

From the clinic to the community: physiotherapy's public health role in an inactive world

Muhammad Salman Bashir ¹

¹ School of Health Sciences, University of Management and Technology, Lahore, Pakistan

chistisalman@gmail.com

Citation:

Bashir MS. (2026). From the clinic to the community: physiotherapy's public health role in an inactive world. *International Journal of Health Disciplines*, 1(2), 01-02

In 2022 nearly a third of the world's adults, about 1.8 billion people, did not reach the recommended 150 minutes of moderate activity a week. The share was 23% in 2000 and 31% in 2022, and the global target of a 15% cut by 2030 is expected to be missed [1].

The encouraging news is how little movement it takes to matter. A 2025 analysis of 57 studies using step-counting devices found that people who walked about 7,000 steps a day had a 47% lower risk of death than those who managed 2,000, along with lower risks of dementia, type 2 diabetes and falls. Even 4,000 steps were linked to a 36% lower risk [2]. These are observational figures, but the pattern holds across outcomes.

The bill for doing nothing is just as clear. If inactivity stays where it is, an estimated 499 million new cases of preventable non-communicable disease will arise between 2020 and 2030, costing public health systems about 47.6 billion international dollars a year. Three-quarters of those cases will fall in low- and middle-income countries [3].

Inactivity is also unevenly shared. The same global data show persistent gaps by gender, age and region, and the authors warn that efforts to promote activity must not widen them [1]. That warning matters for us. Gym memberships, fitness trackers and private clinics reach people who already have time and money. The woman working two jobs, the older man afraid of falling and the family with no safe pavement outside the door are harder to reach, and a public health approach has to be built around them.

This is where physiotherapy has to look at itself. We are the health profession trained in movement, yet most of our contact with the public begins after an injury, a stroke or a fall. A 2025 survey of primary care staff in England shows both the gap and the opening. More than half of respondents could not state the activity guidelines correctly, and lack of time and of affordable local programs got in the way. First contact physiotherapists, along with link workers, were the most likely to assess motivation, support behaviors change and follow patients up [4].

Public health physiotherapy means using that skill before the referral letter arrives. It starts in the consulting room: ask every patient about activity and prescribe it as carefully as a knee exercise. It continues outside, with walking and strength groups in community halls, workplaces and schools, and priority for older adults, who are the least active [1]. It also reaches policy, because transport, housing and school timetables shape how much people move. Training programmes need to teach health promotion and behaviour change as core subjects, and health systems need to fund prevention posts. A profession built on movement should be judged partly on whether its community moves more.

Copyright: © 2026 The Author(s).
Licensed under a Creative Commons
Attribution (CC BY) 4.0 International
License. Users are free to share and
adapt the material by giving an
appropriate credit to the original
author(s).



References

1. Strain T, Flaxman S, Guthold R, et al. National, regional, and global trends in insufficient physical activity among adults from 2000 to 2022: a pooled analysis of 507 population-based surveys with 5.7 million participants. *Lancet Glob Health* 2024;12(8):e1232-e1243. [https://doi.org/10.1016/S2214-109X\(24\)00150-5](https://doi.org/10.1016/S2214-109X(24)00150-5)
2. Ding D, et al. Daily steps and health outcomes in adults: a systematic review and dose-response meta-analysis. *Lancet Public Health* 2025;10(8):e668-e681. [https://doi.org/10.1016/S2468-2667\(25\)00164-1](https://doi.org/10.1016/S2468-2667(25)00164-1)
3. Santos AC, Willumsen J, Meheus F, Ilbawi A, Bull FC. The cost of inaction on physical inactivity to public health-care systems: a population-attributable fraction analysis. *Lancet Glob Health* 2023;11(1):e32-e39. [https://doi.org/10.1016/S2214-109X\(22\)00464-8](https://doi.org/10.1016/S2214-109X(22)00464-8)
4. Osinaike J, Copeland RJ, Myers A, Hardcastle SJ. Physical activity promotion practice within primary care: a cross-sectional survey of primary care health professionals in England. *BMJ Open* 2025;15(7):e093632. <https://doi.org/10.1136/bmjopen-2024-093632>