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Physical Activity Guideline

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Public Health Protection Department

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The Public Health Protection Department developed this guideline in collaboration with subject matter experts and would like to acknowledge and thank these health professionals and physical education staff for their dedication toward improving health in the Emirate of Dubai.

Public Health Protection Department

Dubai Health Authority

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INTRODUCTION

Public Health Protection Department (PHPD) forms an integral part of Dubai Health Authority (DHA) and is mandated by DHA Law No. (14) of the year (2021) amending some clauses of law No. (6) of 2018 pertaining to the Dubai Health Authority (DHA), to undertake several functions including but not limited to:

- Developing and monitoring early screening programs for chronic diseases such as diabetes, high blood pressure, cardiovascular diseases, cancer and mental health diseases.
- Develop public health policies and strategies and give them priority.
- Monitor and estimate population health and prepare periodic reports about the health situation in the Emirate of Dubai.
- Develop surveillance systems for communicable and non-communicable diseases.
- Develop and update public health indicators with the coordination of the concerned stakeholders, taking into consideration social, economic, cultural and biological factors.
- Design and implement public health programs and activate the community role through community participation in these programs.
- Connect the population of Dubai with the necessary health promotion services through social network/media channels, prepare and implement health-promoting health campaigns, projects and initiatives aligned with the strategic vision of DHA.

- Participate actively in educating the community about disease prevention and empower the community to follow healthy lifestyles and control the risk factors for disease.
- Develop guidelines through publications, announcements, brochures, workshops and conferences aimed at promoting public health.
- Evaluate the results of intervention programs and monitor the general health situation of the Emirate of Dubai.

The Physical Activity Guideline aims to fulfil the following overarching Dubai Health Sector Strategy 2026:

- Pioneering Human-centred health system to promote trust, safety, quality and care for patients and their families.
- Pioneering prevention efforts against non-communicable diseases.
- Foster healthcare education, research and innovation.

EXECUTIVE SUMMARY

Increasing physical activity reduces mortality and morbidity from non-communicable diseases such as cardiovascular disease and cancer, as well as type 2 diabetes mellitus, dementia, and depression. It has significant physical & mental health benefits, including increased ability to perform everyday activities, maintain healthy body weight, improved sleep, cognitive ability, bone and musculoskeletal health, mental health and immune system. Globally, 81% of adolescents and 27.5% of adults currently do not meet the recommended levels of physical activity. In the UAE, the prevalence of physical inactivity among adults aged 18+ was 39% for males and 49% for females. In contrast, the emirate of Dubai in 2019 reported that almost 20% of adults aged 18+ years engaged in sufficient PA, with no significant difference between males and females. Adhering to established physical activity guidelines, is therefore essential in combating physical inactivity. Therefore, this physical activity guideline provides recommendations for healthcare professionals, physical education teachers in schools, and the community to increase physical activity and reduce sedentary behaviours to help lower the burden of non-communicable diseases in Dubai, UAE.

DEFINITIONS

Aerobic physical activity: Activity in which the body's large muscles move in a rhythmic manner for a sustained period of time. Aerobic activity also called endurance activity – improves cardiorespiratory fitness.

Balance training: Static and dynamic exercises that are designed to improve an individual's ability to withstand challenges from postural sway or destabilizing stimuli caused by self-motion, the environment, or other objects.

Bone-strengthening activity: Physical activity primarily designed to increase the strength of specific sites in bones that make up the skeletal system. Bone-strengthening activities produce an impact or tension force on the bones that promotes bone growth and strength.

Cardiorespiratory fitness (endurance): A health-related component of physical fitness. The ability of the circulatory and respiratory systems to supply oxygen during sustained physical activity. Usually expressed as measured or estimated maximal oxygen uptake (VO₂ max).

Exercise: A subcategory of physical activity that is planned, structured, repetitive, and purposive, in the sense that the improvement or maintenance of one or more components of physical fitness is the objective. "Exercise" and "training" are frequently used interchangeably and generally refer to physical activity performed during leisure time with the primary purpose of improving or maintaining physical fitness, physical performance, or health.

Fitness: The ability to carry out daily tasks with vigour and alertness, without undue fatigue, and with ample energy to enjoy leisure-time pursuits and respond to emergencies. Physical fitness includes several components, including cardiorespiratory endurance (aerobic power), skeletal muscle endurance, skeletal muscle strength, skeletal muscle power, flexibility, balance, speed of movement, reaction time, and body composition.

Flexibility: A health- and performance-related component of physical fitness that is the range of motion possible at a joint. Flexibility is specific to each joint and depends on a variety of specific variables including, but not limited to, the tightness of specific ligaments and tendons. Flexibility exercises enhance the ability of a joint to move through its full range of motion.

Light-intensity physical activity: Light-intensity physical activity is between 1.5 and 3 METs, i.e. activities with energy cost less than 3 times the energy expenditure at rest for that person. This can include slow walking, bathing, or other incidental activities that do not result in a substantial increase in heart rate or breathing rate.

Major muscle groups: Major muscle groups include the legs, back, abdomen, chest, shoulders and arms.

Metabolic equivalent of task (MET): The metabolic equivalent of task, or simply metabolic equivalent, is a physiological expressing the intensity of physical activities. One MET is the energy equivalent expended by an individual while seated at rest.

Moderate-intensity physical activity: On an absolute scale, moderate-intensity refers to the physical activity that is performed between 3 and less than 6 times the intensity of rest. On a scale relative to an individual's personal capacity, moderate-intensity physical activity is usually a 5 or 6 on a scale of 0–10.

Muscle-strengthening activity: Physical activity and exercise that increase skeletal muscle strength, power, endurance, and mass (e.g. strength training, resistance training, or muscular strength and endurance exercises).

