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Public policies for physical activity in Recife: analysis of *Academia da Cidade* and *Academia Recife* programs

Políticas públicas para atividade física em Recife: análise dos programas Academia da Cidade e Academia Recife

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ABSTRACT

Introduction: Physical inactivity is one of the main modifiable risk factors for noncommunicable diseases, and Recife simultaneously maintains two municipal physical-activity promotion programs linked to different departments. Objective: To compare the historical-institutional origins, conceptual and management models, and the documented reach and evaluation evidence of two municipal programs for the promotion of physical activity in Recife, Brazil: the *Academia da Cidade Program* and the *Academia Recife Program*. Methods: Qualitative, documentary, descriptive-analytical case study. Scientific articles, official documents (decrees, ordinances, public notices and municipal plans), and grey literature concerning both programs were analyzed through thematic content analysis. Results: The *Academia da Cidade*, created in 2002 by the Municipal Health Department and articulated with Primary Health Care within the Unified Health System, is characterized by an expanded health-promotion approach and by civil-servant Physical Education professionals. The *Academia Recife*, created in 2013 and currently linked to the Municipal Department of Sports, operates under outsourced management by a Social Organization and concentrates on providing infrastructure for structured exercise (weight training, functional training and complementary classes), currently reaching more than 60,000 registered people across 29 poles and the Cross Recife unit. Conclusion: The coexistence of both programs evidences distinct models of physical-activity public policy operating in the same territory and points to the need for formal intersectoral governance mechanisms between the Health and Sports Departments, capable of qualifying the integration and strategic planning of both initiatives.

Keywords: Public policies; Physical activity; Municipal Programs; Health.

RESUMO

Introdução: A inatividade física é um dos principais fatores de risco modificáveis para as doenças crônicas não transmissíveis, e o Recife mantém, simultaneamente, dois programas municipais de promoção da atividade física vinculados a secretarias distintas. Objetivo: Comparar as origens histórico-institucionais, os modelos conceituais e de gestão, e as evidências de alcance e avaliação documentadas de dois programas municipais de promoção da atividade física em Recife, Brasil: o Programa Academia da Cidade e o Programa Academia Recife. Métodos: Estudo qualitativo de caráter documental, descritivo-analítico, do tipo estudo de caso. Foram analisados artigos científicos, documentos oficiais (decretos, portarias, editais e planos municipais) e literatura cinzenta relativos aos dois programas, submetidos à análise de conteúdo temática. Resultados: O Programa Academia da Cidade, criado em 2002 pela Secretaria Municipal de Saúde e articulado à Atenção Primária à Saúde do Sistema Único de Saúde, caracteriza-se por uma concepção ampliada de promoção da saúde e por profissionais de Educação Física concursados. O Programa Academia Recife, criado em 2013 e atualmente vinculado à Secretaria Municipal de Esportes, opera sob gestão terceirizada por Organização Social e concentra-se na oferta de infraestrutura para exercícios físicos estruturados (musculação, treinamento funcional e aulas complementares), reunindo atualmente mais de 60 mil pessoas cadastradas em 29 polos e na unidade Cross Recife. Conclusão: A coexistência dos dois programas evidencia modelos distintos de política pública de atividade física no mesmo território e aponta para a necessidade de mecanismos formais de governança intersetorial entre as Secretarias de Saúde e de Esportes, capazes de qualificar a integração e o planejamento estratégico das duas iniciativas.

Palavras-chave: *Políticas públicas; Atividade física; Programas municipais; Saúde.*

