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ON THE MOVE

National strategy for physical activity promoting health and wellbeing 2020

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SUMMARY

On the move – national strategy for physical activity promoting health and wellbeing 2020.
Publications of the Ministry of Social Affairs and Health 2013:14.

Too little physical activity and exercise among the population causes significant and increasing challenges to Finnish society. Sedentary lifestyle is a contributory factor to many common diseases, problems caused by ageing and the increased economic costs, and it weakens the productivity of labour and competitiveness, and increases inequalities in health and wellbeing between population groups. The favourable impacts of physical activity on obesity, type 2 diabetes, disorders of the musculoskeletal system and depression and on their prevention have been known for a long time.

Although people pursue fairly much physical activity during their leisure time, the rest of the day largely consists of sitting for long periods of time beginning from early childhood education and care, at school, work, institutions, means of transport and at home. Even in early childhood education and care children sit for 60 per cent of their time, and for adults the proportion is as much as 80 per cent. There is thus a great need for increasing physical activity and reducing sitting in Finnish society.

At the beginning of the 21st century an intensive and effective cross-sectoral cooperation has been achieved on actions to promote health-enhancing physical activity, and it will be intensified further as a result of the preparation of the present national strategy. The Government Resolutions on policies to develop health-enhancing physical activity (2002 and 2008) have served as a good basis for the national actions to promote health-enhancing physical activity. The aim of the preparation of the national strategy has been to achieve an even deeper and more concrete approach and a strong commitment among the stakeholders both during the work and in future.

The vision of the strategy up to the year 2020 is that Finns will pursue more physical activity and sit less during the course of their lives. The vision highlights the following elements:

1) The importance of exercise and physical activity as a basic prerequisite for individuals' and society's health, wellbeing and competitiveness is understood.
2) The different administrative branches and organisations will create the opportunities for a physically active life.
3) Promotion of physical activity is based on partnerships between stakeholders, effective structures and good leadership.
4) Factors contributory to gender equality and equal treatment will be identified and impacted on effectively.
5) Individuals will take advantage of the improved opportunities to increase their daily physical activity.
6) Finland will be an increasingly stronger model country for physical activity culture in Europe.

The following four guidelines have been chosen to promote physical activity that enhances people's health and wellbeing:

Guideline 1. Reducing sitting in daily life in the course of life.
Guideline 2. Increasing physical activity in the course of life.
Guideline 3. Highlighting physical activity as a vital element in enhancing health and wellbeing, prevention and treatment of diseases and in rehabilitation.
Guideline 4. Strengthening the status of physical activity in Finnish society.

The guidelines are aimed at activation in particular of persons who take too little physical activity for their health and wellbeing and changing the operational culture of organisations so as to encourage people's physical activity at the different stages of their lifespan. Furthermore, targeted actions will be aimed at such target groups whose physical inactivity we should be most concerned about and in regard to which development measures have been scarce. Such are children under school age and their families; children, young people and families with children in the most vulnerable socioeconomic position; young people at upper secondary level schools; students in vocational education; the ageing working population; and older people living at home.

Physical activity that enhances health and wellbeing needs to be increased and sedentary lifestyle reduced at all stages of people's lifespan by means of the principle of integration, through the contribution of all the administrative branches and through partnerships. Society and its organisations and decision-makers should encourage, support and guide individuals and communities towards more active and healthy lifestyles. The methods include influencing knowledge and skills, the living environment, circumstances, structures and cultures.

The strategy describes the state of the population's physical activity, the present actions and objectives for physical activity that enhances health and wellbeing as well as critical factors to achieve the objectives. It also suggests concrete actions for different stakeholders. Detailed measures are described in a separate action plan. The strategy also contains a description of the resources and monitoring of health-enhancing physical activity and exercise. The monitoring system includes a set of indicators that provide an overall view, as well as a comprehensive monitoring system integrated into the duty of the National Sports Council in accordance with the Sports Act (section 4) to assess the impact of the actions of the government in the field of physical activity and exercise.

Key words:

Course of life, cross-sectoral, exercise, health, physical activity, principle of integration, wellbeing

TIIVISTELMÄ

Muutosta liikkeellä! Valtakunnalliset yhteiset linjaukset terveyttä ja hyvinvointia edistävään liikuntaan 2020. Sosiaali- ja terveysministeriön julkaisuja 2013:14.

Väestön fyysisen aktiivisuuden ja liikunnan vähäisyys aiheuttaa merkittäviä ja yhä kasvavia haasteita suomalaiselle yhteiskunnalle. Liikkumaton elämäntapa lisää monia kansansairauksia, ikääntymisestä aiheutuvia ongelmia ja kansantalouden kustannuksia, heikentää työelämän tuottavuutta ja kilpailukykyä sekä on yhteydessä väestöryhmien välisiin terveys- ja hyvinvointieroihin. Jo pitkään on tiedetty liikunnan myönteisistä vaikutuksista lihavuuteen, tyypin 2 diabetekseen, tuki- ja liikuntaelinsairauksiin sekä masennukseen ja niiden ehkäisyyn.

Vaikka ihmiset harrastavat melko aktiivisesti liikuntaa vapaa-ajallaan, on muu osa päivästä paljolti istumista varhaiskasvatuksessa, koulussa, työssä, laitoksissa, kulkuneuvoissa ja kotona. Jo varhaiskasvatuksessa lapset ovat paikallaan 60 prosenttia ajastaan. Aikuisilla vastaava luku on 80 prosenttia. Liikunnan ja fyysisen aktiivisuuden lisäämiselle sekä istumisen vähentämiselle suomalaisessa yhteiskunnassa on siis suuri tarve.

Terveyttä edistävän liikunnan kehittämisessä on 2000-luvun alussa saavutettu tiivis ja toimiva poikkihallinnollinen yhteistyö, joka tämän linjaustyön avulla vahvistuu entisestään. Terveyttä edistävän liikunnan periaatepäätökset (2002 ja 2008) ovat toimineet hyvänä pohjana valtakunnalliselle terveysliikunnan edistämistyölle. Tässä linjaustyössä on pyritty vielä syvempään ja konkreettisempaan otteeseen, ja toimijoiden vahvaan sitouttamiseen jo työn aikana.

