We the delegates and hosts of the 6th International Congress on Physical Activity and Public Health, the biennial meeting of the International Society of Physical Activity and Health (ISPAH), with representatives from 72 countries and held in Bangkok, Thailand:

- **Recognize** the urgency of addressing non-communicable diseases (NCDs) including type 2 diabetes, cardiovascular diseases, numerous cancers, which contribute to a high and growing proportion of the disease, disability and cost burden in developed and developing countries;

- **Reaffirm** that physical inactivity is one of the four key modifiable risk factors for NCD and is a cornerstone strategy for reducing NCDs;

- **Highlight** the low levels of physical activity globally, particularly in adolescents (aged 11-17 years), not meeting the WHO Global Recommendations on Physical Activity, and the significant gender, age and regional inequities that must be addressed;

- **Note** that the WHO Commission on Ending Childhood Obesity in 2016 called for implementation of actions to increase physical activity across the life course and to address obesogenic environments, with a particular focus on the early years of life, as an important component of addressing overweight and obesity;

- **Highlight** that the drivers of physical inactivity are linked to societal and environmental changes including technology, globalisation and urbanisation, which are transforming how people live, work, travel and play;

- **Agree** that a sustainable and affordable response to increasing global levels of physical inactivity requires actions within and beyond the health sector, implemented through effective partnerships that encourage individual actions, create favourable social norms, and provide supportive environments and policies;

- **Highlight** that global efforts to increase physical activity as a major contributor to reducing NCDs has been insufficient and that, despite progress on developing national action plans, there is an urgent need to strengthen and scale the implementation of evidence-based actions to achieve the global targets for physical inactivity by 2025; and therefore we call for increased

- **Prioritisation and implementation** of policy actions which will support and promote increased physical activity and also contribute to achieving six of the seventeen 2030 Sustainable Development Goals (SDG), namely:

  - **SDG 3 Ensure healthy lives and promote wellbeing**: Policy actions across multiple settings which lead to an increase in population levels of physical activity will contribute to reducing NCDs (Target 3.4); providing infrastructure that supports physical activity through equitable access to safe walking, cycling and use of public transport, by all ages, can contribute to reducing road traffic accidents particularly those involving pedestrians and cyclists (Target 3.6); and reduced automobile use can contribute to improved air quality (Target 3.9);

  - **SDG 4 Quality Education**: Policy actions that mandate and are enforced to ensure equitable provision of pre-school and school-based physical education curricula, physical activity programs and environments that are inclusive and enable all girls and boys to develop the physical literacy, fundamental movement skills, knowledge, attitudes, habits and enjoyment of physical activity can contribute to enhancing readiness for primary education (Target 4.2), improved educational outcomes (Target 4.1) and ensure healthy lives and promote wellbeing (SDG3) across the life course;
✓ **SDG 5 Gender Equity**: Policy actions which promote physical activity through improved access to safe and affordable opportunities to participate in sport and physical activity by girls and women, particularly those in marginalized and disadvantaged communities, can **contribute to ending discrimination** (Target 5.1) in sports and physical activity as well as contribute to the prevention of NCDs and **ensure healthy lives and promote wellbeing** (SDG3);

✓ **SDG 11 Inclusive, safe, resilient and sustainable cities and communities**: Development, implementation and enforcement of urban and transport planning policies that require city and regional designs to provide equitable access to safe, affordable infrastructure for walking and bicycling, as well as public open spaces and recreational facilities **can contribute to achieving sustainable transport systems for all** (Target 11.2); **enhancing inclusive and sustainable urbanization** (Target 11.3); reducing the environmental impact of cities (Target 11.6) and achieving universal access to green and public spaces (Target 11.7);

✓ **SDG 13 Climate Change**: Land use and transport policy, combined with fiscal, environmental and educational interventions that support walking, cycling and use of public transport by all **can contribute to a reduction in the use of fossil fuels and climate change mitigation** (Target 13.1) and **improved education, awareness, and human and institutional capacity on climate change mitigation and adaptation** (Target 13.2);

✓ **SDG 15 Life on Land**: Policy actions that ensure adequate access to, and use of, natural environments for physical activity, recreation and play by children and adults can **contribute to the sustainable use, appreciation, conservation and restoration of land, biodiversity** (Target 15.1) and terrestrial and inland freshwater ecosystems (Targets 15.5).