Introduction

The landscape of global and national public health has been profoundly altered by the epidemiological transition, marked by the reduction in mortality from infectious diseases and the expressive increase in morbidity and mortality associated with Non-Communi-

cable Diseases[1]. In this context, physical inactivity has emerged as one of the main primary, independent, and modifiable risk factors for the development of various noncommunicable diseases, including cardiovascular diseases, type 2 diabetes, and certain neoplasms[1]. The World Health Organization recognizes the centrality of physical activity for health and recommends that adults accumulate at least 150 to 300 minutes of moderate-intensity aerobic activity, or 75 to 150 minutes of vigorous-intensity activity, per week, in addition to regular muscle-strengthening activities[2]. In 2018, in response to the persistently high global prevalence of physical inactivity, the World Health Organization launched the Global Action Plan on Physical Activity 2018–2030, through which all Member States committed to a 15% relative reduction in the prevalence of physical inactivity among adults and adolescents by 2030, to be achieved through multisectoral, whole-of-society policy actions[3]. In Brazil, tackling noncommunicable diseases has become a priority, and the Unified Health System (*Sistema Único de Saúde*) has incorporated health promotion, with an emphasis on physical activity, as a fundamental strategy, aligned with the National Health Promotion Policy[4].

The city of Recife, capital of the state of Pernambuco, has consolidated itself in recent decades as an important scenario for public health and sports policies in Brazil. In the early 2000s, a new municipal administration adopted the principle of the "inversion of priorities" a governance orientation, aligned with the equity logic of the Unified Health System, that redirected public investment toward historically underserved territories and populations, seeking to reduce social contrasts and expand access to public services[5]. It was in this political context that the city implemented two large-scale, municipally run programs for the promotion of physical activity that currently coexist in its territory: the *Academia da Cidade* Program, created in 2002 by the Municipal Health Department, and the *Academia Recife* Program, created in 2013 and currently linked to the Municipal Department of Sports. Both programs have since expanded considerably and remain in full operation, which in itself illustrates the relevance that physical-activity promotion has acquired in the city's public policy agenda.

The *Academia da Cidade*'s structure and results were influential enough to serve as a direct reference for the formulation of programs at other levels of government, such as the state program *Academia da Cidade* and the federal Academia da Saúde Program[6], launched by the Ministry of Health in 2011 to be implemented throughout the national territory. This influence should be read within a broader national trend, since publicly funded, free-access exercise facilities have expanded considerably across Brazilian municipalities over the past decade, even so, the *Academia da Cidade*'s trajectory illustrates a documented case of policy diffusion, in which a successful local innovation contributed to shaping public health strategy at the state and federal levels, which justifies closer attention to its origins and evolution.[5]

The *Academia da Cidade*, in particular, has already been the object of a dedicated systematic review, which synthesized evidence from six primary studies on its influence on public-health-related outcomes and on the operational barriers faced by the program[7]. No equivalent synthesis exists for the *Academia Recife*, and, more importantly, the literature identified for this study did not include a study that directly and systematically compares the *Academia da Cidade* and the *Academia Recife* within the same analytical framework. This gap is relevant because the two programs, operating in parallel in the same municipality, are linked to different secretariats, funding logics, and management models, which raises questions already signaled in the literature on the implementation challenges of intersectoral co-management in Recife's health-promotion policies about coordination, efficiency, and the coherence of the physical-activity promotion agenda at the municipal level[8].

Thus, the objective of this study is to comparatively analyze the *Academia da Cidade* and *Academia Recife* programs regarding their historical origins, conceptual frameworks, governance and management models, and the evidence on their reach and evaluation documented to date, discussing the implications of their parallel implementation for the public policy of health promotion and physical activity in the city of Recife.

Methods

Research design

This study is characterized as qualitative research of a descriptive-analytical nature. A case study approach is adopted, centered on the municipality of Recife, to allow for an in-depth and contextualized investigation of the programs under analysis. The research is based on a comprehensive review of secondary data sources[9].

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Data Sources and Information Collection

The scope of analysis was constituted by a diverse set of documents, systematically selected to ensure a multifaceted view of the programs. Data sources include:

- Scientific Articles: Peer-reviewed publications, indexed in academic databases such as SciELO, PubMed, LILACS, and Google Scholar, addressing the evaluation, implementation, and impact of the programs[1].
- Official Governmental Documents: Municipal decrees, ordinances, public call notices for service management, municipal health plans, and information made available on the official portals of the Recife City Hall.
- Grey Literature: Institutional reports, news agency articles, and non-academic website content (including the official websites of both programs) that provide contextual information about their operation and public perception.
- Keywords: The search strategy combined controlled descriptors from the Health Sciences Descriptors (Descritores em Ciências da Saúde), namely "Public Health Policies", "Health Promotion", "Physical Activity" and "Unified Health System", with free-text terms. Because the names of specific programs are not indexed as controlled descriptors, the program names "*Academia da Cidade*" and "*Academia Recife*", as well as the name of the municipality ("Recife"), were used as free terms, since they are essential to retrieve documents that refer to the programs by their proper names. Searches were structured using the Boolean operators AND and OR, as in the following combinations: ("*Academia da Cidade*" AND "Recife"); ("*Academia Recife*" AND "management" AND "public policy"); ("health promotion" AND "Recife" AND "physical activity"); ("public policies" AND "physical activity" AND "Recife").

Eligibility criteria and document selection

Given the documentary nature of this study, inclusion and exclusion criteria were applied to the documents rather than to human participants. Sources were included when they: (a) directly addressed the *Academia da Cidade* and/or the *Academia Recife*, their implementation, management, activities, or evaluation; (b) were publicly available in full text, in Portuguese or English; and (c) originated from an identifiable institutional or academic source (peer-reviewed journals, government bodies, or the programs' own official channels). Sources were excluded when they: (a) mentioned the programs only tangentially, without providing substantive information; (b) were opinion pieces, advertisements, or promotional material without verifiable institutional or empirical content; or (c) were duplicated across databases. Titles and abstracts (or, for institutional documents, the introductory sections) were first screened for relevance, followed by a full-text assessment of the remaining sources against these criteria. This process resulted in 18 scientific articles and 15 official/institutional documents that met the inclusion criteria and were retained for thematic analysis. The identification, screening, and selection of the documents are summarized in the flow diagram presented in Figure 1.

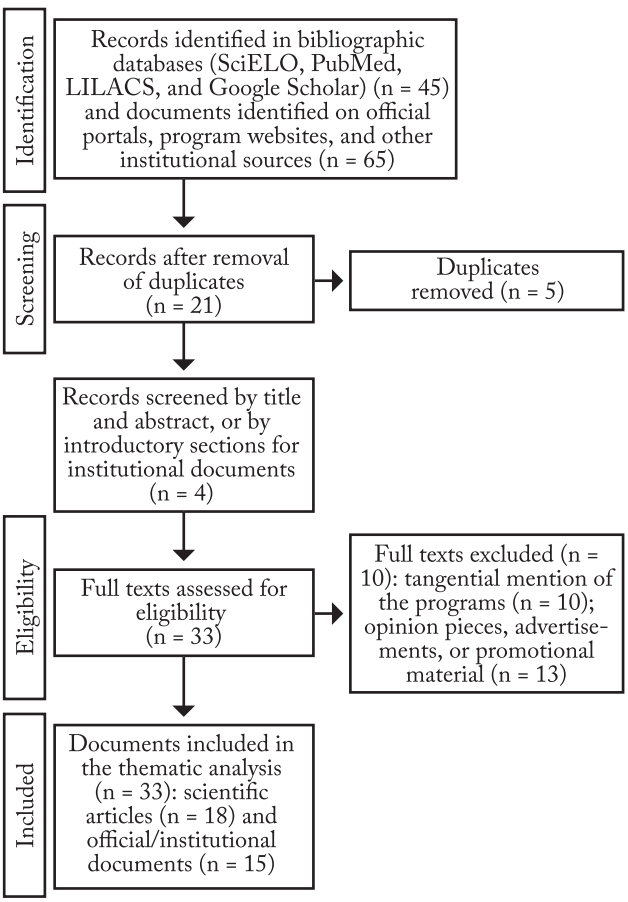


Figure 1 – Flow diagram of the identification, screening, and selection of the documents included in the analysis.