Multicomponent physical activity: For senior adults, multicomponent physical activity is important to improve physical function and decrease the risk of falls or injury from a fall. However, multicomponent physical activity is also beneficial for other age categories. These activities can be done at home or in a structured group setting. Many studied interventions combine all types of exercise (aerobic, muscle strengthening, and balance training) into a session, and this has been shown to be effective. An example of a multicomponent physical activity programme could include walking (aerobic activity), lifting weights (muscle strengthening), and incorporates balance training. Examples of balance training can include walking backwards or sideways or standing on one foot while doing an upper body muscle-strengthening activity, such as bicep curls.

Physical activity: Any bodily movement produced by skeletal muscles that requires energy expenditure. Examples of common types of activity include: walking, cycling, running, dancing, swimming, yoga, and gardening.

Physical inactivity: An insufficient physical activity level to meet present physical activity recommendations.

Primary health care: Health care provided in the community for people making an initial approach to a medical practitioner or clinic for advice on prevention and management of diseases. It is the first point of contact for someone when they contract an illness, suffer an injury, or experience symptoms that are new to them.

Recreational physical activity: Physical activity performed by an individual that is not required as an essential activity of daily living and is performed at the discretion of the individual. Such activities include sport participation, exercise or training, or activities such as going for a walk, dancing, and gardening.

Sedentary screen time: Time spent watching screen-based entertainment (TV, computer, mobile devices). Does not include active screen-based games where physical activity or movement is required.

Sedentary behaviour: Any waking behaviour characterized by an energy expenditure of 1.5 Metabolic Equivalent of Task or lower while sitting, reclining, or lying. Most desk-based office work, driving a car, and watching television are examples of sedentary behaviours; these can also apply to those unable to stand, such as wheelchair users.

Vigorous-intensity physical activity: On an absolute scale, vigorous-intensity refers to physical activity that is performed at 6.0 or more METS. On a scale relative to an individual's personal capacity, vigorous-intensity physical activity is usually a 7 or 8 on a scale of 0–10.

ABBREVIATIONS

ACSM: American College of Sports Medicine

ARBS: Adolescent Risk Behaviour Survey

DHHS: Dubai Household Survey

EIM: Exercise is Medicine

NCD: Non-communicable diseases

PA: Physical Activity

1. BACKGROUND

Physical Activity (PA) as defined is any bodily movement produced by skeletal muscles that requires energy expenditure like all movement during leisure time, for transport to get to and from places, or as part of a person's work.

Increasing PA reduces mortality and morbidity from non-communicable diseases (NCD) such as cardiovascular disease and cancer, as well as type 2 diabetes mellitus, dementia, and depression.

It has significant physical & mental health benefits, including increased ability to perform everyday activities, maintain healthy body weight, improved sleep, cognitive ability, bone and musculoskeletal health, mental health and immune system.

Physical inactivity contributes to missed opportunities for children and adults to have better health, increasing the burden of morbidity and mortality resulting from NCD. Widespread physical inactivity is also a major economic burden to national health systems, and to the

economy worldwide. Physical inactivity per year costs \$90,622,088. The direct healthcare cost attributable to NCD & mental health between 2020 & 2023 was \$: 996,842,964 per year. The health and economic burden of physical inactivity is not inevitable, and avoiding it requires implementing effective policies and interventions, adapted to available resources, culture and local community needs.

Furthermore, the prevalence of insufficiently physically active persons aged 18+ years is defined as less than 150 minutes of moderate-intensity activity per week, or equivalent. Globally, 81% of adolescents and 27.5% of adults currently do not meet WHO's recommended levels of PA. In the UAE, the prevalence of physical inactivity among adults aged 18+ was 39% for males and 49% for females. In contrast, the emirate of Dubai in 2019 reported through the Dubai Household Survey that almost 20% of the population engaged in sufficient PA, with no significant difference between males and females as shown in Table 1.

Table1: Sufficient Physical activity levels by gender in Adults (18 + years) in Dubai – DHHS (2019).

	Males (%)	Females (%)	Total (%)
Physically active	19.7 (17.5–21.9)	20.4 (17.9–22.9)	19.9 (18.2–21.6)

Furthermore, the Adolescent Risk Behaviour Survey 2019 (ARBS-Dubai-2019) revealed that 82.4% of adolescents were not physically active for a total of at least 60 minutes per day on all 7 days preceding the survey.

Therefore, the Public Health Protection Department, DHA collaborated with subject matter experts (health professionals and physical education staff) and have conducted an intensive review of the literature and of well-established PA guidelines to create the PA guideline for Dubai, UAE.

In conclusion, PA plays a crucial role in maintaining overall health and well-being, through reducing the risk of NCD. Therefore, adhering to established PA guidelines is essential in combating the growing issue of physical inactivity. The PA guideline provides recommendations for healthcare professionals, physical education teachers in schools, and the community to increase PA and reduce sedentary behaviours to help lower the burden of NCD in Dubai, UAE.

2. SCOPE

This guideline provides evidence-based recommendations to encourage and increase physical activity in the community, including children, adolescents, adults, and healthy senior adults.

3. PURPOSE

Support healthcare professionals and the community to promote physical activity to improve overall health and reduce the burden of non-communicable diseases.

4. APPLICABILITY

Primary Healthcare Facilities

5. RECOMMENDATION ONE: BENEFITS OF PHYSICAL ACTIVITY

Physical activity has many benefits for all age groups (Figure 1).

