

Physical activity recommendations and policies in the European Region



Introduction

WHO Europe's policy framework for action and overview of national physical activity policy's in Europe

How much is needed?

New WHO recommendations

In short: physical inactivity situation



Inactivity status in European Region

- GBD 2004: Attributable deaths by age, sex, risk factor and disease or injury for the year 2004
- Physical inactivity 4th leading risk factor in global mortality
- 1 million deaths related to physical inactivity in European Region per year



Inactivity status in European Region

- 41% of adults does not engage in any moderate physical activity in a typical week
- 22% of 11-year old girls and 30% of boys report at least one hour of daily MVPA
- 65% of EU citizens get some form of physical exercise at least once a week. 34% seldom or never



Eurobarometer 64.3. Special Eurobarometer 246: Health and Food

Eurobarometer 72.3. Special Eurobarometer 334: Sport and PA

Health Behaviour in School Aged Children 2005/06 Survey

WHO Global Recommendations on Physical Activity for Health

Global recommendations on physical activity for health

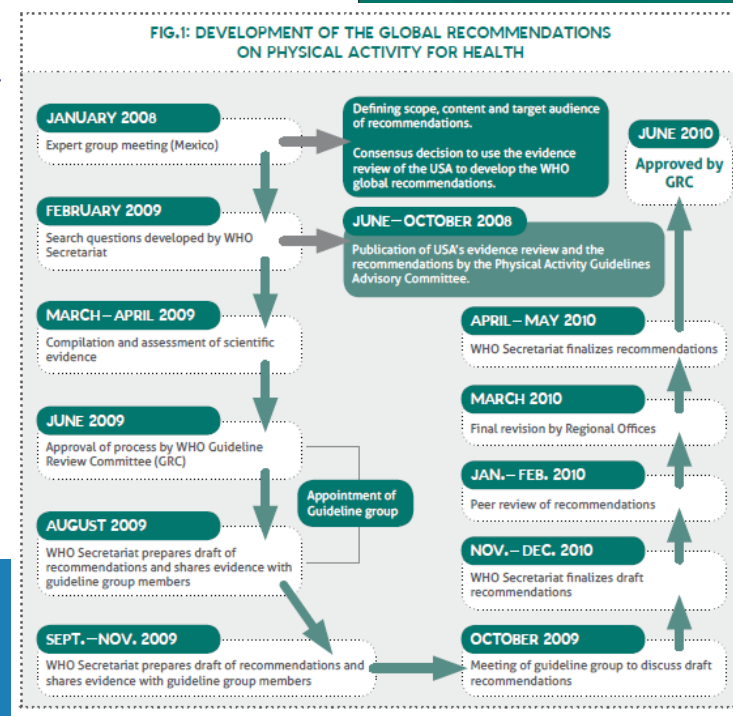
- Why?
 - Public health significance of active living
 - To give MS an evidence based starting point to advocate for physical activity promotion
 - To respond to limited existence of national guidelines in low and middle income countries



World Health
Organization

How much PA is needed to enhance health?

- Main aim: providing guidance on dose response relation between frequency, duration, type and total amount of PA needed for prevention of NCD's
- Three age-groups; 5-17 year olds; 18-64; and 65+
- Main target audience; national and local policy makers



Global Physical Activity Recommendations

Intensity of activity

moderate



vigorous

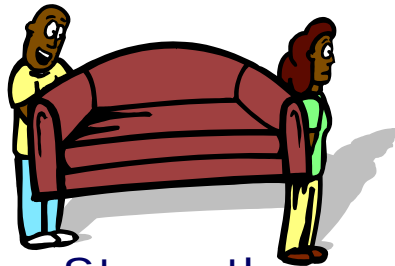


How often?
How long?
How much
in total?

Type of activity



Aerobic



Strength



Balance



Flexibility

Domains of activity

recreation



and sports



transportation



household



work/school



Children and youth - aged 5-17 - should:

- Daily **at least 60 minutes** of MVPA
- More than 60 minutes provide additional health benefits.
- Most physical activity should be aerobic. Incorporate vigorous intensity activities, including muscle and bone strengthening activities at least 3 times per week.



