



University of Zurich

Institute of Social and Preventive Medicine

Promotion of Physical Activity in Primary Care settings: A European Perspective

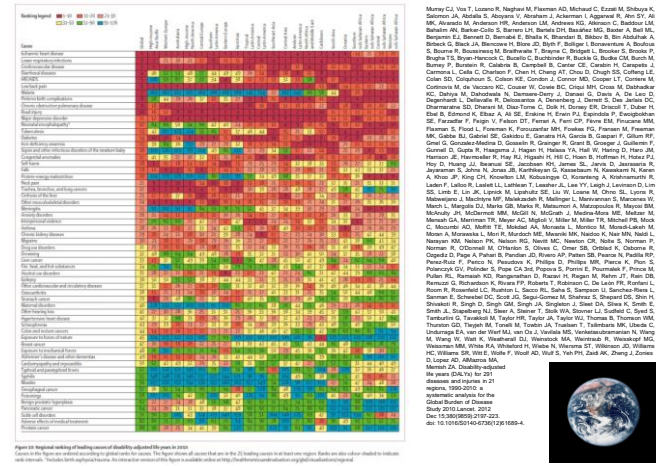
Brian Martin, MD MPH
Physical Activity and Health Unit

Expert Symposium on National Exercise for Health Referral Frameworks 19.06.14, Dublin City University

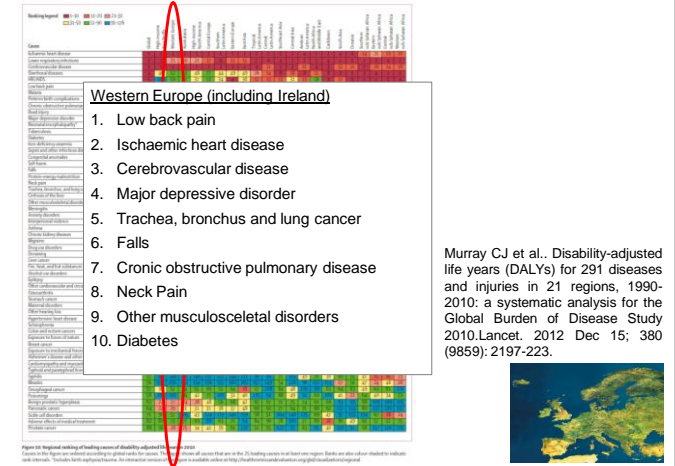


- The epidemic of non-communicable diseases
- Physical activity promotion in health care settings
- The "Zurich declaration" and its implications

Regional ranking of leading causes of disability-adjusted life years in 2010



Regional ranking of leading causes of disability-adjusted life years in 2010



Working in partnership to prevent and control the 4 noncommunicable diseases – cardiovascular diseases, diabetes, cancers and chronic respiratory diseases and the 4 shared risk factors – tobacco use, physical inactivity, unhealthy diets and the harmful use of alcohol.

World Health Organization

2008-2013 Action Plan for the Global Strategy for the Prevention and Control of Noncommunicable Diseases

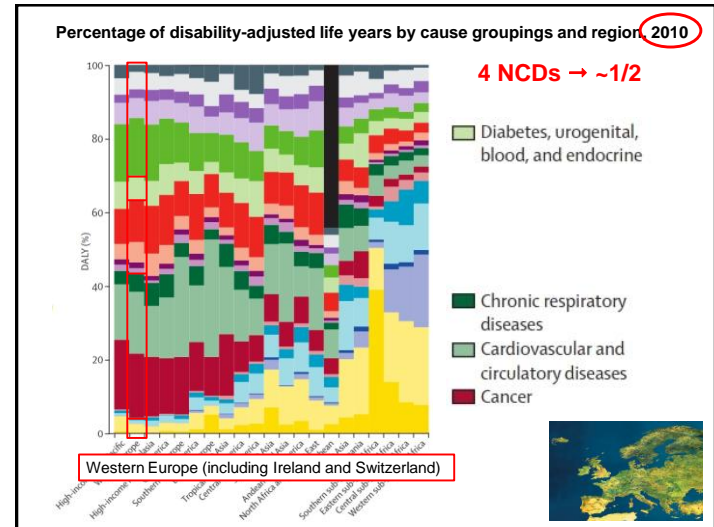
4 main groups of non-communicable diseases

Cardio-vascular diseases

Chronic respiratory disease

Diabetes

Cancers



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World Health Organization

2008-2013 Action Plan for the Global Strategy for the Prevention and Control of Noncommunicable Diseases

