

WSI International Conference

Physical Activity and Health Guidelines for Women: National and International Considerations Related to Ethnicity and Race

St. Louis, USA, June 2, 2002

Group1 Report - Task: Establish a research agenda for Physiological and Medical issues:

What are the most pressing research needs?

PHASE 1: IDENTIFICATION OF KEY ISSUES

Although data is now becoming more extensively available on causes of death in women across the world the interplay between physical activity, all-cause mortality and disease risk is still relatively unknown in developing and emerging nations. This lack of data in conjunction with the growing epidemic of non-communicable diseases (NCDs) in these countries further emphasizes the need to identify and reduce leading risk factors for such diseases.

In order to obtain the data that will enable us to characterize the relationship between physical activity and women's health we must first broaden our current compendium of physical activity to reflect the full diverse range of activities (transport, domestic, physical labour, cultural, sport and recreation) that women engage in across the world. It is only once the full cultural breadth of activity is known that we can completely understand the role that physical activity plays in the risk of both communicable and non-communicable diseases.

- develop an instrument to determine physical activity level that fully reflects the diversity of activity in which women participate in across the world.
- ascertain the energy expenditure associated with diverse activities
- using the newly developed instrument conduct population surveillance studies of physical activity – link with disease

In many nations of the world cultural barriers prevent the participation of girls and women in physical activity. These barriers may be a function of gender, socio-economic status, a lack of awareness of the potential benefits of physical activity and its relationship to disease, a lack of awareness of the risk factors for many NCDs and/or cultural dichotomies that promote the enhancement of risk factors (i.e. in many nations obesity is looked upon from a cultural perspective as "positive"). ASSUMING that a positive link between health and physical activity remains amongst women from multiple cultural and ethnic backgrounds a coordinated program of education about these benefits that addresses cultural issues and recognizes diversity is paramount.

- education programs that target specific needs with respect to women's health knowledge, perceptions of physical activity and awareness of the health benefits of physical activity
- incorporate the use of visible demonstration projects
- link with other international health oriented projects

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