



Finland as a model in actions of health-enhancing physical activity?

Brian Martin, MD MPH
 HEPA Europe, the European Network for the Promotion of Health-Enhancing Physical Activity
 Swiss Federal Institute of Sport Magglingen, Switzerland

KKI-Juhlakatselmus, Helsinki, 13.03.2009

HEPA promotion in Finland



- 1960s Concerns about prevalence of non-communicable disease NCD
- 1970s The North Karelia Project
- 1980s National extension of HEPA promotion
 - 1980 First Sports Act
 - 1983 National plans for health education
 - 1992 Policy and action plan on cycling promotion
 - 1991 Finland on the Move Programme
 - 1994 Fit for Life Programme
 - ...

Puska P. The North Karelia Project – pioneering work to improve national public health. National Public Health Institute – KTL. www.ktl.fi

Vuori I, Lankenau B, Pratt M. Physical Activity Policy and Program Development: The Experience in Finland. Public Health Reports 2004; 119: 331-345



Puska P. The North Karelia Project – pioneering work to improve national public health. National Public Health Institute – KTL. www.ktl.fi

HEPA promotion in Finland

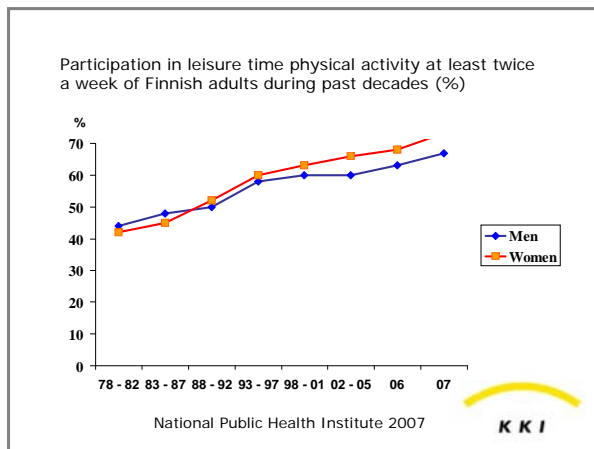


- 1960s Concerns about prevalence of non-communicable disease NCD
- 1970s The North Karelia Project
- 1980s National extension of HEPA promotion
- + Monitoring and evaluation

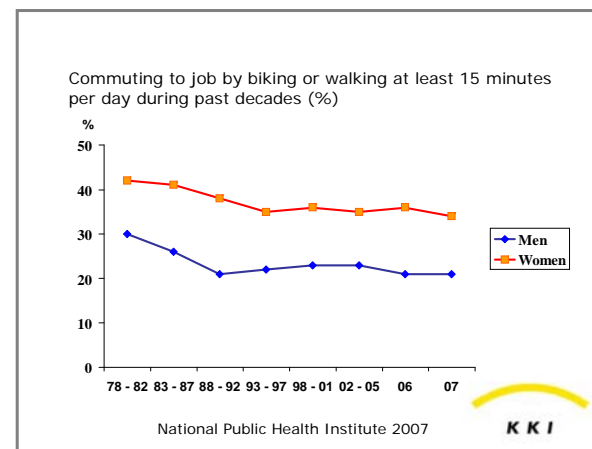
Puska P. The North Karelia Project – pioneering work to improve national public health. National Public Health Institute – KTL. www.ktl.fi

Vuori I, Lankenau B, Pratt M. Physical Activity Policy and Program Development: The Experience in Finland. Public Health Reports 2004; 119: 331-345

Cavill N, Foster C, Oja P, Martin BW. An evidence-based approach to physical activity promotion and policy development in Europe: contrasting case studies. Promotion and Education 2006; 8: 104-111.



Komulainen J. Fit for Life Program: Tailored campaigns for promoting physical activity and healthy life-style in adults. World Sport for All Congress, Genting Highlands, Malaysia 2008



Komulainen J. Fit for Life Program: Tailored campaigns for promoting physical activity and healthy life-style in adults. World Sport for All Congress, Genting Highlands, Malaysia 2008

Evaluation of Finland's HEPA policies and programmes

„The national „Fit for Life“ programme was evaluated at the end of its second 5-year phase by an independent expert group.

(...)

According to the evaluation, the programme has had many strengths as well as weaknesses. The results are being fed systematically into the activities of the programme's third five-year phase in order to improve its performance.”