Data analysis

The collected data were subjected to thematic content analysis. Information was systematically extracted, coded, and organized into predefined analytical categories, derived from the study's objectives. This structured ap-

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proach allowed for a rigorous comparison between the *Academia da Cidade* and the *Academia Recife*. The main categories of analysis were:

- Genesis and institutional context: Year of creation, responsible department, and political motivations.
- Governance and management model: Direct public administration versus partnership with Social Organizations.
- Conceptual framework and objectives: Expanded vision of health promotion versus focus on structured physical exercise.
- Operational structure: Characteristics of physical spaces, equipment, and activities offered.
- Human resources: Profile and institutional bond of professionals.
- Documented evaluation and impact: Results of evaluation studies, user perception, and influence on other policies.
- Inter-relationship and coexistence dynamics**:** Evidence of collaboration, complementarity, or fragmentation between the programs.

Results

A systematic search of bibliographic databases and institutional repositories resulted in the identification of a robust set of materials for analysis. A review of scientific articles on the topic yielded 18 publications that fully met the inclusion criteria, addressing epidemiological aspects, user perception, and evaluation of specific public policies in Recife. Regarding official documents, 15 documents were located and analyzed, including municipal decrees, institutionalization ordinances, public calls for proposals for the management of social organizations, and technical management reports from the Health and Sports Departments.

Characterization and comparative analysis of the programs

Figure 2 shows the geographic distribution of the *Academia da Cidade* and *Academia Recife* poles across the city, illustrating the territorial reach of both programs. Chart 1 summarizes the main structural and operational characteristics of the two programs.

The *Academia da Cidade* Program: pioneering and integration with the Unified Health System

- **Genesis and Institutionalization**

The *Academia da Cidade* was implemented in 2002 by the Municipal Health Department of Recife, during a period of reorientation of local policies[5]. Its creation was linked to a political project of building a "Healthy Recife", focusing on social inclusion and the requalification of public spaces[5]. The program was formally institutionalized by Municipal Decree nº 19,808, of 2003, and elevated to the status of Municipal Health Promotion Policy by Ordinance nº 122/2006, consoli-