5.1. Children & Adolescents

Physical activity helps Improve:

- Mental health
- Cognitive function
- Weight management
- Bone health
- Motor skills
- Social skills
- Physical fitness

Physical activity helps reduce the risk of:

- Heart disease
- Type 2 Diabetes

5.2. Adults

Physical activity helps Improve:

- Weight management
- Mental health
- Cognitive function



- Quality of sleep
- Bone and muscle health
- Physical fitness

Physical activity helps reduce the risk of:

- Stroke and heart disease
- Hypertension
- Type-2 Diabetes
- Cancer

5.3 Senior Adults

Physical activity helps improve:

- Bone health
- Cognitive function
- Physical function

Physical activity helps reduce the risk of:

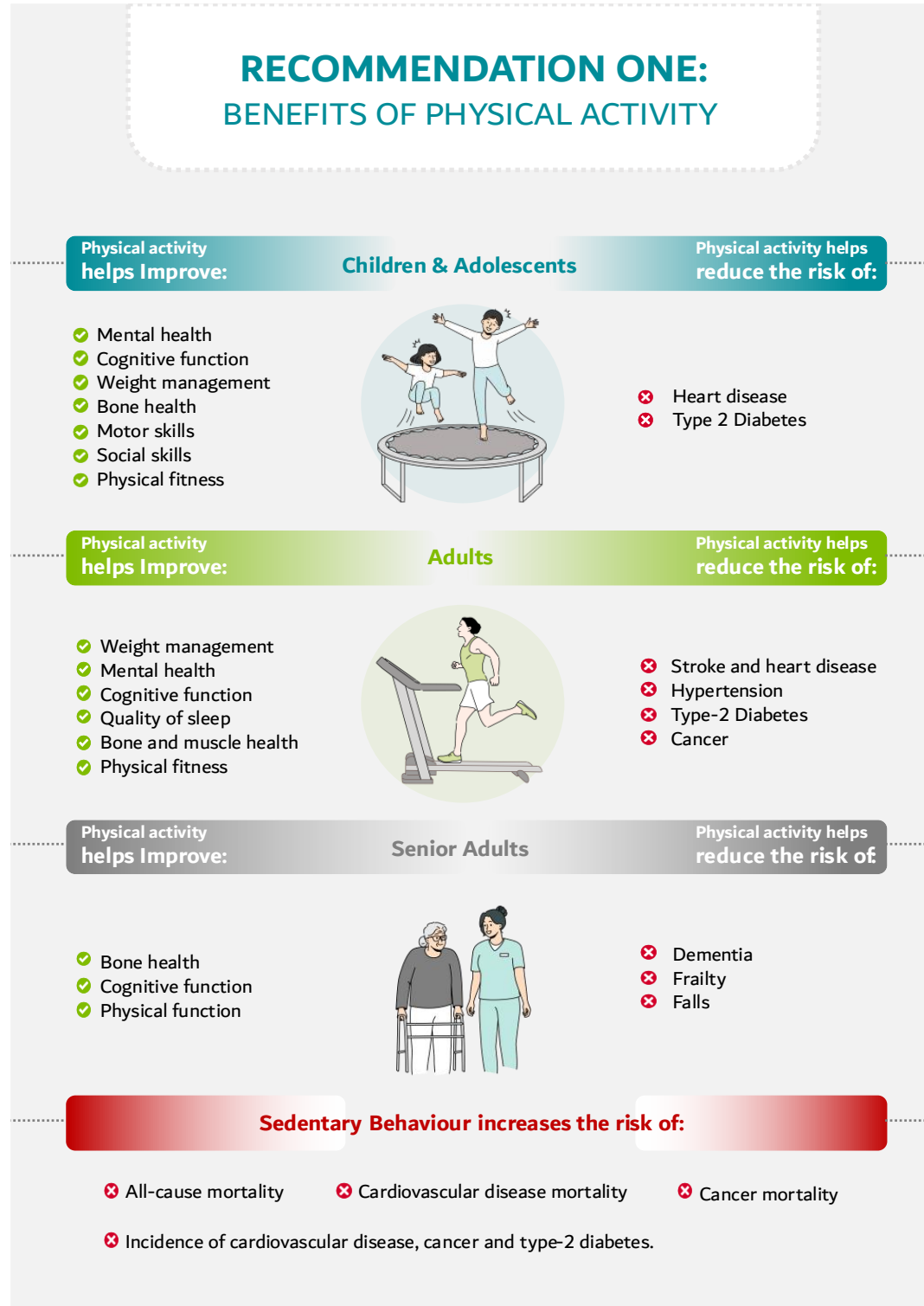
- Dementia
- Frailty
- Falls

Sedentary Behaviour increases the risk of:

- All-cause mortality

-
- Cardiovascular disease mortality
 - Cancer mortality
 - Incidence of cardiovascular disease, cancer and type-2 diabetes.

Figure 1: Benefits of Physical Activity





6. RECOMMENDATION TWO: TYPES AND COMPONENTS OF PHYSICAL ACTIVITY

6.1 Types of physical activity

Main types

6.1.1 Aerobic Physical Activity

An activity that increases heartbeat and effort needed to breathe

Benefits: improves cardiovascular fitness

Examples: running, brisk walking, swimming, and cycling

6.1.2 Muscle-Strengthening Activity

An activity that requires the body's muscles to work or hold against an applied force or weight.

Benefits: increases skeletal muscle strength, power, endurance, and muscle mass

Examples: weight-lifting exercises and resistance training

6.1.3 Bone -Strengthening Activity

An activity that produces a force on the bones

Benefit: promotes bone growth and strength

Examples: jumping jacks, running, brisk walking, and weight-lifting exercises.

Some activities are included in more than one type of activities such as swimming and cycling.

Other Types of Physical Activity

6.1.4 Balance:

An activity that develops the ability to stay in control when stationary or moving.

Benefits: Improves motor skills

Examples: standing on one leg

6.1.5 Flexibility:

An activity that causes the body's muscles to be lengthened but in a controlled manner

Benefits: Enhances ability of a joint to move through its full range of motion.

Examples: Stretching exercises

6.2. Components of physical activity that help increase the benefits:

- Exercise Intensity
- Frequency
- Duration
- Sets and Repetitions (for muscle-strengthening activity)

6.2.1. Exercise Intensity

As the intensity increases, heart rate, energy consumption, and respiratory rate also increase and the greater the benefit. Limit the amount of time spent being sedentary, particularly screen time, by engaging in activity of any intensity (Figure 2).