Linjausten visio vuoteen 2020 on, että suomalaiset liikkuvat enemmän ja istuvat vähemmän koko elämänkulun aikana. Visiossa keskeisiä ovat seuraavia näkökulmat:

1) Liikunnan ja fyysisen aktiivisuuden merkitys ymmärretään yksilön ja yhteiskunnan terveyden, hyvinvoinnin ja kilpailukyvyn perusedellytyksenä.
2) Eri hallinnonaloilla ja organisaatioissa luodaan mahdollisuudet fyysisesti aktiiviseen elämään.
3) Fyysisen aktiivisuuden edistäminen perustuu sidosryhmien välisiin kumppanuuksiin, toimiviin rakenteisiin ja hyvään johtamiseen.
4) Sukupuolten tasa-arvon ja yhdenvertaisuuden tekijät tunnistetaan ja niihin vaikutetaan tehokkaasti.
5) Yksilöt tarttuvat parantuneisiin mahdollisuuksiin lisätä jokapäiväistä liikettään.
6) Suomi on entistä vahvempi fyysisesti aktiivisen kulttuurin mallimaa Euroopassa.

Terveyttä ja hyvinvointia edistävän liikunnan kehittämiseksi on valittu neljä linjausta:

Linjaus 1.	Arjen istumisen vähentäminen elämänkulussa.
Linjaus 2.	Liikunnan lisääminen elämänkulussa.
Linjaus 3.	Liikunnan nostaminen keskeiseksi osaksi terveyden ja hyvinvoinnin edistämistä sekä sairauksien ehkäisyä, hoitoa ja kuntoutusta.
Linjaus 4.	Liikunnan aseman vahvistaminen suomalaisessa yhteiskunnassa.

Linjaukset kohdentuvat erityisesti terveytensä ja hyvinvointinsa kannalta riittämättömästi liikkuvien aktivoimiseen sekä organisaatioiden toimintakulttuurien liikunnallistamiseen elämänkulun eri vaiheissa. Lisäksi kohdennettuja toimia suunnataan sellaisiin kohderyhmiin, joiden liikkumisesta on syytä olla eniten huolissaan, ja joiden osalta kehittämistoimenpiteet ovat olleet vähäisiä. Tällaisia ovat alle kouluikäiset lapset ja heidän perheensä, sosioekonomisesti heikommassa asemassa olevat lapset, nuoret ja lapsiperheet, yläkouluikäiset nuoret, ammatillisen koulutuksen opiskelijat, ikääntynyt työväestö ja kotona asuvat ikäihmiset.

Suomen väestö tarvitsee kaikissa ikävaiheissa läpäisyperiaatteella, kaikkien hallinnonalojen myötävaikutuksella ja kumppanuudella fyysisen aktiivisuuden edistämistä ja liikkumattomuuden vähentämistä terveytensä ja hyvinvointinsa parantamiseksi. Yhteiskunnan sekä sen organisaatioiden ja päätöksentekijöiden tulee kannustaa, tukea ja ohjata yksilöitä ja yhteisöjä liikunnalliseen ja terveelliseen elämäntapaan. Keinoja ovat vaikuttaminen tietoihin ja taitoihin, elinympäristöön, olosuhteisiin, rakenteisiin ja kulttuuriin.

Linjauksissa kuvataan väestön fyysisen aktiivisuuden tilaa, terveys- ja hyvinvointiliikunnan toimenpiteiden nykytilaa sekä tavoitteita ja kriittisiä tekijöitä tavoitteisiin pääsemiseksi, ja esitetään konkreettisia toimenpiteitä eri toimijoille. Yksityiskohtaiset toimenpiteet kuvataan erillisessä toimenpidesuunnitelmassa. Linjaukset sisältävät myös kuvauksen terveyttä ja hyvinvointia edistävän liikunnan resursseista ja seurannasta. Seurantajärjestelmä sisältää kokonaiskuvan luovan indikaattorikokonaisuuden sekä laaja-alaisen seurantajärjestelmän integroituna valtion liikuntaneuvoston liikuntalain (4 §) mukaiseen tehtävään arvioida valtionhallinnon toimenpiteiden vaikutuksia liikunnan alueella.

Avainsanat:

Liikunta, fyysinen aktiivisuus, terveys, hyvinvointi, elämänkulku, poikkihallinnollisuus, läpäisyperiaate

SAMMANDRAG

Förändring i rörelse! Nationell strategi för motion som främjar hälsan och välbefinnandet 2020.
Social- och hälsovårdsministeriets publikationer 2013:14.

Ringa fysisk aktivitet och motion bland befolkningen medför betydande och alltmer växande utmaningar för det finländska samhället. Det stillasittande levnadssättet ökar flera folksjukdomar, åldersrelaterade problem och kostnader för samhällsekonomin, försämrar produktiviteten i arbetslivet och konkurrensförmågan samt ökar skillnaderna i hälsa och välbefinnande mellan befolkningsgrupper. De positiva effekterna av motion på fetma, typ 2 diabetes, besvär i stöd- och rörelseorganen samt depression och deras förebyggande är kända sedan länge.

Fast människor utövar motion relativt aktivt på sin fritid, går den övriga delen av dagen till stor del till att sitta i småbarnsfostran, skolan, arbetet, institutioner, fortskaffningsmedel och hemma. Redan i förskolepedagogiken sitter barnen stilla 60 procent av sin tid och motsvarande siffra för vuxna är till och med 80 procent. Det finns alltså ett stort behov av att öka den fysiska aktiviteten och minska sittandet i det finländska samhället.