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PA includes play, games, sports, transportation, recreation, physical education, or planned exercise, in the context of family, school, and community activities.



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Adults - aged 18-64 – should:

- **At least 150 minutes** of MPA spread throughout the week
OR
at least 75 minutes of VPA spread throughout the week
OR
an equivalent combination of those two
- Bouts of at least 10 minutes.



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Adults - aged 18-64 – should:

For additional health benefits:

- increase MPA to **300 minutes** per week
OR
engage in **150 minutes** of VPA per week,
OR
an **equivalent combination** of those two
- Muscle-strengthening activities on 2 or more days a week.



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Older adults - 65 years old & above should:

Main recommendations for older adults are the same as the ones for adults!



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Older adults - 65 years old & above :

Specific recommendations for older adults:

- Older adults with poor mobility should perform PA to enhance balance and prevent falls on 3 or more days/ week.
- Muscle-strengthening activities on 2 or more days a week.
- Be as physically active as your abilities and condition allow.



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In adults and older adults, PA includes recreational (leisure) time physical activity, transportation (walking or cycling), occupational (work), house chores, play, games, sports or planned exercise, in the context of daily, family, and community activities.



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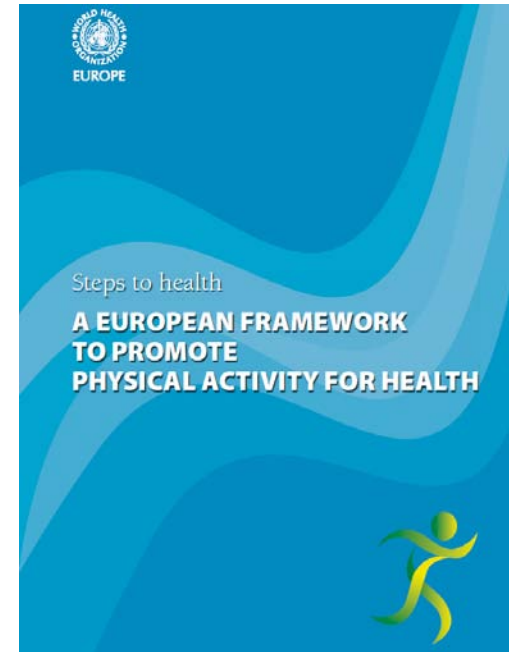
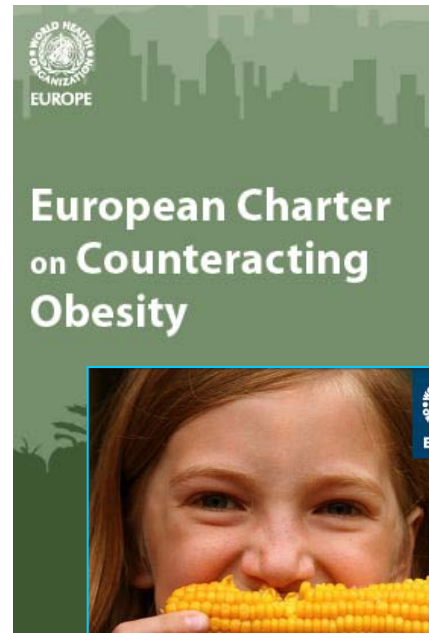
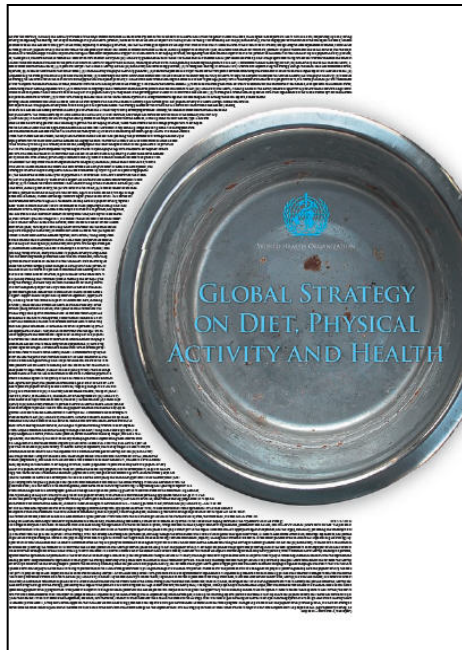
Last key messages:

- Are an evidence based starting point for national policy makers looking to promote physical activity
- Can be used by all relevant stakeholders to communicate valid and consistent messages on the frequency, duration, intensity, type and total amount of physical activity for health;
- Tool for health professionals to inform patients;
- Can be used as benchmarks for public health monitoring and surveillance purposes;
- Can support the development of physical activity policy.



WHO Europe's policy framework for action and overview of national physical activity policy's in Europe

WHO Mandate for Action



Why policies?

- National recognition and commitment
- Common objective and strategies for involved stakeholders
- Provides a framework for tools and actions
- Clear roles and responsibilities
- Greater accountability and allocation of resources



Why monitoring PA promotion policies

- As part of our mandate
- To monitor commitments made in:
- To better understand
- To better support
- To provide countries with insights in what is happening in their region/good examples



How did we collect policy info?

- First collection of PA policy documents in 2006 in preparation of an online WHO database with PA promotion documents
- Inventory launched at WHO Ministerial Conference on Counteracting Obesity (76 documents of 22 European countries)
- Additional information retrieved in 2007 and 2009 by report of national focal points



Definition

- PA policy document: written document that contains a specific strategy and defines goals and objectives on PA promotion; issued by a part of the public administration

Overview

- Total identified policy documents, currently: around 170
- Policy information retrieved for 41 countries
- Most identified policy documents national (exceptions: Belgium, Ireland, United Kingdom)
- Institutional involvement: mainly Ministry of Health



Overview

- Main focus of policy documents in most cases not only HEPA, also nutrition, obesity, cardiovascular disease prevention, public health, sustainable development or environmental health.
- To which extent physical activity was addressed in the policy document depends on the type of policy document.



Main topics/sectors documents

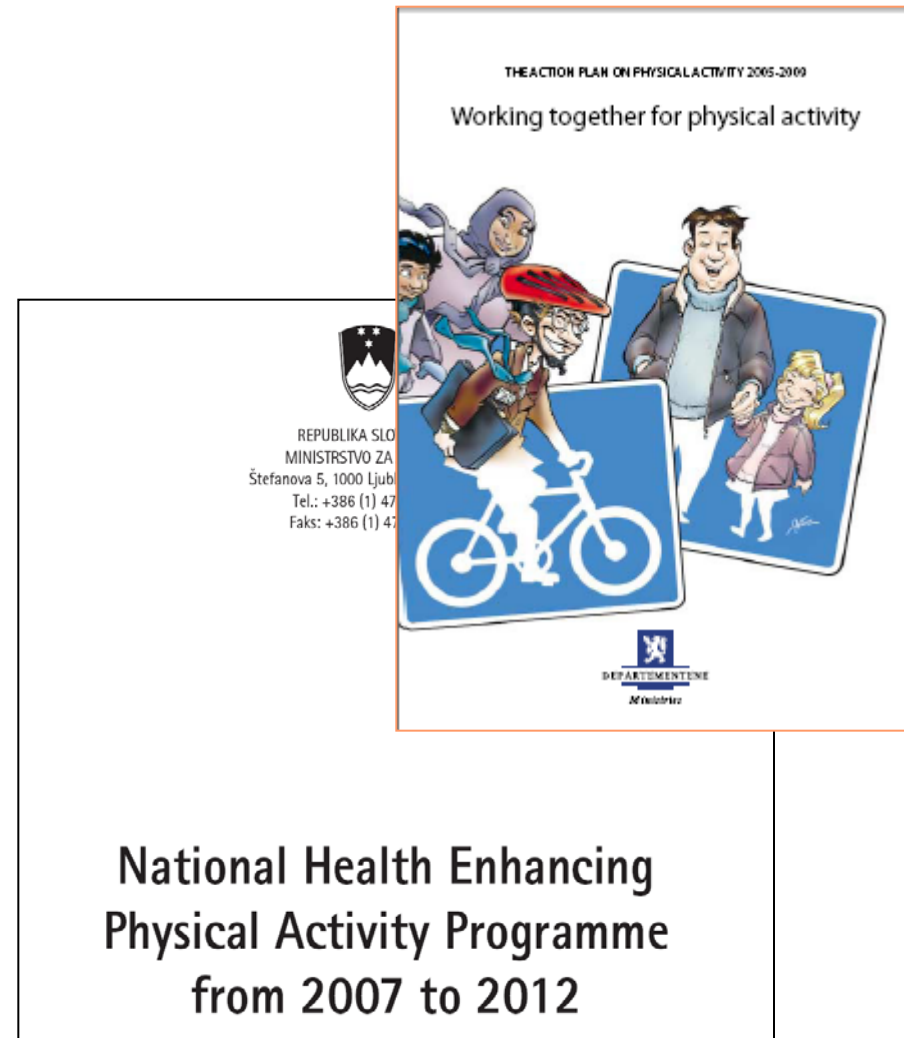
➤ Overview of documents per sector:

Sector	Documents	Countries
Public health	88	36
Sport	34	16
Transport	22	11
Education	8	4
Environment	7	6
Other/not identified	31	

Policies on physical activity:

As separate, dedicated policy:

- Slovenia: National Health Enhancing Physical Activity Programme 2007-2012
- Norway: Working together for physical activity. The Action Plan on Physical Activity 2005-2009



Policies on physical activity:

Together with or integrated in nutrition policy document:

- Luxembourg: Action plan for healthy nutrition and physical activity, 2006
- Georgia: National action plan on food security, healthy eating and physical activity 2006-2010
- Macedonia: Second Action Plan for Food and Nutrition of the Republic of Macedonia



Policies on physical activity:

As part of obesity prevention policy:

- Turkey: The programme of control and struggle with obesity of turkey 2010-2014
- Slovakia: National Obesity Prevention Program 2008
- Netherlands: Memorandum on Obesity, 2009

MINISTERSTVO ZDRAVOTNÍCTVA
SLOVENSKEJ REPUBLIKY

Číslo: 28743-2/2007-ŠT

Materiál na rokovanie
vlády Slovenskej republiky

Národný program prevencie obezity

Podnet:

Na základe plánu práce
hlavných úloh Vlády SR

Predkladá:

Ivan Valentovič
minister zdravotníctva
Slovenskej republiky

Memorandum on Obesity

Out of Balance: the Burden of Obesity

Policies on physical activity: sport

As part of a national sport policy:

- Estonia: Estonian Sports Charta, 2002
- Ireland: Sport and recreation action plan, 2004
- Belgium: Action plan sports for Flanders 2007-2009

EESTI SPORDI HARTA



Sport and Recreation
Action Plan 2004 - 2005

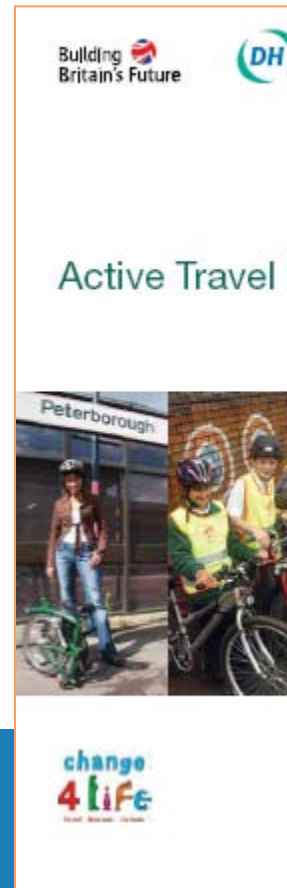


Do Limerick County Development Board, County Hall, Corcoran, Limerick
Tel: 061-456414 Fax: 061-456411 Email: info@limerickcddb.ie