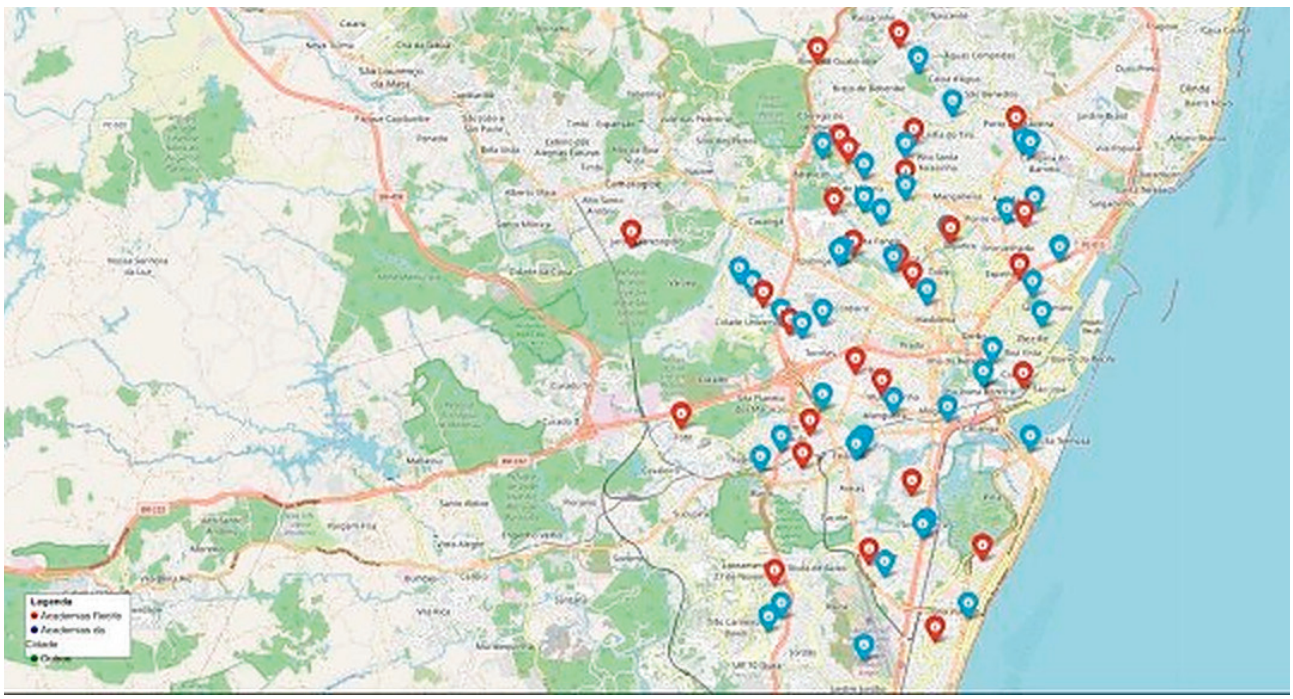


Figure 2 – Location of the Academia da Cidade (blue) and Academia Recife (red).

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Chart 1 – Comparative chart of structural and operational characteristics of the *Academia da Cidade* and *Academia Recife Programs*

Characteristic	Academia da Cidade Program	Academia Recife Program
Year of Creation	2002	2013
Responsible Department	Municipal Health Department	Municipal Department of Sports
Management Model	Direct Public Administration	Public-Private Partnership (Management by Social Organization)
Conceptual Focus	Health Promotion (expanded vision: physical activity, nutrition, health education, culture)	Access to structured physical exercise infrastructure, with complementary group classes
Main Activities	Group classes (gymnastics, dance), dialogue circles, walks, cultural events, games.	Weight training, functional training, localized gymnastics, high-intensity interval training, dance/step classes with equipment.
Professional Profile	Public servants (Physical Education Professionals hired via public examination) integrated into the Unified Health System.	Employees hired under private-sector labor contracts by the managing Social Organization (Physical Education professionals and nutritionists).
Institutional Link	Articulated with Primary Health Care (Family Health Units and Family Health Support Centers).	Linked to the municipal sports and leisure policy.
Operating Hours	5:30 a.m.–11:30 a.m. and 2 p.m.–8 p.m.	5:30 a.m.–9:30 a.m. and 5 p.m.–9 p.m. (Mon–Fri); 6 a.m.–10 a.m. (Sat)
Operational Structure	42 poles	29 poles + Cross Recife unit; >60,000 registered users

dating its strategic role in the municipal public health structure[5].

- **Conceptual framework and objectives**

The central objective of the *Academia da Cidade* transcends the simple practice of exercises. It is based on an expanded concept of health promotion, which encompasses physical activity, healthy eating, and health education as interconnected axes[5]. According to the program's institutional description, activities seek to requalify public spaces as places of coexistence and leisure while establishing a permanent dialogue with the Primary Health Care network[5]. One of its most important conceptual pillars was the inclusion of the Physical Education Professional in the Unified Health System, recognizing them as a health agent and integrating them into multiprofessional teams[5].

- **Operational structure and activities**

The *Academia da Cidade* operates in public spaces called "poles," equipped to favor a wide range of physical activities and body practices. The program currently comprises 42 poles distributed across the city. The activities offered are diversified and include gymnastics classes, dance, games, sports, guided walks, as well as social and cultural mobilization actions such as dialogue circles, festivals, and thematic tours[5]. According to the Recife City Hall's own service description, poles operate from 5:30 a.m. to 11:30 a.m. and from 2 p.m. to 8 p.m., offering physical assessments and exercise prescription in articulation with the Family Health Units, which can refer users with noncommunicable diseases, such as hypertension and diabetes, for monitoring at the poles.

- **Management model and human resources**

The management of the *Academia da Cidade* is carried out directly by the Municipal Health Department. The Physical Education professionals who work at the poles are public servants, hired through public examination[5]. This management model provides job stability, creates a strong institutional bond, and facilitates the continuous integration of the program with other Unified Health System policies and services.