6.2.1.1. Light-intensity: Can talk in full sentences (any light physical activity that helps replace sedentary time such as walking and household tasks).

6.2.1.2. Moderate-intensity: Can talk in phrases or short sentences (e.g. brisk walking, swimming, weight exercise, resistance training, and cycling slower than 16 km per hour).

6.2.1.3. Vigorous-intensity: Have difficulty talking (e.g., running, weight exercise, football, swimming laps, and cycling 16 km per hour or faster).

6.2.2. Frequency

The more a person does aerobic activity or muscle-strengthening activity per week the greater the benefit.

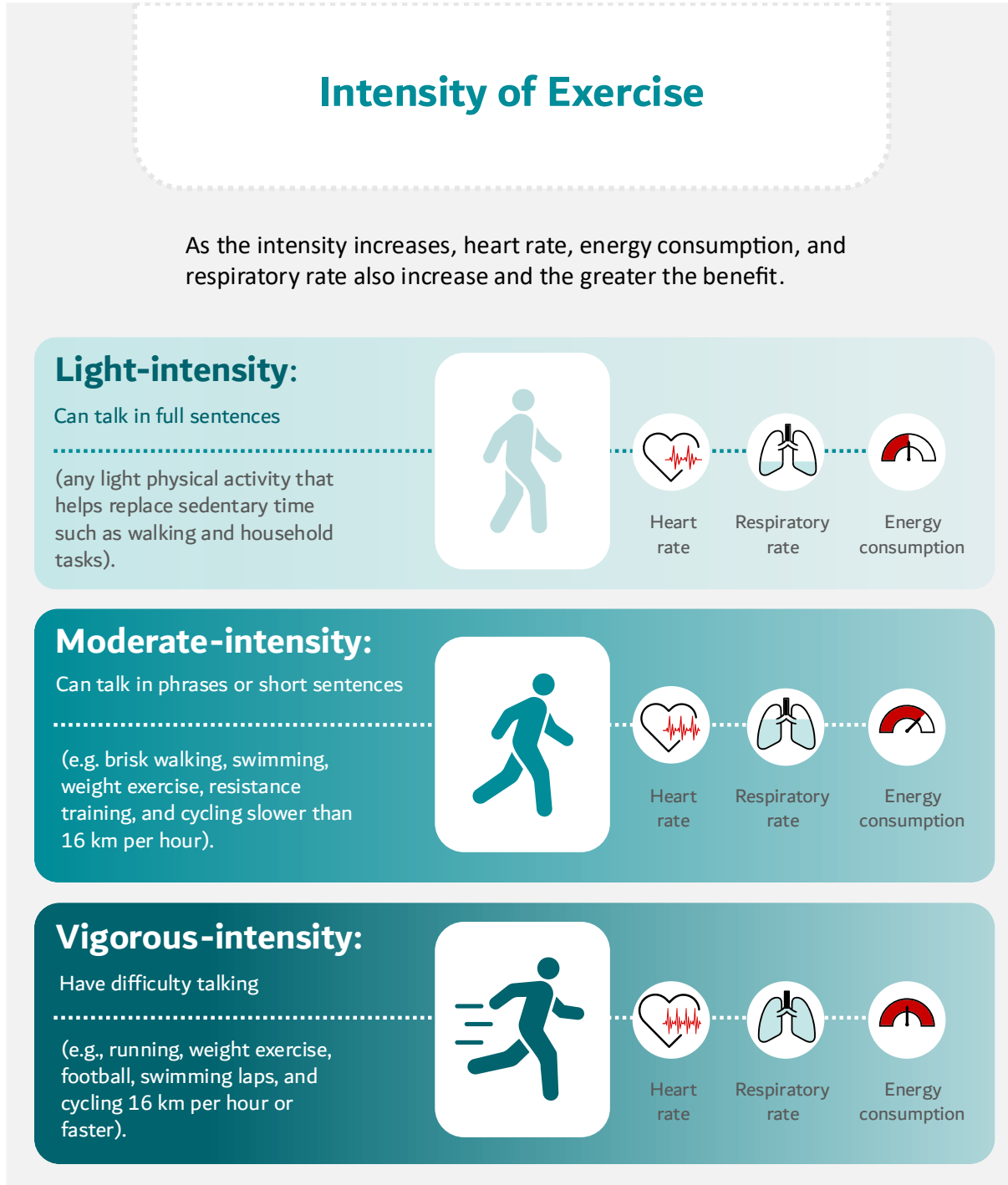
6.2.3. Duration

The longer a person does an activity in any one session the greater the benefit.

6.2.4. Sets and Repetitions

The number of times a person does the muscle-strengthening activity, like lifting a weight or doing a push-up impacts the benefits of the activity.

Figure 2: Intensity of Exercise



7. RECOMMENDATION THREE: CHILDREN (0-6 YEARS)

The summary of the physical activity recommendations for children aged 0 to 6 years are illustrated in Figure 3.

7.1 CHILDREN 0-2 YEARS:

SEDENTARY TIME

Limit the amount of time spent being sedentary, with recreational screen time not recommended. Instead, engage in imaginative play and storytelling activities.

PHYSICAL ACTIVITY

0-1 years: Encourage interactive floor-based activities for a minimum of 30-minutes a day.

1-2 years: Spend at least 180 minutes doing a variety of physical activities of any intensity, spread throughout the day. Aim for daily outdoor play

7.2 CHILDREN 3-6 YEARS:

SEDENTARY TIME

Limit the amount of time spent being sedentary, keeping recreational screen time to less than an hour a day.

PHYSICAL ACTIVITY

Spend at least 180 minutes doing a variety of physical activities, of which at least 60 minutes should be moderate- to vigorous-intensity activity, spread throughout the day.

Tips:

- Create a home environment that encourages movement and exploration.
- Encourage a wide variety of movements like running, jumping, catching, throwing, and kicking, in different environments, to build fundamental movement skills.
- Introduce activity-based games. E.g. Animal movements
- Visit playgrounds to engage the child in social play and interact with others while being active.