I utvecklandet av motion som främjar hälsa har man i början av 2000-talet uppnått ett intensivt och fungerande tväradministrativt samarbete, som stärks ytterligare genom dessa riktlinjer. Principbesluten om motion som främjar hälsa (2002 och 2008) har fungerat som ett bra underlag för det nationella arbetet för att främja hälsomotion. I detta arbete med att dra upp riktlinjerna har man eftersträvat ett ännu djupare och mer konkret grepp samt ett starkt engagemang bland aktörerna redan under arbetet.

Visionen för riktlinjerna fram till år 2020 är att finländare ska röra sig mer och sitta mindre under sitt liv. Följande synvinklar är centrala i visionen:

1) Betydelsen av motion och fysisk aktivitet förstås som en grundförutsättning för individens och samhällets hälsa, välbefinnande och konkurrensförmåga.
2) Möjligheter till ett fysiskt aktivt liv skapas inom olika förvaltningsområden och organisationer.
3) Främjandet av fysisk aktivitet baserar sig på partnerskap mellan intressenter, välfungerande strukturer och ett gott ledarskap.
4) Faktorerna bakom jämställdhet mellan könen och likvärdighet identifieras och dessa påverkas på ett effektivt sätt.
5) Individer passar på att utnyttja de förbättrade möjligheterna för att öka sin dagliga motion.
6) Finland är ett ännu starkare modelland för en fysiskt aktiv kultur i Europa.

Fyra riktlinjer har valts för att utveckla motion som främjar hälsan och välbefinnandet:

Riktlinje 1. Att minska sittandet i vardagen under livet.
Riktlinje 2. Att öka motionen i livet.
Riktlinje 3. Att lyfta fram motionen som en central del i främjandet av hälsa och välbefinnande samt förebyggande och behandling av sjukdomar och rehabilitering.
Riktlinje 4. Att stärka motionens ställning i det finländska samhället.

Riktlinjerna inriktas särskilt på att aktivera personer som motionerar otillräckligt med avseende på sin hälsa och sitt välbefinnande samt en integrering av motionen

i organisationers verksamhetskultur i livets olika skeden. Därutöver riktas åtgärder mot sådana målgrupper vars motionsvanor ger mest upphov till oro och i fråga om vilka utvecklingsåtgärderna varit ringa. Dessa är barn under skolåldern och deras familjer, barn, unga och barnfamiljer i socioekonomiskt svagare ställning, ungdomar i högstadieåldern, studerande inom yrkesutbildning, åldrande löntagare och äldre människor som bor hemma.

I syfte att förbättra hälsan och välbefinnandet behöver den fysiska aktiviteten främjas och stillasittandet minskas genom en princip om integrering av motionen i samtliga åldersskeden och genom medverkan av samtliga förvaltningsområden och partnerskap. Samhället och dess organisationer och beslutsfattare ska uppmuntra och stödja individer och grupper till ett fysiskt och hälsosamt levnadssätt. Ett medel är att påverka kunskaper och färdigheter, levnadsmiljö, förhållanden, strukturer och kulturen.

I riktlinjerna beskrivs tillståndet för den fysiska aktiviteten bland befolkningen, nuläget för åtgärderna inom motion som främjar hälsan och välbefinnandet samt mål och kritiska faktorer för att nå målen. Därutöver presenteras konkreta åtgärder för olika aktörer. Detaljerade åtgärder beskrivs i en separat åtgärdsplan. Riktlinjerna innehåller även en beskrivning av resurserna för och uppföljningen av motion som främjar hälsan och välbefinnandet. Systemet för uppföljning består av en helhet med indikatorer som ger en totalbild samt ett övergripande system för uppföljningen som är integrerat med statens idrottsråds uppgift enligt idrottslagen (4 §) att utvärdera effekterna av statsförvaltningens åtgärder på idrottens område.

Nyckelord:

Motion, fysisk aktivitet, hälsa, välbefinnande, liv, tväradministrativ, princip om integrering

FOREWORD

Considerable progress has been achieved in the health and wellbeing of the Finnish population by influencing people's lifestyles. At the same time, however, not all aspects of their lifestyle, such as physical activity routines, have developed in the desired manner. Change trends in our society, such as the ageing of the population, the widening wellbeing and health gaps between different population groups, the lengthening of work careers, increased unemployment, economic challenges and rapid technological advances are posing new challenges to the maintenance and improvement of wellbeing.

Nowadays, Finns are fairly actively engaged in physical activity during their leisure time. However, this is not enough to ensure the necessary level of daily health-enhancing physical activity, as there is too little non-exercise physical activity. Our contemporary way of living favours physical inactivity, sitting in vehicles and in front of screens, and does not encourage us to engage in enough physical activity. We must all join forces so that we can change the situation.

Close and successful cooperation between different administrative branches in the development of health-enhancing physical activity among the Finnish population was initiated at the start of the millennium. In order to put the cooperation on a more effective basis, the Ministry of Social Affairs and Health and the Ministry of Education and Culture jointly appointed a steering group for health-enhancing physical activity (1 November 2011–31 May 2015). The most important task given to the steering group was the drawing up of a joint strategy and an action plan for health-enhancing physical activity. As part of the preparatory work, the steering group was expected to consider the strategies set out in the Government Programme, the results of the already completed cross-administrative programmes and projects, available research information, and the expertise possessed by different actors together with their responsibilities.

There has been extensive cooperation between different stakeholder groups as part of the preparatory work. Different ministries and the institutions coming under them, social and health sector organisations, research and expert institutions, education and training organisations, municipalities, programmes promoting physical activity and a large number of working groups and experts have provided a great deal of material and comments regarding the content of the national strategy. During a preparatory process that lasted for slightly more than a year, a wide variety of opinions from different parties were heard, while at the same time efforts were made to commit the actors to the implementation of the strategy. The plan can only be successfully implemented if all of the important parties in the field of health and physical activity and all of the different administrative branches and sectors work in accordance with the strategy objectives and if all of the resources are focused accordingly. Achieving success also requires strong and transparent cooperation, innovations and new solutions, and high-quality management and coordination.

