recreational opportunities through:
  o Reduced costs for participation in programs and/or use of facilities
  o Increased operating hours
  o Co-location of schools and PRFS
  o Availability of childcare
  o Joint use agreements
  o Establishment of new parks and trails
• Provide programs in parks, recreation, fitness, and sports that are appropriate for individuals of both genders, diverse cultures, abilities, developmental stages and needs and that have demonstrated positive physical activity outcomes.
• Design new and upgrade facilities according to universal design principles to ensure accessibility, safety, and optimal use for physical activity.
• Fund an Active Families Initiative that provides programs that support and benefit families at the community level and in responds to community needs.
• Fund research on safe sports participation (i.e., injury prevention), particularly for youth, and include such issues as progressive exercise program design, exercise order, exercise technique, modal efficacy, and the impact of human movement impairments.
• Fund research on participation in sport alternatives that can be pursued across the lifespan.
• Restore a dedicated federal funding source for the development and rehabilitation of urban parks and recreation infrastructure and programs.
• Establish a coordinator position within the National Parks Service to develop policies and partnerships between the state and federal recreation agencies to promote physical activity.

STRATEGY 2: Enhance the existing parks, recreation, fitness, and sports infrastructure to build capacity to disseminate policy and environmental interventions that promote physical activity.

TACTICS
• Encourage interdisciplinary curricula in the studies of physical activity, leisure sciences, public health, and urban planning in institutions of higher education to increase physical activity at the community level.
• Develop certification and continuing education programs in physical activity and public health for fitness instructors, personal and fitness trainers, and other qualified professionals.
• Develop a model for fitness instructors that focuses on training organizations versus individuals in wellness worksite practices and policies. Include low-cost interventions feasible for small business and non-profits, as
well as comprehensive worksite wellness approaches.

- Use volunteers and education entities to increase the parks, recreation, fitness, and sports sector’s ability to execute the National Physical Activity Plan.

**STRATEGY 3: Use existing professional, amateur (Amateur Athletics Union, Olympics) and college (National Collegiate Athletic Association) athletics and sports infrastructures and programs to enhance physical activity opportunities in communities.**

**TACTICS**

- Train athletes and sports management staff to deliver environmental and policy interventions in addition to individual change interventions.
  - Use sporting event venues as opportunities for delivering messages and creating opportunities for active participation.
  - Use social marketing approaches to change spectator sports culture and use it as a lever to increase physical activity.

- Recruit and train national sports governing associations, including professional, collegiate, amateur, and youth-focused associations, to serve as advocates for physical activity in communities, especially among inactive and low-resource segments of the population.

**STRATEGY 4: Increase funding and resources for parks, recreation, fitness, and sports programs and facilities in areas of high need.**

**TACTICS**

- Develop a coordinated effort to organizations in the parks, recreation, fitness and sports sector to engage their members in advocating for the policy, environmental, and practice changes recommended for all sectors of the National Physical Activity Plan.

- Prioritize money for the rehabilitation and maintenance of existing parks, recreation, fitness, and sports assets that provide opportunities for physical activity.

- Ensure relevance of programs and facilities by meaningfully engaging community members in developing funding criteria.

- Establish tax incentives to promote the development and use of parks, recreation, fitness, and sports facilities and programs.

- Establish dedicated funding streams at all levels for public, non-profit, private parks, recreation, fitness, and sports facilities.

- Encourage non-traditional funding for the development, maintenance, and renovation of parks, recreation, fitness, and sports facilities, including private-public partnerships in target communities.

- Increase funding to improve the equity of access to parks, trails, recreation, fitness, and sports (public, private, and non-profit) programs and facilities.

- Target programming funds to expand and broaden services to attract and engage populations not traditionally served through varied, innovative, and culturally relevant offerings.
STRATEGY 5: Improve physical activity monitoring and surveillance capacity to gauge program effectiveness in parks, recreation, fitness, and sports settings based on geographic population representation and physical activity levels, not merely numbers served.

TACTICS
• Develop standardized benchmarking measures or criteria for evaluating program effectiveness that are reliable, valid, and easy to use.
• Create, maintain, and disseminate an inventory of public and private parks, recreation, fitness, and sports facilities.
• Create a national clearinghouse to consolidate and disseminate data from agencies on effective programs and facility design.
• Assess the use of parks, recreation, fitness, and sports facilities and services through a nationwide population surveillance effort. Assess physical activity levels associated with use of these facilities and services. Evaluate cases of major improvement.

STRATEGY 6: Increase social marketing efforts to maximize use of recreation programs and facilities and promote co-benefits with environmental and other related approaches.

