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## Physical Activity and Health in Alaska

In July 1996, the U.S. Department of Health and Human Services released the first Surgeon General's report on physical activity and health.<sup>1</sup> The report provides a detailed review of the literature on physical activity and health, including: the historical background and evolution of recommendations; physiologic responses to long-term exercise; the effects of physical activity on health and disease; patterns and trends in physical activity; and understanding and promoting physical activity.

Among the major findings:

- People who are usually inactive can improve their health and well-being by becoming even moderately active on a regular basis.
- Physical activity need not be strenuous to achieve health benefits.
- Greater health benefits can be achieved by increasing the amount (duration, frequency or intensity) of physical activity.

### What is a Moderate Amount of Physical Activity?

The report recommends that all people (over age 2 years) accumulate at least 30 minutes of endurance-type physical activity, of at least moderate intensity, on most--if not all--days of the week. A moderate amount of physical activity is defined as physical activity that is roughly equivalent to 150 Calories of energy per day, or 1000 Calories per week. Examples of moderate activity include: walking 1¾ miles; running 1½ miles; playing basketball for 15-20 minutes; swimming laps for 20 minutes; raking leaves for 30 minutes, and shoveling snow for 15 minutes. People should select activities that they enjoy and that fit into their daily lives. Because the amount of activity is a function of duration, intensity and frequency, the same amount of activity can be obtained in longer sessions of moderately intense activities (such as brisk walking) or in shorter sessions of more vigorous activity (such as running).

### The Effects of Physical Activity on Health and Disease

Regular physical activity improves health in the following ways:

- Reduces risk of dying prematurely.
- Reduces risk of dying prematurely from cardiovascular disease.
- Prevents or delays development of high blood pressure, and helps reduce blood pressure in people who already have high blood pressure.
- Reduces risk of developing colon cancer.
- Reduces risk of developing diabetes.
- Favorably affects fat distribution.
- Maintains normal muscle strength, joint structure and joint function.
- Essential for normal skeletal development and attainment of optimal peak bone mass during childhood and adolescence.
- Relieves symptoms of depression and anxiety and may reduce risk of developing depression.
- Improves the health-related quality of life by enhancing psychological well-being and improving physical function among persons in poor health.

### Physical Activity Among Alaska Residents

#### Adults

Almost half (48.2%) of adults in Alaska do not exercise or do not exercise regularly (sedentary lifestyle).<sup>2</sup> In comparison, 57.8% of U.S. adults have a sedentary lifestyle.

#### Youth

Among Alaska high school students, 77.9% of boys and 65.6% of girls report participation in vigorous physical activity.<sup>3</sup>

Vigorous activity is defined as having exercised or participated in sports activities for at least 20 minutes that caused sweating and heavy breathing, on 3 or more days per week. Alaska students, especially girls, are more likely to report vigorous physical activity than are U.S. students (U.S. rates 74.4% for boys and 52.1% for girls). Among both boys and girls, however, the proportion engaging in vigorous physical activity decreases with increasing grade. The decrease is most apparent among girls.

### Discussion

The Surgeon General's report states that "physical inactivity is a serious, nationwide problem." Alaska's levels of physical activity

are somewhat better than those for the U.S. in general. Improving the level of physical activity can have a large impact on the health of the population.

Each February, during American Heart Month, the American Heart Association launches a nationwide educational campaign relating to cardiovascular disease. For February 1997 the educational message is, "Get in on the Action!" which urges everyone to make physical activity a part of their daily lives. Those interested in learning more about Heart Month and how to participate should contact Tracy McFall at the American Heart Association, Alaska Affiliate at 563-3111, extension 24.

### **Recommendations for Health Care Providers**

The U.S. Preventive Services Task Force recommends that health care providers counsel adults and children in order to promote regular physical activity with an emphasis on regular, moderate-intensity activity.<sup>4</sup> The recommendation is based on the "proven efficacy of physical activity in reducing risk for heart disease, hypertension, obesity and diabetes."

Suggested strategies for counseling include:<sup>5</sup>

- Ask about physical activity.
- Discuss goals (weight loss, look better, feel better, etc.). Are the goals realistic?
- The most important component of "regular exercise" is the *regular*, not the *exercise*.
- Exercise should be fun or it will not be regular.
- Physical activity need not be strenuous to achieve health benefits.
- Suggest a variety of activities.

### **Obtaining a copy of the Surgeon General's Report**

The Section of Epidemiology has summaries and fact sheets from the report. To obtain a copy of the full report, contact the Government Printing Office, Superintendent of Documents, PO Box 371954, Pittsburgh, PA 15250-7954, phone 202-512-1800, FAX 202-512-2250.

#### **References**

1. Department of Health and Human Services. Physical Activity and Health: A report of the Surgeon General. Atlanta, Georgia: USDHSS, Centers for Disease Control and Prevention, 1996.
2. 1994 Annual Report: Alaska Behavioral Risk Factor Survey. Section of Community Health Services/EMS, Alaska Division of Public Health, Nov. 1996.
3. Youth Risk Behavior Survey Alaska Report 1995. Alaska Department of Health and Social Services and Department of Education, Feb. 1996.
4. U.S. Preventive Services Task Force. Guide to Clinical Preventive Services, 2nd ed. Baltimore: Williams and Wilkins; 1996.
5. Wolf SH, Jonas S, Lawrence R (eds). Health Promotion and Disease Prevention in Clinical Practice. Baltimore: Williams and Wilkins; 1996.

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