ITALY

PHYSICAL ACTIVITY FACTSHEET

ITALY

PREVALENCE (%) OF ADULTS REACHING THE RECOMMENDED PHYSICAL ACTIVITY LEVELS, 2010–2013

<table>
<thead>
<tr>
<th>%</th>
<th>ADULTS (30–60 YEARS)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Males</td>
<td>63</td>
</tr>
<tr>
<td>Females</td>
<td>37</td>
</tr>
<tr>
<td>Both sexes</td>
<td>36</td>
</tr>
</tbody>
</table>

Total population: 60,782,668
Median age: 44.7 years
Life expectancy at birth males: 80.3 years
Life expectancy at birth females: 85.2 years
GDP per capita: €25,600
GDP spent on health: 9.1% (1)

This is one of the 28 European Union Member States factsheets on health-enhancing physical activity, developed as a part of a joint initiative between the European Commission (EC) and WHO Regional Office for Europe in the context of the implementation of the Recommendation of the Council of the European Union on promoting health-enhancing physical activity across sectors and the European Noncommunicable Diseases Action Plan 2012–2016.

The Regional Office is grateful to the European Commission (EC) for its financial support for the preparation of this country profile.
Monitoring and surveillance

Physical activity in adults

Italy currently has no national health monitoring and surveillance system for physical activity. The country has adopted national recommendations, using the cut-off points for adults reaching the recommended physical activity levels as defined by the United States Centers for Disease Control and Prevention (CDC) and the American College of Sports Medicine (ACSM). The national recommendations address youth (children and adolescents) and older adults.

According to national data for the years 2010–2013 from the survey by the Italian Ministry of Health’s Behavioural Risk Factor Surveillance System (Progressi delle Aziende Sanitarie per la Salute in Italia (PASSI)) – conducted by the National Centre for Epidemiology, Surveillance, and Health Promotion (3) – 36% of Italian adults (aged 30–60 years) and 24% of older adults (aged 60+ years) meet the recommended physical activity levels (see Table 1).

<table>
<thead>
<tr>
<th>%</th>
<th>ADULTS (30–60 YEARS)</th>
<th>OLDER ADULTS (60+ YEARS)</th>
</tr>
</thead>
<tbody>
<tr>
<td>MALES</td>
<td>63</td>
<td>41</td>
</tr>
<tr>
<td>FEMALES</td>
<td>37</td>
<td>59</td>
</tr>
<tr>
<td>BOTH SEXES</td>
<td>36</td>
<td>24</td>
</tr>
</tbody>
</table>

The intercountry comparable physical activity estimates for 2010 for Italy from the WHO Global Health Observatory (GHO) show that 64.1% of adults (aged 18+ years) meet the WHO recommended physical activity levels, with males (70.0%) being more active than females (58.7%) (4).

Physical activity in children and adolescents

Italy uses the international cut-off point for children and adolescents reaching the recommended physical activity levels, as endorsed in WHO’s Global recommendations on physical activity for health (2010) (5). The national data from 2010–2013, collating together the data for children and adolescents, show that 43% of children and adolescents (6–17 years) meet the WHO recommended physical activity levels (see Table 2), with more boys (46%) being physically active than girls (44%).

<table>
<thead>
<tr>
<th>%</th>
<th>CHILDREN AND ADOLESCENTS (6–17 YEARS)</th>
</tr>
</thead>
<tbody>
<tr>
<td>MALES</td>
<td>46</td>
</tr>
<tr>
<td>FEMALES</td>
<td>44</td>
</tr>
<tr>
<td>BOTH SEXES</td>
<td>43</td>
</tr>
</tbody>
</table>

Source: Ministry of Health PASSI, 2013 (3).

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The WHO GHO 2010 estimates for Italian adolescents (defined as aged 11–17 years in relation to WHO data) differ widely from the national reported results, with only 8.2% meeting the WHO recommended physical activity levels. However, the general trend of more boys being physically active than girls (9.0% and 7.4%, respectively) remains the same across the two sets of data.

Types of physical activity and modes of transport

Box 1 provides details of a health-enhancing physical activity (HEPA) promotion programme in Italy.