The steering group for health-enhancing physical activity has achieved a great deal and made a valuable contribution to the preparation of the strategy. We would like to thank the steering group and the persons in charge of the group, Director-General Riitta Kaivosoja from the Ministry of Education and Culture, Director Taru Koivisto from the Ministry of Social Affairs and Health and Director Harri Syväsalmi from the Ministry of Education and Culture, for successfully coordinating the work. We also extend our thanks to Päivi Aalto-Nevalainen, Counsellor for Cultural Affairs in the Ministry of Education and Culture, and Mari Miettinen, Senior Officer in the Ministry of Social Affairs and Health, who put the strategy on paper, for their excellent work as well as Tommi Vasankari, Director of the UKK Institute, Eino Havas, Director of the Research Centre LIKES, and Minna Paajanen, Secretary of the National Sports Council, for their active participation in the preparatory work.

Paavo Arhinmäki
Minister of Culture and Sports

Susanna Huovinen
Minister of Health and Social Services

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TOWARDS A MORE PHYSICALLY ACTIVE SOCIETY

The health and wellbeing of the Finnish population have improved during the past few decades. However, we will be facing major challenges in the future. Among the most important of them are the ageing of the population and its concentration in growth centres, the widening of the gaps in wellbeing and health between population groups, weakening productivity and competitiveness, the lengthening of work careers and rapid technological advances. Uncertainties concerning economic development and changes in the nature of work and our living environment also have an impact on our everyday life. Our contemporary way of living favours physical inactivity, sitting and spending time in front of screens, and does not encourage us to be physically active.

Nowadays, Finns are fairly actively engaged in physical activity during their leisure time. However, this is not enough to ensure the necessary level of health-enhancing daily physical activity, as there is too little non-exercise physical activity in early childhood education and care, at school, at work, during commuting and during leisure time. There is also a great deal of concern regarding the health risks of excessive sitting. After all, already in day care children are sedentary for 60 per cent of their time and adults for 80 per cent of the time that they are awake. This is definitely too much. There is thus a great need for more physical activity and for less sitting in Finnish society.

Inadequate physical activity and the weak physical condition of the population have greatly contributed to an increase in the number of overweight people and also to an increase in obesity, type 2 diabetes, musculoskeletal disorders and depression. Musculoskeletal disorders are the greatest cause for disability and absences due to illness, and the increase in mental health problems is also a source of great concern. A physically inactive lifestyle has become a global problem and is comparable with obesity, smoking and alcohol consumption. In fact, according to the World Health Organization (WHO), physical inactivity is the fourth largest risk factor in deaths caused by lifestyle diseases.

For many years now, there has been solid research evidence on the health-promoting impacts of physical activity and its positive impacts on wellbeing. Physical activity is important for our overall physical, mental and social wellbeing and for healthy and safe growth and development. Physical activity helps to improve the condition of our musculoskeletal system and the state of our respiratory and blood circulation system, and it also contributes significantly to the prevention and treatment of diseases and successful rehabilitation. Physical activity helps to reduce early deaths and is particularly important in the prevention of the coronary heart disease, elevated blood pressure, large intestine cancer and adult diabetes. Physical activity is of great importance for mental health and the quality of life. Physical activity and particularly a high level of endurance fitness have been found to be connected with the functioning of the

brain, such as memory, alertness, concentration, creativity, learning and motivation. The use of physical activity in the prevention and treatment of illnesses is well-justified and described in the continuously updated Current Care Guidelines intended for health-care actors. Physical activity will play an increasingly important role as the population ages and as more and more older people live at home instead of in care institutions. Investing in the safety of physical activity helps to achieve significant reductions in the number of accident injuries resulting from physical exercise.

The norms observed in Finland provide a sound basis for promoting health and wellbeing by means of physical activity. The most important acts containing provisions on physical activity promoting health and wellbeing are the Constitution of Finland (731/1999), the Sports Act (1054/1998), the Health Care Act (1326/2010), the Youth Act (72/2006) and the Local Government Act (365/1995). Under the Constitution of Finland, physical activity is a basic cultural right. The purpose of the Sports Act is to promote the wellbeing and health of the population and to support the growth and development of young people by means of physical activity. Under the Health Care Act, municipalities must include health counselling in all health care services and arrange health checks and advice for all age groups. Under the act, municipal decision-makers must monitor the health and wellbeing of the residents and the factors affecting them and take measures in order to meet these needs.

The Youth Act applies to people under the age of 29. The objective of the act is to support the growth of young people and create a basis for their independence, promote active citizenship among young people, strengthen them socially and improve the growth environment and living conditions of young people. A healthy lifestyle is one basis for the objectives. Under the Youth Act, sports activities for young people are part of the youth work and youth policy of the municipalities. Under the Local Government Act, municipalities must promote the well-being of their residents and sustainable development in their areas. Physical activity is one tool for a wellbeing policy and is of importance in the maintenance of the health, work ability and functional capacity of the municipal residents. Other pieces of legislation, such as acts on day care and early childhood education and care, the Basic Education Act, the Occupational Health Care Act, the Act on Care Services for Older Persons, the Land Use and Building Act and the Environmental Protection Act, are also of importance in the promotion of physical activity among the population.

In the area of health-enhancing physical activity, successful cross-administrative cooperation mechanisms have been established during the last decade and this cooperation should be further strengthened. The first government resolution on the development guidelines for health-enhancing physical activity was adopted in 2002. The government term 2007-2011 saw the implementation of two government resolutions on the promotion of physical activity. The Committee for Health-Enhancing Physical Activity (TELI), appointed by the Ministry of Social Affairs and Health and the National Nutrition Council (VRN), coordinated the implementation of the Government Resolution on Development Guidelines for Health-Enhancing Physical Activity and Nutrition, which was adopted on 12 June 2008. The Committee on Promoting Physical Activity (LED), appointed by the Ministry of Education and Culture, helped to ensure the implementation of the Government Resolution on Policies promoting Sport and Physical Activity, which was adopted on 11 December 2008. Measures were directed at increasing physical activity among different population and age groups, improving the conditions for physical activity and increasing cross-administrative cooperation concerning health-enhancing physical activity in municipalities and at developing education, training and research.

