



HEPA Europe
European network for the promotion
of health-enhancing physical activity

HEPA Europe, the European Network for the Promotion of Health-Enhancing Physical Activity

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^oMembers of the Steering Committee of HEPA Europe

⁺Observer in the Steering Committee of HEPA Europe

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[#]WHO, European Centre for Environment and Health, Rome, Italy

*Diet, Physical Activity and Health - A European Platform for Action
Meeting, 17.09.2008, PA in the EC and WHO-Related Activities*

European Situation in 2004

- **Scientific exchange
on physical activity and health ↑ ↑**
- **Development of methods ↑ ↑**
- **No more regular exchange
and development platform
for national physical activity
promotion strategies**



HEPA Europe
European network for the promotion
of health-enhancing physical activity



**Founded
at the first
Network
Meeting
in
Slagelse,
Denmark,
Gerlev
Sports
Academy,
26 and 27
May 2005**

Access through meetings, website and newsletter



World Health Organization
Regional Office for Europe

European network for the promotion of health-enhancing physical activity

International inventory of documents

This inventory is meant to serve different goals including:

- to provide Member States with information on existing policies, strategies and approaches in different European countries with regard to activity promotion;
- to disseminate existing experiences;
- to facilitate access to information and knowledge available;
- to provide a suggestive information bank to adopt, implement and evaluate policies, or interventions at the national and subnational level;
- to identify geographical or topical areas of information and examples are lacking.

The inventory is being developed in a stepwise and iterative manner. The first step focuses on the search for existing policies and national physical activity promotion and national physical activity promotion.

The preliminary version of the online inventory is presented on 10 November 2006 at the WHO Europe Region Summit in Copenhagen, Denmark.

To provide documents and information or suggest

HEPA Europe - the European network for the promotion of health-enhancing physical activity

HEPA Europe the European network for the promotion of health-enhancing physical activity
www.euro.who.int/hepa

Newsletter

Issue No. 2 | September 2005

Editorial Time to move!

Physical inactivity is a major public health problem in Europe. It is a leading cause of death and disability. It is a major public health problem in Europe. It is a leading cause of death and disability. It is a major public health problem in Europe. It is a leading cause of death and disability.

It is our task now to identify the possible steps needed to promote physical activity in Europe, to identify the best practices, and to disseminate them as far as possible to the general public. We are also pleased to see that you are interested in this topic and we hope that you will be able to provide us with information on this topic.

IN THIS ISSUE

- 1. Physical inactivity in Europe: a public health problem
- 2. Physical inactivity in Europe: a public health problem
- 3. Physical inactivity in Europe: a public health problem
- 4. Physical inactivity in Europe: a public health problem
- 5. Physical inactivity in Europe: a public health problem
- 6. Physical inactivity in Europe: a public health problem
- 7. Physical inactivity in Europe: a public health problem
- 8. Physical inactivity in Europe: a public health problem
- 9. Physical inactivity in Europe: a public health problem
- 10. Physical inactivity in Europe: a public health problem

Updated 28 November 2006 | Contact us at: hepa@euro.who.int

www.euro.who.int/hepa



Slagelse, 26./27.05.2005



Tampere, (14.) 15.-16.06.2006



**Graz,
(16.)
17.-18.05.
2007**



**Annual Conference &
Meeting of HEPA Europe
Glasgow, 08.-10.09.2008**



Future HEPA Europe Meetings

- 25.09.2009** **Bologna, Italy**
*Public Health Service,
Emilia-Romagna Region*
- Nov 2010** **Olomouc, Czech Republic**
Palacky University

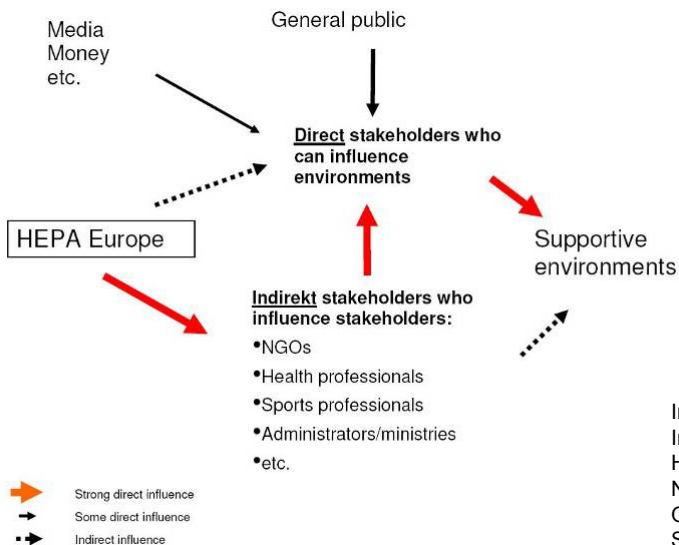
HEPA Europe – Objectives (1 of 2)

