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WHO-led Study on Insufficient Physical Activity among Adolescents leaves out LGBTQI2S Youth

1. Egale Canada is the only national LGBTQI2S human rights organization in Canada. We strive to inform public policy, inspire cultural change, and promote human rights and inclusion through research, education, awareness and legal advocacy.
2. On November 22, 2019, the WHO issued a news release summarizing the findings of a recent study on adolescent physical activity. The study, funded by the WHO, looks at the prevalence of insufficient physical activity among boys and girls over a fifteen-year period. According to this study: "...more than 80% of school-going adolescents globally did not meet current recommendations of at least one hour of physical activity per day – including 85% of girls and 78% of boys."¹
3. The authors note that the countries that have shown the greatest decrease in levels of insufficient physical activity are, broadly speaking, high-income countries that prioritize access to organized sports for adolescents. For example, in the United States, "...better physical education in schools, the pervasive media coverage of sports, and a strong presence of sports clubs providing many opportunities to play in structured organised sport"² are factors that have contributed toward a decrease in the levels of insufficient physical activity among boys.
4. The causal nexus between access to organized sport and meeting the recommended hours of physical activity in a day is deeply concerning for Egale Canada, because it is well documented that adolescent team sports are hostile to sexual minority youth. For example, in a 2014 study on *physical activity disparities in heterosexual and sexual minority youth*, Calzo and Roberts explained:

Given prior research indicating that adolescent team sports contexts may be hostile to sexual minority youth, **it is not surprising**

¹ WHO Newsroom, *New WHO-led study says majority of adolescents worldwide are not sufficiently physically active, putting their current and future health at risk*, World Health Organization, 22 November 2019, online: WHO <<https://www.who.int/news-room/detail/22-11-2019-new-who-led-study-says-majority-of-adolescents-worldwide-are-not-sufficiently-physically-active-putting-their-current-and-future-health-at-risk>>.

² Regina Guthold, Gretchen A Stevens, et al, "Global trends in insufficient physical activity among adolescents: a pooled analysis of 298 population-based surveys with 1.6 million participants", *Lancet Child Adolesc Health* 2019, 21 November 2019, online: The Lancet <[https://www.thelancet.com/journals/lanchi/article/PIIS2352-4642\(19\)30323-2/fulltext](https://www.thelancet.com/journals/lanchi/article/PIIS2352-4642(19)30323-2/fulltext)>.



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that sexual minority youth in the current study were 46%-72% less likely to participate in team sports each week than heterosexual youth [emphasis added].

[...]

Athletic self-esteem played a substantial role in explaining sexual orientation MVPA [moderate to vigorous physical activity] differences. Sexual minorities of both genders reported less positive views on their own athletic ability than heterosexuals. We found that **athletic self-esteem accounted for up to 74% of female sexual orientation MVPA differences** and **nearly 100% of male sexual orientation MVPA differences** [emphasis added].³

5. It is critical that global public policy is mindful of the fact that many LGBTQI2S adolescents are reluctant to participate in team and organized sport because of homophobia, bi-phobia, and transphobia. A study, and perhaps more importantly, the recommendations contained therein, is severely limited⁴ by the fact that it does not address the underlying discrimination that prevents LGBTQI2S youth from joining team and organized sport in the first place.
6. The Constitution of the WHO expressly states that “the objective of the World Health Organization shall be the **attainment by all peoples of the highest possible level of health** [emphasis added].”⁵ Egale Canada is concerned that the policies and programs recommended by the WHO – “more sports, active play and recreation opportunities”⁶ – are insufficient if they do not address a fundamental problem for our community, namely, that team and organized sport continue to be a hostile and discriminatory space for LGBTQI2S persons.

³ Jerel Calzo, Andrea L Roberts, et al, “Physical Activity Disparities in Heterosexual and Sexual Minority Youth Ages 12-22 Years Old: Roles of Childhood Gender Nonconformity and Athletic Self-Esteem”, *Ann Behav Med*, 47:(1), 01 February 2014, online: NCBI <<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3945417/>>.

