

Editorial

*Corresponding author:

Ahmad Alkhatib, PhD, MSc, BSc(BA), FHEA, RNutr, CISSN

Head of Division of Sport and Exercise Science

School of Social and Health Sciences

University of Abertay

Dundee DD1 1HG, UK

E-mail: drahmadalkhatib@gmail.com

Volume 2 : Issue 3

Article Ref. #: 1000OROJ2e004

Article History:

Received: September 22nd, 2015

Accepted: September 22nd, 2015

Published: September 22nd, 2015

Citation:

Alkhatib A. Sports or physical activity for the inactive world: should we be encouraging safer physical activity patterns more than sports? *Obes Res Open J.* 2015; 2(3): e10-e11.

Sports or Physical Activity for the Inactive World: Should we be Encouraging Safer Physical Activity Patterns more than Sports?

Ahmad Alkhatib*

Division of Sport and Exercise Science, School of Social and Health Sciences, University of Abertay, Dundee, United Kingdom

The scientific evidence on the positive effects of physical activity as part of a healthy lifestyle is well established. Physical activity has both direct and indirect effects for preventing several chronic diseases, including cardiovascular disease (CVD), obesity, diabetes and cancer.¹ Healthcare policies across the globe have developed numerous strategies to encourage physical activity with several calls for action to prevent and decrease overweight and obesity, such as calls for action in the US Department for health and Human Services in 2001, the UK House of Commons Health Committee report on obesity and the Department of Health physical activity guidelines in 2004.²⁻⁴ Moreover, numerous implementation initiatives have encouraged physical activity and sports participation with an aim of achieving health outcomes and cost saving strategies for healthcare.

However, the promotion of physical activity, guidelines and calls for action have often implemented the terms of “physical activity” and “sports” interchangeably. Referring to physical activity benefits and the associated desired health outcomes has often been confused with encouraging sports participation. Numerous government initiatives have attempted to address the physical activity guidelines amongst different population groups by weighing them heavily towards promoting sports and less so for physical activity. A public misconception, for example, is that being physically active is conveyed through encouragement to participate in often competitive sports such as football, triathlon, cycling, running, football or even rugby and boxing. Furthermore, physical education in many countries seems to have primarily focussed on developing sports skills, whilst governments and local councils seem to directly or indirectly encourage the idea that being physically active is translated by doing sports. The most recent government policies in the UK have continued to recommend “Playing sport helps to keep people healthy and is good for communities. Playing sport at school or in a local club is also the first step to competition at the highest level”.⁵ Playing competitive sport has also formed a large part of the London 2012 Olympics legacy, despite questionable outcomes in terms of sustainable populations’ participation and the associated health outcomes, since it was first implemented in 2004.⁶ Hosting major tournaments is likely to increase participation in specific sports, such as the England 2015 Rugby World Cup, and Qatar’s planned Football World Cup in 2022, even though not much attention have been given to deal with the risks associated with competitive sports participation, or to translate the sports’ health benefits into promoting a safer physical activity.

Competitive sports, especially team sports are associated with a higher risk of injury compared with physical activities such as walking and gardening. Perhaps performing such a comparison may not be possible. However, to encourage the idea that being physically active is only translated by doing sports in order to gain the health benefits may be at odds with the established physical activity health benefits. In fact, the word “sports” has only been mentioned 3 times compared with the word “physical activity” which was mentioned 105 times within the World Health Organisation (WHO) global strategy on physical activity and health.⁷

By definition, physical activity is any bodily movement produced by the skeletal muscles that uses energy. This includes exercise and other activities such as playing, walking,

Copyright:

© 2015 Alkhatib A. This is an open access article distributed under the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly cited.