In accordance with the work carried out during the government term (2007-2011) and the assessments made on the work, the Ministry of Social Affairs and Health and the Ministry of Education and Culture deemed it necessary to update the manner in which the cooperation is organised. In order to put the activities on a more efficient basis, the two separate committees were replaced with a steering group for health-enhancing physical activity, a joint body of the two ministries, which was assigned the principal task of preparing the strategy for health-enhancing physical activity.

The focus areas of the programme of Prime Minister Jyrki Katainen's (2011) government were the lengthening of work careers, the promotion of wellbeing at work, the reduction of inequality and social exclusion, and the narrowing of gaps in the field of wellbeing and health. Physical activity plays an important role in all of these areas. As set out in the Government Programme, 'the promotion of wellbeing and health as well as the reduction of inequality will be taken into ac-

count in all societal decision-making and incorporated into the activities of all administrative sectors and ministries'. Thus, the promotion of physical activity should be made a more integral part of the activities of the different sectors in society.

In accordance with its programme, the Finnish Government promotes a physically active lifestyle extending through the whole duration of people's lives. It is important to identify the opportunities of the organisations influencing the different stages of people's lives (early childhood education and care, youth work, Finnish Defence Forces, work communities, social and health care, NGOs) to promote a physically active lifestyle. It is also important to promote physical activity through those actors who reach young people and people of working age that remain outside education, training and working life. In order to increase the number of people who do enough physical activity in terms of their health and wellbeing, the measures should increasingly target the groups that have the poorest chances of engaging in physical activity and the greatest need for a more active lifestyle.

The Finance Committee of the Finnish Parliament has also expressed its concern over the physically inactive lifestyle of the population. In its report on the state budget proposal for 2013 (VaVm 39/2012 vp), it stated that the Finnish culture of physical activity is facing major challenges as the lack of physical activity among the population will create serious problems for our society. The Committee emphasises that sports funding should be focused on those areas that bring the biggest reductions in physical inactivity. In line with the Government Programme, the Committee also points out that the most important societal organisations should assume greater responsibility for making Finns more physically active. The change can only become a reality if the sports sector re-examines its own activities and if there is a broad-based involvement of societal actors based on the cross-cutting principle. The opinion expressed by the Committee is an important contribution to the debate on promoting wellbeing by means of physical activity in Finnish society at large.

The work being done in Finland to promote physical activity among the population has also aroused international interest. The government resolutions, the steering group jointly appointed by the two ministries, cross-administrative cooperation and the measures to promote physical activity in different sectors of society are a fairly new concept in the European-wide efforts to develop physical activity. There was already an exchange of information within the European network in the 1990s. The year 2005 saw the establishment of the European network for the promotion of health-enhancing physical activity by the WHO, and about ten years ago the European Commission set up its unofficial Working Group Sport and Health. As a result of the competence in the field of sports granted to the EU and the identification of health-enhancing physical activity as a priority theme in EU's Work Plan for Sport (2011-2014), the unofficial working group of the Commission was replaced with a Working Group on Sport, Health and Participation in 2011, which comes under the Council.

In 2008, the EU issued physical activity guidelines; on the basis of these guidelines the Council adopted conclusions on promoting health-enhancing physical activity in November 2012. In the conclusions, Member States are urged to promote initiatives increasing physical activity, encourage the inclusion of physical activity supporting active ageing in their national policies and promote closer cooperation between sport, health care and other sectors. The health sector of the EU has a High Level Group of Nutrition and Physical Activity. At the moment, the Commission is preparing a proposal for Council guidelines on health-enhancing physical activity. Starting in 2014, projects promoting health-enhancing physical activity may also receive funding from Erasmus+, the joint Union programme on education, youth and sport. Ministries and organisations are actively involved in the development of health-enhancing physical activity in the European Union.

Physical activity promoting health and wellbeing is being developed and carried out in a number of different administrative branches and by a large number of different actors. It is important to expand the cooperation and partnerships between the different ministries and institutions and the agencies coming under them, municipalities, education, training and research organisations, NGOs and other stakeholder groups. Comprehensive promotion of physical activity is possible through extensive planning and structural cooperation across administrative, organisational and professional boundaries. There is also a need for effective local-level measures, while at the same time physical activity should be made part of wider efforts, such as the promotion of wellbeing and health, youth work and the development of better living conditions, education, training and working life. In order to make the debate on physical activity a society-wide theme, we need high-quality strategic management and coordination, innovation and more up-to-date thinking and approaches.

2

ECONOMIC IMPACT OF PHYSICAL ACTIVITY

Society pays a high price for physical inactivity. A low level of physical activity results in direct costs to the health care system, while the indirect costs are mainly borne by employers. A rapid increase in the cost of physical inactivity is expected in the next few years. It is estimated that in the United States, the costs resulting from the lack of physical activity are expected to double during the next 20 years. In emerging economies, such as China and India, the costs are expected to increase by as much as 500 per cent in the same period. In Britain, studies have been done on the cost of physical inactivity in relation to the incidence of illnesses and mortality and the costs arising from them. According to the studies, in 2003-2004 the direct costs to health care services arising from physical inactivity totalled about one billion pounds (1.35 billion euros). At the same time, it was estimated that physical inactivity was the prime cause of about 35,000 deaths.

Lack of physical activity results in indirect costs by increasing absenteeism due to illness and by decreasing work productivity. According to an analysis made on the basis of the material collected for the survey 'Health Behaviour and Health among the Finnish Adult Population in 2003-2008', those who engage in physical activity no more than once a week have four and a half sickness absenteeism days more each year than those who engage in physical activity between two and three times weekly. According to studies done in Europe and North America, investing in workplace physical activity is worth the effort: the money invested in it can be recouped between 1.5 and 5.5 times. The work organisation will save costs as a result of fewer sickness leaves and early retirements as well as higher intangible capital. Intangible capital includes the way in which the employees perceive their own health and work ability, the workplace atmosphere and the improved image of the organisation.