TACTICS
• Maximize use of current parks, recreation, fitness, and sports facilities (e.g., athletic fields) to increase physical activity opportunities for less active groups (e.g., girls, women, those with mental and/or physical disabilities, and low-income youth) through increased programming, social marketing and transport assistance.
• Collaborate with transportation agencies to monitor and promote the use of trails for recreation and transportation purposes.
• Coordinate facility and program development that encourages appropriate leisure time physical activities (e.g., walking trails) while minimizing environmental impact and reducing reliance on motorized vehicle use.
• Develop partnerships and programs such as “green gyms” that promote physical activity through volunteer environmental stewardship opportunities (e.g., community gardening, ecological restoration).
BUSINESS AND INDUSTRY

Rationale and Strategies

Technological advancements in the workplace have greatly improved efficiency, reduced redundancy of tasks, and maximized output. However, an unfortunate consequence is that many job tasks in the modern workplace have become increasingly sedentary.

Hours at a desk, behind a wheel, or at a counter predispose employees to health problems, which lead to absenteeism, short-term disability, reduced quality and quantity of work, excess health care costs, and overall work impairment.

Because of their close ties to employees, business and industry can encourage positive physical activity behavior change in a supportive context of workplace policies and culture. By leveraging community resources and using health benefits incentives, business and industry also have an opportunity to reach families and the broader community.

A healthier, more productive workforce helps provide incentives for business and industry to pursue the following strategies:

**STRATEGY 1**
Identify, summarize, and disseminate best practices, models, and evidence-based physical activity interventions in the workplace.

**STRATEGY 2**
Encourage business and industry to interact with all other sectors to identify opportunities to promote physical activity within the workplace and throughout society.

**STRATEGY 3**
Educate business and industry leaders regarding their role as positive agents of change to promote physical activity and healthy lifestyles within the workplace and throughout society, giving particular consideration to efforts targeting low-resource populations.

**STRATEGY 4**
Develop legislation and policy agendas that promote employer-sponsored physical activity programs while protecting individual employees’ and dependents’ rights.

**STRATEGY 5**
Develop a plan for monitoring and evaluating worksite health promotion programs.
Business and Industry: Strategies and Tactics

STRATEGY 1: Identify, summarize, and disseminate best practices, models, and evidence-based physical activity interventions in the workplace.

TACTICS
• Develop guidelines for what constitute “best practices” for workplaces and create a model of universal best practices that business and industry can adopt.
• Develop and maintain a clearinghouse of examples of best practices and resources that can be accessed by business and industry.
• Recognize organizations that are examples of best practices. Best practices can include offering cognitive and behavioral interventions, environmental changes that support and encourage physical activity (e.g., shower facilities), and policies that encourage workers to be physically active (e.g., flex time, lunch time walking groups).
• Recruit key business and industry leaders to play central roles in influencing their peers.
• Develop specific approaches that are appealing to worksites with large numbers of lower income and ethnic minority workers.
• Advance physical activity environmental assessment and improvement planning tools for worksites to help them build environments that support active, healthy living.

STRATEGY 2: Encourage business and industry to interact with all other sectors to identify opportunities to promote physical activity within the workplace and throughout society.

TACTICS
• Identify a lead organization within business and industry to interact with other sectors.
• Identify exemplary cross-sector partnerships for promoting physical activity within the workplace and throughout society and make information about these partnerships available through a clearinghouse and other dissemination activities.
• Encourage businesses to explore ways to expand products, marketing, sponsorship, and other efforts to promote physical activity and recognize and reward exemplary and innovative actions.

STRATEGY 3: Educate business and industry leaders regarding their role as positive agents of change to promote physical activity and healthy lifestyles within the workplace and throughout society, giving particular consideration to efforts targeting low-resource populations.

TACTICS
• Identify key policies and activities that employers, both private and public, can implement to promote physical activity in the workplace.
• Establish and advance a research agenda on promoting physical activity and health in the workplace, with particular attention to economically challenged, less educated, or underserved populations. Emphasize research on how to improve participation among employees who have the highest risk behaviors.
• Develop and implement an advocacy agenda. Work with employers to make physical activity practices and
policies, such as flex time for activity, commonplace.

**STRATEGY 4: Develop legislation and policy agendas that promote employer-sponsored physical activity programs while protecting individual employees’ and dependents’ rights.**

**TACTICS**
- Identify funding sources for advocacy activities.
- Develop a plan to educate legislators and policy makers about the benefits of physical activity in the workplace.
- Develop an advocacy agenda.