- **to promote a better understanding of health-enhancing physical activity and to give a stronger voice to physical activity promotion in health policy and in other relevant sectors in Europe, including support for workforce development**
- **to develop, support, and disseminate effective strategies and multi-sectoral approaches in the promotion of health-enhancing physical activity**

HEPA Europe – Objectives (2 of 2)

- to foster the preservation and creation of social and physical environments as well as values and lifestyles supportive of health-enhancing physical activity
- together with other relevant institutions and organizations, to improve coordination in physical activity promotion across sectors and administrative structures

Simplified model of HEPA Europe's influence on stakeholders



HEPA Europe – Membership

- **Membership is open to organizations and institutions active at the international, national or sub-national level willing to contribute to the goals and objectives of the network.**
- **These include for example government bodies, scientific institutions, NGOs.**

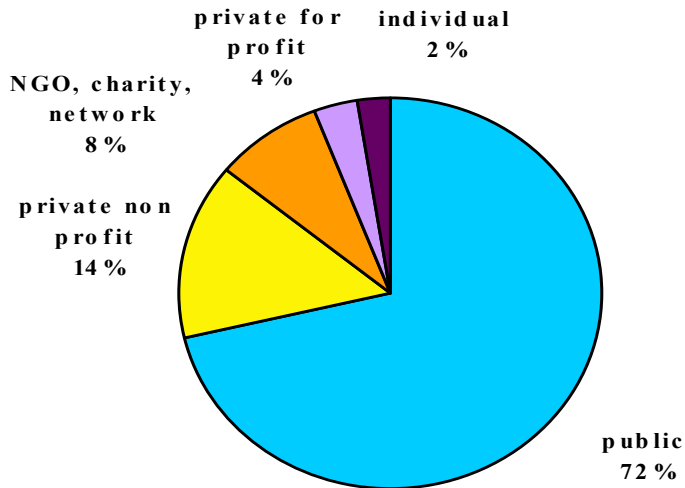
HEPA Europe Members September 2008

	Country	No. of members		Country	No. of members
1	Austria	2	14	Italy	2
2	Belgium	1	15	Lithuania	2
3	Bosnia and Herzegovina	1	16	The Netherlands	3
4	Bulgaria	1	17	Norway	1
5	Croatia	1	18	Portugal	2
6	Czech Republic	1	19	Slovenia	1
7	Denmark	3	20	Spain	4
8	Finland	10	21	Sweden	3
9	France	3	22	Switzerland	3
10	Germany	6	23	The former Yugoslav Republic of Macedonia	1
11	Hungary	1	24	The Netherlands	5
12	Iceland	2	25	Turkey	1
13	Ireland	2	26	United Kingdom	22