Alone the diabetes caused by physical inactivity is a major source of costs for the health care system. In 2007, physical inactivity accounted for more than 700 million euros of the overall costs of diabetes in Finland. The cost of diabetes has more than doubled during the last ten years. According to the calculations made by the WHO, physical inactivity accounts for 27 per cent of the risk of diabetes. Society at large will pay dearly for the explosive increase in type 2 diabetes. According to the results of the study 'Diabeteksen kustannukset Suomessa 1998-2007' (Cost of diabetes in Finland in 1998-2007), the costs resulting from the medical treatment of diabetes patients in 2007 totalled 1,304 million euros, of which the extra costs arising from diabetes accounted for 832.6 million euros. According to the Dehko study, the overall costs and the productivity costs arising from the medical treatment of diabetes patients total 2.7 billion euros. In 2007, health care expenditure in Finland totalled 17.1 billion euros, which means that the cost of diabetes accounts for a large proportion of the overall expenses.

Physical inactivity and a weakening of physical capacity increase the risk of falling and the risk of fall-

ing-related injuries among older people. One in three of all those over 65 fall each year and falls become more frequent with age. In Finland, the costs for the acute treatment of fall-related injuries suffered by those aged over 65 totalled 39 million euros in the year 2000. Finns over the age of 65 suffer about 7,500 hip fractures each year. The average cost of the acute treatment of a fractured hip totals about 20,000 euros, which means that the overall costs of broken hips are enormous (Current Care Guidelines 2011). For example, in a municipality of 20,000 the cost of acute treatment of fractured hips totals about 480,000 euros each year. International studies indicate that in the municipality in question, an effective programme aimed at combating falls could prevent at least one third of all hip fractures. As a result, the municipality concerned could save at least 120,000 euros in acute treatment costs each year.

The WHO has developed a tool for determining the monetary value of the health impacts of walking and cycling. With the present amount of walking and cycling in Finland, the average annual benefits arising from cycling total 1,154 billion euros and those from walking as much as 3,711 billion euros. The examples are based on the results of the 2011 National Passenger Traffic Survey. If Finns increased their number of walking and cycling trips by one fifth by the year 2020, this would increase the value of walking-related health benefits by 370 million euros each year and the value of cycling-related health benefits by 120 million euros each year.

There is still fairly little evidence on the cost impacts resulting from measures encouraging people to do more physical activity as a way of promoting health. Physical activity interventions focusing on schools are estimated to have a high cost-to-benefit ratio among children and young people. At the same time, urging patients to be more physically active and drawing up personal physical activity programmes seem to the most cost-effective options among the adult population. As guidance becomes more intensive, costs will increase more rapidly than the health benefits, which will lower the cost-to-benefit ratio. Studies done in New Zealand indicate that providing every physically active person with a physical activity prescription would bring a benefit of about 800 euros/person. In other words, the cost-to-benefit ratio of the measure would be fairly high. In Britain, the National Institute of Health and Clinical Excellence, a body issuing health care recommendations, urges doctors to carry out a short intervention when consulting patients that engage in too little health-enhancing physical activity. The institute estimates that the measure would have a cost impact of between 30 and 670 euros for each additional quality-adjusted life year.[1] If the cost savings resulting from the prevented diseases are also taken into account in the calculations, there will also be long-term net savings.

Physical activity has an enormous impact on the national economy and there should be greater focus on understanding it. From society's point of view, physical activity is a good investment because it provides a cost-effective way of improving the health and wellbeing of the population. From the perspective of society at large and its different organisations, it is important that the input/output ratio of physical activity and the way in which it boosts performance (such as work and studying) and productivity can be demonstrated. In the future, this will pose challenges for the development of economic studies on physical activity, and it means that health economics should be more closely incorporated in the research on the links between physical activity on the one hand and health on the other.

EXAMPLES OF STUDIES

*The **City of Kuopio** has taken part in WHO's HEAT project; one aim of this project has been to provide tools for assessing the economic impacts of the physical activity of the population. The City of Kuopio has examined the extent of bicycle commuting among its employees and assessed the socio-economic benefits generated by cycling to work. Based on the results of the questionnaire survey, and in accordance with the HEAT calculation model, it has been estimated that 366 city employees cycle for 45 minutes five days a week, nine months of the year. The benefits of this to society at large total at least 600 million euros annually.*

*In **Britain**, those over 65 were provided with an opportunity to take part in physical activity programmes near their homes twice a week for two years. The programmes were free of charge and were organised by local authorities. Activities were held in parish halls, at community centres and at service homes. The programme helped to prevent 76 early deaths and 230 hospital treatment periods for each 10,000 residents. The programme generated health care savings worth 601,000 pounds (about 710,000 euros) each year.*

1 The health impacts of the activities under comparison are often measured as life years (LY) and/or quality-adjusted life years (QALY). QALY combines the quality of life connected with health and life expectancy. One QALY is equivalent to one life year in a state of perfect health (Drummond et al. 2005).

3

HOW DO FINNS ENGAGE IN PHYSICAL ACTIVITY AT DIFFERENT STAGES OF THEIR LIVES?

The amount of physical activity that is adequate in terms of health and wellbeing is defined in guidelines drawn up for different age groups: Physical activity guidelines for early childhood education and care (2005), physical activity guidelines for school-aged children (2008), a physical activity pie for people aged 18-64 (2009) and a physical activity pie for people over 65 (2009). There are also more specific guidelines for adapted physical activity, physical activity during pregnancy and after childbirth, and physical activity for strengthening the health of bones. These guidelines provide a good basis for high-quality physical activity. Some of these documents also discuss the maximum recommended period of continuous sitting. However, there are not yet any specific guidelines concerning sitting in Finland (See Figure 1).