**STRATEGY 5: Develop a plan for monitoring and evaluating worksite health promotion programs.**

**TACTICS**
- Identify organizations to develop a plan that includes:
  - A brief set of critical evaluation measures.
  - A baseline national survey of worksite health promotion programs, practices, and outcomes.
  - An employee Health Interest Survey to identify employee trends and preferences in worksite health.
VOLUNTEER AND NON-PROFIT ORGANIZATIONS

Rationale and Strategies

While many people would like to be more physically active, they face substantial physical and social barriers in doing so. Supportive environments are essential if people are to have real and sustainable opportunities for daily physical activity.

Volunteer and non-profit organizations have long been recognized as “a source of social cohesion, a laboratory of innovation, and a continually adaptable means of responding to emerging ideas, needs, and communal opportunities.” They have been in the forefront of developing and promoting physical activity recommendations and programs.

The unique characteristics of volunteer and non-profit organizations and their history of involvement in encouraging physically active lifestyles make them well qualified to mobilize public action in pursuit of the following strategies.

**STRATEGY 1**
Advocate to local, state and national decision makers for policies and system changes identified in the National Physical Activity Plan that promote physical activity.

**STRATEGY 2**
Convene multi-sector stakeholders at local, state, and national levels in strategic collaborations to advance the goals of the National Physical Activity Plan.

**STRATEGY 3**
Conduct outreach to non-profit groups’ members, volunteers, and constituents to change their own behaviors and advocate for policy and system changes outlined in the National Physical Activity Plan.
Volunteer and Non-Profit Organizations: Strategies and Tactics

STRATEGY 1: Advocate to local, state, and national decision makers for policies and system changes identified in the National Physical Activity Plan that promote physical activity.

TACTICS
- Identify joint priorities so multiple organizations can speak with one strong voice.
- Develop and disseminate position statements on issues relevant to physical activity.
- Educate local, state and national decision makers about physical activity and effective policy approaches.
- Influence policymakers to pass legislation that advances initiatives consistent with National Physical Activity Plan goals, including opportunities to build capacity and advocate for change at the local and community level.
- Advocate for increasing research funding for physical activity.
- Assist in prioritizing community needs and liaise between communities and governments to achieve the services and programs that most benefit the community, particularly those at highest need (low-income, underserved and/or minority populations, and people with disabilities).

STRATEGY 2: Convene multi-sector stakeholders at local, state, and national levels in strategic collaborations to advance the goals of the National Physical Activity Plan.

TACTICS
- Develop a shared platform among volunteer and non-profit organizations that includes a commitment to collaborate, such as “one voice for physical activity.”
- Promote an “Adopt a Strategy” approach and encourage different groups to take the lead on collaboration for each piece of the Plan.
- Share best practices for physical activity promotion and advocacy across multiple sectors.
- Support efforts of other sectors’ work outlined in the National Physical Activity Plan.
- Ensure representation of all populations, including low-income, underserved and/or minority populations, and people with disabilities.

STRATEGY 3: Conduct outreach to non-profit groups’ members, volunteers, and constituents to change their own behaviors and advocate for policy and system changes outlined in the National Physical Activity Plan.

TACTICS
- Use evidence-based behavior change methods to reach all constituents, including people with disabilities.
- Use community mobilization techniques to recruit and engage members, volunteers, and constituents.
- Adopt the workplace tactics recommended by the Business and Industry sector.
- Use all available communication channels to members, volunteers, and constituents, including print publications, websites, social media, broadcast media, and newsletters to promote engagement in behavior change and advocacy.
- Use enhanced strategies, such as culturally tailored programs, materials, and communication channels, to reach special populations, low-income, underserved and/or minority populations, and people with disabilities.
MASS MEDIA

Rationale and Strategies

Mass media, both traditional media, like TV and magazines, and “new” media, like Web sites, social networking sites, and text messaging, have enormous potential and power to influence individual behaviors and societal attitudes. Working alone, and in partnership with the other sectors, mass media have much to contribute through the following strategies:

**STRATEGY 1**
Encourage public health agencies to form partnerships with other agencies across the eight sectors to combine resources around common themes in promoting physical activity.

**STRATEGY 2**
Enact federal legislation to support a sustained physical activity mass media campaign.

**STRATEGY 3**
Develop consistent mass communication messages that promote physical activity, have a clear and standardized “brand,” and are consistent with the most current *Physical Activity Guidelines for Americans*.

**STRATEGY 4**
Ensure that messages and physical activity plans developed by state and local public health agencies and key stakeholders from the eight sectors are consistent with national messages.

