Expert Group on Health-enhancing physical activity

Fifth meeting (12 April 2016)
Report by the European Commission
1. PARTICIPANTS

- Experts from 25 Member States: Austria, Belgium (French and Dutch-speaking Community), Bulgaria, Croatia, Cyprus, Czech Republic, Estonia, Finland, France, Germany, Hungary, Italy, Latvia, Lithuania, Luxemburg, Malta, The Netherlands, Poland, Portugal, Romania, Slovak Republic, Spain, Sweden, UK
- European Commission: DG EAC, DG SANTE, JRC
- Observers: ECF, ENAS, EUPEA, EuropeActive, HEPA Europe, UPKL, WHO Europe

2. INTRODUCTION

As part of their introductory words, the chairman and the European Commission warmly thanked the Cyprus Sport Organization for hosting the meeting, and recalled that the meeting was organised back-to-back with the fourth meeting of the network of Physical Activity Focal Points, who had been invited to stay for the Expert Group meeting, to foster opportunities for networking.

The group adopted the agenda without comments.

The Commission recalled that all presentations and relevant meeting documents would be made available in the collaborative platform set up for the XG HEPA: https://circabc.europa.eu/w/browse/5f7b94ab-3391-4309-a1cf-5734cca4efdf

3. INFORMATION POINT FROM THE EUROPEAN COMMISSION

Several services from the European Commission were invited to give an update on recent relevant developments at EU level, with the view to promote cross-sector and cross-policy approaches in promoting physical activity.

DG EAC informed about recent events that it had organised. It noted that internal works regarding the European Commission's evaluation of the implementation of the 2013 Council Recommendation on HEPA were ongoing. It also informed that the High Level Group on Grassroots Sport set up by Commissioner Navracsics was addressing health benefits of grassroots sport and that final recommendations from that Group would be released mid-2016. The information point also included an update on funding of projects in the field of HEPA through the Erasmus+ programme (which would include, as from 2016, small projects with simplified administrative requirements) and through an upcoming call for projects on Promoting HEPA policy measures and actions for refugees, linked to a recently adopted Pilot Project on HEPA from the European Parliament. DG EAC informed about the data protection reform, about the implications for national anti-doping legislation, and informed about a conference on the topic organised by the Dutch Presidency on 15 June in Amsterdam. Finally, a brief overview of the concept for the European Week of Sport 2016 was presented.

2 A pilot project is an initiative of an experimental nature designed to test the feasibility and usefulness of action. It is meant to try different approaches, develop evidence-based strategies to address a problem, identify good practices, and provide policy guidance for the benefit of possible future initiatives, in this case, in the area of HEPA.
DG SANTE gave an update on their policy on physical activity, recalling that it was based on the EU Strategy on Nutrition, Overweight and Obesity-related Health Issues (2007). He informed that Member States were cooperating in the framework of the High Level Group on Nutrition and Physical Activity. The EU Platform for Action on Diet, Physical Activity and Health was a forum for European-level organisations, ranging from the food industry, health NGOs, consumer organisations, research organisations and health professionals to cooperate and take voluntary commitments, including related to physical activity (38 registered actions on physical activity, 14 ongoing). An independent external evaluation in 2012 validated its continuation while suggesting an increased focus on children, physical activity and low socio-economic groups. The adoption of the Action Plan on Childhood Obesity in 2014 by the High Level Group - a way to contribute to the implementation of the Strategy – consists of voluntary actions in several areas, including encouraging physical activity, and sets up a monitoring framework. DG SANTE finally informed about the Joint Action on Nutrition and Physical Activity ('JANPA'), an action involving 25 Member States for 2.5 years, to support the implementation of the Action Plan on Childhood Obesity.

DG EAC informed that efforts to avoid overlaps between the monitoring frameworks under the Council Recommendation on HEPA and under the Action Plan on Childhood Obesity had been undertaken and led to the agreement that the source for 2 indicators related to physical activity would be the Council Recommendation on HEPA. Joint meetings between the network of Physical Activity Focal Points (DG EAC) and the High Level Group on Nutrition and Physical Activity (DG SANTE) would be envisaged.