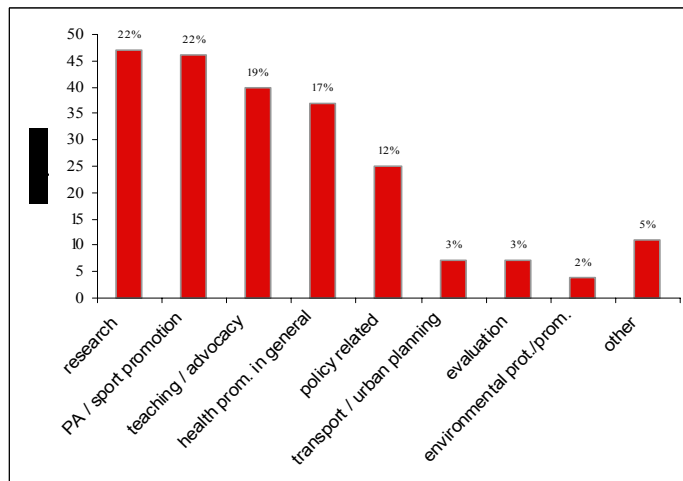
Plus 1 observer from Mexico

Total: 82 member institutions and 2 individual members from 26 countries

HEPA Europe - type of institutions



HEPA Europe – main activities of members



Up to 5 responses per member, N = 213

HEPA Europe – Steering Committee

- **Brian Martin**, Federal Office of Sport, Switzerland (Chair)
- **Winfried Banzer**, Olympics Sports Confederation, Germany
- **Finn Berggren**, Gerlev PE and Sports Academy, Denmark
- **Eddy Engelsman**, Ministry of Health, Welfare and Sport, NL
- **Jean-Michel Oppert**, Paris VI University, Hotel Dieu, France
- **Francesca Racioppi**, WHO Regional Office for Europe
- **Harry Rutter**, South East Public Health Observatory, UK
- **Michael Sjöström**, Karolinska Institute, Sweden
- **Radim Šlachta**, Palacky University, Czech Republic
- **Mireille van Poppel**, Vrije Universiteit Medical Center, NL
- **Tommi Vasankari**, UKK Institute, Tampere, Finland
- **Jozica Maucec Zakotnik**, CINDI Slovenia
- *Observer: **Fiona Bull**, GAPA*



Harry Rutter



Finn Berggren



Eddy Engelsman



Michael Sjöström



Jean-Michel Oppert



Francesca Racioppi



Mireille van Poppel



Radim Šlachta



Jozica Zakotnik



Tommi Vasankari



Winfried Banzer



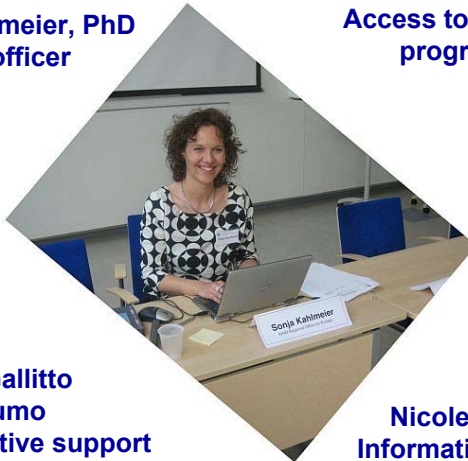
Fiona Bull

HEPA Europe – Secretariat at WHO Europe

Sonja Kahlmeier, PhD
Technical officer
Rome

Access to other WHO
programmes and
activities

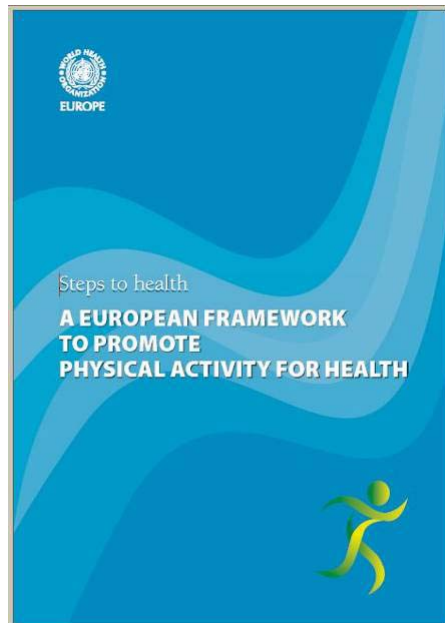
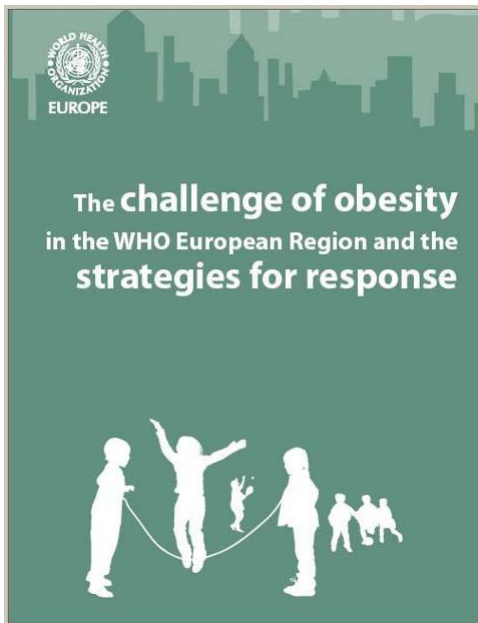
Cooperation with
Lideke Middelbeek
Technical officer
WHO Copenhagen