Cavill N, Foster C, Oja P, Martin BW. An evidence-based approach to physical activity promotion and policy development in Europe: contrasting case studies. Promotion and Education 2006; 8: 104-111.



Background

- Strong sports for all activities and facilities, important role of sport clubs and since 1972 of national programme Youth+Sports
- Complex political situation; sports, but not health is a federal responsibility
- No strong tradition of public health and evaluation of interventions

Cavill N, Foster C, Oja P, Martin BW. An evidence-based approach to physical activity promotion and policy development in Europe: contrasting case studies. Promotion and Education 2006; 8: 104-111.



The 34th Magglingen Symposium 1995 Sports - Physical Activity - Health

- Organised by Bernard Marti
 - Physical activity and health - recent findings
 - Physical activity in Switzerland – first estimates
 - National examples for HEPA promotion:
Finland (Ilkka Vuori) and the Netherlands
 - ➔ Consensus: need for a Swiss national programme
-
- No additional resources available

Physical activity in Switzerland – first estimates

„Summing up the substance of the twelve studies under review, it becomes clear that not more than one third of the Swiss population is physically active or does sports in a frequency sufficient for health, i.e. at least twice per week. At least one third of the population is never or practically never physically active.

(...)

„The analysis presented here showed consistently higher levels of activity in individuals of the male gender, of younger age, of unmarried status and of better education, particularly from the German speaking part of Switzerland.“

Hättich A. Schriftenreihe der ESSM; 1995.



← International influences



Very important for

- development of elements of national strategy and for
 - development of national structure
- through:
- Contacts with individual experts
 - Global and regional Networks
 - Facilitation of contacts with experts
 - Supporting documentation



HEPA promotion in Switzerland

- 1995 Magglingen Symposium sports - PA – health
- 1996 Beginning of Allez Hop programme
- 1996 Beginning of Health Promotion Unit Magglingen
- 1999 Network HEPA Switzerland

Cavill N, Foster C, Oja P, Martin BW. An evidence-based approach to physical activity promotion and policy development in Europe: contrasting case studies. Promotion and Education 2006; 8: 104-111.

Development



- **1996: Launched by three health insurance companies and Swiss Olympic**
- **2003: public-private partnership:**
 - » Federal Office of Sport
 - » Health Promotion Switzerland
 - » Swiss Olympic
 - » santésuisse (association of Swiss Health Insurances)

Martin-Diener E, Wanner M et al. Allez Hop: Did Switzerland „get moving“ after a decade of a national physical activity promotion programme? 2nd ICPAH Congress, Amsterdam, 15.04.2008

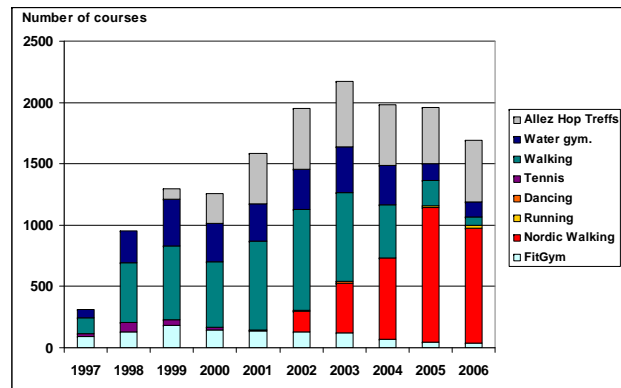
The programme Allez Hop



- **Weekly lessons during ten week courses, qualified instructors**
- **National programme**
- **At the beginning in collaboration with sports clubs and associations; later also with independent instructors**
- **Up to 20'000 participants per year, 90% female**

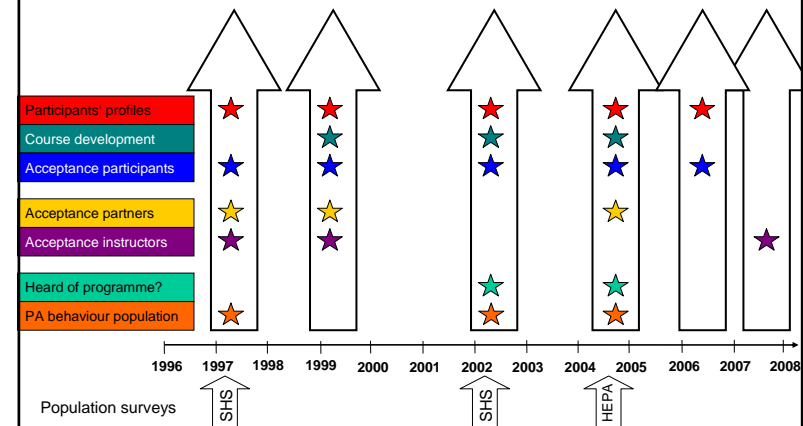
Martin-Diener E, Wanner M et al. Allez Hop: Did Switzerland „get moving“ after a decade of a national physical activity promotion programme? 2nd ICPAH Congress, Amsterdam, 15.04.2008