The Joint Research Centre of the European Commission, Public Health Policy Support Unit, made a presentation about its activities, i.e. providing EU policies with independent, evidence-based scientific and technical support throughout the whole policy cycle. He explained that the policy areas covered were including Public Health, with notably behavioural studies on health and taxation. Their focus was to use an economic approach and experimental tools (with monetary incentives) in order to measure and quantify human behaviour or/and to achieve behavioural change. They were covering physical activity, with initiatives such as laboratory experiments, field experiments or surveys.

A research project aiming at creating Network Interventions for Increasing Physical Activity in Preadolescents was presented (PEER ACTIVE project), as a contribution to tackling the obesity crisis. The project aimed at testing different interventions and at understanding gender differences. Physical activity measurement had been measured with accelerometers for 7 consecutive weeks. Results showed that unlike individual interventions, network interventions had a significant effect on the Moderate to Vigorous Physical Activity (MVPA) of the preadolescents participating in the study. In addition, males’ MVPA was maximized under a team rewards scheme while females’ under a direct reciprocity scheme (male preadolescents were more interested in playing team games and forming larger networks while females had a preference in small intimate groups usually including two or three reciprocated friendships).

A project proposal to be launched by the JRC was also presented (Bike Prints), aiming at using social based incentives to attract more people in cycling and to make existing bikers to cycle more (change routine).

3

4. COORDINATION OF THE IMPLEMENTATION OF THE COUNCIL RECOMMENDATION ON HEPA (DELIVERABLE 2)

4.1. APPROACH AND MS CONTRIBUTIONS

HU, as lead expert in charge of deliverable 2, recalled that the XG HEPA was mandated to coordinate the implementation of the Recommendation from the Council on promoting HEPA across sectors. The coordination role of the XG entailed compiling and sharing national good practices and lessons learned. Good practices would serve as good examples which could inspire and inform the elaboration of national cross-sector HEPA policies, implementation plans and actions. HU summarised what had been done since the fourth meeting. She informed that 22 Member States and 4 observer organisations had provided good practices, and that a section summarizing the implementation of the Council Recommendation had been added.

The XG supported the proposed approach, and the format and structure of Deliverable 2. The group asked for the section on the EU overview to be more elaborated, and to include in particular more information on the context and on the outcome of the monitoring framework.

The lead expert informed that she would send a revised version of Deliverable 2 addressing these comments, which the group would be invited to validate, offering also a last opportunity for the Member States that did not provide a good practice to contribute. The objective was to complete the work on Deliverable 2 by end of May.

4.2. PRESENTATION OF GOOD PRACTICES AT NATIONAL LEVEL

This fifth meeting of the XG HEPA gave the opportunity to three experts and one observer organisation to inform about initiatives in the field of physical activity promotion.

ES presented the A+D Action Plan, an action plan aiming to guarantee the global access of the Spanish population to physical exercise and sport, in order to promote its health benefits and to fight the high levels of sedentary lifestyle and obesity. Designed as a ten years’ plan, it started its implementation in 2010 joining both the WHO recommendations and the EU Physical Activity Guidelines. The A+D Action Plan was including an initiative on prescription of physical activity by general practitioners, with a view to reduce the amount of medicine prescription. Concretely a state-funded online course on physical activity prescription for health workers had been put in place, and had already been followed by about 3% of the total of family doctors in Spain.

ET presented the campaign "Estonia is moving", as part of the national Sport For All development plan. He presented the three specific goals of this nationwide campaign, i.e. to increase the number of Estonians who are physically active, to inform the population of the options open to them in terms of participating in sport and physical activity, and to raise awareness within the population about the benefits of a physically active lifestyle. He informed that the campaign was including many different initiatives, such as mass participation events, activation of sporting programmes within schools, media coverage and publicity. This was achieved through coordination with a range of diverse partners from across society. Finally, he noted that a survey conducted in 2014 showed that people were most likely to start exercising when they had the support from their families and friends.