4 (+2) main groups of non-communicable diseases

Cardio-vascular diseases

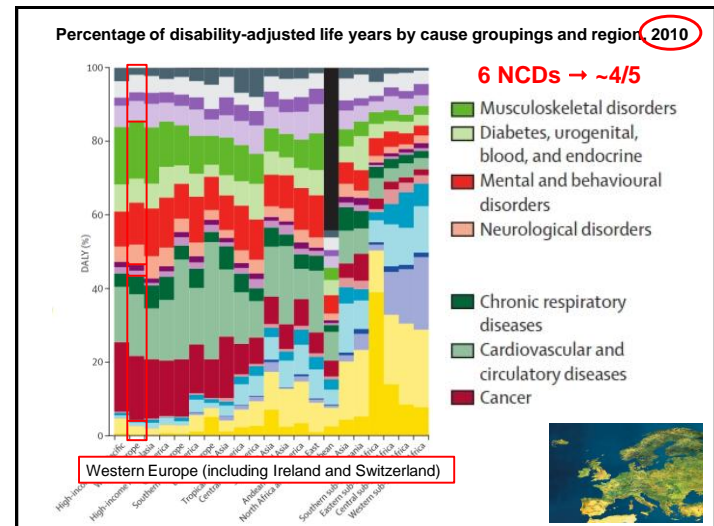
Chronic respiratory disease

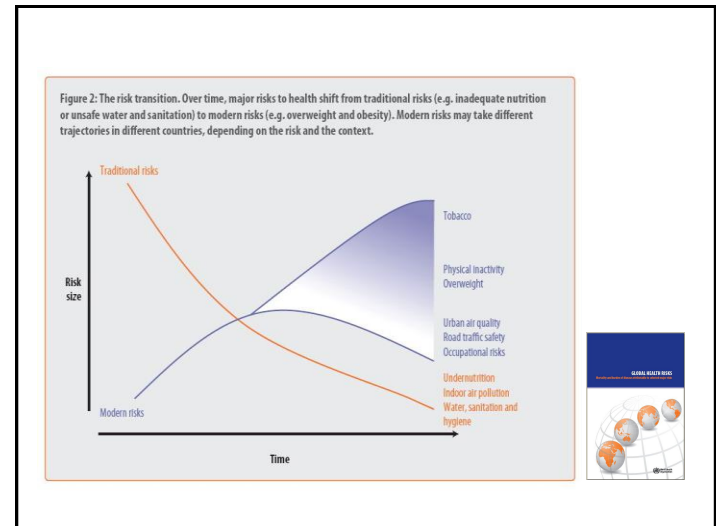
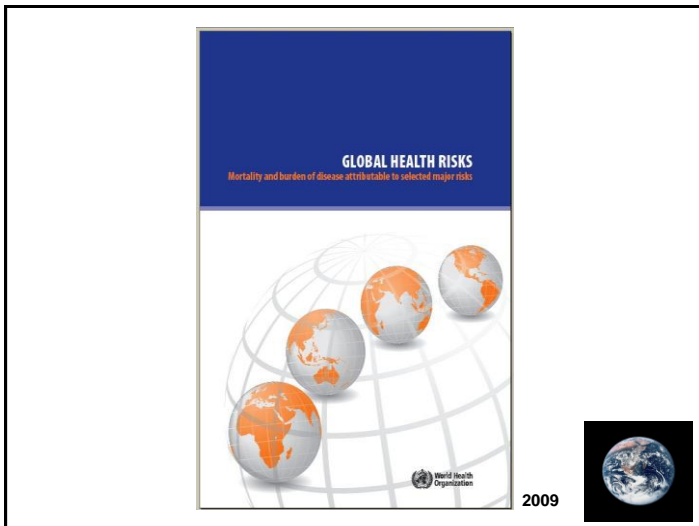
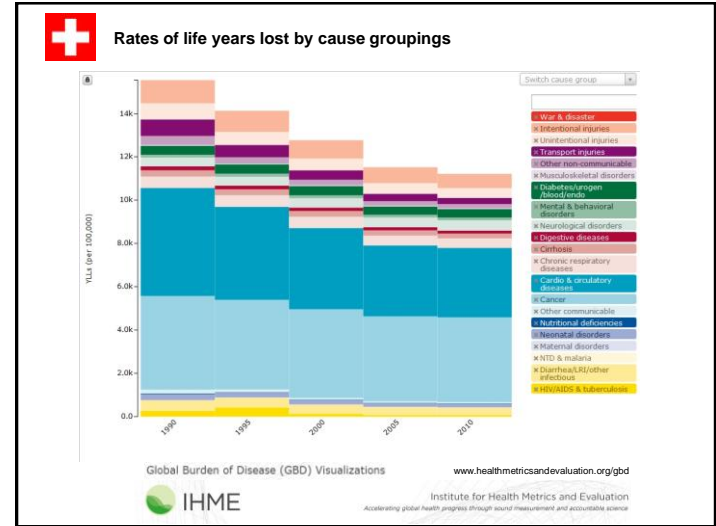
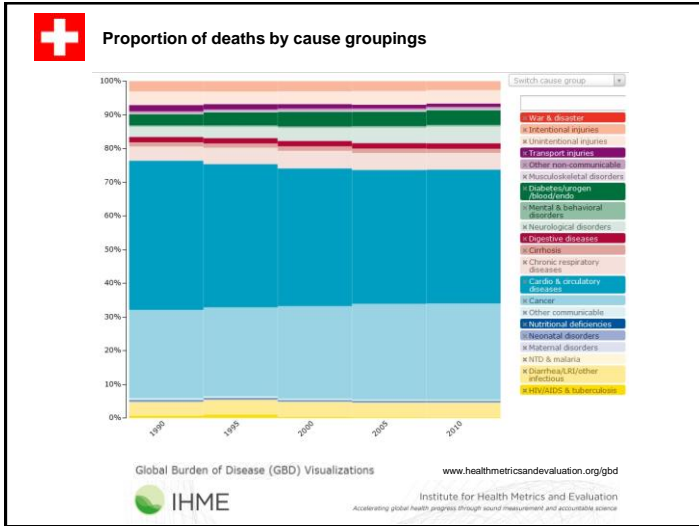
Musculo-skeletal disorders