Course development



Martin-Diener E, Wanner M et al. Allez Hop: Did Switzerland „get moving“ after a decade of a national physical activity promotion programme? 2nd ICPAH Congress, Amsterdam, 15.04.2008

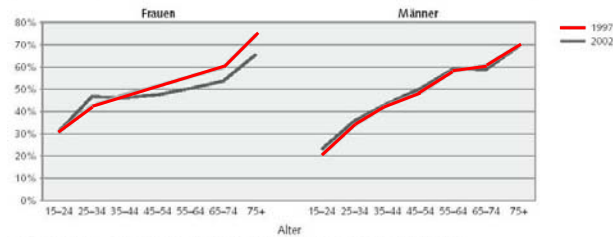
Evaluation questions





“Inactivity in sports” in the Swiss Health Surveys 1997 und 2002

Anteile der sportlich inaktiven Frauen und Männer nach Alter, 1997 und 2002 G 10



Quelle: BFS, Schweizerische Gesundheitsbefragung 1997, 2002, Bewegung unterwegs: n=19'528 (2002), 12'941 (1997).
Sportverhalten: n=19'706 (2002), 13'004 (1997).

Lamprecht M, Stamm HP. Bewegung, Sport, Gesundheit. Fakten und Trends aus den Schweizerischen Gesundheitsbefragungen 1992, 1997, 2002. StatSanté, Resultate zu den Gesundheitsstatistiken in der Schweiz, 1/2006.



Most popular sports in Switzerland 2007

	level 2007	change since 2000
Bicycle, mountainbike	35.0%	+3.2%
Walking/hiking*	33.7%	+11.1%
Swimming	25.4%	-0.9%
Skiing	21.7%	+3.8%
Jogging/running	16.8%	-0.8%
Fitness training	14.0%	+2.5%
Gymnastics	11.7%	-5.3%

*47% nordic walking; 20% walking; 33% brisk walking

Lamprecht M, Fischer A, Stamm HP. Sport Schweiz 2008: Das Sportverhalten der Schweizer Bevölkerung. Magglingen, BASPO 2008