8. RECOMMENDATION FOUR: CHILDREN AND ADOLESCENTS (7-17 YEARS)

The summary of the physical activity recommendations for children and adolescents aged 7 to 17 years are illustrated in Figure 3.

8.1 SEDENTARY BEHAVIOUR

Limit the amount of time spent being sedentary, keeping recreational screen time to less than 2 hours a day. Instead engage in activities of any intensity, including those of light-intensity.

8.2 PHYSICAL ACTIVITY

- Accumulate an average of 60 minutes in moderate- to vigorous-intensity aerobic activity per day across the week.
- A variety of vigorous-intensity aerobic activities, muscle- and bone-strengthening exercises should be incorporated at least 3 days a week to promote the development of movement skills.

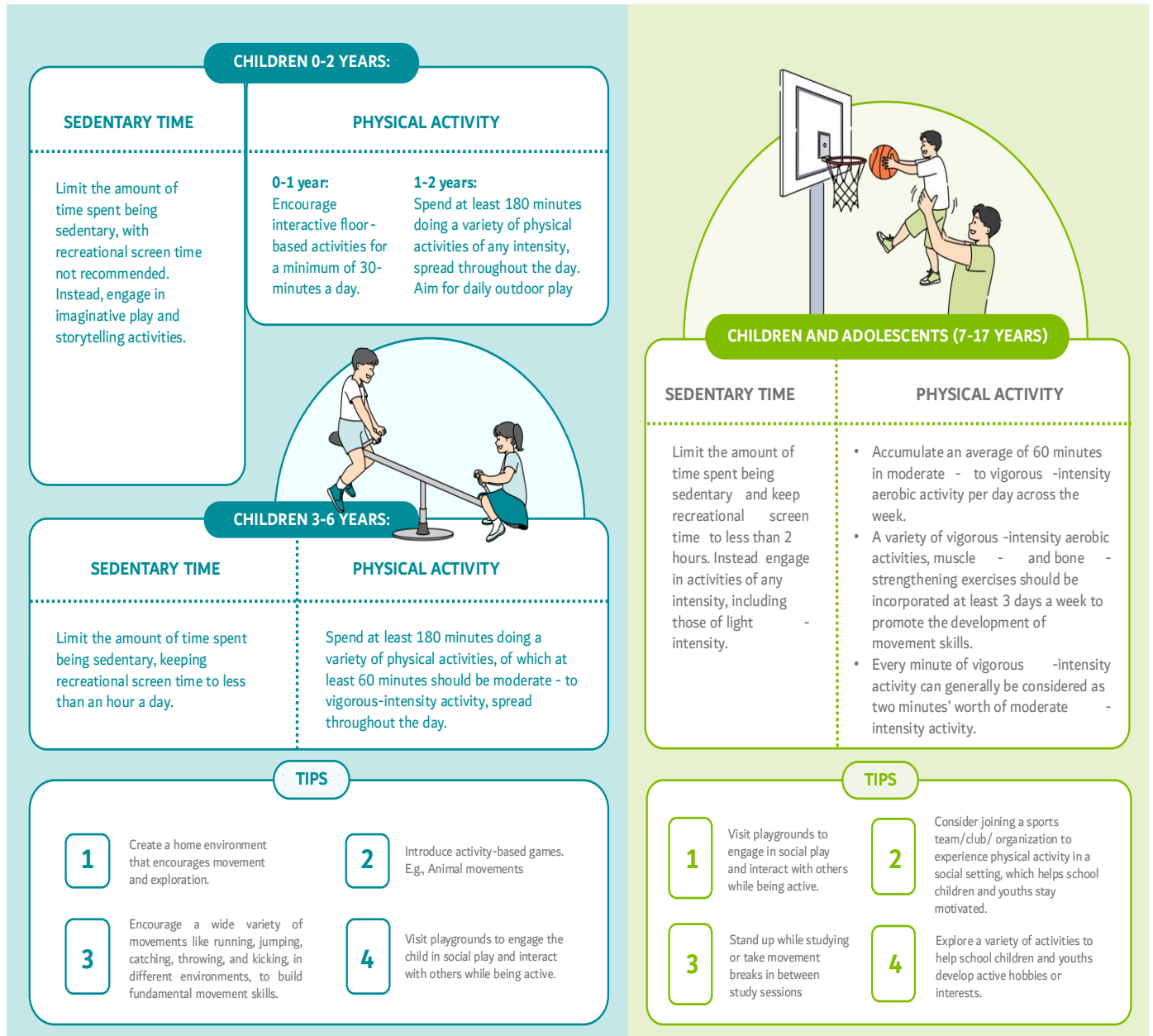


- Every minute of vigorous-intensity activity can generally be considered as two minutes' worth of moderate-intensity activity

Tips:

- Explore a variety of activities to help school children and youths develop active hobbies or interests.
- Stand up while studying or take movement breaks in between study sessions
- Consider joining a sports team/club/organization to experience physical activity in a social setting, which helps school children and youths stay motivated.
- Visit playgrounds to engage in social play and interact with others while being active.

Figure 3: Physical activity recommendations Summary for Children & Adolescents



8.2.1 Types of Aerobic, Muscle, & Bone Strengthening Activities for School Children and Adolescents

The summary of the types of physical activity recommendations for school children and adolescents are illustrated in Figure 4.

8.2.2 Aerobic Activities

Moderate-intensity

- Games at the playground (e.g. Hide and Seek)
- Cycling
- Swimming
- Brisk walking
- Casual racquet sports (e.g., tennis & padel)

Vigorous-intensity

- Games at the playground (e.g., Tag/Catching)
- Jumping rope
- Mountain biking on sand or designated parks
- Football
- Running
- Competitive racquet sports (e.g., tennis & padel)

8.2.3 Muscle-Strengthening Activities

Moderate-intensity

- Games at the playground (e.g. tug of war also known as pulling rope in Emirati culture)
- Climbing
- Resistance exercises using body weight or resistance bands.

