

European Heart Health Initiative

National Action Plans to Increase Physical Activity among Children and Young People in Europe.

Summary Report and Recommendations

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EUROPEAN HEART HEALTH INITIATIVE

National Action Plans to increase physical activity among children and young people

Summary report and recommendations

Management summary

- This report sets out findings and recommendations from a review of European Heart Health Initiative (EHHI) members' action plans to increase physical activity among children and young people.
- Templates were completed by ten national coordinators responsible for the EHHI activities in their countries.
- There appears to be a great deal of interest in the subject, and a great deal of data is being used to underline the importance of action on physical activity for young people.
- However, only the UK and Ireland are taking a true national approach, and three are preparing to do so. Given the political commitment to this area of public health policy, it is surprising to see that the development of national programmes in the field of Physical Activity is not taken up in more countries.
- Other countries reported a range of actions being undertaken some of them at a national level or with national implications – but they were not comprehensive programmes of action.
- Most plans reported more of a focus on action rather than advocacy. Many of the plans continue to focus awareness-raising campaigns on physical activity rather than national-level advocacy.
- Stated aims and objectives for these programmes tend to be quite general, and often focus on awareness-raising activities. Few programmes mention objectives which are specific and measurable.
- There appears to be strong partnership working in many countries, at least in terms of having links with the main organisations which can influence physical activity. There are few examples of national-level alliances and this remains a key area for development.
- This report should be seen to be a baseline of policy-related activity in each country.
- The actions identified in this report can be fed directly into new initiatives outlined in the new European Heart Network project on children and obesity.
- Members should continue to be encouraged to develop action plans which are research-based, have clear and specific objectives, focus on advocacy and are truly national in their potential impact.

1. Purpose of this report

The purpose of this report is to set out findings and recommendations from a review of European Heart Health Initiative (EHHI) members' action plans to increase physical activity among children and young people. This was a significant part of the work of the EHHI in 2003, which focused amongst others on the implementation of the recommendations set out in the paper 'Children and Young People - the importance of physical activity'(1). In order to help national coordinators with the implementation of these recommendations, EHHI produced a guidelines document outlining theoretical models and principles of as well as approaches to alliance building.

The information in this report is intended to fulfil three main functions:

- To summaries the activities carried out under the initial phases of the EHHI.
- o To provide a baseline against which progress in policy development can be assessed.
- o To feed into the new initiatives of the next EHN project, which will focus on children and obesity.

2. Background

The EHHI is a major programme of the European Heart Network, an alliance of heart foundations and other non-governmental heart health organisations committed to the prevention of cardiovascular diseases (CVD) in Europe.

The mission of the European Heart Network is to play a leading role through networking, collaboration and advocacy in the prevention and reduction of cardiovascular disease (CVD) so that it will no longer be a major cause of premature death and disability throughout Europe.

Action on physical activity was a significant part of the EHHI programme in 2003. A paper on 'Children and Young People - the Importance of Physical Activity'(1) was produced in 2001. This set out the background data and rationale for action on the subject. In 2003, National co-ordinators aimed to produce action plans which set out their plans for increasing action and advocacy on physical activity. These were intended to build on the discussion at earlier EHHI member meetings, and on the a guidance document produced by the BHF Health Promotion Research Group, University of Oxford (2).

3. Methodology

Following the meeting a pro-forma was distributed to national co-ordinators for National co-ordinators tended to complete these forms following completion. consultation - typically with concerned agencies such as sports or education organisations. Action plan templates were completed by the national coordinators responsible for the EHHI activities in ten countries.

 Austria Belgium Denmark Finland italy
 Netherlands
 Sweden

United Kingdom

4. Description of action plans received from each country

4.1. Brief description

When asked to give a brief description about the action plans in the different EU countries, it became clear that only the UK and Finland have a national-level action plan. See Table 1 for details.

Other countries reported a range of actions being undertaken – some of them at a national level or with national implications – but they were not comprehensive programmes of action.