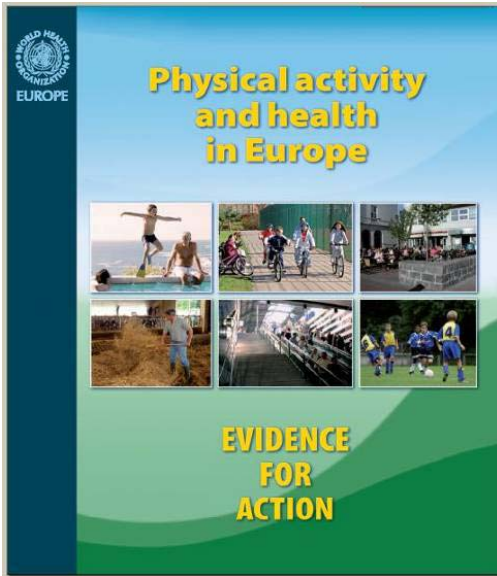


Francesca Racioppi
Acting director
WHO Rome office
Member of HEPA
Europe Steering
Committee

Manuela Gallitto
Cristina Fumo
Administrative support

Nicoletta Di Tanno
Information outreach





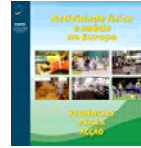
Currently available in 6 languages



Russian

Danish

Italian



Portuguese



Slovenian

Production in progress:
French, Japanese, Spanish, Turkish
Translation planned: Swedish

Cavill N, Racioppi F, Kahlmeier S. Physical Activity and Health in Europe. Evidence for Action. Copenhagen: WHO, 2006.

1. Why is physical activity important for health?



Although the effects of diet and physical activity on health often interact, particularly in relation to obesity, there are additional health benefits to be gained from physical activity that are independent of nutrition and diet...
— Global Strategy on Diet, Physical Activity and Health (8)

In 2002, two thirds of the adult population (aged 15 years and over) in the European Union (EU) did not reach recommended levels of activity (8). Across the WHO European Region as a whole, one in five people takes little or no physical activity, with higher levels of inactivity in the eastern part of the Region. Physical inactivity is estimated to cause 600 000 deaths per year in the Region (5–10% of total mortality, depending on countries) and leads to a

loss of 5.3 million years of healthy life due to premature mortality and disability per year (9).

Physical activity is a critical public health issue because:

- adequate physical activity is important for many aspects of health; and
- few people participate in regular health-enhancing physical activity.

Health effects

Physical activity has major beneficial effects on most chronic diseases (Table 2). These benefits are not limited

Cavill N, Racioppi F, Kahlmeier S. Physical Activity and Health in Europe. Evidence for Action. Copenhagen: WHO, 2006.

2. What is known about current levels of physical activity and inactivity?



Only in recent years have internationally comparable data on levels of physical activity across the European Region begun to be collected. Thus, few comprehensive figures are available about trends and prevailing patterns of physical activity in many countries.

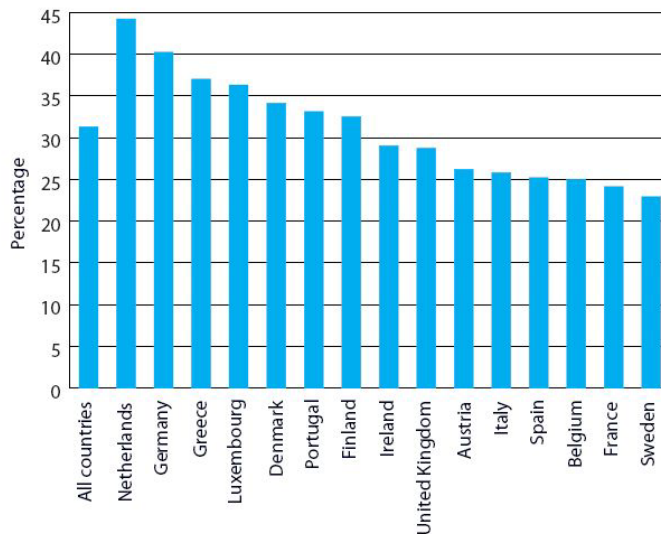
How active are people in the European Region?

Current activity levels
An analysis of a survey of EU countries in 2002 (8) showed that two thirds of the adult population did not reach recommended levels of physical activity. On average, only 31% of respondents reported sufficient physical activity (Fig. 1).