FR made a presentation about the T’CAPS programme, aiming at promoting physical activity
among young people in Guadeloupe, with a view to address overweight and obesity. He explained that cardiovascular health, overweight and obesity in Guadeloupe were worse than the average in France, because of the island context (e.g. biking, walking and active mobilities are less developed). Notably, physical activity levels were dropping between primary schools and secondary schools. The programme had been launched in 2012 and was being extended to 12 schools in 2016.

The European Cyclist’s Federation (ECF) gave an update from the cycling sector, starting with a presentation of a study of 2013 on the economic benefits of cycling in the EU. The cycling economy was estimated at 205 billion € per year (internal and external benefits of cycling together), where health benefits had the largest share (114-121 billion €). He informed about a recent study assessing the use of the World Health Organization’s Health Economic Assessment Tool (HEAT) for cycling across Europe, and giving recommendations on how to increase its use. He informed also about a recent study on jobs and job creation in the EU Cycling Economy (contribution of cycling sector to green growth in Europe), and an accompanying video. Results showed that only doubling the cycling modal share would allow reaching 1 million jobs in the European cycling sector. In addition, it showed that a number of jobs were not requiring high levels of qualification, hence contributing to the objectives of an inclusive Europe. It also showed that there was a great innovation potential in the bike sector.

Finally, ECF informed about the “Declaration of Luxembourg” on Cycling as a climate friendly Transport Mode. It was the result of the first ever informal meeting of EU transport ministers dedicated to cycling (7 October 2015). He noted that the Declaration was including acknowledgment of the benefits of cycling (innovation, environment, health), calls for internal and external benefits of cycling, and action plans for different levels of governance. Notably the Declaration was setting up a network of national focal point for cycling. EU, Member States, local and regional level had to start the implementation of the Declaration.

5. **National Sports Medicine and Sports Research Center – Cyprus Sports Organization**

The Cyprus Sports Organization made a presentation of its National Sports Medicine and Sports Research Center and informed that the Center was aiming at scientific support and monitoring of high performance athletes and counselling of athletes, coaches and medical doctors. Its function was also contributing among other things to identify talents in sports, evaluating their functional capacity and biological characteristics, making an effort to maximize their performance, while dealing with the prevention of overtraining, sports injuries, sports nutrition and psychomotor examination.

Several studies related to physical fitness and health related factors, which the Center carried out as part as its activities, were mentioned. An unpublished study carried out a few years ago to examine and evaluate practically the physical fitness and health related factors of untrained adult population of Cyprus revealed that more than 50% of male population and more than 60% of female population were physically inactive during their leisure time. Even

---

4 https://ecf.com/groups/economic-benefits-cycling-eu-27
6 https://ecf.com/groups/cycling-works-jobs-and-job-creation-cycling-economy
young adults were having many predisposition factors to develop cardiovascular problems. Interestingly, the most important barrier to exercise regularly was considered to be the lack of time, and expected benefits of physical activity were different depending on the age.

Suggested measures to increase participation in exercise included the construction of more indoor and outdoor sport facilities, and reducing expenses to access sport facilities. Another study conducted in 2010-2011 in cooperation with the Physical Education Inspectors of the Cyprus Ministry of Education and Culture, aimed at measuring and evaluating the fitness levels of more than 25000 high school students aged 13–15 year. Even if results indicated that boys had better physical fitness levels than girls, both boys and girls did not reach satisfactory levels. A study carried out in 2012-2014 on physical fitness levels of police officers, which led to the revision of hiring criteria, was also briefly presented.

Finally, the introduction of an Exercise Biology Book in the third grade of junior high school, to enrich pure biology matter with effects on the body (e.g. of exercising), was presented as a success.

6. PREPARATION OF EXPERT GROUP RECOMMENDATIONS TO ENCOURAGE PHYSICAL EDUCATION IN SCHOOLS, INCLUDING MOTOR SKILLS IN EARLY CHILDHOOD, AND TO CREATE VALUABLE INTERACTIONS WITH THE SPORT SECTOR, LOCAL AUTHORITIES AND THE PRIVATE SECTOR (Deliverable 1)

LU briefly recalled that Council conclusions on the promotion of motor skills, physical and sport activities for children had been adopted in December 2015 under the LU Presidency of the Council of the EU. Several recommendations from the Deliverable 1 of the XG HEPA had been included. The Council Conclusions were addressing calls to the Member States, and invitations to the European Commission and to the sport movement.