Most of the actions being set out were of 3 to 5 years in duration, and being undertaken by a number of partners. See later for details.

4.2. Aims and objectives

Aims and objectives varied, and tended to be quite general in nature, depending on the country's stage of development on the issue (see Table 1). Examples included:

- To increase the knowledge of young people about the relationship between life-style and health.
- To set up intervention campaigns and to reach a high number of young people with physical activity campaigns.
- To create awareness on the importance of physical activity as a tool to combat the obesity epidemic.
- To set up a global approach: scientific data on obesity and physical activity will be used as a basis to develop the needs and the practical implementations to create an action plan.
- To increase the hours of physical activity in schools; to achieve the goal of 60 minutes of physical activity per day.
- To promote safe environments to support formal and informal physical activity.

Few objectives were specific and measurable. A good example of these types of objectives were from Ireland:

- o To provide information to 100,000 parents / guardians.
- To support 100,000 children in increasing their levels of physical activity at home, at school and through play pack.
- o To further support 2000 teachers already involved with the Irish Heart Foundation physical activity programme in schools Action for Life.

4.3. Action or advocacy?

One of the objectives of this process was to ensure that programmes were comprehensive including both action and advocacy aspects.

Most plans reported more of a focus on action rather than advocacy. These included projects like children's clubs, promotional campaigns, walking projects, competitions, seminars, websites, or projects with a focus on a certain limited period of time (e.g. during heart week). Few plans (names) included research components.

Advocacy-oriented activities were more limited but there were some encouraging approaches being taken in some countries, which included:

- Call for local authorities to create a safer environment for children to be active, e.g. safe routes to school, playgrounds, etc.
- Use of the media to influence decision makers.
- Influencing political decision makers (e.g. convincing politicians to focus more on physical activity)
- Target decision makers and other authorities to ensure that they are well informed about the key actors and activities

4.4. Target groups

Targeting also varied according to the stage of development. Some countries specified specific age groups (such as Finland where 0-12 years is split into four groups) while others were more general:

- Boys and girls in primary and secondary schools
- Parents
- Teachers (both teachers in physical education and other teachers)
- Press
- General public

4.5. Settings

The main settings mentioned were:

- Schools
- The local community
- Families
- Television and radio

4.6. Background data

Most countries appeared to make good use of data to justify the case for physical activity, including data from government reports; from national health councils, food administrations, schools, general surveys, and the EHHI reports.

All data seem to point out that physical inactivity and unhealthy lifestyles are increasing among young children. Girls, especially teenage girls are less active than boys, and there is a great concern about levels of obesity.

All physical activity plans recommend between 30 to 60 minutes of physical activity per day for young people.

4.7. Priority actions

Priority actions tended to fall into a number of categories:

Information campaigns towards schools and school teachers

- o influence schools to stimulate healthy nutrition and physical activity.
- encourage children's institutions to follow the advice from the Ministry of Health to let children be as physically active as possible.
- o encourage staff to talk to children about healthy eating and physical activity.
- encourage school directors to develop schools as physical activity promoting centres.
- o information campaigns towards young people.
- o encourage children and young people to be physically active for 1 hour per day.

Information campaigns towards parents

- encourage parents to support their children to take part in a series of physical activities.
- o encourage parents to become actively involved in physical activity with their children.

Advocacy campaigns towards local and national politicians

- in order to obtain e.g. safer roads to school, safer schoolyards more suitable for physical activity.
- in order to ask the community, as owner of the school to arrange to school and the area around it for physical activity.

Research and evaluation

- o on why young people 'engage in obesity induced behaviour'.
- o environmental factors influencing levels of activity in 15-17 year olds.