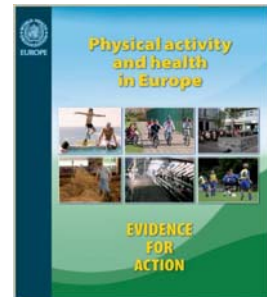
A survey of health behaviour among young people aged 11, 13 and 15 years across Europe, in 2001–2002, measured participation in physical activity (54). It found that about a third (34%) reported enough physical activity to meet current guidelines: one hour or more of at least moderate intensity on five or more days a week. In most countries, boys were more active than girls and activity declined with age in both sexes. Activity varied widely between countries, however, ranging from 11% of girls and 25% of boys in France to 51% of girls and 61% of boys in Ireland among 11-year-olds. Similar variations existed among all age groups; for example, the proportion of active 15-year-old boys was 49% in the Czech Republic and 25% in Portugal.

Cavill N, Racioppi F, Kahlmeier S. Physical Activity and Health in Europe. Evidence for Action. Copenhagen: WHO, 2006.

Fig. 1. Proportion of adults (aged 15 years or over) in the EU classified as sufficiently active, 2002



Source: Sjöström et al. (8).



Cavill N, Racioppi F, Kahlmeier S. Physical Activity and Health in Europe. Evidence for Action. Copenhagen: WHO, 2006.

Cited source: Sjöström M et al. Health-enhancing physical activity across European Union countries: the Eurobarometer study. Journal of Public Health, 2006, 14(1):1–10.

3. What factors and conditions influence physical activity?



Why are some people active and others not? A complex range of factors – in the individual and the micro and macro environments (Fig. 2) – influences the likelihood that an individual, group or community will be physically active. Factors in the macro environment include general socioeconomic, cultural and environmental conditions. Influences from the micro environment include the conduciveness of living and working environments to physical activity, and the supportiveness of social norms and local communities. Such individual factors as attitudes towards physical activity, belief in one's ability to be active or awareness of opportunities in daily life can influence the likelihood that someone will try a new activity (60).

Some of the determinants of active living – such as the weather or people's genetic make-up – are difficult or impossible to modify. A combination of short- and long-term action, however, can be used to tackle most factors. Bringing these actions together in a comprehensive strategy should be a key priority for policy-makers (see spotlight on Finland).

Macro environment

Socioeconomic status

Socioeconomic conditions can affect physical activity in many ways. Participation in leisure-time physical activity tends to be directly related to socioeconomic status. Poorer people

Cavill N, Racioppi F, Kahlmeier S. Physical Activity and Health in Europe. Evidence for Action. Copenhagen: WHO, 2006.

Determinants of Physical Activity Behaviour

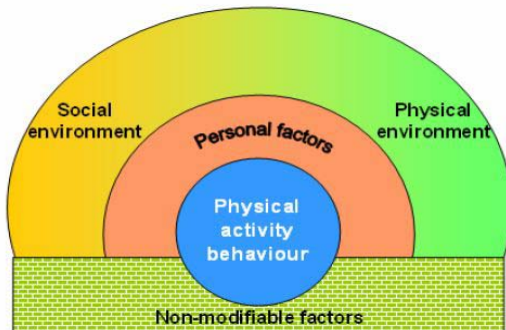
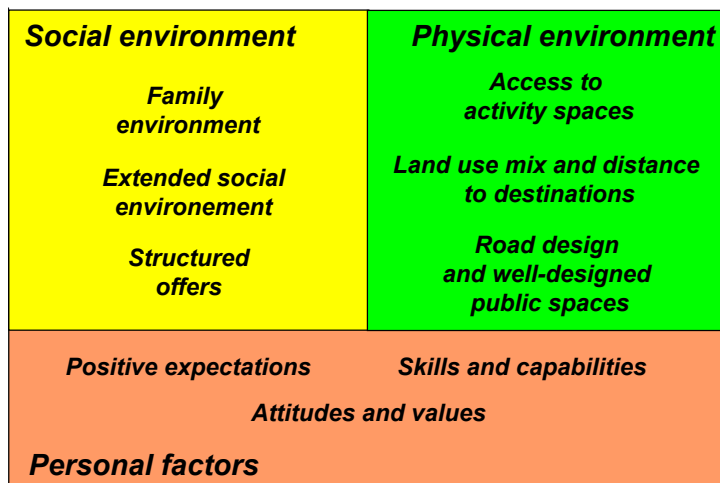


Figure 3.