Allez Hop



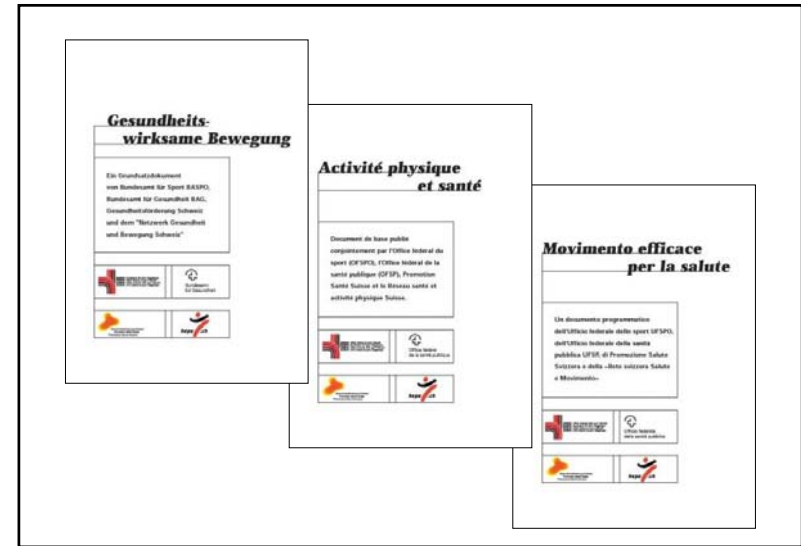
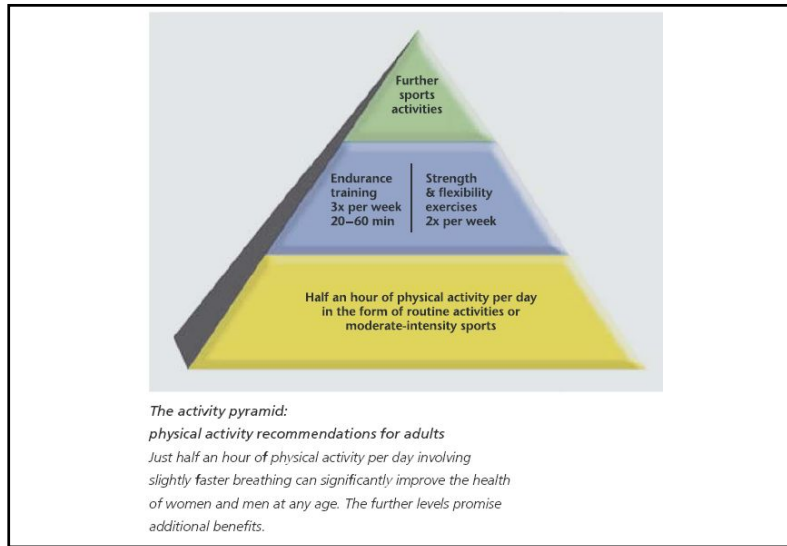
- **The programme has reached insufficiently active middle aged women for a decade**
 - **Allez Hop is the top evaluated physical activity promotion programme in Switzerland**
 - **Evaluation supported a continuous programme development**
-
- **National implementation stopped December 2008**
 - **Instructors training merged with seniors' sport**
 - **Possibly continuation at the regional level**

Martin-Diener E, Wanner M et al. Allez Hop: Did Switzerland „get moving“ after a decade of a national physical activity promotion programme? 2nd ICPAH Congress, Amsterdam, 15.04.2008

Local seed money projects 2000 to 2002

„Concerning the dissemination of the local project support physical activity, neither the original targets nor the ones revised after the first experiences could be achieved. The duration of the project was altered from ½ to 2 years, but still only 19'500 Swiss Francs (12'000 Euro) out of the 55'000 Swiss Francs (35'000 Euro) originally planned could be distributed. (...) An analysis of the projects registered showed that financial support was appreciated, but all other support was hardly utilised. Participation in the final questionnaire was low, only a minority of projects took part in further quality control and only in the most rudimentary way.“

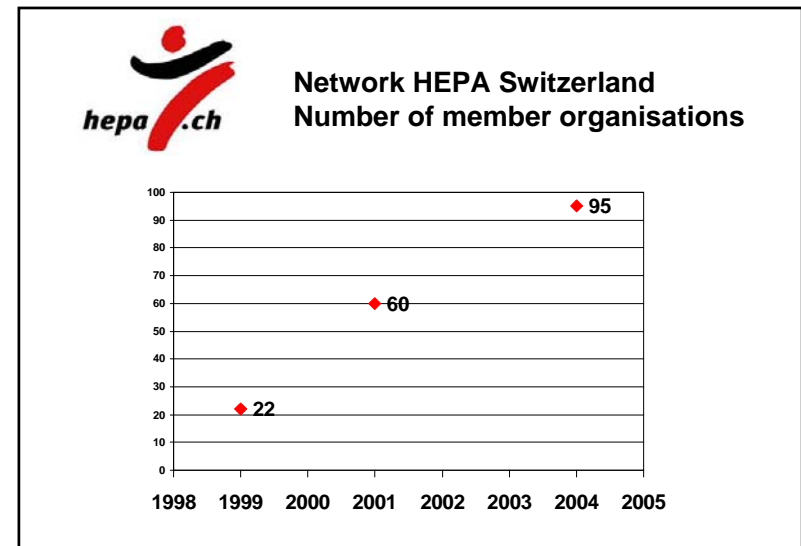
Martin B. Lokale Projektunterstützung Bewegung 2000 bis 2002. Bericht zum Projekt von Gesundheitsförderung Schweiz und des Bundesamts für Sport Magglingen. 2003