doing household responsibilities or gardening. Regular and organised physical activity can form the term “exercise” and is known to be associated with less risk of injury compared with doing “sports” with soccer as a prime example. It has recently been reported that approximately 37 paediatric sport or recreational injuries are treated hourly in the United States.⁸ In particular, team sports injuries such as soccer that tend to peak during the teen years.⁸ Perhaps the common Anterior Cruciate Ligament (ACL) injuries provide a simple example of how recreational soccer results in adverse effects on physical activity participation. Reflecting on a personal experience at a known Sports Medicine department, it was striking to see the high number of individuals, who visited the orthopaedic department to be treated for a soccer-related ACL injury within a short space of time. The prolonged rehabilitation process often lasts from six months to 2 years. Returning to being active is often compounded by the fear of re-injury.⁹ The injury-related deficits are often combined a very little attention paid to meeting the minimum physical activity guidelines throughout the prolonged rehabilitation process, with some deterioration of physical fitness, all potentially increase the risk of CVD. Therefore, in terms of injury prevention, implementing physical activity guidelines should not be confused with promoting sports but should rather be concerned with less competitive physical activity initiatives.

Traditionally, being healthy and physically active behaviours have been focussed on irregular physical patterns, such as those associated with manual work such as farming, carpentering etc. This type of being physically active has empirically been found to be associated with longevity and reduced risks of CVD. For example, a traditional Mediterranean lifestyle encompasses an active lifestyle alongside a healthy diet, and is strongly associated with reduced CVD and longevity.¹⁰ Perhaps, the message should be multifaceted involving obesity researchers, clinicians, sport professionals and government bodies to work together to implement a balanced message for populations’ physical activity guidelines.

Undoubtedly, the message encouraging sports participation across different participant groups has marked benefits for health, particularly amongst children and adolescents, and developing sports competitiveness contributes to the nation’s reputation and economical growth.⁵ However, in terms of injury prevention, implementing physical activity guidelines should not be confused with promoting sports. It may be time that we start to consider emphasising more on physical activity rather than sports.

REFERENCES

1. Blair SN, Brodney S. Effects of physical inactivity and obesity on morbidity and mortality: current evidence and research issues. *Med Sci Sports Exerc.* 1999; 31(Suppl 11): S646-S662.
2. US Department of Health and Human Services [USDHHS]. The surgeon general’s call for action to prevent and decrease overweight and obesity. Washington, DC: US Government Printing Office; 2001.
3. House of commons health committee, Obesity. Third report of session 2003-04. London: The stationery office; 2004.
4. Department of Health. At least five a week: evidence on the impact of physical activity and its relationship to health. A report from the Chief Medical Officer. London: Department of Health; 2004.
5. UK Department of Culture Media & Sport, Department for Education. Policy paper, 2010 to 2015 government policy: sports participation. Available at: <https://www.gov.uk/government/publications/2010-to-2015-government-policy-sports-participation/2010-to-2015-government-policy-sports-participation> 2015; Accessed September 20, 2015.
6. Woodhouse J. London olympics 2012: sporting legacy; 2010.
7. WHO. Global strategy on diet, physical activity and health; 2005. Available at: http://www.who.int/dietphysicalactivity/strategy/eb11344/strategy_english_web.pdf 2005; Accessed May 20, 2012.
8. Schwebel DC, Brezaussek CM. Child development and pediatric sport and recreational injuries by age. *J Athl Train.* 2014; 49(6): 780-785. doi: [10.4085/1062-6050-49.3.41](https://doi.org/10.4085/1062-6050-49.3.41)
9. Gignac MA, Cao X, Ramanathan S, et al. Perceived personal importance of exercise and fears of re-injury: a longitudinal study of psychological factors related to activity after anterior cruciate ligament reconstruction. *BMC Sports Sci Med Rehabil.* 2015; 7: 4. doi: [10.1186/2052-1847-7-4](https://doi.org/10.1186/2052-1847-7-4)
10. Alkhatib A. Effective intervention strategies combining Mediterranean diet and exercise for reducing obesity, metabolic and cardiovascular risks in high-risk populations: mini review. *Obes Res Open J.* 2015; 2(1): 4-9. doi: [10.17140/OROJ-1-102](https://doi.org/10.17140/OROJ-1-102)