**STRATEGY 5**
Sequence, plan, and provide campaign activities in a prospective, coordinated manner. Support and link campaign messages to community-level programs, policies, and environmental supports.

**STRATEGY 6**
Encourage mass media professionals to become informed about the importance of physical activity and the potential role they can play in promoting physical activity.

**STRATEGY 7**
Encourage local, state, and federal public health agencies and key stakeholders from the eight sectors to integrate into their physical activity plans and programs Web- and new media-based physical activity interventions that are supported by evidence.

**STRATEGY 8**
Expand the definition of media for mediated interventions to include new and emerging technologies such as global positioning systems, video gaming, and other technologies. Identify funding for research to develop evidence that supports or opposes the use of existing and emerging technologies for increasing physical activity.
STRATEGY 1: Encourage public health agencies to form partnerships with other agencies across the eight sectors to combine resources around common themes in promoting physical activity.

TACTICS
- Establish a Mass Media/Physical Activity Task Force to identify potential partners and conduct consultations across health and other jurisdictions from all levels (local, community, and state) and sectors on the role of mass media as part of physical activity planning.
- Integrate physical activity campaigns across agencies and sectors with shared resources.
- Identify local community organizations and communications vehicles with which to partner in targeting underserved communities.

STRATEGY 2: Enact federal legislation to support a sustained physical activity mass media campaign.

TACTICS
- Use the Mass Media/Physical Activity Task Force (see strategy 1) to develop and implement a plan to build advocacy for sustained federal funding ($100 million per year over 10 years) for a mass media social marketing campaign to increase physical activity.

STRATEGY 3: Develop consistent mass communication messages that promote physical activity, have a clear and standardized “brand,” and are consistent with the most current Federal Physical Activity Guidelines for Americans.

TACTICS
- Involve local, state, and federal public and private organizations across the eight sectors in the Mass Media/Physical Activity Task Force to secure funding for and to develop a highly visible national logo, campaign brand, and physical activity messages.
- Involve local, state, tribal, and federal entities across the eight sectors in developing the messages.

STRATEGY 4: Ensure that messages and physical activity plans developed by state and local public health agencies and key stakeholders from the eight sectors are consistent with national messages.

TACTICS
- Ensure that state and local media efforts to promote physical activity are consistent with national messaging and branding, while taking into account cultural relevancy for targeted populations and providing diverse role models and activity types.
- Develop a style guide and training manual on the use of the mass media messages and national logo and branding for use by state and local campaigns and key stakeholders. Involve users in creating these tools.

STRATEGY 5: Sequence, plan, and provide campaign activities in a prospective, coordinated manner. Support and link campaign messages to community-level programs, policies, and environmental supports.

TACTICS
- Integrate serial mass media efforts into long-term (i.e., 5 to 10 years) planning for physical activity.
• Identify and obtain resources that are sufficient to initiate and maintain these mass media efforts.
• Support mass media efforts with coordinated programming and community and professional action.

STRATEGY 6: Encourage mass media professionals to become informed about the importance of physical activity and the potential role they can play in promoting physical activity.

TACTICS
• Create and publicize a Mass Media Physical Activity Resource Center.
• Develop an approach to educating members of the media about physical activity and the National Physical Activity Plan. This should be an ongoing approach and should be coordinated with other activities of National Physical Activity Plan partners. For example, invite members of the media to the Physical Activity and Public Health course offered annually by the U.S. Centers for Disease Control and the Prevention Research Center of the University of South Carolina.
• Engage media channels with diverse target audiences.
• Encourage producers of electronic news and entertainment programming to include messages related to promoting physical activity for health.

STRATEGY 7: Encourage local, state, and federal public health agencies and key stakeholders from the eight sectors to integrate into their physical activity plans and programs Web- and new media-based physical activity interventions that are supported by evidence.

TACTICS
• Test the dissemination of evidence-based media interventions and identify those with the greatest likelihood of population reach and impact.
• Fund and Implement these interventions, prioritizing large population groups.

STRATEGY 8: Expand the definition of media for mediated interventions to include new and emerging technologies such as global positioning systems, video gaming, and other technologies. Identify funding for research to develop evidence that supports or opposes the use of existing and emerging technologies for increasing physical activity.

TACTICS
• Encourage technology companies, such as cellular phone manufacturers and service providers, global positioning systems manufacturers, and health-e games manufacturers, to research and develop products and applications that promote and track physical activity.
• Support research on e-health marketing interventions conducted by universities in collaboration with industry, working together to promote products that demonstrate the most promise.
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American Cancer Society
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