- **Documented evaluation and impact**

The *Academia da Cidade* has been the subject of several evaluations that attest to its positive impact. Studies demonstrate a high degree of user satisfaction (72.8%)[1]. The main motivation for joining the program is the pursuit of "improving health" and adopting a healthier lifestyle[1]. A comparison between users and non-users revealed that *Academia da Cidade* participants have a significantly better self-perception of health: only 28.5% of users classified their health as fair or poor, compared to 45.4% of non-users[1]. In addition to this local impact, the *Academia da Cidade* demonstrated a notable "policy transfer" effect, contributing to the creation of the state program "Academias das Cidades" and the federal government's "Programa Academia da Saúde"[10] A systematic review of six primary studies on the *Academia da Cidade* corroborates these findings, reporting reductions in sedentary time and increases in

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daily physical activity among frequent users, improvements in the management of chronic conditions such as hypertension, and a positive association between length of participation and quality of life among older adults. The same review, however, also documents operational barriers reported by both users and Physical Education professionals working in the program, most notably concerns about the safety of the poles, insufficient maintenance of equipment, and limited promotion of the program to the wider population barriers that qualify the otherwise positive evaluation record of the *Academia da Cidade* and that were not previously discussed in this manuscript[7].

The *Academia Recife* Program: focus on structure and a new management model

- **Genesis and institutional link**

The *Academia Recife* Program was launched by the Municipal Department of Tourism and Leisure (later transferred to the Municipal Department of Sports) in 2013, according to the program's own institutional records[11]. A 2024 case-study report on public-private partnerships published by Comunitas indicates that the program's current management-contract model, under which a Social Organization operates the units, has been in place for approximately eight years (that is, since around 2016) which clarifies that the *Academia Recife* structure documented in this study reflects a later reorganization of the program rather than its original 2013 format.[12] Its stated purpose is to improve quality of life and democratize access to fitness equipment, especially in underserved areas, situating the program within the municipality's sports and leisure policy rather than directly within health policy[11].

- **Conceptual framework and objectives**

The declared objective of the *Academia Recife* is to "improve the quality of life of people" through free access to outdoor gyms with professional monitoring[11]. The program's conceptual focus is predominantly on structured physical exercise, centered on weight training. According to the program's own institutional pages, however, its offering also includes complementary group classes (e.g. functional training, stretching, localized gymnastics, dance, step and cross-training) which qualifies the program's focus as broader than weight training alone, even though it remains organized around equipment-dependent, structured exercise rather than the community-mobilization and health-education activities that characterize the *Academia da Cidade*[11].

- **Operational structure and activities**

The *Academia Recife* structure is standardized, consisting of poles equipped with a set of stainless-steel weight-training and gymnastics equipment designed to withstand outdoor conditions[11]. Each pole has a fixed number of equipment and a defined class capacity[11]. Classes run in scheduled 40-minute sessions, from 5:30 a.m. to 9:30 a.m. and 5 p.m. to 9 p.m. on weekdays, and 6 a.m. to 10 a.m. on Saturdays, and include weight training, functional training, High-Intensity Interval Training, and collective classes (e.g. functional training, stretching, localized gymnastics, dance, step and cross-training)[11]. According to the 2024 Comunitas case study, the open-air poles are concentrated in neighborhoods of higher socioeconomic vulnerability and are complemented by an itinerant, truck-mounted unit adapted to deliver classes across the city; each fixed pole occupies 200–300 m^2, contains 17 pieces of equipment, and has a capacity of 30 students for weight training and 20 for stretching and gymnastics classes[12]. At the time of this analysis, the program comprised 29 poles and the Cross Recife unit, according to its official website[11].

- **Management model and human resources**

The *Academia Recife* operates under a public-private partnership management model. The city hall selects, through a public notice, a private, non-profit Social Organization to carry out the administrative and sports management of the units[12]. The managing entity, such as the Institute for Sports and Culture Management, is responsible for hiring all professionals, including coordinators, physical education teachers, and nutritionists, under labor contracts governed by Brazil's Consolidation of Labor Laws (the general legal framework for private-sector employment) rather than by a public-service bond with the municipality[12,13]. The management contract includes explicit accountability mechanisms: according to Comunitas' case-study report, contract renewal is conditioned on achieving at least 80% of the goals set out in the public call notice and on the availability of budgetary resources; the managing organization submits quarterly activity reports and monthly financial reports, which are reviewed by the Municipal Sports Department with the support of the municipal Controladoria (internal audit body), alongside recurring meetings between the Department and the Social Organization to discuss user demands

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and service improvements[12]. The analyzed documents did not provide sufficiently granular information on the interprofessional composition of either program to allow a precise comparison of staffing profiles beyond the predominance of Physical Education professionals in both, this remains an open question for future research based on primary data.