In a tour de table, Member States informed about initiatives taken as a response to these Council Conclusions. The recent adoption of the Conclusions did not allow for much evolutions and for new initiatives or actions to be reported at this stage. Several experts noted that calls to Member States in the Council Conclusions were already under implementation in their country before the Council Conclusions, which would then rather be used to evaluate ongoing programmes. Several Member States informed that Deliverable 1 would be translated into their national language and partly incorporated in relevant instruments at national level. Some Member States considered the Council Conclusions as a good opportunity to deepen the cooperation with the education sector at national level. The support of the Erasmus+ in implementing programmes was seen as very useful.

In line with the invitations in the Council Conclusions, the European Commission informed that it had the intention to launch a project aiming at comparing prevalence of physical activity as generated by different questionnaires, across each other and with actual accelerometer data. Member States would thus be able to calibrate existing prevalence that stem from questionnaire data. It would also be possible to convert prevalence rates that stem from one instrument (e.g. IPAQ) to prevalence estimates from another instrument (e.g. EHIS). The idea of the project had been discussed with the XG HEPA at the fourth meeting and was very much welcomed. The project would involve the World Health Organization and expert international researchers. The European Commission informed that it had received the expression of interest from 11 countries to participate in such project, and that a meeting

---

would be organised in June with these countries to discuss further about expected involvement, implementation details and timetable.

The Council Conclusions invited in particular the European Commission to develop physical activity guidelines for children in ECEC settings, schools and sport clubs, in collaboration with scientific experts including the WHO, targeting in particular policy makers, local authorities, parents, family and wider community. UK informed that it had already defined such guidelines, in line with recommendations from the World Health Organization.

Observers informed about relevant initiatives, including UPKL and their European Social Sport Coach programme, and EuropeActive and the objective of the fitness sector to have 80 million members in health and fitness centres by 2025.


The European Commission recalled that, in the Resolution on a European Union Work Plan for Sport (2014-2017), the Council and the representatives of the governments of the Member States invited the Commission to “adopt by November 2016 and on the basis of voluntary contributions from Member States, a report on the implementation and relevance of the Work Plan” as a basis for the preparation of a possible EU Work Plan during the first half of 2017. It informed that consultations of relevant stakeholders had started at the recent EU Sport Forum in March in The Hague, with a dedicated discussion panel, and were currently going on. Member States and sport organisations would receive soon a detailed questionnaire in order to collect their views in a structured way on different aspects of the EU Work Plan for Sport and suggestions for the future.

Besides these formal questionnaires, this session of the XG HEPA allowed experts and observers to share already their own thoughts and views. The importance to keep HEPA in future priorities was voiced explicitly and strongly by the group.

The too high time pressure for the first deliverable of the XG HEPA was raised. Exchanges of good practices and networking taking place in the XG HEPA were considered very useful, as well as contributions from observers during the works (an even more active participation was suggested). Deepening these exchanges of good practices on very specific aspects of HEPA was suggested. Cooperation with health, education and sport systems was considered an important dimension to be further strengthened. Cooperation across Member States on measurement of physical activity prevalence was also considered useful to deepen, in order to ensure comparability of data across Europe. Finally, a suggestion to rename the EU Work Plan for Sport into *EU Work Plan for Sport and Physical Activity* was made.

8. **Conclusion of the Next Meeting**

It was agreed that a sixth and last meeting of the XG HEPA under the EU Work Plan 2014-2017 could be organised in January-February 2017 if necessary, with a view to take stock of recent developments and align views in view of a possible new EU Work Plan for Sport.

Dr. Clea Hadjistefanou Papaellina, Chairwoman of the Cyprus Sport Organization, addressed the group and expressed the interest of Cyprus in increasing cooperation with other Member States, the World Health Organization and the European Commission, with the view to address the worrying level of physical inactivity in Cyprus.