⁴ Although the WHO-led study does recognize that *further testing with diverse populations is needed*, the study does not reference the special needs of LGBTQI2S persons and therefore the recommendations stop short of providing a complete picture to policy makers around the world. See note 2 – “Another flaw includes the sometimes-limited validity and reliability of survey instruments. Although questionnaires used in studies that were included in our analysis were tested for validity and reliability in different settings and have been recommended by experts, further testing with diverse populations and potential adaptation of questionnaires is needed [emphasis added].”

⁵ *Constitution of the World Health Organization*, art 1, chapter 1, 22 July 1946 (entered into force on 07 April 1948) online: WHO <<http://apps.who.int/gb/bd/PDF/bd47/EN/constitution-en.pdf?ua=1>>.

⁶ WHO Newsroom, supra note 1.



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7. Ultimately, a rights-based approach to health⁷ requires that policy is informed by the principles of non-discrimination and equality. It is our hope that governments, stakeholders, and community leaders, develop policies that are mindful of the fact that LGBTQI2S adolescents are disproportionately excluded from team and organized sport, and are therefore essentially excluded from the recommendations contained in the WHO-led study on insufficient physical activity among adolescents.
8. There is much that Canada can do to set a worldwide standard for access to, and inclusion in, sport and recreation for LGBTQI2S persons. We recommend the Government of Canada take the following steps to ensure a cohesive national strategy regarding LGBTQI2S sports inclusion:
 - **Implement** a nation-wide sport policy that strictly prohibits abuse, harassment and discrimination based on gender, gender identity and expression, and sexual orientation.
 - **Mandate** all National Sport Organizations develop policies that foster inclusion and ensure opportunity and accessibility for all to participate.
 - **Include** the unique experiences of the LGBTQI2S community in the harmonized Code of Conduct. Implement definitions of terms that describe the identities and experiences of the LGBTQI2S persons. Incorporate the words gender, gender identity and expression, as prohibited grounds of discrimination.
 - **Provide** a commitment to administer funding and administrative support for a *National Sports Inclusion Task Force*. This taskforce will be responsible for the subsequent issuance of an annual report card on the LGBTQI2S inclusion climate in sport in Canada.
 - **Formalize** the Sport Inclusion Task Force and Equity Research Hub as an official working group of Egale Canada.
 - **Support** Egale Canada in the development and delivering of training materials to create safer and more inclusive sport spaces and facilities, geared to coaches, athletes, spectators and all sport enthusiasts at any level.
 - **Develop** an LGBTQI2S assessment tool that addresses harassment, abuse and discrimination to monitor, hold persons accountable and track LGBTQI2S-phobic incidents.
 - **Work** with Egale Canada to appoint a member to the Centre for Sport and Human Rights advisory council, and to contribute funding to ensure the success of the Centre's programs and mission.

⁷ WHO Newsroom, *Human rights and health*, World Health Organization, 29 December 2017, online: WHO <<https://www.who.int/news-room/fact-sheets/detail/human-rights-and-health>>.



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- **Appoint** Egale Canada to the national Sport Canada body and the Gender Equity working group, to represent the LGBTQI2S community in order to develop, implement and monitor a LGBTQI2S equity strategy for sport and recreation in Canada.
9. The WHO has explained that “urgent policy action”⁸ is needed to address insufficient physical activity for adolescents around the world. Egale Canada must stress that this problem is compounded for LGBTQI2S adolescents, who avoid team and organized sport because of homophobia, bi-phobia and transphobia.⁹ We urge the Government of Canada to set the worldwide standard on non-discrimination in sport by working with Egale Canada to ensure that sport and recreation is inclusive and accessible for all Canadians.

Yours very truly,

A handwritten signature in black ink that reads 'Helen Kennedy'. The signature is stylized and cursive.

Helen Kennedy
Executive Director at Egale Canada

⁸ WHO Newsroom, supra note 1.

⁹ According to Guylaine Demers: “30% of heterosexual athletes, 67% of LGB athletes, and 85% of trans athletes experience at least one homophobic episode.” See Guylaine Demers, “Sports Experiences of Lesbian, Gay, Bisexual and Transgender Athletes”, *Sport Information Resource Center*, 03 October 2017, online: SIRcuit <<http://sircuit.ca/sport-experiences-of-lgbt-athletes/>>.