4.8. Physical activity alliances and partners

One of the key recommendations of the EHHI approach is to set up a national-level alliance to help to steer the development of national advocacy programmes. However few of these have been set up specifically to guide action on physical activity for young people. Examples include:

- o Ireland: most of the activities have been set up with partners involved in the National Heart Alliance (in Ireland).
- SOFA was set up in Norway. This is a physical activity alliance focusing on minimum one hour of PA for every child during the school day (including special training for teachers).
- Netherlands: activities are set up with a physical activity alliance and with the Knowledge centre on overweight.
- In Finland, the role of the Young Finland Association is crucial in encouraging children and young people to participate in physical activity. Young Finland coordinates both school and community activities in several projects.
- o Italy has built on the networks set up under previous EHHI programmes to further develop these activities.

Partners involved in these actions include:

- National or government bodies (ministries responsible for public health, education).
- Health organisations such as e.g. cancer organisations, diabetes organisations, etc. (Norway, Finland, Ireland).
- Sports councils, sports clubs.
- Nutrition centres and organisations involved in the fight against obesity (Belgium, Netherlands).
- Alliance members (amongst others Italy, Ireland, Finland, Norway).
- Voluntary organisations (Finland).
- Universities and academic centres (Belgium, Netherlands).
- Insurance companies (Denmark).
- Schools, including parents organisations (Denmark).

4.9. Evaluation methods

Few countries had set out detailed evaluation plans. Most were output measures such as requests for materials prompted by a media campaign, or process evaluation measures. This is a key area for development at both national and EU level.

5. Analysis of the stage of development of action plans.

In order to assess the stage of development of action on physical activity in each country, action plans were grouped into categories, according to stage of development of action in each member state. The rough categories used for this are based around a commonly-used model of behaviour change which combines action and intention into four stages:

Action

Countries in this stage are active in the field of promotion of physical activity among young people, at a national level. They have set out an action plan which has been agreed by key agencies, and sets out clear actions for each partner, at national levels. The plan may have been published as part of government policy documents.

Preparation

Countries in this stage are beginning to develop action on young people and physical activity, and have taken some form of action to begin the process. This may be through convening an alliance, preparing background papers, or engaging key stakeholders. However, they have generally not yet set out a comprehensive plan of national action.

Contemplation

Countries in this stage are thinking about action on young people and physical activity. They may be taking part in local-level projects or programmes to promote physical activity, but they have not yet taken any specific action to begin the process of bringing this together into a national action plan.

Pre-contemplation

Countries in this stage have not yet begun to consider the issue, or have decided not to prepare action plans.

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Table 1. Summary of each country action plan received, and categorisation into 'stage of development'.

Stage	Country	Description	Comment & suggested Action
Action	Finland	A National strategy for physical activity exists, which has a specific work group on children and young people's physical activity and Family physical activity. The action plan includes action-oriented activities as well as a programme of advocacy.	One of the strongest current approaches on physical activity for young people being taken by any EU country.
	United Kingdom	Physical activity strategies exist in all of the countries of the UK, with a component focusing on young people. In addition, the UK-wide National Heart Forum has led the development of the Young@Heart programme. This has helped develop a national-level approach to promoting action on young people and physical activity. This is primarily focused on advocacy aimed at central government in areas such as PE, health sport and education.	As this action plan includes all action on CVD, care needs to be taken to ensure that the focus on physical activity is not lost.
Preparation	Ireland	National position paper produced which was used for advocacy. There is no current action plan but they have taken steps to begin to prepare one in 2004.	Ensure that action remains focused on young people and physical activity rather than broad heart disease issues.
	Italy	The CVD prevention alliance in Italy has agreed that from Jan 2004 to Dec 2006 they will focus on physical activity and young people. They are currently at the stage of inviting members of the alliance to put forward ideas and projects for inclusion in the action plan.	As stated, they might give more attention to external communication and influencing policymakers and stakeholders.
	Norway	A national-level physical activity alliance has been set up (SOFA) which includes all the key players. Their focus to date has been action on PE, with advocacy campaigns including promotional activities with politicians.	The alliance appears to be in an excellent position to begin work which would have a truly national-level impact.

