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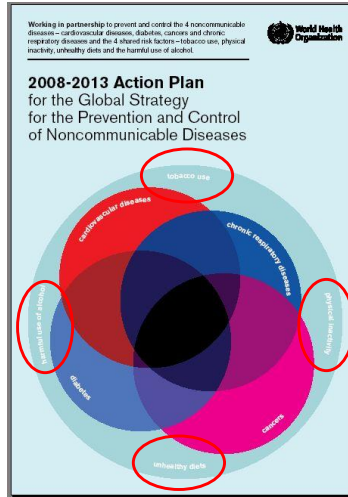
Institut für Sozial- und Präventivmedizin

Stand der internationalen Entwicklungen zur Bewegungsförderung

Dr. med. Brian Martin, MPH

Arbeitsbereich Bewegung und Gesundheit

NGO-Allianz Ernährung, Bewegung und Körpergewicht
Strategie-Workshop, Bern, 27.03.2012



Cardio-vascular diseases
Harmful use of alcohol
Diabetes
Unhealthy diets

Tobacco use
Chronic respiratory diseases
Physical inactivity
Cancers
2008

Figure 2: The risk transition. Over time, major risks to health shift from traditional risks (e.g. inadequate nutrition or unsafe water and sanitation) to modern risks (e.g. overweight and obesity). Modern risks may take different trajectories in different countries, depending on the risk and the context.

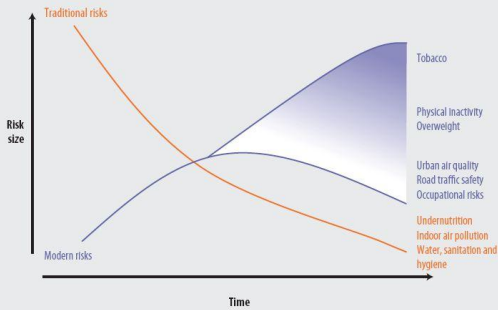
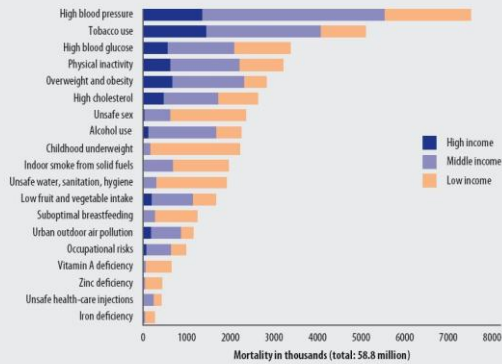


Figure 6: Deaths attributed to 19 leading risk factors, by country income level, 2004.



HEPA promotion in global public health





(2000)



2004



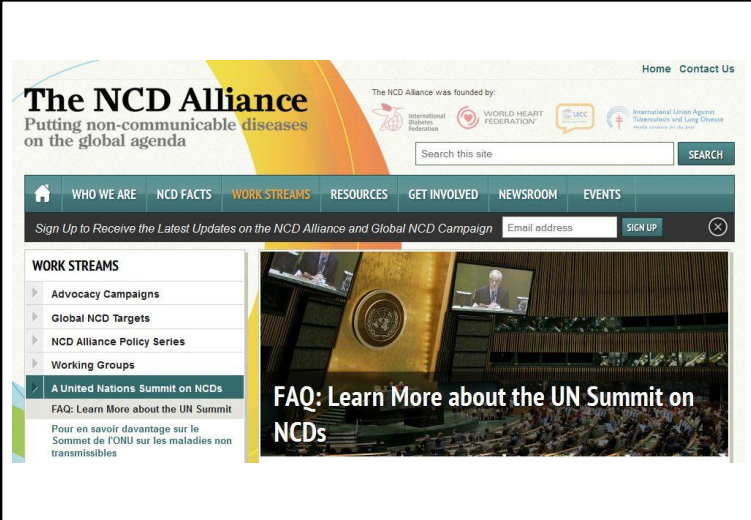
2008



2009



2010



The NCD Alliance
Putting non-communicable diseases on the global agenda

The NCD Alliance was founded by:
 International Diabetes Federation | WORLD HEART FEDERATION | WHO LACC | International Union Against Tuberculosis and Lung Disease

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WORK STREAMS

- Advocacy Campaigns
- Global NCD Targets
- NCD Alliance Policy Series
- Working Groups
- A United Nations Summit on NCDs**

FAQ: Learn More about the UN Summit


Pour en savoir davantage sur le Sommet de l'ONU sur les maladies non transmissibles

