National Approaches to Physical Activity Promotion in the European Region: Examples and Experiences

Kahlmeier, S; Middelbeek, L; Jurakic, D; Tomten, H; Jackson, F; Schuit, J

Postprint available at:
http://www.zora.uzh.ch

Posted at the Zurich Open Repository and Archive, University of Zurich.
http://www.zora.uzh.ch

Originally published at:
National Approaches to Physical Activity Promotion in the European Region: Examples and Experiences

Sonja Kahlmeier, Lideke Middelbeek, Danijel Jurakic, Heidi Tomten, Flora Jackson, and Jantine Schuit

Kahlmeier is with the Institute of Social and Preventive Medicine, the University of Zurich, Switzerland. Middelbeek is with the WHO Regional Office for Europe, Copenhagen, Denmark. Jurakic is with the School of Kinesiology, University of Zagreb, Croatia. Tomten is with the Physical Activity Dept, Directorate of Health, Oslo, Norway. Jackson is with NHS Health Scotland, Programme Design and Delivery, Edinburgh, Scotland.
This symposium presented and discussed examples of national approaches to physical activity promotion across the WHO European Region. Four different country experiences to physical activity promotion were presented from Croatia, the Netherlands, Norway, and the United Kingdom (Scotland), representing different stages of development. An overview of the European situation was also provided. The symposium provided lessons about the challenges and promising approaches to national physical activity promotion. More and more national physical activity promotion policies from different sectors and with different approaches are becoming available. Some countries are taking a “whole-government” approach while others build on strengths in one particular sector, such as sport. In some countries, former strengths were lost due to societal and political changes and policies without clear allocation of funds seem widespread. While first common success factors begin to emerge, there is no one-fits-all approach for national physical activity promotion in Europe. Countries should learn from each other but also take account of their particular strengths and challenges to develop the most effective approach.

**Keywords:** policy, exercise, evaluation, Europe

While until a few years ago comprehensive policies were the exception in Europe, more countries are now developing or strengthening policies and strategies to promote physical activity. The WHO Global Strategy on Diet, Physical and Health called upon countries to develop national policies to promote physical activity, and guidance was developed.

This symposium presented examples of national approaches to physical activity promotion across the WHO European Region. It aimed to identify the challenges and promising approaches to national physical activity promotion. To this end, 4 different country experiences to physical activity promotion were presented from Croatia, the Netherlands, Norway, and the United Kingdom (Scotland), representing different stages of development.

Ms. Lideke Middelbeek, WHO Regional Office for Europe, gave an overview of national physical activity promotion policies in Europe. Through a series of questionnaires to Member States, an online inventory of policy documents has been established since 2006. Currently, information from 39 of the 53 Member States, including 161 mostly national policy documents, is reported. Some countries developed separate physical activity promotion strategies or integrated them into wider public health strategies (87 policy documents from 37 countries), or promoted sports approaches (29/15 countries) while others pursued transport (25/11 countries) or environmental approaches (7/6 countries; 13 documents not classified).

Dr. Danijel Jurakic provided information on Croatia but was not able to present in person. When Croatia was a part of Yugoslavia, there was a well-organized system for exercise for the general population. The shift from socialism to capitalism in 1991 brought also major changes in this positive situation. Currently, physical activity promotion lies on the shoulders of local “Sport for All” associations, without a national umbrella strategy. Although there is a Croatian sports act, which addresses some important topics regarding physical activity promotion, unfortunately, no programs have been implemented on the national level. Consequently, a crucial factor for success is to advocate for physical activity being recognized as an important factor for health and quality of life by policy makers.

Dr. Heidi Tomten from the Norwegian Directorate of Health summarized the experiences with the Norwegian Action Plan on Physical Activity 2005–2009. The Action Plan was developed under the leadership of the Ministry of Health in a steering group with 7 other ministries (Labour and Social Affairs, Culture, Children and Family Affairs, Environment, Transport, Regional and Community Affairs, Education, and Research). It covers a wide range of domains. Strengths identified through external evaluation included the involvement of the different sectors, increase in knowledge, tools and mutual understanding and a binding political agenda. As weaknesses, a certain lack of clear allocation of responsibility and fragmentation and lack of clear priorities of the policy were noted, along with an ad-hoc nature of activities and insufficient funds. Dr. Tomten concluded that while still much remained to be done, knowledge and experience gained during the last 5 years builds a solid foundation for considerable progress in the years to come.

Flora Jackson from NHS Health Scotland presented the lessons from the 5-year review on the national physical activity strategy, “Let’s make Scotland more active” (LMSMA). Launched with cross-government and -party agreement, the strategy has a 20-year vision that “the people of Scotland will enjoy the benefits of an active life.” The strategic target is that by 2022, 50% of adults and 80% of children shall meet the minimum recommendations for physical activity. The 5-year review reported a 3% increase in adult activity levels to 39% while those of children remained unchanged (64%). The review endorsed the continuation of the strategy but suggested that efforts be accelerated amongst key groups for the vision to be achieved. Lessons learned after 5 years of implementation included the need for greater emphasis on the environment, local and national co-ordination, leadership, performance management, accountability, evaluation, communication and advocacy.

Dr. Jantine Schuit from the National Institute of Public Health and the Environment, the Netherlands, presented the experiences with physical activity promotion in...
the Netherlands. In the last 10 years, the Dutch Physical Activity Policy was primarily initiated and developed by the Department of Sports. Physical activity promotion is not a separate policy spearhead but part of the overweight prevention agenda. At present, 56% of the adults (in 2001: 52%) and 26% of the children adhere to the national physical activity recommendations. Although increasing, the political commitment in physical activity promotion is limited. Critical success factors for promotion are the underpinning of policy with research, strong links between policy makers and researchers, alliances with other sectors like education and the effort of key players to stimulate physical activity in disadvantaged groups.

**Conclusions.** More and more national physical activity promotion policies from different sectors and with different approaches are becoming available. Some countries are taking a “whole-government” approach with a strong focus on the policy development process, which seem to have higher changes for a long-term strategy and political commitment but need endurance during the process and clear allocation of responsibilities to reduce the risk of fragmentation. Other countries built on strengths in one particular sector, such as sport, with good results but possibly lower success in gaining political commitment. In some countries, former assets were lost due to societal and political changes and now, activity promotion often lies on the shoulders of NGOs without much support through a national strategy. In such cases, long-term advocacy for physical activity as important factor for health and quality of life is even more crucial for success. While first common success factors begin to emerge, there is no one-fits-all approach for national physical activity promotion in Europe. Countries should learn from each other but also take account of their particular strengths and challenges to develop the most effective approach.

**Acknowledgments**

We would like to thank Prof. Stjepan Heimer, PhD, and Dr. Marija Rakovac, University of Zagreb, Crocia, Mr. Maarten Koornmeef, Ministry of Health, Welfare and Sport, the Netherlands, and Dr. Wanda Wendel-Vos, RIVM, the Netherlands, for input to the presentations. The views expressed in this paper are the authors’ and do not necessarily reflect those of the World Health Organization. All speakers have covered their own travel expenses.

**References**