Base Document for Switzerland
Health-Enhancing Physical Activity

Why physical activity is healthy
Activity levels in Switzerland
Factors influencing our activity behaviour
Getting people to be more active

www.hepa.ch





HEPA promotion in Switzerland

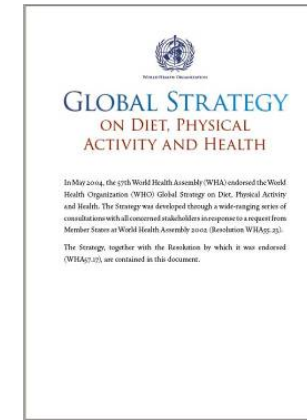
- 1995 Magglingen Symposium sports - PA – health
- 1996 Beginning of Allez Hop programme
- 1996 Beginning of health promotion unit Magglingen
- 1999 Network HEPA Switzerland

- 2000 Concept for a national sport policy
- Strong HEPA component
- Timely development thanks to international support
- Measures in 2002 weak (0.6 Mio Euro/year)
- Content widely taken up

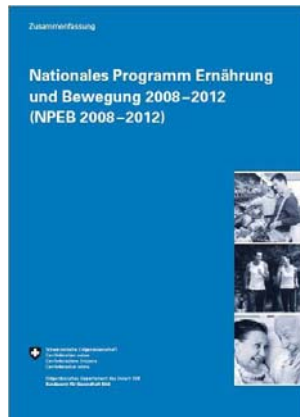
Cavill N, Foster C, Oja P, Martin BW. An evidence-based approach to physical activity promotion and policy development in Europe: contrasting case studies. *Promotion and Education* 2006; 8: 104-111.



Swiss National Programme Diet and Physical Activity 2008



World Health Assembly 2004



Swiss National Programme Diet and Physical Activity 2008

Objective 3:

- Promoting Physical Activity and Sport

But

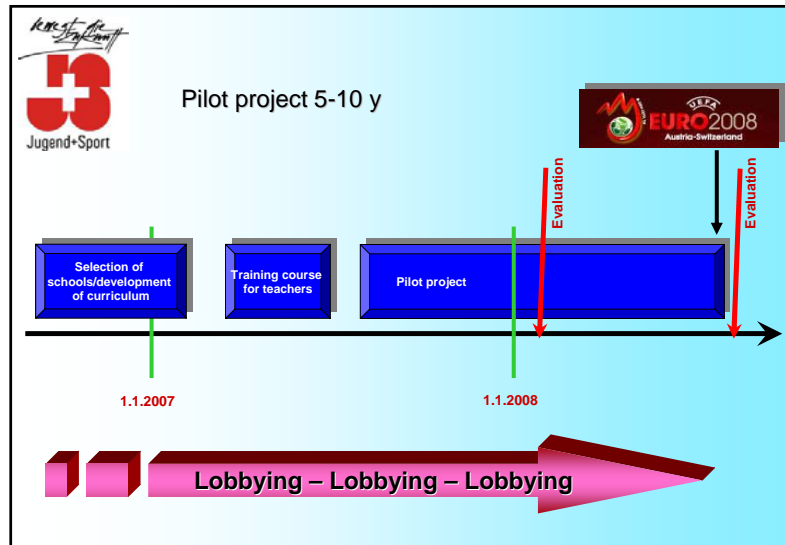
- Currently national funding only for monitoring and coordination, not for implementation...



HEPA promotion in Switzerland

- 1995 Magglingen Symposium sports - PA – health
- 1996 Beginning of Allez Hop programme
- 1996 Beginning of health promotion unit Magglingen
- 1999 Network HEPA Switzerland

- 2000 Concept for a national sport policy
- 2001 Action Plan Environment and Health († 2007)
(Directory plan for non-motorised transport)
- 2008 National programme Diet, Physical Activity and Health
- but Successful activities in related projects, by NGOs, in cantons and communities and
- and First indications for improvements in (leisure time) PA



Cycling in Switzerland as part of SwitzerlandMobility



Jeudi de la Vaudoise du 23 février 2006: « Sport sur Ordonnance »