FAQ: Learn More about the UN Summit on NCDs



2 Monitoring exposures


- Tobacco smoking
 - Target: 40% relative reduction in prevalence of current tobacco smoking
 - Indicator: Age-standardized prevalence of current tobacco smoking among persons aged 15+
- Alcohol
 - Target: 10% relative reduction in alcohol per capita consumption (APC)
 - Indicator: APC of pure litres of alcohol among persons aged 15+
- Dietary salt intake
 - Target: Mean adult population intake of salt less than 5 grams per day
 - Indicator: Age standardized mean adult population intake of salt per day



2 Monitoring exposures, cont..

Examples

- Blood pressure/hypertension
 - Target: 25% relative reduction in prevalence of raised blood pressure
 - Indicator: Age-standardized prevalence of raised blood pressure among persons aged 25+
- Obesity
 - Target: No increase in obesity prevalence
 - Indicator: Age-standardized prevalence of obesity among persons aged 25+









WHO Monitoring framework and targets for the prevention and control of NCDs

Why we need a global target on physical inactivity

We commend WHO for developing the Political Declaration on the Prevention and Control of NCDs, adopted at the UN High Level Meeting in September 2011 and Member States on their support for the Political Declaration. Halting the NCD epidemic requires timely implementation of the commitments in the Political Declaration and taking clear decisions at the 65th World Health Assembly this May.



Fiona Bull
Chair Global Advocacy for Physical Activity (GAPA)



Victor Matsudo
Chair Physical Activity Network Americas (RAFA-PANA)



Adrian Bauman
Chair Asia Pacific Physical Activity Network (APPAN)



Brian Martin
Chair Agita Mundo, Global physical activity network



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Chair HEPA Europe, European network for HEPA promotion



Vicki Lambert
Secretariat African Physical Activity Network (AFPAN)

February 8 2012

World Health Organization
SECOND WHO DISCUSSION PAPER
(Version dated 22 March 2012)

A COMPREHENSIVE GLOBAL MONITORING FRAMEWORK INCLUDING INDICATORS AND A SET OF VOLUNTARY GLOBAL TARGETS FOR THE PREVENTION AND CONTROL OF NONCOMMUNICABLE DISEASES

Indicators and targets for 2025 for the global monitoring framework for NCDs

Indicators with targets	Target
Mortality between ages 30 and 70 due to CVD, cancer, diabetes, and chronic respiratory disease	25% reduction
Hypertension	25% reduction
Tobacco	30% reduction
Salt	30% reduction
Physical inactivity	10% reduction

Other WHO core indicators

Overweight/obesity (adult, child, adolescent)	Policy to restrict advertising to limit and to reduce marketing of unhealthy foods to children
Raised total cholesterol	Cervical cancer screening
Raised blood glucose/diabetes	Vaccination: HPV, Hepa B, B
Adult per capita consumption of alcohol and heavy episodic drinking	Access to basic technologies and medicines
Low fruit and vegetable intake	Access to palliative care
Cancer incidence, by type	Integrating therapy for CVD risk reduction

Other country-specific indicators of NCD and related issues including social determinants of health

* All indicators should be disaggregated by gender, age, socioeconomic position, and other relevant stratifiers

GAPA, RAFA-PANA, APPAN, Agita Mundo

WHO Monitoring framework and targets for the prevention and control of NCDs

**POSITION STATEMENT #2
SUPPORT FOR THE INCLUSION OF A GLOBAL TARGET ON PHYSICAL INACTIVITY**

We call upon Member States, WHO and other interested partners, to endorse the inclusion of the global target and indicator on physical inactivity in the core set of the NCD monitoring framework

Fiona Bull
Chair Global Advocacy for Physical Activity (GAPA)

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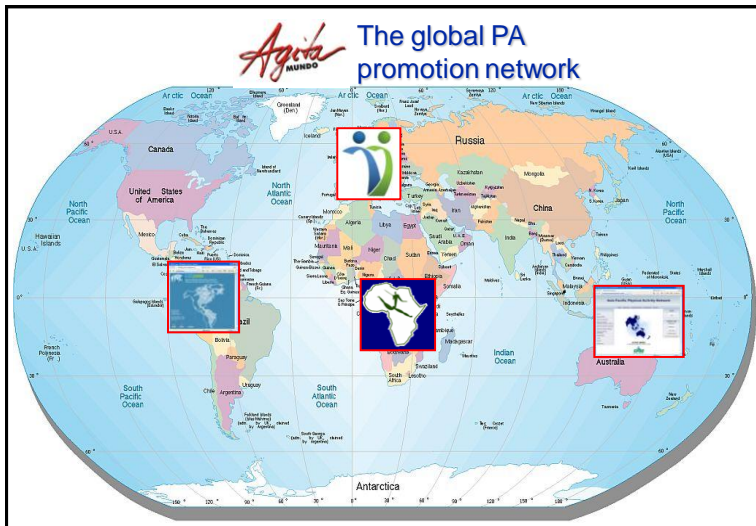
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March 27 2012



