

## Article 35: Human Development and Lack of Exercise and Fitness and Wellness Support Programs

**Lack of exercise** hinders human development by weakening important physical functions such as bone density and motor skills essential for lifelong independence (Arena et al., 2025; Matthews et al., 2021; Xu et al., 2023). Therefore, **fitness and wellness support programs** help counter these detrimental effects by offering age-specific support, such as boosting brain health in youth and preserving muscle in seniors. Furthermore, these programs turn exercise into a sustainable habit that supports a healthy growth trajectory, ensuring that individuals don't just live longer but maintain a high quality of life at every stage (Allen et al., 2025; Arnett et al., 2019; Barwais et al., 2013).

### Causes and Scope of Lack of Exercise in the United States

Lack of exercise has become a national crisis, with nearly 25% of U.S. adults failing to meet any physical activity guidelines. This trend is largely driven by sedentary work environments and increased screen time, which have replaced traditional physical movement with digital consumption. The scope of this issue extends across all demographics, contributing to rising rates of obesity and chronic illness that strain the American healthcare system (Arena et al., 2025; Matthews et al., 2021; Xu et al., 2023).

Following that lead, a study investigated how much time adults in the United States spent being sedentary and what daily activities contributed most to that inactivity. Given growing concerns about the health consequences of prolonged sitting, understanding these patterns was especially important. Thus, researchers used a national sample of 2,640 adults aged 20–75 from the AmeriSpeak panel and asked participants to complete up to two detailed 24-hour activity recalls on randomly selected days in late 2019. These recalls captured how people allocated their time across work, transportation, household tasks, and leisure. On average, U.S. adults reported 9.5 hours per day of sedentary time—a figure notably higher than estimates based on a single general sitting question. The largest share of sedentary time occurred during work and leisure activities. Leisure sitting was driven primarily by television viewing and computer or internet use. Overall, the findings show that much of adults' daily routines involve extended periods of sitting rather than movement. This pattern suggests that inactivity is embedded in both occupational structures and screen-based leisure habits. The scope of the issue was substantial at the population level, as prolonged sedentary behavior is associated with cardiometabolic health risks. The researchers concluded that reducing sedentary leisure time, particularly screen use, and replacing it with physical activity should be a central focus of public health efforts to improve exercise levels among U.S. adults (Matthews et al., 2021).

On that same note, a study estimated how many adults in the United States meet the World Health Organization's physical activity recommendations and examined which groups are least likely to get enough exercise. To address this question, the researchers analyzed cross-sectional data from the 2017–2018 National Health and Nutrition Examination Survey (NHANES)—a large national survey in which participants reported their weekly physical activity through structured interviews and questionnaires. Researchers classified activity levels as insufficient, sufficient, or highly sufficient based on WHO guidelines for moderate- and vigorous-intensity exercise. Overall, less than half of U.S. adults met the recommended levels of physical activity, with 55.1 percent reporting insufficient activity in a typical week. Adults with chronic conditions such as hypertension, diabetes, or disability were even less likely to achieve adequate exercise compared with the general population. Women,

older adults, and individuals with lower education or lower income also had lower odds of meeting activity guidelines. These findings indicate that health status and socioeconomic disadvantages are closely tied to reduced exercise levels. Moreover, the results showed that insufficient physical activity is not limited to isolated groups but affects a large share of the adult population. This broad pattern pointed to structural and health-related barriers that limit regular engagement in exercise. Hence, the researchers concluded that increasing physical activity, particularly among medically and socially vulnerable groups, should remain a central public health priority in the United States (Xu et al., 2023).

Another study examined a multi-level framework of social, economic, cultural, political, and environmental factors to determine why physical inactivity and obesity vary across counties in the United States and what larger forces help predict these patterns. To explore this, the researchers used data from all counties across the United States, incorporating 12 variables that represented cultural, political, policy, social, economic, and environmental influences. Furthermore, they assessed how these factors predicted county-level physical inactivity and obesity prevalence. The findings showed that broader community and structural factors were closely linked to differences in physical inactivity across counties nationwide. In fact, inactivity levels were more strongly tied to these social and environmental conditions than obesity rates were. Counties varied widely in how physically inactive their populations were, and much of that variation aligned with differences in local economic conditions, policies, culture, and built environments. These findings suggest that the location and environment where people live play a major role in shaping how active they are. The results also suggest that physical inactivity is not simply a matter of individual choice but one that is influenced by interconnected structural forces. Communities with fewer supportive conditions for movement may face greater barriers to regular exercise. Overall, the scope of insufficient physical activity across U.S. counties reflects these broader contextual differences. The researchers concluded that addressing physical inactivity requires public health efforts that target social, economic, policy, and environmental conditions rather than focusing only on personal behavior (Arena et al., 2025).

### **Effectiveness and Impact of Fitness and Wellness Support Programs**

Fitness and wellness support programs promote structured environments that help turn sedentary habits into active lifestyles. These programs utilize social support and expert coaching to help participants overcome barriers like low motivation, unhealthy diets, and limited time. Moreover, they help reduce the risk of chronic diseases by promoting consistent movement, which in turn lowers the overall burden on the healthcare system. Ultimately, fitness and wellness support programs empower individuals to achieve long-term health milestones, fostering a more resilient and productive workforce in the country (Allen et al., 2025; Arnett et al., 2019; Barwais et al., 2013).