Activité physique et santé

Un état des lieux

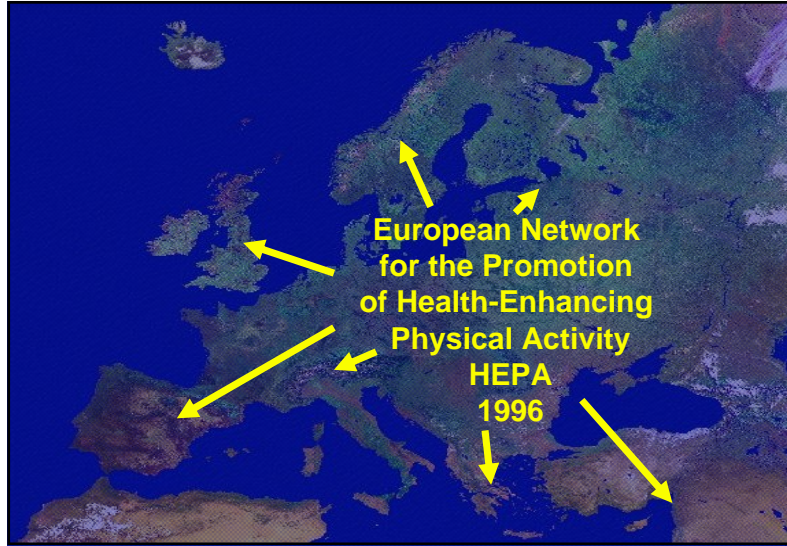
Dr. med. Brian Martin, MPH¹
 Dr. med. Raphaël Bize^{1,2}
 Rebekka Surbeck¹
 Gerda Jimmy, MPH¹
 Dr. Oliver Padlina, MPH¹

¹ Haute école de sport Macolin, Office fédéral du sport
² Institut Universitaire de Médecine Sociale et Préventive de Lausanne



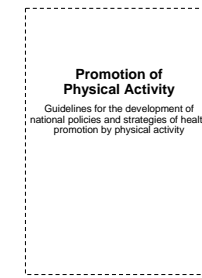
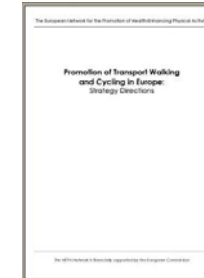
as a model for ?

- Inspiration from changes possible at population level
- Technical assistance, knowledge transfer and adaptation of successful interventions possible
- Advocacy, monitoring, and networking at the national level can be adapted and implemented within a few years
- While established projects such as Youth+Sports are flourishing and acquiring additional resources, new approaches have difficulties in getting politically established and funded at the national level
- Fundamental differences between political systems and cultures or only a question of time?
- For policy changes international institutions (WHO) more important than country examples?



European Network for the Promotion of HEPA I

Important contacts, meetings and conferences, reports



European Network
for the Promotion
of Health-Enhancing
Physical Activity
HEPA
1996-2001 (†)

European Situation in 2004

- Scientific exchange on physical activity and health ↑ ↑
- Development of methods ↑ ↑
- WHO Global Strategy on Diet, Physical Activity and Health
- Global networks like Agita Mundo and GAPA
- No more regular exchange and development platform for national physical activity promotion strategies at the European level

Expert Meeting Magglingen June 2004



Expert Meeting Magglingen June 2004

→ Decision to re-launch HEPA Europe



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**



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**



HEPA Europe – Steering Committee until September 2008

- **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
- **Mari Miettinen**, Ministry of Social Affairs and Health, Finland
- **Pekka Oja**, former network HEPA Europe
- **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
- **Jozica Maucec Zakotnik**, CINDI Slovenia
- *Observer: **Fiona Bull**, GAPA*

HEPA Europe – Steering Committee since September 2008

- **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*

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

HEPA Europe Members September 2008

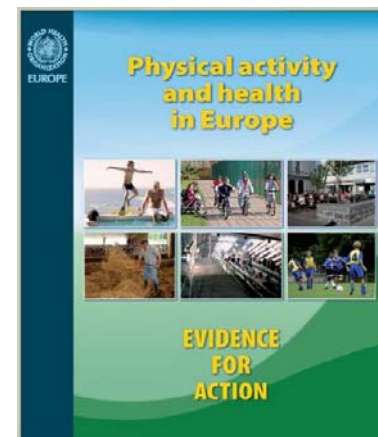
	Country	No. of members		Country	No. of members
1	Austria	2	14	Italy	2
2	Belgium	1	15	Lithuania	2
3	Bosnia and Herzegovina	1	16	The Netherlands	3
4	Bulgaria	1	17	Norway	1
5	Croatia	1	18	Portugal	2
6	Czech Republic	1	19	Slovenia	1
7	Denmark	3	20	Spain	4
8	Finland	10	21	Sweden	3
9	France	3	22	Switzerland	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 Members from Finland

- Ilkka Vuori (individual member)
- Pekka Oja (individual member)
- Age Institute, Finland
- Baltic Region Healthy Cities Association, Finland
- Finnish Centre for Health Promotion, Helsinki, Finland
- Fit for Life Program / LIKES Research Center for Sport and Health Sciences, Jyväskylä, Finland
- Ministry of Social Affairs and Health, Helsinki, Finland
- The National Public Health Institute (KTL), Helsinki, Finland
- Urho Kekkonen (UKK) Institute for Health Promotion Research, Tampere, Finland
- Young Finland Association, Helsinki



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.