Diabetes

Mental health problems

Cancers





Working in partnership to prevent and control the 4 non-communicable diseases – cardiovascular diseases, diabetes, cancers and chronic respiratory diseases and the 4 shared risk factors – tobacco use, physical inactivity, unhealthy diets and the harmful use of alcohol.

2008-2013 Action Plan for the Global Strategy for the Prevention and Control of Noncommunicable Diseases

4 main risk factors

- Tobacco use
- Cardio-vascular diseases
- Harmful use of alcohol
- Diabetes
- Chronic respiratory disease
- Physical inactivity
- Cancers
- Unhealthy diets

Research aims

- Quantifying combined effects of the four behavioural risk factors for NCD on mortality
- Developing respective risk charts for communication

Methods

- Record linkage study: MONICA Study & Swiss National Research Programme 1A with Swiss National Cohort
- 16'721 Participants (16-90 years)
- Up to 32 years of mortality follow-up

Research article: Establishing a follow-up of the Swiss MONICA participants (1984-1993); record linkage with census and mortality data

Cohort Profile: The Swiss National Cohort—a longitudinal study of 6.8 million people

Martin-Diener E, Meyer J, Braun J, Tamutzer S, Fäh D, Rohrmann S, Martin BW. The combined effect on survival of four main behavioural risk factors for non-communicable diseases. *Prev Med*, in press. Project funded by Swiss Heart Foundation and Swiss Cancer League and supported by Swiss National Science Foundation.

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Analyses

- (Mortality risks: Cox proportional Hazard Models)
- 10-year survival probabilities: Weibull Regression Models

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10 year survival probabilities at 65 and 75 years of age in the Swiss National Cohort – risk charts

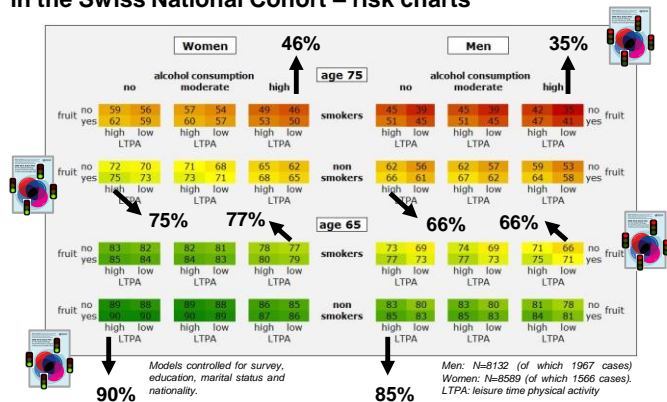
Age	Sex	Alcohol consumption			Smoking status	Fruit intake	
		no	moderate	high		no	yes
75	Women	no	59-56	57-54	49-46	51-45	47-41
		high	60-57	53-50	62-56	64-58	
	Men	no	41-39	43-38	43-38	47-41	
		high	51-45	51-45	62-57	59-53	
65	Women	no	72-70	71-68	65-62	62-56	64-58
		high	75-73	73-71	68-65	66-61	67-62
	Men	no	73-69	74-69	71-66	77-73	75-71
		high	83-80	83-80	81-78	85-83	84-81

Models controlled for survey, education, marital status and nationality.

Men: N=8132 (of which 1967 cases)
 Women: N=8589 (of which 1566 cases).
 LTPA: leisure time physical activity

Martin-Diener E, Meyer J, Braun J, Tamutzer S, Fäh D, Rohrmann S, Martin BW. The combined effect on survival of four main behavioural risk factors for non-communicable diseases. *Prev Med*, in press. Project funded by Swiss Heart Foundation and Swiss Cancer League and supported by Swiss National Science Foundation.

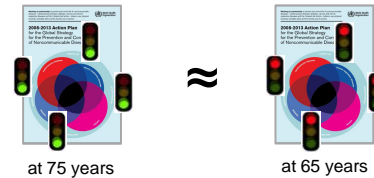
10 year survival probabilities at 65 and 75 years of age in the Swiss National Cohort – risk charts



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Conclusions

- The independent and combined impact of WHO's four behavioural risk factors for NCD could clearly be shown in a Swiss population sample, i.e. in a population with a well developed health care system
- The combined impact of healthy behaviour on mortality is stronger than the differences between men and women
- Healthy behaviour keeps you young for ten years longer!



Martin-Diener E, Meyer J, Braun J, Tamutzer S, Föh D, Rohrmann S, Martin BW. The combined effect on survival of four main behavioural risk factors for non-communicable diseases. *Prev Med*, in press.
Project funded by Swiss Heart Foundation and Swiss Cancer League and supported by Swiss National Science Foundation.