Policies on physical activity: transport

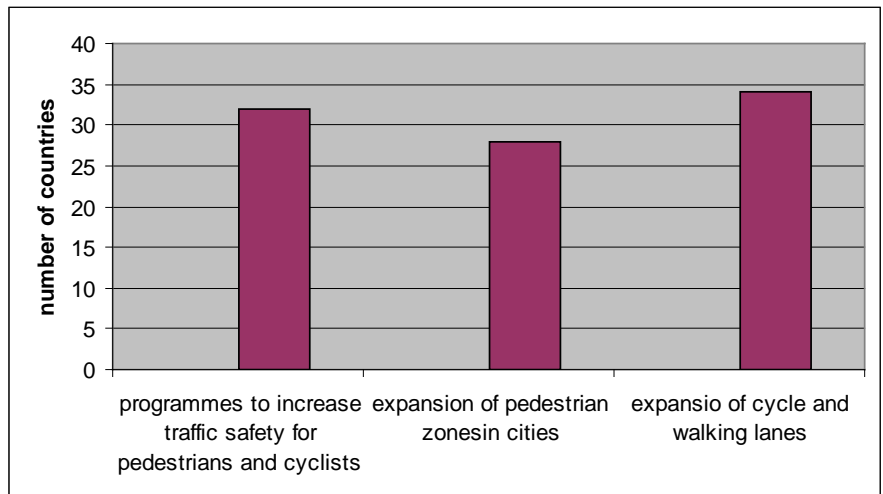
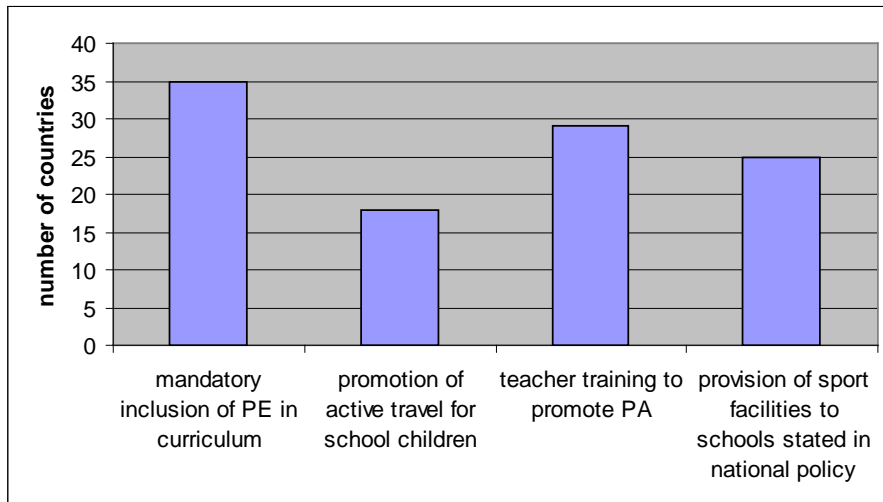
As part of an active transport policy:

- United Kingdom: Active Travel, 2010
- Germany: National Cycling Plan, 2005



Specific policy actions

- Monitored specific 18 policy action in the field of PA promotion
- Countries were asked to indicate per policy action whether it is: not existing; clearly stated, partly implemented/enforced; clearly stated, fully implemented/enforced
- Information from 39 countries
- Actions related to school setting, actions related to active travel



Concluding remarks

- Considerable increase in number of identified policy documents
- Most documents developed from a public health policy perspective
- Other sector approaches still more rare
 - Less developed
 - Less reported?
- Not many policy documents only devoted to HEPA have been identified
- More in depth analysis of policy documents (looking at: specific target goals, stakeholder involvement, timeframe, monitoring and evaluation)

THANK YOU!

Lideke Middelbeek – lim@euro.who.int
www.euro.who.int/physicalactivity



Importance of PA

- Many positive health effects
 - *Maintaining weight*
 - *Contributes to prevention of chronic diseases (diabetes, CVD's, cancer)*
- Promote psychological well being and reduces stress, anxiety and feelings of depression and loneliness
- Contributes to self confidence
- Foster and improves social contacts and integration
- Benefits for economy
- Benefits for environment
- Having fun!!