All school-aged children (between the ages of 7 and 18) should engage in at least 1-2 hours of all-round physical activity each day in a manner that is appropriate for the age of each child. Adults should engage in at least 2 hours 30 minutes of brisk physical activity each week (such as walking), or alternatively, 1 hour 15 minutes of stressful physical activity (such as running). In addition, adults should also do exercises twice weekly to improve their muscular fitness and motor abilities. Under the guidelines for adults, ageing people should be provided with physical activity programmes tailored to their needs in which consideration is given to their level of mobility and illnesses and where emphasis is on balance and joint mobility.

Two risk factors that are independent of each other

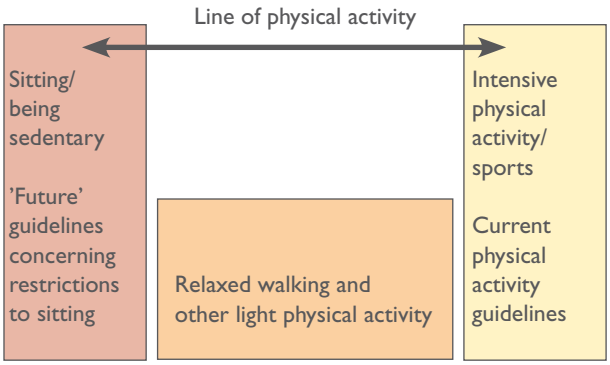

FIGURE 1.
Line of physical activity (Vasankari 2012)

Screen time and time spent in a sitting position

With the decrease in non-exercise physical activity, a sedentary lifestyle has become increasingly common in the Western world. Making physical inactivity socially acceptable already starts in early childhood and care. After all, it has been observed that children attending early childhood education and care stay in one place for 60 per cent of their active time. Finnish children and youngsters exceed the recommended daily screen time (max. two hours) alone by watching television. The survey 'Finnish Schools on the Move' (2012)

found that pupils in grades 4-6 spent the most time watching television and playing games while those in grades 7-9 ranked highest in other computer uses. Of all children in grades 4-6, about one third watched television for at least three hours/day during school days and more than half the same amount of time during weekends. Of all children in grades 4-6, one in five played games for at least three hours/day during weekdays and one in three the same amount of time during weekends. Primary school pupils are physically inactive for 38 minutes/hour during the school day, while the figure for lower secondary level pupils is 45 minutes. When the habits of the adult population have been examined, it has been noted that men of all ages spend more time in a sitting position than women. Women spend an average of 6 hours, 40 minutes in a sitting position each day, while the figure for men is 7 hours, 20 minutes. Among both genders, young people generally spend more time in a sitting position than people belonging to older age groups.

Amount of physical activity at different life stages

Studies show that there are substantial differences between population and age groups in terms of their adherence to physical activity guidelines. In overall terms, about one half of all children and youngsters engage in enough health-enhancing physical activity. The gender gap is substantial, as girls engage in less physical activity in all age groups than boys. There is still little research information available on children under school age. However, researchers are of the view that already children under the age of three do not engage in enough physical activity and that one in three children aged between 3 and 6 fail to meet their daily physical activity recommendations. These figures for small children are worrying, as studies have shown that physical activity and lifestyle patterns already start to become established at this stage and that a physically inactive lifestyle seems to become particularly well entrenched.

According to objective measurements, primary school children engage in brisk physical activity for an average of 62 minutes and pupils at the lower secondary level for 45 minutes each day. Overall, activity is at its peak among first-grade children who are engaged in brisk physical activity for an average of 69 minutes each day. The recommendation of at least one hour of brisk physical activity is met by about 50 per cent of all primary school children and 17 per cent of all pupils at the lower secondary level. At the same time, the recommendation of 1.5 hours of brisk physical activity is met by nine per cent of all primary school pupils and by only one per cent of all pupils at the lower secondary level. Primary school children engage in brisk physical activity for an average of 32 minutes during a six-hour school day, while the figure for pupils at the lower secondary level is 17 minutes during the same amount of time.

The amount of physical activity peaks at the age of 11 (at the threshold of puberty). A total of 48 per cent of all boys and 37 per cent of all girls of this age meet their physical activity recommendations. At the same time, about ten per cent of all children in this age group are more or less physically inactive. The most dramatic decline in physical activity[2] occurs at the onset of the age of 15, when only 15 per cent of boys and nine per cent of girls meet the physical activity recommendations. In Finland, the decline is on average steeper than in other Western countries.

In general, physical activity and other lifestyle patterns among vocational students are less healthy than those among upper secondary students of the same age. This is a worrying trend, particularly when consideration is given to the fact that the narrowing of socio-economic health gaps has been a health policy objective for many years and that many vocational students are studying for physically demanding professions. Few of the upper secondary students meet the physical activity recommendations laid out for young people of school age. Of all vocational students, seven per cent engage in periods of physical activity of at least 30 minutes several times each day, while the figure for upper secondary students is 11 per cent.

If the findings of the school health survey are compared with the recommendations concerning brisk physical activity for adults (2 hours, 30 minutes/day), a total of 42 per cent of all vocational students meet the target, while the figure for upper secondary students is 55 per cent. The proportion of those with practically no physical activity (max. once a week) is significantly higher among vocational students than among upper secondary students. A total of 29 per cent of all vocational students engage in physical activity no more than once a week, while the figure for upper secondary students is 17 per cent.

2 The decline in physical activity can be divided into two phenomena: drop-off and drop-out. The *drop-off phenomenon* refers to a decline in physical activity with age, whereas *drop-out* refers to the giving up of sports as a leisure-time activity, which is common among adolescents (Aira, Kannas, Tynjälä, Villberg & Kokko 2013).

Almost half of all vocational students (48%) and nearly a third of all upper secondary students (31%) engage in physical activity causing sweating and shortness of breath for a maximum of one hour each week. In these figures, the proportion of vocational students with no physical activity was 15 per cent, while the corresponding figure for upper secondary students was 8 per cent. Male vocational students engage in more physical activity causing sweating and shortness of breath that their female counterparts. Other negative health habits are also more common among vocational students. The proportion of overweight students is higher in vocational institutions than in upper secondary schools and excessive weight is more common among boys than girls.