Box 1. After-school HEPA promotion programme
The Class Sports (Sport di Classe) programme, established in 2013, is a joint venture between the Ministry of Education, Universities and Research, the Italian Olympic Committee (CONI) and the Presidency of the Council of Ministers, to promote physical education from primary school onwards (6). The aims of the intervention are to: motivate young children to be more physically active; ensure 2 hours per week of physical education (PE); review the governance model for PE in schools to ensure greater synergy and coordination between the project coordinators; and ensure that all primary schools in Italy are engaged in the programme on some level.

Policy response

Major policy documents adopted by government bodies

The National Sport Educational Centre (CSEN) has adopted a Sports for All policy entitled “integrated sports” (Lo Sport Integrato), addressing both disabled and able-bodied individuals and aiming to create a cohesive group that, through sports, develops and promotes the culture of integration, solidarity and acceptance of diversity at all levels. The programme aims to affirm the value of human diversity as a source of richness and not as a handicap (7). The CONI School of Sport has adopted the policy “Exercise is Medicine” which addresses preventive measures for health and wellness among the general public (8). In addition, the Ministry of Education, Universities and Research and the CONI have adopted a joint policy to promote sports at school (6).

Guidelines and goals

Italy has national recommendations on physical activity and health for young people (2) and older adults, which are based on the recommendations of the CDC and the ACSM. These entail ensuring that adults carry out at least 30 minutes of moderate-intensity physical activity on most (if not all) days and that children and adolescents aged 5–17 years engage in at least 60 minutes of moderate- to vigorous-intensity physical activity (MVPA) daily.
Table 3 presents a summary of the key measures in place to monitor and address physical activity in Italy.

**Table 3. Summary of key physical activity initiatives in Italy**

<table>
<thead>
<tr>
<th>HEALTH</th>
<th>SPORTS</th>
<th>EDUCATION</th>
<th>TRANSPORT</th>
<th>MONITORING</th>
<th>GUIDELINES</th>
</tr>
</thead>
<tbody>
<tr>
<td>Counselling on physical activity as part of primary health care services</td>
<td>Existence of a national Sports for All policy(ies)</td>
<td>Mandatory physical activity in primary and secondary schools</td>
<td>National or subnational schemes promoting active travel to school and/or workplace</td>
<td>Physical activity included in the national health monitoring system or separate routine survey</td>
<td>Existence of national recommendation on physical activity</td>
</tr>
<tr>
<td>NO</td>
<td>YES</td>
<td>YES</td>
<td>YES</td>
<td>NO</td>
<td>YES</td>
</tr>
</tbody>
</table>

**Additional information on action in key areas**

**Supporting marginalized groups**

“Superabile” is a scheme organized jointly by the Italian Paralympic Committee (Comitato Paralimpico (CIP)) and the National Institute for Insurance against Accidents at Work (Istituto Nazionale per L’Assicurazione Contro Gli Infortuni Sul Lavoro (INAIL)). The scheme uses sports as an integral component of the rehabilitation and reintegration programme for disabled workers. It expresses a strong commitment to supporting the development of sports and the physical activity of people with disabilities at work, and generally tries to expand the physical activity culture for people with disabilities (9).

**Schools**

Two hours of PE per week are compulsory in Italian primary and secondary schools. Active transport to school is encouraged, using the PIEDIBUS scheme. This “walking bus” allows students to travel to school on foot, accompanied by adult volunteers, in an organized fashion. It primarily serves to replace private cars as a means of travelling to school, but it can also replace public transport and school buses. The PIEDIBUS has a set route, regular “stops”, conductors (just like on a standard bus), a route leader and other escorts, and the way is marked by warning signs for motorized vehicles. It is designed primarily for use by schoolchildren who are too young to walk to school independently. The scheme is run by the municipalities, local health authorities, schools and parents’ associations (usually in cooperation) (10).
Successful approaches

The Wellness Valley project
The Wellness Valley project in the Romagna region of Italy is an initiative led by the Wellness Foundation, seeking to involve all stakeholders in building on the environmental, human, historical and artistic strengths of the region, in order to:

- improve the quality of life of residents; and
- increase the attractiveness of the area, both for tourists and for qualified and creative workers looking for welcoming and stimulating places to live and work.

Every year, the Wellness Foundation organizes a workshop to take stock of the results from the initiatives and activities undertaken by the various stakeholders and to set new goals for the future. The Romagna region wants to become a "laboratory of good practice and excellence", including in the field of HEPA promotion, with the intention of further development and transfer to other locations in the future. At the heart of the initiative is the Technogym Village, providing a physical point of reference for the promotion of the “wellness lifestyle” (11).
References