Vigorous-intensity

- Circuit training
- Hopping, jumping, and rope-skipping

8.2.4 Bone Strengthening Activities

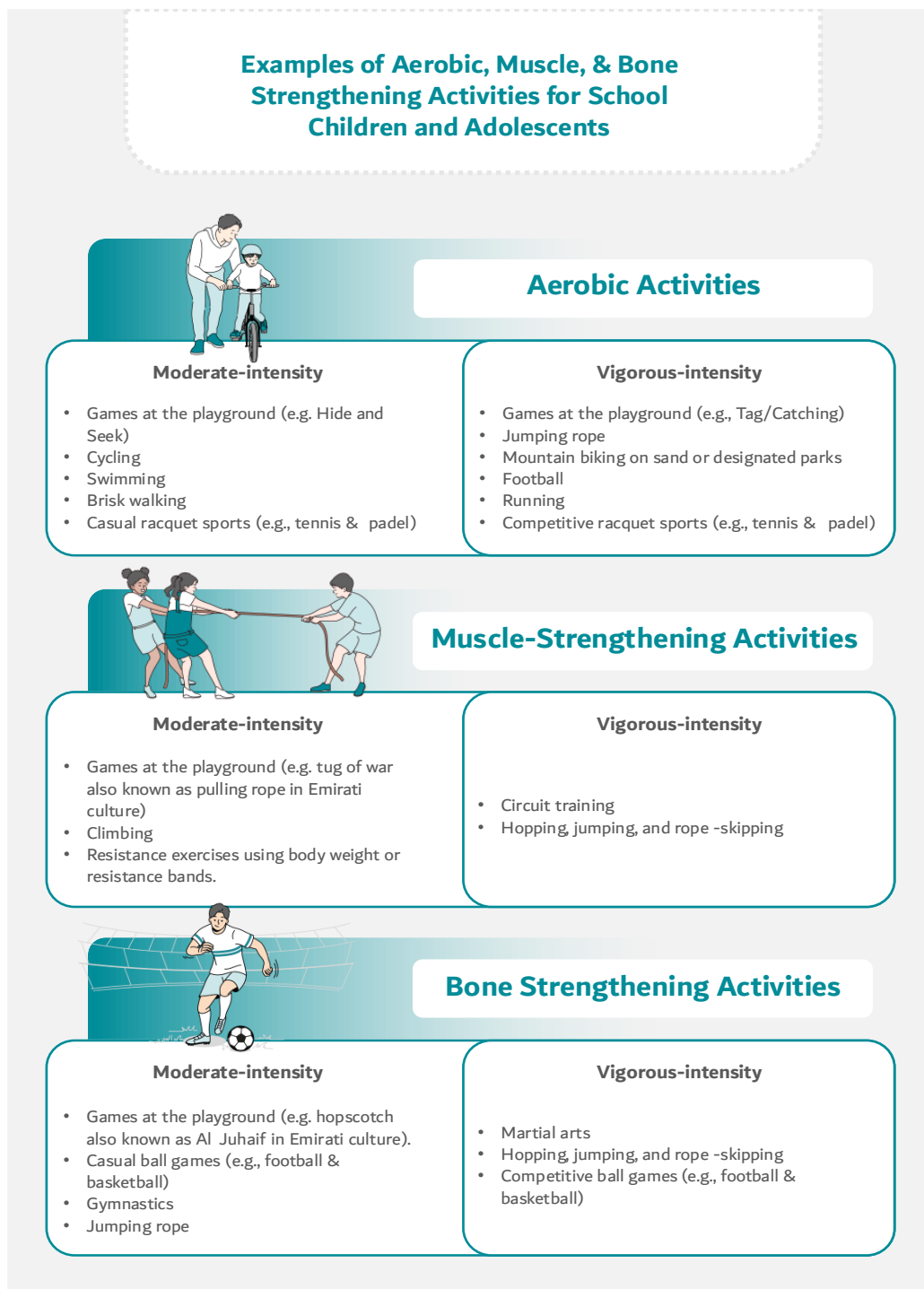
Moderate-intensity

- Games at the playground (e.g. hopscotch also known as Al Juhaif in Emirati culture).
- Casual ball games (e.g., football & basketball)
- Gymnastics
- Jumping rope

Vigorous-intensity

- Martial arts
- Hopping, jumping, and rope-skipping
- Competitive ball games (e.g., football & basketball)

Figure 4: Examples of Aerobic, Muscle & Bone strengthening activities for school children and adolescents



8.3 Exercise Safety

While physical activities bring about countless benefits, it is important to stay safe during physical activities. Use the SAFER acronym as a way of remembering the key safety tips:

- **S** is for screening, sustainability and suitability of exercise and equipment.
- **A** is for awareness of environment (weather), hydration, nutrition, and rest.
- **F** is for fitness level, knowing one's limits (ability and competency).
- **E** is for exercise with buddies to help take care of each other and be aware of emergency protocol and equipment.
- **R** is for responsibility of taking ownership of one's safety and learn CPR/AED to support others if needed.

Special Considerations

- Youth with disabilities should work with a health care professional or physical activity specialist to understand the types and duration of physical activity appropriate for them.
- For children with chronic conditions, they must consult a health care professional before conducting any type of physical activity.
- When young people are not able to participate in the appropriate types or duration of physical activities needed to meet the key guidelines, they should be as active as possible and avoid being inactive.

9. RECOMMENDATION FIVE: ADULTS AGED 18+ TO 64

The summary of the physical activity recommendations for adults aged 18+ to 64 years is illustrated in Figure 5.

9.1 SEDENTARY BEHAVIOUR

Adults should limit the amount of time spent being sedentary. Replacing sedentary time with physical activity of any intensity (including light intensity) provides health benefits.