"If we could give every individual the right amount of nourishment and exercise, not too little and not too much, we would have found the safest way to health"

Hippokrates ~460-370 BC



Physical activity in the prevention and treatment of diseases

FYSS 2008

IN ENGLISH!

Swedish FYSS – the book about Physical Activity in the prevention and treatment of disease summarizes the up-to-date scientific knowledge on how to prevent and treat various diseases and conditions using physical activity. The book covers most areas of diseases and conditions where physical activity has a documented effect.



Written by 95 experts, FYSS is produced by the Swedish Society of Sports Medicine and it is published in cooperation with Swedish National Institute of Public Health.

FYSS is a source of information that summarizes to which extent physical activity can be used to prevent and treat various diseases. It also gives advice on exercise recommendations and includes risks with physical activities for various conditions. FYSS is a tool for licensed health-care staff in prescribing physical activities.

The book is also useful for activities organizers within the communities who work with physical activity on prescription (P4R) and for educational institutions such as colleges and universities that focus on health sciences and public health.

The Swedish Society of Sports Medicine together with Swedish National Institute of Public Health initiated a translation of FYSS from Swedish to English. This work is to be completed in autumn winter of 2009.

The Swedish National Institute of Public Health is a state agency under the Ministry of Health and Social Affairs. The Institute works to promote health and prevent ill health and injury, especially for population groups most vulnerable to health risks.

The three main tasks of the Institute are:

- To monitor and coordinate the implementation of the national public health policy.
- To be a national centre of knowledge for the development and dissemination of methods and strategies in the field of public health, based on scientific evidence.
- To exercise supervision in the areas of alcohol, tobacco and illicit drugs.

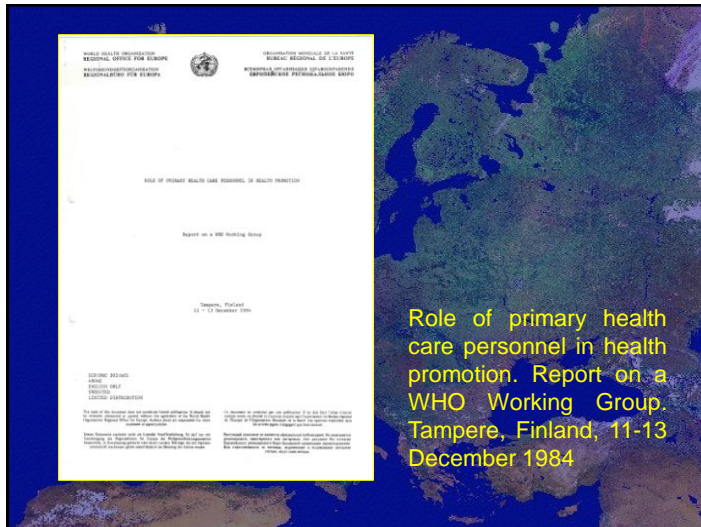
The Institute lends support, exerts influence and supervises in the areas of health promotion and disease prevention.

All our publications can be read and downloaded from our website www.fhi.se/en/Publications/All-publications-in-english/. You also can order the majority of our publications in hard copy. All prices are exclusive of VAT. Postage and handling charges will be added.

Please order via www.fhi.se/en/publications or e-mail fhifirst@soi.se

Swedish National Institute of Public Health





27 - 29 NOVEMBER 1998

announcement

First European Conference on the Promotion of Health-Enhancing Physical Activity (HEPA)

Organisers

- The UKK Institute for Health Promotion Research
- Netherlands Olympic Committee* Netherlands Sports Confederation (NOC*NSF)
- Finnish Rheumatism Association

27 - 29 NOVEMBER 1998

First European Conference on the Promotion of Health-Enhancing Physical Activity (HEPA)

NATIONAL SPORTS CENTRE 'PAPENDAL' ARNHEM, THE NETHERLANDS

Organisers

- HEPA promotion for youth
- 12.00 - 13.00 Lunch
- 13.00 - 15.00 Thematic sessions 2 and 4
- HEPA Promotion in primary health care
- HEPA Promotion in voluntary organisations
- 15.00 - 16.30 Break
- 16.30 - 17.30 Thematic sessions 3 and 5
- Community development for HEPA promotion
- HEPA for various population groups
- 18.00 - 19.30 UKK Walk Test for the participants

Sunday morning, 29 November

- 8.30 - 10.00 Workshop
- 10.00 - 12.30 Break
- 12.30 - 13.30 Thematic session 2: Fitness promotion
- Effective marketing of healthy lifestyles*
- Review of the development of and future challenge for HEPA promotion
- Research and development needs for HEPA promotion
- Stewart Blair, The Cooper Institute for Aerobics Research, USA
- Concluding remarks
- Stewart Blair, The UKK Institute for Health Promotion Research, Finland
- 12.30 - 13.30 Closing lunch
- * to be confirmed

