

# **Government Resolution on policies to develop health-enhancing physical activity in Finland**

18 April 2002

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The Government Programme aims to promote, in particular, health-enhancing physical activity among the adult population and physical activity that supports the healthy growth of children and young people. In the Health 2015 public health programme approved by the Government physical activity is seen as an important means of promoting the population's health. The Ministry of Social Affairs and Health appointed at the end of 2000 a Committee on Development of Health-Enhancing Physical Activity including participants from the Ministry of Social Affairs and Health and the Ministry of Education and their sectors of administration, as well as from other ministries and NGOs in the field. The Committee submitted its report (Committee Report 2001:12) in November 2001.

There is indisputable research-based evidence of favourable health effects of physical activity. By increasing physical activity it is possible to improve considerably the functional capacity, health and well-being of the population as well as to save on public expenditure.

In the recent 25 years pursuing physical activity as a hobby has increased among the Finnish adult population, but at the same time everyday physical activity, such as journeys between home and work and other active living, has decreased. It is noteworthy that less than half of the adult population move enough from the health point of view. Physical activity among children and young people is strongly divided. Some studies indicate that only one third of children move enough in view of their healthy growth and as much as one fifth of young people aged 15 to 18 years do not take any exercise. For older people too little physical activity means weakened physical capacity, which restricts their independent living and causes premature need for care.

Physical inactivity essentially increases the risk of many diseases. It has been estimated that the risk of illness in physically non-active people is, in relation to those pursuing physical activity moderately: in regard to coronary heart disease, cerebral palsy and development of obesity about the double, in adult diabetes 20 – 60 per cent, in hypertension 30 per cent, in colon cancer 40 – 50 per cent, and

in osteoporotic fractures 30 – 50 per cent higher. Finnish regional research has shown that the use of hospital services is 25 – 35 per cent less among the third of the population that is the most active, compared with the least active third.

The objective of the Sports Act (1054/1998) is, among others, to promote the well-being and health of the population, and to support the growth and development of children and young people by means of physical activity. The Ministry of Education is responsible for the general direction, development and co-ordination of the sports provision within the state administration. The local authorities shall create the prerequisites for physical activities of municipal inhabitants by developing health-enhancing physical activity, supporting relevant civic activities, providing sports facilities and by arranging physical activity also for special groups. The expert body at the Ministry of Education that is in charge of tasks under the Sports Act is the National Sports Council. Health-enhancing physical activity and prerequisites for pursuing it are developed and realised in several other sectors of administration and by many other actors as well. The co-operation has been developed by the Ministry of Social Affairs and Health, the Ministry of Transport and Communications, the Ministry of the Environment and Metsähallitus, the Forest and Park Service. Sports organisations, and increasingly also NGOs in the field of social and health care, are important actors in developing health-enhancing physical activity.

With a view to increasing health-enhancing physical activity and boosting related activities in a balanced way it is necessary to intensify the cross-sectoral co-operation. This presupposes a more efficient co-ordination of the co-operation between the relevant actors and NGOs. In addition, it must be ensured that the resources allocated for health-enhancing activity are adequate and used as appropriate.

In accordance with the proposal of the Committee on Development of Health-Enhancing Physical Activity the Government hereby adopts a Resolution to develop health-enhancing physical activity.

Measures will be prepared and undertaken in accordance with the Government Resolution, and the present activities of the Ministries in the field of health-enhancing physical activity will be intensified as follows:

## **I Organisation of the co-operation on health-enhancing physical activity (PP 1-2)**

1. Different ministries are responsible for developing health-enhancing physical activity and circumstances supporting it in their sectors. The Ministry of Social Affairs and Health is responsible for public health work, preventive health care, and for development of rehabilitation. The Ministry of Education is responsible for the general direction, development and co-ordination of sports provision and for the co-operation on physical activity in the state administration.
2. The relevant ministries and interest groups are represented in the Advisory Committee on Health-Enhancing Physical Activity set up by the Government to develop the co-operation of ministries and other bodies. The Committee gives proposals and opinions related to health-enhancing physical activity, but it has no power e.g. to distribute grants.

## **II Financing of health-enhancing physical activity (PP 3-4)**

3. More resources are allocated to the development of health-enhancing physical activity within the framework of the customary appropriations by increasing and reallocating the present grants from the profits of the Slot Machine Association meant for the promotion of public health and the national pools and lottery profits meant for sports.
4. The criteria for State financing for municipal social welfare and health care and sports provision are adjusted so that account is taken of the local authorities' own measures to develop health-enhancing physical activity for inhabitants.