Factors influencing sport and physical activity behaviour (determinants). Behaviour is influenced by factors that cannot be changed (e. g. gender, age, cultural background). And also by factors that can be changed. These include personal factors and factors in the social and physical environment.

Modifiable Determinants of Physical Activity



4. What can the health sector and others do to increase physical activity?



Strategies

Action on physical activity should be based on a number of key principles, adapted from a Swedish plan (7):

1. taking a population health approach;
2. using a broad definition of physical activity;
3. engaging multiple sectors;
4. improving the environment for physical activity;
5. working at multiple levels;
6. basing programmes on the stated needs of the population;
7. improving equity; and
8. using the best available evidence.

Taking a population health approach

Physical activity promotion should focus on the health needs of the population as a whole, rather than particular high-risk groups. Creating more opportunities for activity for everyone and improving the environment to support it are likely to lead to greater public health benefit than programmes that target only small groups. Multilevel, coordinated action is urgently needed to improve participation in health-enhancing physical activity (see spotlight on Spain).

Using a broad definition of physical activity

Using a broad definition offers far greater potential to engage a range of sectors. Physical activity includes

Cavill N, Racioppi F, Kahlmeier S. Physical Activity and Health in Europe. Evidence for Action. Copenhagen: WHO, 2006.

Overview and highlights of effective approaches

Spotlight. A community on the move: the experience of San Mauro Pascoli, Italy (120)

This project targeted sedentary women and elderly people, to provide an opportunity for social organized physical activities. The outdoors during spring and summer and during autumn and winter. Next, mostly middle-aged women implemented for the long-term continuation of the programme. Teachers, community representatives, social workers, local grass and the private sector.

A key finding was that, while men reported to be well aware of the physical activity, they lacked to be physically active in their own community, using the local parks. They concluded that information and motivation is insufficient to prompt changes in behaviour without being accompanied by interventions that facilitate physical activity.

Spotlight. National sport concept in Switzerland (78)

A new concept for a national sports policy in Switzerland was prepared in 2000. It is a strategy document for enhancing physical activity of the scientific evidence.

When the Federal Government at the end of 2000, it defined the national sports policy as "more physically active people". This was in line with public opinion consistently shown that people know that physical activity is good for health. The concept includes new partnerships across government, and between government and mass media.

Spotlight. Odense, Denmark's national cycling city (102)

Odense was Denmark's official National Cycle City from 1999 to 2002. The Ministry of Transport and the National Road Directorate invested significant funding to demonstrate how coordinated effort could increase cycling. During the four years of the overall programme, 50 projects were developed and implemented, including physical improvements, campaigns and changes in regulations, with an emphasis on trying out innovative ideas.

By the end of 2002, cycling traffic in the municipality of Odense had increased by 20% and the number of accidents involving cyclists had been reduced by 20%, compared to 1996/1997. The evaluation estimated savings for the health sector, mostly attributed to increased safety and reduced noncommunicable diseases.

Spotlight. The congestion charge in London, United Kingdom (100,101)

In 2003, London introduced a congestion charging scheme in which cars were charged to enter a zone in the centre of the city. In 2006 the charge is €11.60 per day. The primary objective of the scheme was to reduce traffic congestion in and around the charging zone. It also affected physical activity: there was a 20% increase in cycle journeys and a 20% increase in journeys walked – both as trips and as part of the increased number of journeys. London's example shows how such interventions can have positive (and some) benefits to public health.

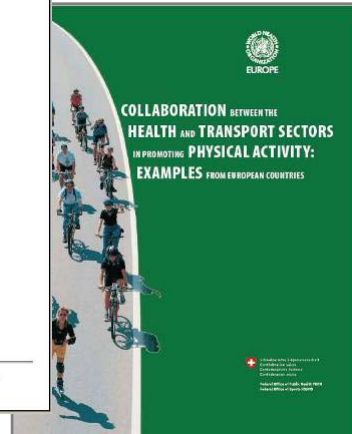
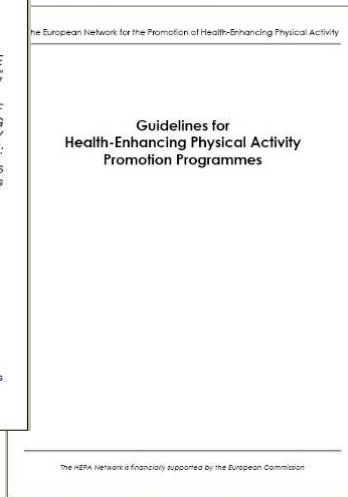
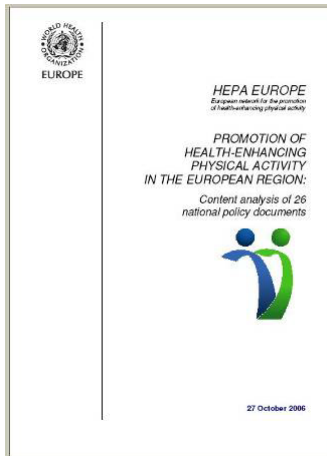
Cavill N, Racioppi F, Kahlmeier S. Physical Activity and Health in Europe. Evidence for Action. Copenhagen: WHO, 2006.