27 - 29 NOVEMBER 1998

First European Conference on the Promotion of Health-Enhancing Physical Activity (HEPA)

Contents of the workshops

1. *Cycling promotion*
2. *How to develop effective network services - linking the need and supply*
3. *Assessment of physical activity - recent developments*
4. *Assessment of health-related fitness*
5. *A French speaking workshop*

10.00 - 12.00 Thematic sessions 1 and 2

- Walking
- HEPA promotion for youth

12.00 - 13.00 Lunch

13.00 - 15.00 Thematic sessions 3 and 4

- HEPA Promotion in primary health care
- HEPA Promotion in voluntary organisations

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**WORLD HEALTH ORGANIZATION
REGIONAL OFFICE FOR EUROPE**

**ORGANISATION MONDIALE DE LA SANTÉ
BUREAU RÉGIONAL DE L'EUROPE**

**WELTGESUNDHEITSORGANISATION
REGIONALBÜRO FÜR EUROPA**

**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 2006**

1 September 2008

WORLD HEALTH ORGANIZATION REGIONAL OFFICE FOR EUROPE
WELTGESUNDHEITSORGANISATION REGIONALBURO FÜR EUROPA

ORGANISATION MONDIALE DE LA SANTÉ BUREAU RÉGIONAL DE L'EUROPE
СЪВЕЩАНИЕ НА ОРГАНИЗАЦИЯ КЪМЪВОДИТЕЛИТЕ НА ЕВРОПЕЙСКО РЕГИОНАЛНО БЮРО

Joint WHO/EC Project on
Monitoring progress on improving nutrition and physical activity and preventing obesity in the European Union, 2008-2010

Work Packages 2008-2010

1. Surveillance of nutritional status, dietary habits and physical activity patterns
2. National policies and actions
3. Good practice in regional and local initiatives
4. Database establishment, and management
5. Support to national surveillance and policy intelligence
6. Coordination, management and reporting
7. Dissemination of results

WORLD HEALTH ORGANIZATION REGIONAL OFFICE FOR EUROPE
WELTGESUNDHEITSORGANISATION REGIONALBURO FÜR EUROPA

ORGANISATION MONDIALE DE LA SANTÉ BUREAU RÉGIONAL DE L'EUROPE
BUREAU DE SANTE REGIONAL DE L'EUROPE

WHO European Ministerial Conference on Nutrition and Noncommunicable Diseases in the Context of Health 2020
Vienna, Austria
4-8 July 2013

25 June 2013
Original: English

Methodology and summary

Country profiles on nutrition, physical activity and obesity in the 53 WHO European Region Member States

Presented at Vienna Ministerial Conference 2013

www.euro.who.int/en/nutrition-country-profiles

Nutrition, Physical Activity and Obesity
Ireland

MONITORING AND SURVEILLANCE
Overweight and obesity in three age groups

Adults 20 years and over*
Age-standardized prevalence of overweight and obesity (BMI) from 2008 to 2010. The proportion of overweight and obese people rose from 67.8% in 2008 to 69.2% in 2010. The proportion of obese people rose from 24.2% in 2008 to 25.2% in 2010.

PHYSICAL ACTIVITY (PA), national policy documents and action plans

Spot	Supervision	Health	Education	Transportation
Existence of national policy documents	Existence of national policy documents	Existence of national policy documents	Existence of national policy documents	Existence of national policy documents
Existence of national action plans	Existence of national action plans	Existence of national action plans	Existence of national action plans	Existence of national action plans

PA recommendations, goals and surveillance

Spot	Target groups	Health	Education	Transportation
Existence of national "sport for all" policy	Existence of specific scheme or programme for community interventions to promote PA in the elderly	Counselling on PA as part of primary health care activities	Mandatory physical education in primary and secondary schools	Inclusion of PA in general teaching/training
Existence of national "sport for all" implementation programme	Existence of an incentive scheme for companies or employers to promote active travel to work	Existence of an incentive scheme for companies or employers to promote active travel to work	Existence of an incentive scheme for companies or employers to promote active travel to work	Existence of an incentive scheme for companies or employers to promote active travel to work

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Existence of national "sport for all" implementation programme	Existence of an incentive scheme for companies or employers to promote active travel to work	Existence of an incentive scheme for companies or employers to promote active travel to work	Existence of an incentive scheme for companies or employers to promote active travel to work	Existence of an incentive scheme for companies or employers to promote active travel to work

* Clearly stated in a policy document, partially implemented or enforced. * Clearly stated in a policy document, entirely implemented and enforced.
Source: country reporting template on Ireland from 2009 developed in the context of a WHO/EC project on monitoring progress on improving nutrition and PA and preventing obesity in the European Union (EU).

