Beyond The Clinic: Community Based Physical Activity and Health Promotion in Brazil

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Project Abstract

During my study abroad experience as a Tyler Fellow in Brazil, I explored how community based physical activity programs and public healthcare initiatives contribute to health promotion. Through academic sessions, site visits, conversations with students and program participants, and participation in one exercise sessions with cancer survivors, I examined how physical activity can support healthy aging, cancer survivorship, and community well being. Two experiences particularly shaped my inquiry; observing the Universidade Estadual de Londrina's strength training program for older women and learning about Correndo Contra o Câncer, an exercise and support program for people affected by cancer. I also explored Brazil's Sistema Único de Saude (SUS) and its commitment to universal healthcare. Across these experiences, I saw that health promotion involves more than providing information or recommending exercise. Professional guidance, social connection, consistent opportunities, and access to community resources can influence people's ability to maintain healthy behaviors. This observational project compares lessons from these Brazilian experiences with broader questions about accessible and sustainable community health programs.

Purpose and Approach

Guiding question: How do community based physical activity programs and public health structures in Brazil support participation, well being, and access to health promoting opportunities?

I approached this question through an experience based inquiry during my programs academic sessions and visits in Londrina and Sao Paulo. My learning included observing UEL's older adult strength training program, participating in one exercise session with Correndo Contra o Câncer

participants, listening to program presentations, speaking with students and participants, and learning about SUS. I also used four readings as background literature. I did not collect clinical measurements or conduct an independent program evaluation; the published studies provide context and are not evidence collected by me.





UW students in front of the Universidade Estadual de Londrina (UEL)

Findings and Observations

1. Physical Activity and Healthy Aging

At the Universidade Estadual de Londrina (UEL), I learned about a supervised strength training program for older women that offers sessions three times a week. The program's research focus included the effects of different professional strategies on health related measures and whether increasing exercise weight is necessary to produce health benefits for older women. The sessions provided a practical example of structured physical activity being incorporated into ongoing health promotion.

One participant I spoke with was 83 years old and had been involved in the program for 14 years. I also learned that a participant attended a session on her birthday. These moments stood

out to me because they illustrated how a program can become a part of a person;s routine, and social life, rather than functioning only as a prescribed exercise plan. The participant's enthusiasm and the relationships built around the sessions suggested that social connection may help sustain participation over time.

A UEL=affiliated randomized controlled trial in my readings provided research context. Rodrigues and colleagues studied a supervised, progressive resistance-training program over two years, with three sessions per week, among older women. The study reported improvements in several measures of cardiac structure and function in the training group. This shows that UWL researchers are examining potential physiological benefits of sustained resistance training. I do not assume that the program I visited was the same intervention described in the trial.

2. **Exercise, Support, and Cancer Survivorship**

At Correndo Contra o Câncer, I learned about a community based program that brings physical activity and support into the experiences of people affected by cancer. I also participated in one exercise session with program participants. Taking part gave me more direct appreciation of the group environment and the role that shared activity can play in creating connection.

The program presentation reported the following participation figures: 137 participants completed six months, with 78% attendance; 78 completed one year; and 32 completed two years. The presentation also reported a recruitment figure of 28%. These figures offer a snapshot of participation over time, although they should be interpreted in the context of definitions used by the program. They are not an independent evaluation conducted for this project.

137 Completed six months	78 Completed one year	32 Completed two years	28% recruitment figure reported

The figure prompted me to think about what helps people remain engaged in health programs. In my research experience at Fred Hutch, I have seen that recruitment and retention can be challenging even when an intervention offers participant compensation. The Brazil experience made me consider how group identity, routine, encouragement, and a sense of belonging may also matter. This is a reflection and comparison, not evidence that one factor causes higher retention.

A second reading I evaluated examined Brazil's physical activity recommendations during cancer treatment. The article explains that Brazilian researchers adapted international guidance to local conditions, including Portuguese language communication, safety information, access to qualified professionals, motivation, long term adherence, and regional socioeconomic differences. It describes supervised physical activity as an important recommendation during treatment, while noting that access to specialized exercise professionals may be limited. This literature helped me consider the importance of design exercise opportunities around the realities of a population and health system. It does not establish that Correndo Contra o Câncer follows these specific guidelines.



UW Students with participants from Correndo Contra o Cancer

Public Health Context and Broader Implications

3. Healthcare Access and Brazil's Public Health System

My study abroad experience introduced me to Brazil's Sistema Unico de Saude (SUS), established in 1988 and guided by the principles of universality, equity, and integrality (comprehensive care). My readings added detail to these principles. Macinko and Harris describe the Family Health Strategy as a community based primary care model organized around defined geographic populations and interdisciplinary teams. Community health agents make household visits, support health promotion, identify health needs, and connect residents with primary care. This model illustrates how public health and clinical care can be linked through local relationships and outreach.

A more recent analysis of SUS governance during the COVID-19 pandemic describes how responsibilities shared across federal, state, and municipal levels enabled some region specific responses, while also creating coordination challenges. The study highlights leadership, adaptable regulation, reliable information, accountability, and public trust as important elements

of health system resilience. Together, these readings helped me see SUS not simply as a system that provides healthcare, but as a public structure whose organization, local capacity, and governance influence whether services reach communities.

These readings also complicate any simple comparison between Brazil and the United States. A universal health system can still face uneven resources, regional inequalities, and gaps in access. Decentralization can support local adaptation while requiring coordination across levels of government. Learning about SUS encouraged me to consider both the goals of the health system and the practical conditions that shape their implementation.

Broader Implications

Together, the UEL and Correndo Contra o Cancer experiences expanded my understanding of health promotion beyond the clinic. Both showed how organized physical activity can create opportunities for movement while also offering structure, professional guidance, and social connection. The SUS sessions added the reminder that these opportunities exist within larger healthcare and policy environments.

For public health practice, these observations point to several considerations:

- Design for sustained participation. Programs should consider convenience, routine, social support, and participants' lived experiences, not only the exercise prescription.
- Build community into health promotion. Group based activities may provide connection and encouragement alongside physical activity.
- Make opportunities accessible. Program design and public systems should account for differences in resources, geography, and access.

- Evaluate more than enrollment. Future evaluations could examine attendance, long term participation, physical function, quality of life, and participants' experiences.

Limitations and Conclusion

This project is based on fellowship learning activities, site visits, and single exercise sessions experience with cancer survivors, presentations, and informal conversations. It was not a clinical study, and I did not independently collect participant outcome data or assess program effectiveness. The participation figures are reported as presented during the program. Accordingly, the observations should be understood as reflective and exploratory rather than causal conclusions.

My time in Brazil showed me that health promotion is not limited to advising individuals to exercise or make healthier choices. It also involved creating welcoming, consistent, and accessible environments where people can participate and build relationships. I returned with stronger appreciation for community centered approaches and a deeper interest in how public health systems can support health opportunities across the life course.

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Fellowship Learning Experiences

- Universidade Estadual de Londrina (UEL): site visit and learning about the strength training program for older women.
- Correndo Contra o Cancer: program presentation, group interaction, and participation in one exercise session.
- Brazil health promotion and SUS academic sessions at Universidade de Sao Paulo