9.2 PHYSICAL ACTIVITY

9.2.1 Aerobic Activity

Adults should do at least 150–300 minutes of moderate-intensity aerobic physical activity; or at least 75–150 minutes of vigorous-intensity aerobic physical activity; or an equivalent combination of moderate- and vigorous-intensity activity throughout the week, for substantial health benefits.

9.2.2 Muscle-strengthening Activity

- Adults should also do muscle-strengthening activities at moderate or greater intensity that involve all major muscle groups on 2 or more days a week, as these provide additional health benefits.
- Finding the suitable weight/resistance is key and a general good practice is to complete 8 to 12 repetitions per set to achieve strengthening outcomes. Repeating 2 or 3 sets may be more effective.



Tips:

- Work out your muscle groups through different multicomponent activities.
- Start with small changes like taking the stairs instead of the lift.
- Being active can be enjoyable - try a new sport or explore one of the many local parks.

Special Considerations

- For adults with chronic conditions, the same recommendations can be applied, however, they must consult a health care professional before conducting any type of physical activity.
- For pregnant and postpartum women, the same recommendations can be applied, however, they must consult a health care professional before conducting any type of physical activity.

Figure 5: Recommendations for Adults (18+to 64 years)



Examples of Aerobic & Muscle Strengthening Activities

Aerobic	Multicomponent	Muscle Strengthening
<ul style="list-style-type: none"> • Brisk Walking • Running • Football • Racquet Sports 	<ul style="list-style-type: none"> • Swimming • Cycling • Circuit Training or High Intensity Interval Training • Hiking 	<ul style="list-style-type: none"> • Weight Exercise • Resistance Training

10. RECOMMENDATION SIX: SENIOR HEALTHY ADULTS AGED 65+

The summary of the physical activity recommendations for senior healthy adults aged 65+ years is illustrated in Figure 6.

10.1 SEDENTARY BEHAVIOUR

Senior adults should limit the amount of time spent being sedentary. Replacing sedentary time with physical activity of any intensity (including light intensity) provides health benefits.

10.2 PHYSICAL ACTIVITY

10.2.1 Aerobic Activity

Senior adults should do at least 150–300 minutes of moderate-intensity aerobic physical activity; or at least 75–150 minutes of vigorous-intensity aerobic physical activity; or an

equivalent combination of moderate- and vigorous intensity activity throughout the week, for substantial health benefits (Figure 6).

10.2.2 Muscle-strengthening Activity

Senior adults should also do muscle-strengthening activities at moderate or greater intensity that involve all major muscle groups on 2 or more days a week, as these provide additional health benefits.

Tips:

- You can incorporate simple strength training exercises such as resistance band exercises.
- Walk or play sports with your family and friends; this is a great way to be active while spending quality time with your loved ones.
- Engage in varied multi-component physical activity at home or in a structured group setting, which can combine aerobic, muscle-strengthening, and balance training into a session.

Special Considerations

For senior adults with chronic conditions, the same recommendations can be applied, however, they must consult a health care professional before conducting any type of physical activity.

Figure 6: Recommendations for Senior Healthy Adults

SENIOR HEALTHY ADULTS AGED 65+

SEDENTARY TIME	PHYSICAL ACTIVITY
<p>Senior adults should limit the amount of time spent being sedentary. Replacing sedentary time with physical activity of any intensity (including light intensity) provides health benefits.</p>	<p>Aerobic Activity Senior adults should do at least 150 –300 minutes of moderate-intensity aerobic physical activity; or at least 75–150 minutes of vigorous -intensity aerobic physical activity; or an equivalent combination of moderate - and vigorous intensity activity throughout the week, for substantial health benefits.</p> <p>Muscle-strengthening Activity Senior adults should also do muscle -strengthening activities at moderate or greater intensity that involve all major muscle groups on 2 or more days a week, as these provide additional health benefits.</p>

TIPS

- 1


You can incorporate simple strength training exercises such as resistance band exercises.
- 2

Walk or play sports with your family and friends; this is a great way to be active while spending quality time with your loved ones.
- 3

Engage in varied multi -component physical activity at home or in a structured group setting, which can combine aerobic, muscle -strengthening, and balance training into a session.

Special Considerations

For senior adults with chronic conditions, the same recommendations can be applied, however, they must consult a health care professional before conducting any type of physical activity.



Examples of Aerobic & Muscle Strengthening Activities

Aerobic	Multicomponent	Muscle Strengthening
<ul style="list-style-type: none"> • Brisk Walking • Jogging 	<ul style="list-style-type: none"> • Swimming • Cycling • Hiking • Circuit Training (to be performed at light to moderate intensity) 	<ul style="list-style-type: none"> • Weight Exercise • Resistance Training

11. RECOMMENDATION SEVEN: EIM-PRESCRIBING PHYSICAL ACTIVITY

11.1 Introduction to Exercise is Medicine (EIM)

Exercise is Medicine® (EIM), is a global health initiative managed by the American College of Sports Medicine (ACSM), is to make physical activity assessment and promotion a standard in clinical care, connecting health care with evidence-based physical activity resources for people everywhere and of all abilities.

EIM encourages physicians and other health care providers to include physical activity when designing treatment plans and to refer patients to evidence-based exercise programs and qualified exercise professionals.

11.2 Primary Healthcare Professionals can follow the steps below to prescribe physical activity:

Step 1: Safety Screening

Before prescribing physical activity to your patients, be sure to use the ACSM's Preparticipation Screening Guidelines (Appendix 1).

Step 2: Provide Brief Advice or a Basic Exercise Prescription

Indicate your recommendation based on the on the Modified Version of Exercise is Medicine Prescription Form—Adults Aged 18+ to 65 (Appendix 2)

12. RECOMMENDATION EIGHT: WORKPLACE PHYSICAL ACTIVITY

12.1 Recommendations for Individuals

Apply the adults or senior healthy adults' recommendations for physical activity to improve your overall health.