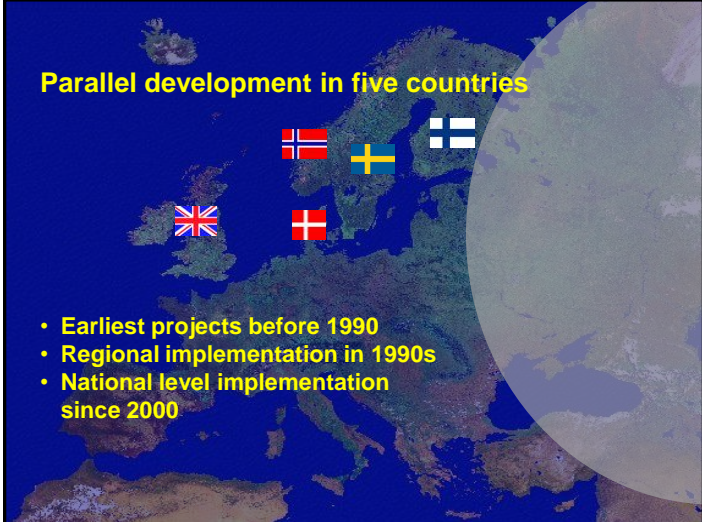


World Health Organization
European Region

Methodology and summary
Country profiles on
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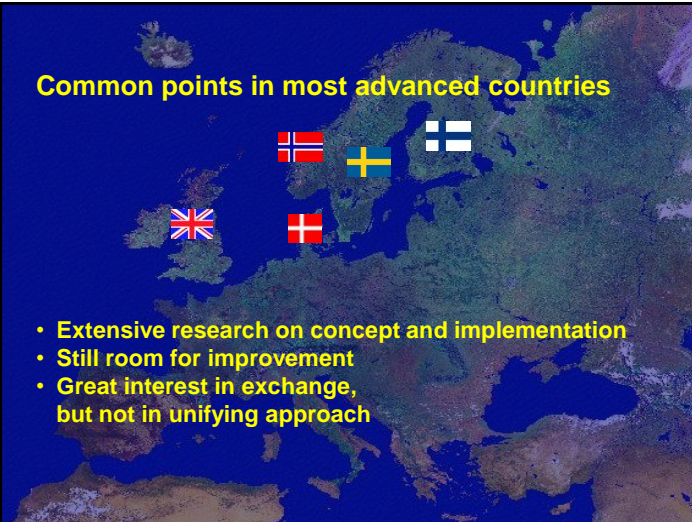
- 53 countries in the WHO European region
- 22 countries report a policy document with physical activity counselling in primary care clearly stated in it
→ 42%
- 21 countries report measures partially or entirely implemented
→ 40% (!)

www.euro.who.int/en/nutrition-country-profiles



Parallel development in five countries

- Earliest projects before 1990
- Regional implementation in 1990s
- National level implementation since 2000



Common points in most advanced countries

- Extensive research on concept and implementation
- Still room for improvement
- Great interest in exchange, but not in unifying approach



Schweizerische Gesellschaft für Sportmedizin
Société Suisse de Médecine du Sport
Società Svizzera di Medicina dello Sport

2/2014

Schweizerische Zeitschrift für
Sportmedizin und Sporttraumatologie
Revue suisse de
Médecine et traumatologie du sport
Rivista svizzera di
Medicina e traumatologia dello sport

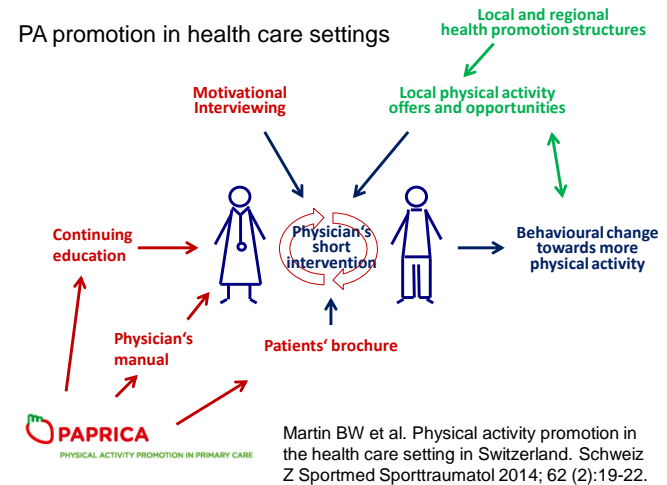
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Günter Luber, Brian Martin