Stage	Country	Description	Comment & suggested Action
Contemplation	Austria	Focus on the co-ordination of prevention-related campaigns, and developing special programmes for young women aged 12-18 in conjunction with schools etc. Working in conjunction with wide range of partners.	More detail would be helpful, especially on the development of an action plan, and focus on advocacy.
	Belgium	Does not have an action plan but have begun thinking about developing one. They have begun to identify key stakeholders and have convened national-level meetings.	The right initial partners have been identified and this initial action can form the basis for the future.
	Denmark	No national action plan. Activities focused around a children's club and school fitness day. These aim to create awareness about physical activity (and healthy eating) among young people. They aim to reach 84% of all Danish schools, so will have a national impact but this does not constitute a national action plan.	These ambitious promotional and awareness-raising activities could be built upon into a truly national action plan. More emphasis should be placed on advocacy.
	Netherlands	State that they want to prepare an action plan, as there are few prevention activities being carried out for young people in the Netherlands. They have begun thinking about preparing a national-level plan but have not taken any specific action to date.	First step appears to be setting up an alliance to develop an action plan.
Pre- contemplation	Sweden	No specific action plan. Experts in Sweden believe that more research needs to be done and it is 'impossible to set up any guidelines or action plans at the moment.' A campaign is run every year on Valentine's day to target 10-year old children.	There should be urgent advocacy carried out to persuade experts in Sweden that lack of definitive research does not justify complacency. The EHHI document 'Children and Young People – the importance of physical activity'(1) should be used as the basis for this advocacy.
	France	No information forthcoming.	Encourage these countries to make a start in the process.
	Spain Germany Portugal		

6. Conclusions

There appears to be a great deal of interest in the subject, and a great deal of data is being used to underline the importance of action on physical activity for young people. However, from a public health perspective, it is disappointing that few countries appear to be taking a comprehensive national approach. Only two countries are taking a true national approach, and two are preparing to do so. This is surprising given the political commitment to this area of public health policy.

Many of the plans continue to focus awareness-raising campaigns on physical activity rather than national-level advocacy. While awareness raising initiatives have a place, and can provide an important context for action, their population-level impact is likely to be limited. Some countries have demonstrated that they are taking a concerted national approach to changing policy on physical activity but these are rare.

Stated aims and objectives for these programmes tend to be quite general, and often focus on awareness-raising activities. Few use objectives which are specific and measurable.

There appears to be strong partnership working in many countries, at least in terms of having links with the main organisations which can influence physical activity. However, there are few examples of national-level alliances. This is a key area for development.

At least one country has identified the lack of strong research in this area on levels of recommended physical activity for young people. This is an urgent area for development.

7. Recommendations

This report should be seen to be a baseline of policy-related activity in each country as we come to the end of this phase of EHHI. It is recommended that this policy audit is carried out again in 2-4 years time to assess progress.

The actions identified in this report should be fed directly into the next phase of the European Heart Health Initiative. This will focus on young people and obesity, and it is critical that physical activity has a central focus in this programme (alongside healthy eating).

In particular, members should continue to be encouraged to develop action plans which are research-based, have clear and specific objectives, focus on advocacy and are truly national in their potential impact. This further capacity building of EHHI members countries must reflect the stage of development in each country. Priorities should include training on effective advocacy methods, and evaluation.

EHHI members should be encouraged to make more use of the guidance document 'Guidelines for building national alliances for the prevention of cardiovascular diseases (2).' This contains valuable advice on setting up and running alliances which will be of great value in establishing national-level advocacy-focused programmes.

Similarly, EHHI members should be encouraged to make more use of the document 'Children and Young People- the Importance of Physical Activity'(1). This contains valuable information and data to 'make the case' for action on physical activity programmes for young people.

Specific recommendations for each country are given in Table 1.

References

- (1) EHN (2001) Children and Young People, the importance of Physical activity, European Heart Network, Brussels
- (2) EHN (2003) Guidelines for building national alliances for the prevention of cardiovascular diseases. European Heart Network, Brussels



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