For instance, a study evaluated the impact of a community-based fitness and wellness program called Fit and Fall Proof™ (FFP), designed to help older adults improve strength, mobility, and physical activity. The program is a peer-led, 10-week class offered several times per week at community sites like senior centers and churches, and it was developed to support underserved rural and urban participants who may struggle with staying active. Thus, researchers followed a convenience sample of older adults who enrolled in the program and collected measures of physical function, social well-being, and emotional health before and after participation using technological tools and quality-of-life surveys. Participants who completed at least one session showed significant improvements in physical mobility, strength, and self-rated social and emotional health compared with their baseline status.

Similarly, attendance contributed to greater gains, especially among the oldest participants, indicating that the program's value increases with engagement. These results were similar to physical activity interventions led by health professionals, showing that peer-led community programs can be effective at increasing exercise and movement in real-world settings. The study also found that FFP supported health equity by reaching older adults in both rural and urban areas who might otherwise lack access to structured activity opportunities. Based on these positive outcomes, the researchers concluded that community fitness and wellness support programs like FFP can play an important role in helping mitigate lack of exercise among older adults. Their findings also suggest that such programs are sustainable, beneficial, and translatable to diverse settings. Overall, the study highlights the potential for well-structured community exercise programs to increase activity levels and improve health among adults at risk of inactivity and its consequences (Arnett et al., 2019).

Another study investigated whether a brief, technology-assisted fitness program could help sedentary adults move more and feel better overall. Thus, the researchers conducted a 4-week randomized controlled trial with 33 sedentary adults who reported sitting more than 7 hours per day. These adults were randomly placed into an intervention group (program participants) or a control group (non-participants). The intervention group used an online personal activity monitor designed to encourage reductions in sedentary time and increases in daily movement, while the control group continued their normal routines. Participants' activity levels, including sedentary time and light, moderate, and vigorous physical activity, were measured at the start and end of the program using daily activity logs and standardized questionnaires. By the end of the four weeks, those in the intervention group had significantly reduced their sedentary time and increased time spent in physical activity at all intensity levels compared with their own baselines. These changes were accompanied by notable improvements in total wellness—a broad measure of physical, emotional, and lifestyle well-being. In contrast, the control group showed no meaningful changes in activity or wellness over the same period. The results suggest that structured fitness and wellness support programs that provide feedback and motivation can effectively help sedentary adults cut sitting time and boost physical activity in their daily lives. Based on these positive outcomes, the researchers concluded that such intervention programs can be valuable tools for mitigating lack of exercise and enhancing overall wellness. These findings support the idea that even short, guided activity programs can lead to meaningful improvements in how much people move and how they feel. Overall, the study highlights the effectiveness of targeted fitness support in helping inactive adults become more active and healthier (Barwais et al., 2013).

Lastly, a study examined whether an 8-week health and wellness program designed, marketed, implemented, and led by students could increase consistent participation in fitness and wellness activities among university faculty and staff. The program was conducted at St. Bonaventure University (a small private university in Western New York State) and included 78 faculty and staff members who enrolled in the challenge. Following that lead, participants completed self-reported questionnaires before and after the 8-week program to measure their involvement in on-campus and local community fitness, nutrition, and wellness activities. The initiative included regular email reminders, newsletters, and organized wellness opportunities designed to encourage engagement. After the program, there was a statistically significant increase in how consistently participants took part in wellness and fitness activities compared with their baseline levels. Faculty and staff also reported greater participation in nutritional programs within both the university and the surrounding community. These findings suggest that structured support, visibility, and consistent encouragement can help busy adults engage more regularly in health-promoting behaviors. Moreover, the

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improvements indicate that organized wellness initiatives can positively influence activity patterns in real-world settings. By making participation accessible and socially reinforced, the program helped mitigate barriers that often limit regular exercise. The researchers concluded that student-driven wellness programs can effectively enhance participation consistency among faculty and staff. Overall, the study highlights the positive impact that well-designed fitness and wellness support programs can have in reducing lack of exercise and promoting healthier lifestyles (Allen et al., 2025).

## References

- Allen, J., Olomofe, C., & Lehman, S. (2025). The impact of a student-developed, student-marketed, student-implemented and student-led 8-week health and wellness program on faculty and staff participation consistency. *Frontiers in Public Health*, 13.  
<https://doi.org/10.3389/fpubh.2025.1659127>
- Arena, R., Wang, S., Pronk, N. P., Woodard, C., & Bhatt, T. (2025). The forcing factors of physical inactivity and obesity in the United States – an artificial intelligence analysis of an ecological framework. *The American Journal of Medicine*, 138(11).  
<https://doi.org/10.1016/j.amjmed.2025.05.011>
- Arnett, M., Toevs, S. E., Bond, L., & Hannah, E. (2019). Outcomes of participation in a community-based physical activity program. *Frontiers in Public Health*, 7.  
<https://doi.org/10.3389/fpubh.2019.00225>
- Barwais, F. A., Cuddihy, T. F., & Tomson, L. (2013). Physical activity, sedentary behavior and total wellness changes among sedentary adults: A 4-week randomized controlled trial. *Health and Quality of Life Outcomes*, 11(1), 183. <https://doi.org/10.1186/1477-7525-11-183>
- Matthews, C. E., Carlson, S. A., Saint-Maurice, P. F., Patel, S., Salerno, E., Loftfield, E., Troiano, R. P., Fulton, J. E., Sampson, J. N., Tribby, C., Keadle, S., & Berrigan, D. (2021). Sedentary behavior in United States adults. *Medicine & Science in Sports & Exercise*, 53(12).  
<https://doi.org/10.1249/mss.0000000000002751>
- Xu, L., Li, T., He, W., Dong, C., Wu, C., & Qin, L. (2023). Prevalence of sufficient physical activity among general adult population and sub-populations with chronic conditions or disability in the USA. *European Journal of Public Health*, 33(5). <https://doi.org/10.1093/eurpub/ckad132>