## **III Community structure and everyday settings promoting physical activity (PP 5-7)**

5. The importance and needs of health-enhancing physical activity are taken into account in setting the goals for land use planning, in drawing up the plans and in the assessment of their impact. Improving the flow of information and interaction practices will facilitate the genuine participation by experts in physical activity and health care, inhabitants and service users in the planning of their environment in co-operation with experts in land use planning and decision-makers.

6. The sports facilities most used by the population are developed in line with the objectives of health-enhancing physical activity. Development of community sports facilities by taking account of the needs of, in particular, children, young people, older people, special groups, and families is determined as an area of emphasis in building municipal sports facilities.
7. The use of routes for bicycle and pedestrian traffic, public yards and parks as places for physical activity is intensified in co-operation of experts in physical activity, health care, the environment and traffic.

#### **IV Promoting physical activity at the different stages of lifespan (PP 8-13)**

8. Ensure that every child and young person has an opportunity for pursuing physical activity in day care and school by integrating physical activity into to the daily programme of day care and schools and by increasing the role of physical activity in the afternoon activities arranged for small schoolchildren.
9. Develop, in 2003, a diversified, joyful model of a 'sports school' teaching basic skills in physical activity for children aged 4 -13, which can be used in various settings, and develop new type of non-competitive sport activities for young people aged 13 - 18.
10. Develop ways and services to promote the physical activity of families in co-operation of various actors. Establish in co-operation of various actors a national network for promoting family exercise in 2003.
11. Strengthen the role of occupational health care in the planning of physical activity at work and health-enhancing exercise at the workplace, and use experts in physical activity to a larger extent in the provision of occupational health service.
12. Introduce in 2004 a national plan for increasing the strength training of older persons living in their own homes with the aim of improving the functional capacity of their musculoskeletal system.
13. Prepare in 2003 quality criteria for guided health-enhancing exercise for older people, making use of the evidence-based information of older persons' physical activity, as well as related ethical guidelines and recommendations.

## **V Integrating health-enhancing physical activity into the municipal welfare policy (PP 14-16)**

14. Municipalities include their strategies for health-enhancing physical activity in their welfare strategies and strategies for different sectors. The responsibilities and division of labour is agreed upon between the different sectors and levels of administration. Groups in need of special support, such as mental health patients, older people and people with disabilities, are taken into account. The local authorities are provided with expert aid and their experimental and development projects are supported. Various experimental projects will be started in 2003.
15. Support the co-ordination responsibility of municipal leadership and sports authorities in the development of health-enhancing physical activity, and strengthen the emphasis and status of health-enhancing physical activity within the municipal sports provision.
16. Integrate the promotion of physical activity into the municipal health care, sports and youth service chains implemented by municipal bodies and NGOs.

## **VI Education in health-enhancing physical activity**

17. The role of health-enhancing physical activity in education, in particular in vocational, polytechnic and university education, will be studied separately in 2003. The aim is to survey the present extent and content of the instruction related to health-enhancing physical activity and to put forward proposals for harmonising and developing the education and for enhancing the co-operation of the bodies organising the education. The study will be made as a part of the national work for developing the curricula and criteria for degrees.

## **VII Research programme for health-enhancing physical activity**

18. Establish and implement a research programme in support of the measures to develop health-enhancing physical activity as a part of the physical education research supported by the Ministry of Education. The programme shall focus on studying on a large scale the health effects of physical activity in different target groups as well as the possibilities to promote health-

enhancing physical activity at the individual, community and environmental level. The aim is to bring about a solid knowledge basis for measures to develop health-enhancing physical activity. The preparation of the research programme will start in 2003.

### **VIII Monitoring the population's physical activity and functional capacity**

19. Create in 2004 a permanent framework for follow-up studies in order to provide information about the state of physical activity and functional capacity of the whole of the Finnish population and changes in them. The National Public Health Institute's follow-up studies at the population level and other relevant studies will be made use of in the planning and implementation of the research.

### **Implementation of the Government Resolution, prerequisites for its implementation, and monitoring (PP 20-22)**

20. The Government considers it important that different authorities, organisations, municipalities and NGOs implement proposals of the Committee on Development of Health-Enhancing Physical Activity (Committee Report 2001:12) to as large an extent as possible taking into account the statements in the Resolution.
21. The Government sees it important that resources are allocated in the different sectors of administration to the measures proposed in the Resolution.
22. The implementation of the Resolution is co-ordinated and monitored by the Ministry of Social Affairs and Health and the Ministry of Education in their sectors and by the Advisory Committee to be established hereby as an advisory body.