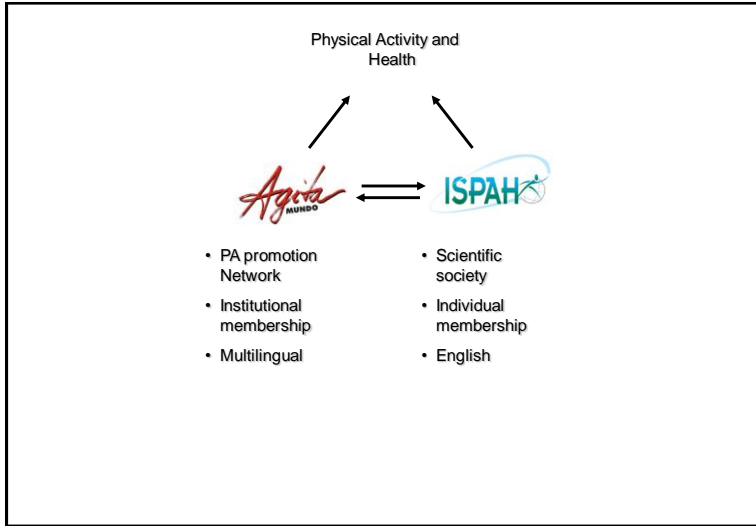
WORLD WEEK FOR PHYSICAL ACTIVITY
1st to 8th APRIL, 2012
6th April World Day For Physical Activity

Agita MUNDO

"TOGETHER FOR A HAPPY AND ACTIVE LIFE"

www.portalagita.org.br e-mail: agitamundo@portalagita.org.br

www.portalagita.org.br www.panh.ch/agitamundo



Scientific Society on Physical Activity and Health

Other Councils

www.ispah.org

GAPA, a council of the International Society for Physical Activity and Health ISPAH
www.globalpa.org.uk

www.globalpa.org.uk

1 Schule

2 Transport

3 Städteplanung

4 Medizinische Grundversorgung

5 Öffentlichkeitsarbeit

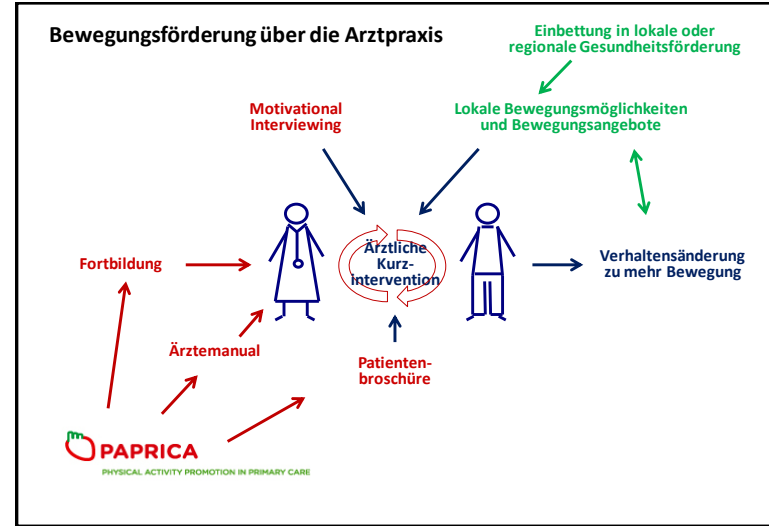
6 Gemeinde

7 Breitensport

NON COMMUNICABLE DISEASE PREVENTION: Investments that Work for Physical Activity

Whole-of-community approaches where people live, work and recreate have the opportunity to mobilize large numbers of people.

www.globalpa.org.uk



Bewegungsförderung über die Arztpraxis

- Im Kanton Wadt seit 2009 im Einsatz
- Umsetzung in anderen Kantonen angelaufen oder in Vorbereitung
- Integration in multidimensionalen Präventionsansatz "Gesundheitscoaching" des Kollegiums Hausarztmedizin vorgesehen

www.panh.ch/paprica www.paprica.ch

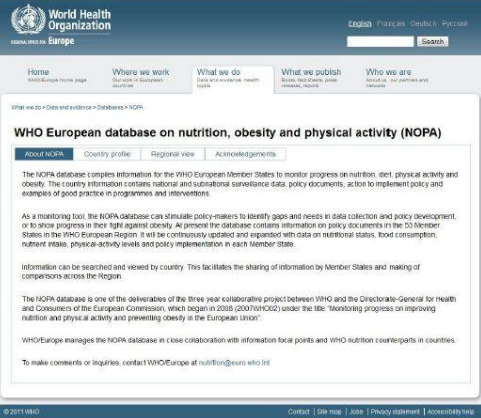
Bize R, Surbeck R, Padlina O, Peduzzi F, Cornuz J, Martin B. Promotion of physical activity in the primary care setting: The situation in Switzerland. Schweiz Z Sportmed Sporttraumatol 2008; 56 (3), 112–116.