The Bangkok Declaration on Physical Activity for Global Health and Sustainable Development, endorsed by delegates at the 6th ISPAH Congress on Physical Activity and Public Health, calls upon governments, policy makers, donors and stakeholders including the World Health Organization, the United Nations and all relevant non-governmental organizations to:

1. **Renew their commitment to, and increase investment in the implementation of policy actions to increase physical activity as a contribution to reducing the global burden of NCDs and achieving the 2030 SDGs (SDGs 3, 4, 5, 11, 13, and 15)**: The actions needed to increase physical activity require multi-sector leadership, partnerships and sustained commitment as well as targeted allocation of resources. Investment from health and from other government departments should be switched to enable the adoption, adaptation to local needs, and sustained implementation of evidence-based solutions across multiple sectors and settings including schools, health care, transport, urban planning, environment, sport, parks and recreation, workplace, local government and community organizations;

2. **Establish National Multi-Sector Engagement and Coordination Platforms**: All countries should develop, fund and implement national action plans on physical activity. To be effective, plans should include mechanisms and resources to engage multi-sector stakeholders from inside and outside of health. Physical activity can contribute to achieving key objectives in education, urban planning, transportation, sports, recreation and sustainable development as well as contribute to addressing health inequities related to sex, age, race/ethnicity, socioeconomic status, and people living with disability. Multi sector platforms should facilitate integrated governance including allocation of resources, align policy directions, identify priorities and responsibilities and monitor and report on progress;
3. **Develop Workforce Capabilities**: Investment in workforce training and development is needed to support the full implementation and monitoring of national action plans and adapting policies and programs aimed at improving personal skills and the environments that support physical activity. Building capacity is needed not only within the health care and public health workforces, but also among professionals in other sectors, such as urban and transport planners and designers, architects and landscape architects, sport and recreation providers, educators and policy makers;

4. **Increase Technical Assistance and Share Experience**: Many countries require technical assistance and guidance to support the development and implementation of national action plans on physical activity. Investment is needed to develop strategies and mobilise the available technical assistance towards those in most need and to increase the sharing of practical experiences among countries and regions. Given the considerable experience gained across many countries since the launch of the WHO’s Global Strategy on Diet, Physical Activity and Health (DPAS) in 2004, much is known on how best to research, develop, and adapt actions to cultural and local contexts. But too little is shared effectively. Mechanisms to support knowledge transfer are needed to increase the effectiveness of implementation of national plans and country capacity to reach the physical activity target by 2025;

5. **Strengthen monitoring and surveillance**: Regular monitoring and reporting on progress of physical activity, its determinants, and policy implementation are essential in all countries to hold agencies accountable to their commitments and guide effective resource allocations. Yet significant gaps exist in the surveillance of physical activity in young people, including the very young (under 5 years of age), children (5-13 years), and older adults. Many countries do not have adequate tracking of trends nor reporting of data for timely use in policy and program development and evaluation.

6. **Support and promote research and evaluation** to further develop the evidence base with a particular focus on addressing gaps in knowledge in areas such as economic analyses, implementation research at the population level, and policy evaluation to increase understanding of the mechanisms and benefits of physical activity across the life course in all countries especially in low and middle income country contexts, including the establishment, and support, of interdisciplinary research and research training programs.

**We urge WHO and Member States to provide leadership and increase resources for technical support in building partnerships among governments including local governments, United Nations agencies and relevant global health initiatives and with academia, professional bodies, nongovernmental organizations, private sector, the media and civil society, to jointly advocate and effectively implement all aspects of this Bangkok Declaration on Physical Activity.**

**DRAFT V1 Precongress**
**Nov 8 2016**

(developed by the ISPAH 2016 BKK Drafting Group with critical input from over 30 experts)