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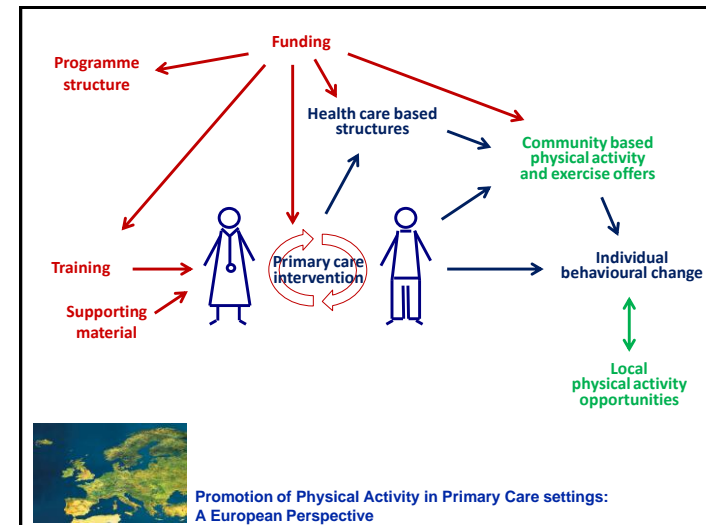
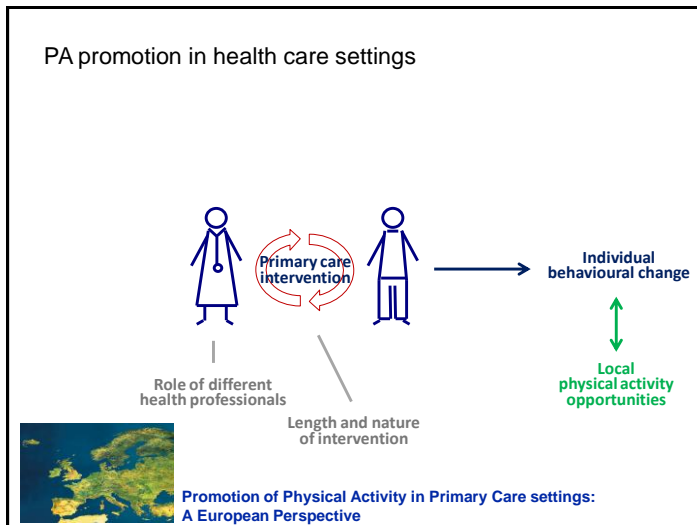
List of content Schweiz Z Sportmed Sporttraumatol 2/2014

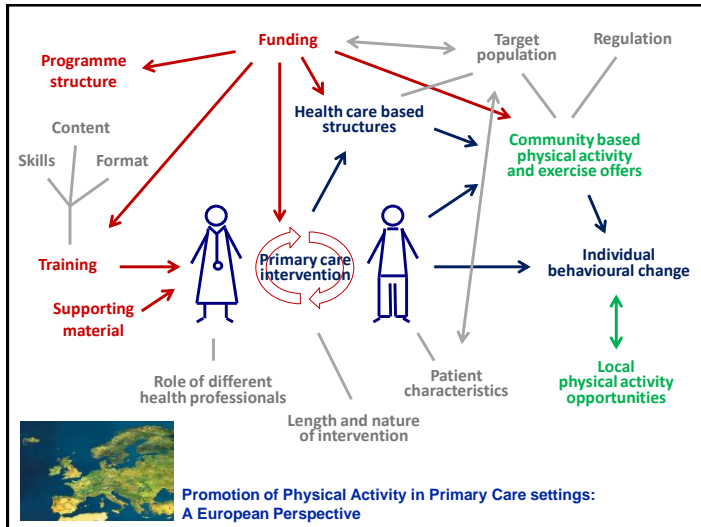
- Martin BW. Physical activity promotion in Europe and in Switzerland: the health care setting and beyond. Editorial.
- Martin-Diener E et al. 10 years of HEPA Europe: what made it possible and what is the way into the future?
- Kahlmeier S et al. A systematic overview of institutions and bodies active in physical activity promotion in Europe.
- Martin BW et al. Physical activity promotion in the health care setting in Switzerland
- Raustorp A. The evolution of physical activity on prescription (FaR) in Sweden
- Ward M. Physical activity promotion in health care settings for primary prevention in the UK.
- Füzéki E et al. Exercise referral in Germany
- Djomba J et al. Physical activity promotion in primary health care in Slovenia
- Potemkina R et al. Physical activity promotion in health care in Russia
- Dupery J et al. Exercise is Medicine in Latin America: training health care professionals in physical activity prescription
- Lobel F et al. The Exercise is Medicine Global Health Initiative Perspective.

PA promotion in health care settings



PA promotion in health care settings





World Health Organization
REGIONAL OFFICE FOR Europe

EXPERT MEETING ON PHYSICAL ACTIVITY PROMOTION IN HEALTH CARE SETTINGS: EUROPE IN 2013 AND IN THE FUTURE
ZURICH, 12-13 NOVEMBER 2013

HEPA Europe
European network for the promotion of Health-Enhancing Physical Activity

Reason for meeting

The meeting is organised jointly with the HEPA Europe Working Group on "HEPA Promotion in Health Care Settings". It will provide an overview of the current state and ongoing developments in physical activity counselling in health care settings in the European region and of worldwide developments relevant for the region.

In small groups, the participants of the expert meeting will discuss opportunities and challenges for the development and implementation of programmes for physical activity promotion in health care settings. The results from the discussion groups will be presented to the plenary meeting. Integrating specialist input on the role of physical activity promotion for secondary prevention and on the role of other health dimensions in behavioural counselling, meeting participants will identify lessons learned and remaining challenges. The results of the meeting will provide the basis for the definition of priorities for future action in the European region.