- **Reach and documented impact**

According to the program's official website, the *Academia Recife* currently reaches more than 60,000 registered people across 29 poles and the Cross Recife unit a figure that has grown from approximately 30,000 in previous years to about 50,000 in 2023, and above 60,000 more recently[11]. The 2024 Comunitas case-study report similarly describes more than 50,000 people as active in the program annually, and provides a documented cost indicator: the annual management contract, valued at approximately R$9.5 million, divided by the roughly 50,000 students enrolled per year, yields an estimated cost of R$190 per student per year, described in the report as considerably lower than comparable private-sector prices offered as one concrete indicator behind the program's framing as cost-effective. The same report attributes the program's operational agility largely to the outsourced management model: according to the Municipal Sports Department's executive secretary, quoted in the report, direct management by municipal staff would likely not achieve the same agility that having a Social Organization run the program provides[12]. The *Academia Recife* is frequently presented in institutional materials as a successful case of public-private partnership with social impact, benefiting tens of thousands of citizens annually[13]. It should be noted that both the Comunitas report and the materials published by the Institute for Sports and Culture Management draw substantially on information and interviews provided by the Municipal Sports Department and the managing Social Organization themselves, rather than on an independent impact evaluation with a comparison group, even so, the Comunitas report applies a more structured set of criteria (replicability, innovation, and cost-effectiveness) across a national sample of over 7,000 public-private contracts, which lends its assessment somewhat more external grounding than purely institutional self-promotion, without constituting a scientific evaluation of health outcomes. Although the analyzed documents do not contain health-impact assessments with the same depth as those available for the *Academia da Cidade*, this should not be read as evidence that the *Academia Recife* lacks positive effects on satisfaction or on users' health perception; it more plausibly reflects a difference in evaluation culture between the health and the sports/leisure sectors, and constitutes a gap to be addressed by future primary research rather than a documented finding of this study.

Discussion

The comparative analysis of the *Academia da Cidade* and *Academia Recife* programs reveals a divergence in their public policy philosophies. The *Academia da Cidade* materializes a process-oriented model, in which physical activity is a vehicle for achieving broader public health objectives: community integration, health education, disease prevention, and strengthening of the Unified Health System[5]. Its success is evaluated not only by the number of participants but by satisfaction and improvement in health perception, reflecting a holistic approach[1]. It should be noted, however, that this more favorable evaluation record for the *Academia da Cidade* coexists with documented operational barriers concerns about safety, equipment maintenance, and limited promotion of the program identified by a systematic review of the program; these barriers indicate that the *Academia da Cidade*'s broader health-promotion philosophy has not, by itself, resolved all challenges to program access and adherence, and should temper an overly favorable reading of the comparison with the *Academia Recife*[7].

The *Academia Recife*, in turn, represents a model more centered on providing standardized, quality infrastructure for structured exercise, although (as noted in the Results) it also offers complementary classes beyond weight training. The program's success is communicated primarily through scale metrics, such as the number of registered users, and through documented indicators of management efficiency most notably the contract's low cost per enrolled student and its renewal clauses tied to achieving at least 80% of contractual goals, as detailed in a national case-study report on public-private social-impact contracts[12], complemented by the managing Social Organization's own institutional framing[13]. This distinction points to a central question for municipal policy: whether physical activity should be treated primarily as a health intervention integrated into the sanitary system, primarily as a public service of sport and leisure focused on infrastructure, or as is

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arguably most defensible as an inherently intersectoral agenda in which both framings are complementary rather than mutually exclusive, and in which the two programs, operating in the same city, currently offer largely separate answers to the same underlying need.