Physical activity and health in Europe

EVIDENCE FOR ACTION

Contributors

Finland
 Jari Paavola
 Finnish Physical Education and Sports Academy, Helsinki, Denmark

N.A. Cavill
 Health promotion consultants, Cheshire, United Kingdom

Peggy Edwards
 Ontario Group, Ottawa, Ontario, Canada

Sergio Kahlmeier
 Technical Office, Transport and Health, WHO European Centre for Environment and Health, Rome, WHO Regional Office for Europe

Eva Martin-Delator
 Swiss Federal Office of Sports, Magglingen, Switzerland

Julia Oja
 UK Institute for Health Promotion Research, Tampere, Finland and Finnish Institute for Health Promotion, Tampere

Jean-Michel Oppert
 Pierre and Marie Curie University, Institut National de la Santé et de la Recherche Médicale, Paris, France

Wendy van Raaij
 VU University Medical Centre, Amsterdam, Netherlands

Francesca Racioppi
 Scientific, Technical, Transport and Health, WHO European Centre for Environment and Health, Rome, WHO Regional Office for Europe

Ash Tonnes
 Regional Advisor Health, Cities and Urban Governance, WHO Regional Office for Europe

Mika Tanskanen
 UK Institute for Health Promotion Research, Tampere, Finland

Additional contributors to spotlight descriptions
 Alan Booth
 Technical Office Physical Activity and Health, WHO Regional Office for Europe

John Falckager
 National Institute of Public Health, Stockholm, Sweden

Anders Backlund, Janice
 Community Health Centre, Countywide Integrated Non-communicable Diseases Intervention (CNDI) Programme, Lahti, Finland

Ulf Eriksson
 Östergötland County Council, Stockholm, Sweden

Brian Martin
 Swiss Federal Office of Sports, Magglingen, Switzerland

Mariano Patafi
 Department of Public Health, Geneva, Italy

Julia Parrao, Sabina
 Community Health Centre, Countywide Integrated Non-communicable Diseases Intervention (CNDI) Programme, Lahti, Finland

xi

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

Analyses of selected approaches

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

PROMOTION OF HEALTH-ENHANCING PHYSICAL ACTIVITY IN THE EUROPEAN REGION
 Content analysis of 26 national policy documents

Guidelines for Health-Enhancing Physical Activity Promotion Programmes

COLLABORATION BETWEEN THE HEALTH AND TRANSPORT SECTORS IN PROMOTING PHYSICAL ACTIVITY: EXAMPLES FROM EUROPEAN COUNTRIES

www.euro.who.int/hepa

Working groups on specific topics

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

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? (Transition of Elze R., Surbeck R., Padrina O., Piskuzi F., Gomez 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

www.euro.who.int/hepa

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

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

Activity reports and work programmes in the reports of the annual meetings

www.euro.who.int/hepa

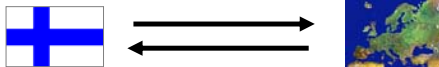
HEPA promotion through other institutions



Challenges in HEPA promotion in

- ! Few countries with clear long-term policy and implementation, including different levels and sectors
- ! No or little attention to underserved populations
- ! In several countries improvements in leisure-time physical activity, but still declines in transport physical activity
- ! Transferability of experiences between cultures and systems
- ! Political process usually not continuous and smooth, rather windows of opportunity for specific steps

→ establishing HEPA as an essential and fully recognised element in the prevention of NCD and in health promotion



- ☞ experience in community-level interventions as the key to behavioural change at the population level
- ☞ experience in inter-sectoral collaboration and in long-term multi-partner programmes
- ☞ collaboration between implementation and research
- ☞ political integration of HEPA promotion
- ☞ experience with international institutions
- ☞ culture of evaluation, quality improvement and innovation

 has given the world

