For an Expanded View of Physical Activity in Health
Por uma visão ampliada da atividade física na saúde

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From the publication of the Letter to the Editor written by Paula et al. (2021) in the Brazilian Journal of Physical Activity and Health (v.26:e0183), we felt the need as Physical Education and Health Professionals (PEF) to collaborate in expanding the view on physical activity (PA) in the context of health, whether public or private.

Non-communicable Chronic Diseases can be prevented or treated by a set of actions, initiatives, subjects, institutions, being socially determined by a set of factors. In the current context of the COVID-19 pandemic, the prevalence of physical inactivity and sedentary behaviors has increased among Brazilian adults1. A previous study showed positive associations between PA and a reduction in severe symptoms of COVID-19 in infected individuals1. However, the authors recommend that the results be viewed with caution. In this direction, health authorities have a key role to play in reducing sedentary behaviors and insufficient physical activity to reduce the risk of serious COVID-19 outcomes.

The multiple benefits of PA go beyond physiology and biology, as they can be seen from multiple perspectives, beyond epidemiology and effects on the disease. The subject’s desire, the physical and material structure, and also adequate environmental safety are examples of important factors to be considered in the subject’s relationship with the practice of PA or physical exercise. Recommendations based on prescribing frequencies, volumes and intensities focused on long-term goals do not seem to meet the subjects’ immediate goals2.

In another context, it does not seem to us that the curricula of health professionals, nurses, physiotherapists, and doctors, among others, inflated with disciplines aimed at strengthening the hegemonic biologic/biomedical model are the solution to increasing the practice of PA by the population. Professional practice involves expanded knowledge in addition to biological, passing through the social sciences, the humanities, as well as the behavioral aspects which compose the reality of the work process in preventing diseases and health promotion3. There is little attention devoted to behavioral aspects, ways of life, and even less to the humanistic and psychosocial benefits arising from these practices. It is urgent to break and overcome the logic in which health professionals need content and technical knowledge to carry out counseling. Guidance for the practice of PA does not require in-depth knowledge on this subject, nor is it exclusive to a single profession. The orientation/counseling for PA can be carried out by any health professional in a few minutes in a routine service to a user/patient4, or in a more structured and longitudinal way in the different opportunities of meeting users/PEF. However, counseling should be understood...
as another way of producing care, not constituting the only or the most important strategy, and should preferably be articulated with intra and intersectoral actions.

The full potential of PA is reduced to a simplistic view represented by the volume/intensity/frequency relationship in a merely prescriptive orientation. Likewise, it does not seem to us that this same knowledge is decisive in a subject’s adherence to a daily PA routine. In this sense, from a holistic view of PA, we can list important aspects to be considered, namely: the individual, the complexity of the different relationships that involve the subject and regular practice, the environment and human experience. In a heterogeneous and unequal country like Brazil, the population’s relationship with the practice of PA must be presented from a multivariate analysis with multiple determinations, in which we can insert (for example) environmental conditions (adequate physical space and safety), social support, culture, gender, among other factors.

To conclude, the message to be transmitted to the population, to the government system and to academic institutions of teaching, extension and research, is the need to strengthen this theme through different perspectives. In health education, whether initial or continuing, a broader view on the PA topic must be taken into account. Involvement with PA seems to us to be defined by the complex relationship between man, the environment and society, and not only by the biological and physiological aspects. The accountability of the subject has been an erroneous tool, as well as expecting a population as diverse as Brazil to follow guidelines without considering the socio-environmental context and the needs of the individual.

Conflict of interest:
The authors declare no conflict of interest.

Author’s contributions
Silva SS, participated in the design and writing of the manuscript. Santos MSB, Souza Neto JM and Costa FF performed a critical review of the content.

References