The choice of management model reflects the different institutional logics underlying each program. The direct-administration model of the *Academia da Cidade*, with professionals hired via public examination, promotes stability, the accumulation of institutional memory, and deep integration with the Unified Health System network[5]. The public servant acts as a permanent agent of the State's health policy. The *Academia Recife* model, which outsources management to a Social Organization under private-sector labor contracts, is often defended for its agility, flexibility, and capacity for rapid expansion[12,13]. This model raises legitimate questions about employment continuity and long-term sustainability, which depend on contractual cycles and political continuity; however, the analyzed documents do not provide evidence to characterize *Academia Recife* employment as precarious in a labor-rights sense, since these contracts carry their own set of legal protections, and this question was not directly addressed by the sources reviewed here. The divergence between the models is not merely technical; it represents two distinct visions of the State's role in the provision of public services: one as a direct executor and guarantor of a permanent health policy, and the other as a financier and regulator of a service provided by a private partner.

Despite this fragmentation, both programs contribute to increasing levels of physical activity at the population level in the city and are recognized in their respective institutional materials as important assets for the health and leisure of the population[5,11]. Studies on the *Academia da Cidade* show that the main factors for adherence are the search for a healthy lifestyle and stress reduction, while permanence is associated with the feeling of well-being and the encouraging role of the teacher[14]. The most common barriers are lack of time and demotivation, factors that likely also apply to *Academia Recife* users, although this extrapolation was not confirmed by the analyzed documents and should be treated as a hypothesis for future comparative research.

It is crucial to recognize the limits of the available evidence. Although the *Academia da Cidade* has been evaluated regarding user perception and satisfaction, there is a lack, in the analyzed materials, of longitudinal studies that monitor objective health outcomes (such as changes in blood pressure, body mass index, or glycemic control) over time for participants of either program. The primary quantitative evidence on user satisfaction and health perception available for the *Academia da Cidade* also remains based on data collected over a decade ago[1], and a more recent, comparable evaluation was not identified for either program in the sources analyzed; this dating should be considered when interpreting the magnitude of the reported effects. This gap prevents a more robust evaluation of the programs' real impact on the population's health and represents a priority area for future research.

In conclusion, Recife hosts two large-scale, conceptually and operationally distinct public programs for the promotion of physical activity. The *Academia da Cidade*, integrated into the health system since 2002, and the *Academia Recife*, linked to sports and leisure policy since 2013, currently operate largely as parallel structures rather than as an articulated municipal strategy. Based on the analysis, it is recommended that municipal management establish formal mechanisms of intersectoral governance, such as a joint management committee with representatives from the Health and Sports Departments, to align strategies, optimize resources, define referral flows between programs, and build a unified physical-activity promotion policy. For future research, the development of longitudinal cohort studies is suggested to evaluate impact on long-term health indicators, cost-effectiveness analyses comparing the two management models, qualitative research exploring user experience in both programs, and an in-depth analysis of the political and administrative process that led to the current policy fragmentation, in order to extract lessons for decision-making in public policy.

Conflict of interest

The authors declare no conflict of interest.

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Author's contributions

Freire GLM: Conceptualization; Methodology; Validation; Formal analysis; Investigation; Resources; Data curation; Supervision; Project administration; Visualization; Writing – original draft; Writing – review & editing; Approval of the final version. Torres VMF and Mangabeira LKM: Conceptualization; Methodology; Validation; Formal analysis; Investigation; Resources; Data curation; Supervision; Project administration; Visual-

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ization; Writing – original draft; Approval of the final version. Marques MB and Tassitano RM: Conceptualization; Methodology; Validation; Formal analysis; Investigation; Data curation; Supervision; Project administration; Visualization; Writing – original draft; Approval of the final version.

Declaration regarding the use of artificial intelligence tools in the article writing process

Claude (Opus 5.5; Anthropic), a generative artificial intelligence tool, was used by the authors for English-language revision of the manuscript and for adapting the text to the journal's final formatting guidelines. The tool was not used to collect or analyze the documents or to formulate the study's findings and conclusions. All content was reviewed, edited, and validated by the authors, who take full responsibility for the final text.

Availability of research data and other materials

After publication the data will be available on demand to authors.

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