12.2 Recommendations for Workplaces

- Encourage active meetings with walk-and-talk formats
- Include short warm-up sessions in the daily schedule
- Offer support for individual behavioural change
- Promote the use of stairs in the workplace



- Assign a workplace champion to provide information about the benefits of regular movement via different communication channels.
- Provide facilities that support physical activity at work such as an exercise space that includes exercise equipment, access to showers, change rooms, and lockers. These facilities should be separate for males and females.
- Provide access to nearby fitness facilities if onsite facilities are not available.
- Provide supervised or partially supervised physical activity programs onsite or at nearby fitness facilities.
- Create opportunities for flexitime or time dedicated for physical activity and embed this within relevant internal policies.
- Develop actionable workplace policies that encourage physical activity in the workplace.

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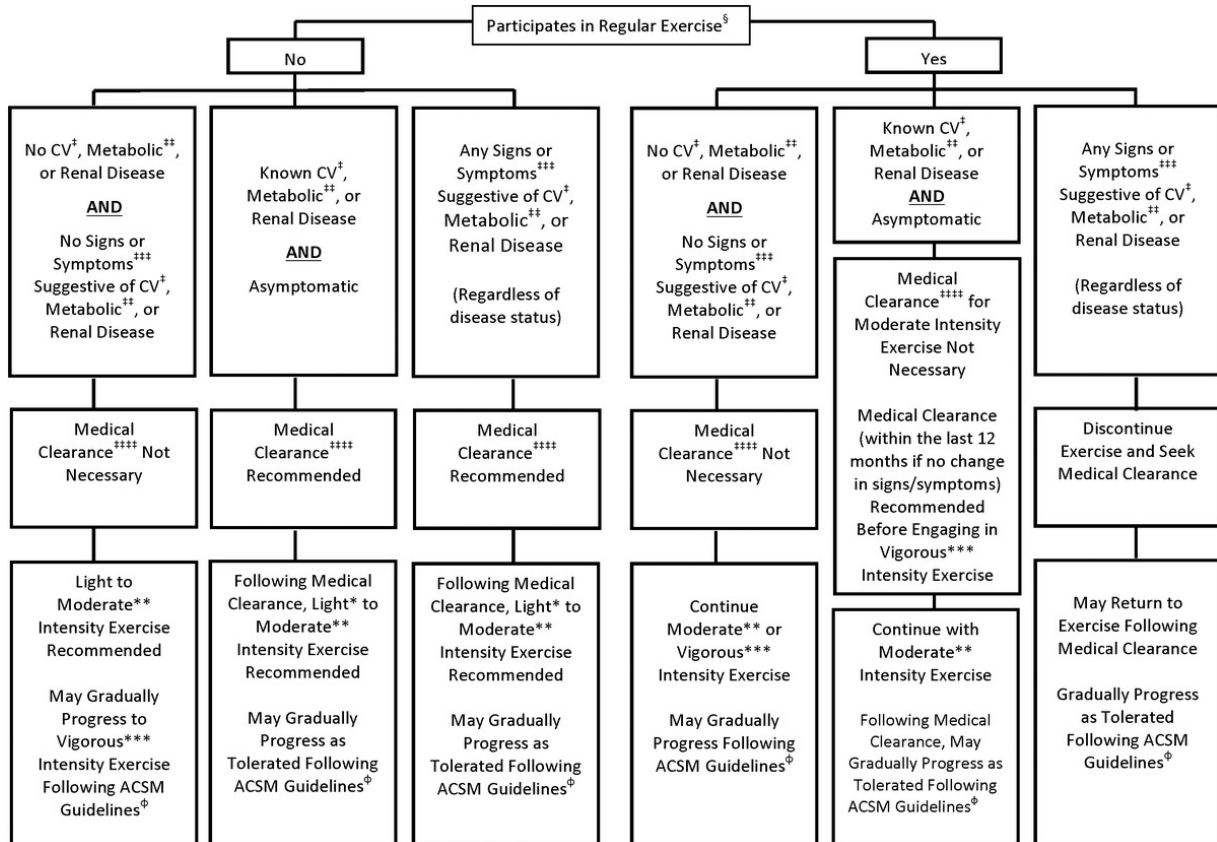
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APPENDICIES

APPENDIX 1 - ACSM'S PREPARTICIPATION SCREENING GUIDELINES



**APPENDIX 2 – MODIFIED VERSION OF EXERCISE IS MEDICINE PRESCRIPTION FORM–
ADULTS AGED 18+ TO 65**

General Recommendations:

Aerobic Activity

Adults should do at least 150–300 minutes of moderate-intensity aerobic physical activity; or at least 75–150 minutes of vigorous-intensity aerobic physical activity; or an equivalent combination of moderate- and vigorous-intensity activity throughout the week.

Muscle-strengthening Activity

Adults should also do muscle-strengthening activities at moderate or greater intensity that involve all major muscle groups on 2 or more days a week.

Aerobic Activity

Frequency (days per week): 1 2 3 4 5 6 7

Intensity: Light Moderate Vigorous

Duration (minutes per day): _____ Minutes

Type (examples are provided below): _____

Muscle-Strengthening Activity

Frequency (days per week): 1 2 3 4 5 6 7

Intensity: Light Moderate Vigorous

Duration (minutes per day): _____ Minutes

Sets and Repetitions (per exercise): 8 repetitions for 2 sets 12 repetitions for 3 sets

Other _____

Muscle groups: legs, back, abdomen, chest, shoulders and arms.

Examples of Aerobic and Muscle-Strengthening Activities:

Aerobic	Multicomponent	Muscle Strengthening
<ul style="list-style-type: none"> • Brisk Walking • Running • Football 	<ul style="list-style-type: none"> • Swimming • Cycling • Circuit Training or High Intensity Interval Training • Hiking 	<ul style="list-style-type: none"> • Weight Exercise • Resistance Training