

**Active Communities Team –  
Northern Healthy Communities Partnership  
Evidence Based Best Practices for Physical Activity –  
Summary (not in order of importance)  
May 2006**

- 1. Multi-faceted programs – school, home, community, family, workplace**
- 2. Having social supports to increase physical activity – promotes individual changes**
- 3. School based physical activity– comes up frequently**
  - a. Doesn't mean just PE in school but when kids out of class at recess, lunch after school – things like walking to school – dropping kids off a few blocks away.**
  - b. Structured and unstructured play time (i.e. females prefer unstructured)**
  - c. Also linked to what schools serve kids for snacks, meals etc**
- 4. P Ed focus on moderate to advanced physical activity for all – not just teaching skills but kids more active all during PE class – not standing around watching skills being taught. Teachers with expertise are important.**
- 5. Involve families and community**
- 6. Increase P/A and decrease sedentary activity**
- 7. Strategies that promote /A and healthy eating**
- 8. Promoting workplace P/A worthwhile and increases productivity**
- 9. Use point of decision prompts – example sign by elevator to take the stairs, sign in parking lot to park further away from the door**
- 10. Community campaigns over several years, using social marketing to target healthy individuals to maintain P/A not just targeting inactive people i.e. target the general population**
- 11. Promote any outdoor activity as it gets people active – example outdoor walking/hiking/biking trails, safe places to play outside, safe places to walk**
- 12. Promote walking programs**
- 13. Make sure activities are accessible and affordable**
- 14. Support individual goal setting**