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Overview of the current state and ongoing developments

Lessons learned and remaining challenges

Basis for the definition of priorities for future action in the European region

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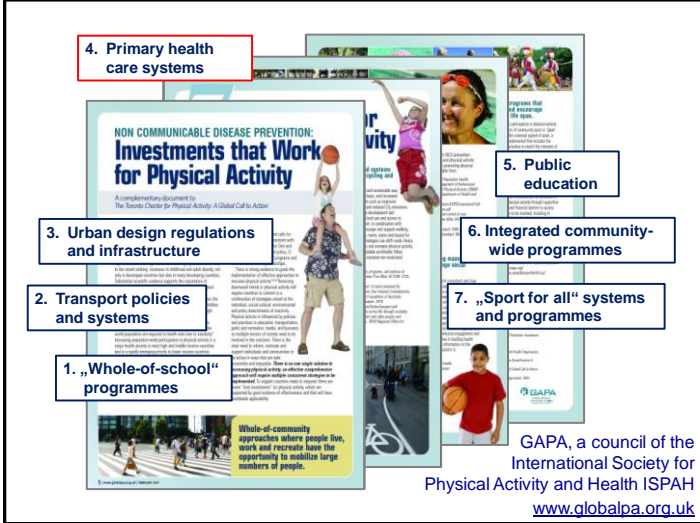
The „Zurich Declaration“ on PA Promotion in Health Care Settings

1. Context of overall physical activity promotion
2. Stewardship of WHO and the health sector for physical activity promotion in health care settings
3. Complete spectrum of physical activity
4. Integration of all health professions in the promotion of physical activity
5. Integration of health care approaches in national programme structures
6. Improvement of evidence base and development of guidance

The „Zurich Declaration“ on PA Promotion in Health Care Settings

1. Context of overall physical activity promotion

"Physical activity promotion in health care settings should be put in the context of overall physical activity promotion and its different evidence-based approaches"



4. Primary health care systems

5. Public education

6. Integrated community-wide programmes

7. „Sport for all“ systems and programmes

3. Urban design regulations and infrastructure

2. Transport policies and systems

1. „Whole-of-school“ programmes

NON COMMUNICABLE DISEASE PREVENTION:
Investments that Work for Physical Activity
A complementary document to
The World Charter for Physical Activity: A Global Call to Action

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

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

The „Zurich Declaration“ on PA Promotion in Health Care Settings

1. Context of overall physical activity promotion ✓

2. Stewardship of WHO and the health sector for physical activity promotion in health care settings

"Stewardship for physical activity promotion in health care settings lies with the health sector, and at the international level with WHO"

The „Zurich Declaration“ on PA Promotion in Health Care Settings

1. Context of overall physical activity promotion ✓

2. Stewardship of WHO and the health sector for physical activity promotion in health care settings ✓

3. Complete spectrum of physical activity

"Physical activity promotion in health care settings deals with the complete spectrum of physical activity, from the reduction of sedentary behaviour over activities in daily life and exercise to sport for all, and includes physical activity for primary prevention, therapy and rehabilitation"

The „Zurich Declaration“ on PA Promotion in Health Care Settings

1. Context of overall physical activity promotion ✓
2. Stewardship of WHO and the health sector for physical activity promotion in health care settings ✓
3. Complete spectrum of physical activity ✓
4. Integration of all health professions in the promotion of physical activity ✓
5. Integration of health care approaches in national programme structures
 - Overall development or integration of existing approaches
 - Including funding, quality control, evaluation and monitoring

The „Zurich Declaration“ on PA Promotion in Health Care Settings

1. Context of overall physical activity promotion ✓
2. Stewardship of WHO and the health sector for physical activity promotion in health care settings ✓
3. Complete spectrum of physical activity ✓
4. Integration of all health professions in the promotion of physical activity ✓
5. Integration of health care approaches in national programme structures
 - Including the integration with health care approaches for other dimensions of health behaviour

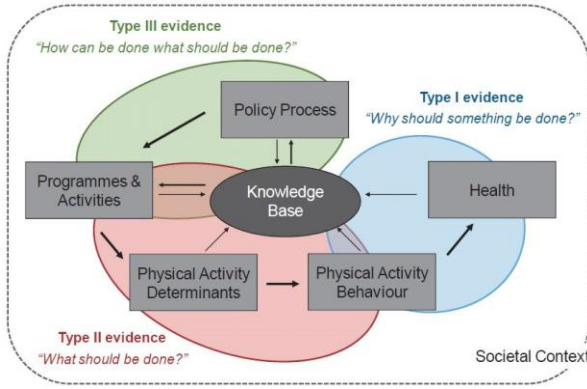


Figure 2: The HEPA Europe Framework. Encompassing the elements shown in the graph, the societal context can interact with them. The knowledge base has a central role for systematic progress in the field; it covers all three types of evidence for public health (Brownson et al, 2009).

Martin-Diener et. 10 years of HEPA Europe: what made it possible and what is the way into the future? Schweiz Z Sportmed Sporttraumatol 2014; 62 (2): 6-12.

The screenshot shows the website for the 10th Annual Meeting and 5th Conference of HEPA Europe. The header includes the University of Zurich logo and the Institute of Social and Preventive Medicine. The main content area features the event title, dates (August 27-29, 2014), and location (University of Zurich, Switzerland). A detailed description of the conference is provided, along with a list of key dates for registration, opening, and abstract submission. A small image of Zurich is shown at the bottom of the main content area.