La Carta de Toronto para la Actividad Física: Un llamado Global para la Acción

The Toronto Charter for Physical Activity: A Global Call for Action

La Charte de Toronto pour l'activité physique: Action

www.globalpa.org.uk



WHO European database on nutrition, obesity and physical activity (NOPA)

The NOPA database contains information for the WHO European Member States to monitor progress on nutrition, diet, physical activity and obesity. The country information contains national and subnational surveillance data, policy documents, action to implement policy and examples of good practice in programmes and interventions.

As a monitoring tool, the NOPA database can stimulate policy-makers to identify gaps and needs in data collection and policy development, or to show progress in their fight against obesity. At present the database contains information on policy documents in the 23 Member States in the WHO European Region. It will be continuously updated and expanded with data on nutritional status, food consumption, nutrient intake, physical activity levels and policy implementation in each Member State.

Information can be searched and viewed by country. This facilitates the sharing of information by Member States and making of comparisons across the Region.

The NOPA database is one of the deliverables of the three-year collaborative project between WHO and the Directorate-General for Health and Consumers of the European Commission, which began in 2008 (2007/01/02) under the title "Monitoring progress on improving nutrition and physical activity and preventing obesity in the European Union".

WHO/Europe manages the NOPA database in close collaboration with information focal points and WHO nutrition counterparts in countries.

To make comments or inquiries, contact WHO/Europe at nutrition@euro.who.int

<http://data.euro.who.int/nopa>

NOPA

WHO European database on nutrition, obesity and physical activity



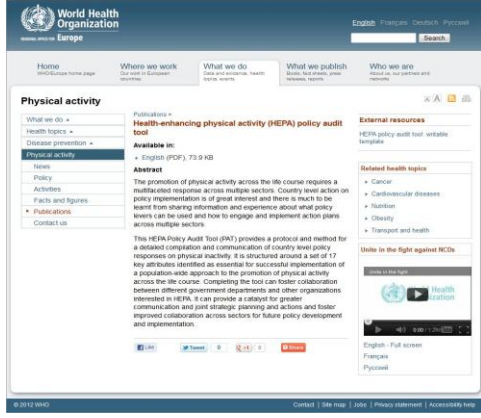
Review of physical activity promotion policy development and legislation in European Union Member States

Promoting sport and enhancing health in European Union countries: a policy content analysis to support action

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

Report no. 10

www.euro.who.int/hepa



Health-enhancing physical activity (HEPA) policy audit tool

Available in:

- English (PDF), 73.9 KB

Abstract

The promotion of physical activity across the life course requires a multifaceted response across multiple sectors. Country-level action on policy implementation is of great interest and there is much to be learnt from sharing information and experience about what policy levers can be used and how to engage and implement action plans across multiple sectors.

This HEPA Policy Audit Tool (PAT) provides a protocol and method for a detailed compilation and communication of country-level policy responses on physical activity. It is structured around a set of 27 key attributes identified as essential for successful implementation of a population-wide approach to the promotion of physical activity across the life course. Completing the tool can foster collaboration between different government departments and other organizations interested in HEPA. It can provide a catalyst for greater communication and joint strategic planning and actions and foster improved collaboration across sectors for future policy development and implementation.

www.euro.who.int/hepat

HEPA PAT

Health-enhancing physical activity policy audit tool

HEPA PAT

Health-enhancing physical activity (HEPA) Policy Audit Tool (PAT)

Case studies on the development and implementation of national policies for the promotion of physical activity

SWITZERLAND

Draft number: final
Date: 13 February 2012
covering situation until May 2011

Completed by:

Brian Martin, MD MPH, Institute of Social and Preventive Medicine, University of Zurich
Eva Martin, MPH, Institute of Social and Preventive Medicine, University of Zurich
Sonja Kahmeier, PhD, Institute of Social and Preventive Medicine, University of Zurich

Lead author: Brian Martin

Contact details: brian.martin@ispm.uzh.ch
www.euro.who.int/hepat

- Project under the lead of the British Heart Foundation National Centre Physical Activity and Health, Loughborough University
- Detailed analyses carried out in 7 European countries
- Comparative analysis currently underway

**HEPA Europe working group
on national approaches in HEPA promotion**

HEPA PAT



Meeting in Zurich on 28./29.06.2012 (to be confirmed)

**Health-enhancing physical
activity (HEPA)
Policy Audit Tool (PAT)**

 **HEPA PAT**

**Case studies on the
development and
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[SWITZERLAND]

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www.euro.who.int/hepapat

www.panh.ch/hepapat

**Challenges
encountered**

- Amount of information
- Differences in perception and judgement
- Differences in approach to project