Inventory of approaches in physical activity promotion

The screenshot shows a web browser window displaying the WHO Europe website. The page title is "Physical Activity - Microsoft Internet Explorer". The address bar shows "http://data.euro.who.int/PhysicalActivity/". The page content includes the WHO logo and the text "World Health Organization Regional Office for Europe". There are navigation tabs for "Country information", "Health topics", "Media centre", "Data and publications", "About WHO", and "Programmes and projects". Below these tabs, there are buttons for "Home", "Country-based view", and "Regional view". The main heading is "International inventory of documents on physical activity promotion". The text below the heading reads: "Welcome to the international inventory of documents for the promotion of physical activity, compiled within the framework of HEPA Europe, the European network for the promotion of physical activity, in close collaboration with the transport and health programme of the WHO Regional Office for Europe. The inventory aims at providing Member States with easily accessible information on physical activity promotion and at disseminating existing experiences to support policy developments. This inventory contains policy documents, approaches and targets related to the promotion of physical activity available from countries across and outside the WHO European Region. They reflect policy initiatives undertaken at different administrative levels (national, sub-national or local) and by different sectors involved with the promotion of physical activity, such as health promotion, sport, transport, environment, education. The inventory is focusing initially on the identification of national policy documents on physical activity promotion. Information can be viewed and searched on a country basis or in a summary table, listing all countries, by clicking one of the tabs above. More information about the project can be found in the HEPA Europe website".

www.euro.who.int/hepa

Analyses of selected approaches



www.euro.who.int/hepa

Working groups on specific topics

BOOK OF ABSTRACTS
Magglingen, Switzerland,
November 22–23, 2006

1ST WORKSHOP FOR THE EXCHANGE OF EXPERIENCES IN PHYSICAL ACTIVITY AND SPORTS PROMOTION IN CHILDREN AND ADOLESCENTS

Swiss National Office of Public Health (SNPH)
Health and Safety Unit
www.bfs.admin.ch/bfs/portal/default

www.physicalactivityandhealth.ch Windows Internet Explorer

www.physicalactivityandhealth.ch/primarycare/

[HEPA Europe \(details about the working group in activity report and work programme\)](#)

HEPA promotion through primary care practice

- Promotion of physical activity in the primary care setting. What is the situation in Switzerland? (Translation of Bize R, Surbeck R, Padlina O, Peduzzi F, Cornuz J, Martin B. Promotion de l'activité physique au cabinet médical. Où en sommes-nous en Suisse? Revue médicale Suisse 2007; 3: 2731-6.)

14.04.08

Elgerner Computer 100%

www.euro.who.int/hepa

Collaboration in projects

WORLD HEALTH ORGANIZATION
REGIONAL OFFICE FOR EUROPE



WELTGESUNDHEITSORGANISATION
REGIONALBÜRO FÜR EUROPA

ORGANISATION MONDIALE DE LA SANTÉ
BUREAU RÉGIONAL DE L'EUROPE

ВСЕМИРНАЯ ОРГАНИЗАЦИЯ ЗДРАВООХРАНЕНИЯ
ЕВРОПЕЙСКОЕ РЕГИОНАЛЬНОЕ БЮРО

WHO/EC Project on Monitoring progress on improving nutrition and physical activity and preventing obesity in the European Union

1st Meeting of National Information Focal Points
Brussels, 23-24 September 2008

1 September 2008



EUROPE



3rd annual meeting
of HEPA Europe
European network for the
promotion of health-
enhancing physical activity

Report of a WHO meeting
16-18 May 2007
Graz, Austria



HEPA Europe
European network for the promotion
of health-enhancing physical activity

**Activity reports and
work programmes in
the reports of the
annual meetings**
www.euro.who.int/hepa