There is comprehensive information available on physical activity among university students. According to the University Student Health Survey (2012), a total of 24 per cent of all students engaged in physical activity at least four times a week. One in ten students did not engage in any physical activity. The percentage of students doing a great deal of physical activity was slightly higher compared with the previous surveys (2000, 2004 and 2008). Physical inactivity is slightly more common among students of universities of applied sciences. University students are fairly active users (30%) of the sports services provided by the universities. The corresponding figure among students of universities of applied sciences was only eight per cent. Experiences with sports in universities have made one third of all university students more interested in physical activity, whereas only one in ten students of universities of applied sciences has become more interested in physical activity as a result.

Slightly more than one in ten people of working age meet the recommendations concerning health-enhancing physical activity. One in two people meet the weekly minimum requirements for brisk physical activity, while fewer than one in five engage in an adequate amount of muscular fitness training. Only a very small proportion (about three per cent) of retired people meets the recommendations concerning brisk physical activity and muscular fitness training. Slightly more than a quarter of people meet the recommendation concerning brisk physical activity, while only one in ten people meet the muscular fitness recommendation. One out of five working-age people and pensioners are more or less physically inactive. There is conflicting evidence regarding the different amounts of physical activity among men and women. Some of the surveys show that women are more physically active than men, while other studies produce opposite results.

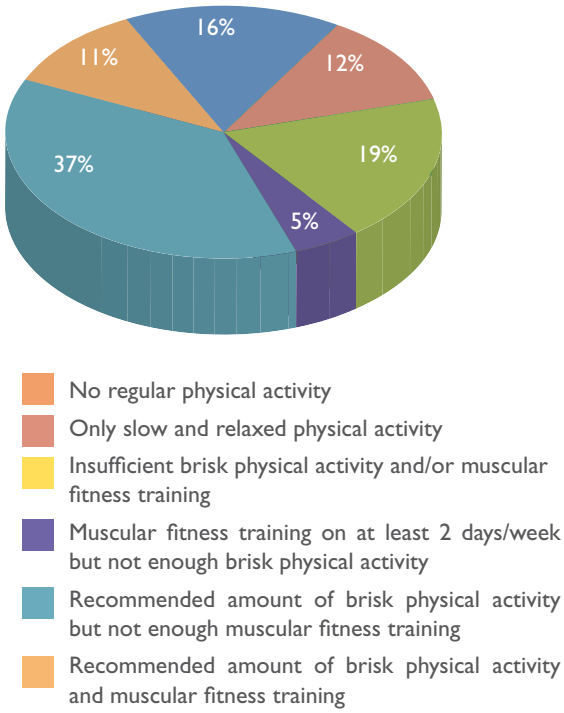

FIGURE 2
Popularity of health-enhancing physical activity among Finns aged 15-64 (Health Behaviour and Health among the Finnish Adult Population 2009)

There were a number of changes in physical activity among working-age people and pensioners during the ten-year period between 2000 and 2011. A smaller proportion of men engage in physical activity during their leisure time. The decline is steepest among those 55-64 years of age. At the same time, physical activity seems to have become more popular among retired women. The number of women aged 30-54 who walk or cycle to work declined.

IA health survey from 2011 measured the physical fitness of people aged 18-74 for the first time. According to the findings, men were on average in better condition than women. People in older age groups were on average in poorer physical condition than people in younger age groups. This applied to both men and women. The relative difference between age groups was the largest in balance tests and the smallest in walking tests. The physical capacity of the population was also measured in the survey. About one half of all women and one third of all men aged 75 and over have difficul-

ty managing a walk of half a kilometre. According to the survey, the walking capacity of the population has, however, improved during the ten-year period, particularly in the older age groups.

Among older people, physical activity is of great significance in the maintenance of functional capacity and mobility. Regular physical exercise improves mobility and lessens the risk of falling, the most common type of accident among older people. Difficulties in walking, a low amount of muscular strength and the weakening of the balance in particular increase the risk of falling. Many older people are at risk of losing their independent functional capacity as a result of an accident injury, and for this reason, it is important for them to engage in physical activity and do balance training so that falls can be prevented.

Leisure-time physical activity environments

The physical activity environment in Finland has changed during the past few decades. Most of the physical activity used to take place outdoors, but nowadays people also do physical activity in facilities specifically built for such purpose. Finland has a total of about 29,000 sports facilities, which are visited more than 300 million times each year. Outdoor sports fields and cross-country tracks account for most of the facilities. Bicycle and pedestrian paths, local outdoor recreation routes and forests are the most popular places for physical activity. Indoor swimming pools and gyms are the most popular of the built facilities.

Slightly more than a third of all leisure-time physical activity among the adult population takes place in natural environments, one quarter in the yards of people's homes, another quarter in built outdoor environments and the remaining 14 per cent in indoor facilities. Young people, urban dwellers and highly educated people are more likely to engage in physical activity in indoor and other built facilities. Natural environments are the most popular places for physical activity among pensioners.

Amount of walking and cycling

In 2010-2011, Finns made a total of 30 per cent of all their journeys on foot or by bicycle. The average length of each journey was 1.6 km (walking journey) and 3.1 kilometres (bicycle journey). The trips made by men on foot and by bicycle were slightly longer than those made by women. The proportion of walking and cycling trips during those years had declined slightly compared with previous years. Among children and young people, the biggest decreases were in the amount of walking and cycling by adolescents. There was also a substantial decrease in walking and cycling among pensioners and people approaching the age of retirement. In overall terms, there has been a significant drop in commuting on foot and by bicycle during the past few decades. Only a fifth of all commuting is done by walking or cycling. There is substantial seasonal variation in walking and particularly in cycling. People walk more in winter, whereas in summer cycling is significantly more popular than in winter. Women are more active cyclists during the summer months than men. Young people, people with no cars and the unemployed are the largest groups of winter cyclists.

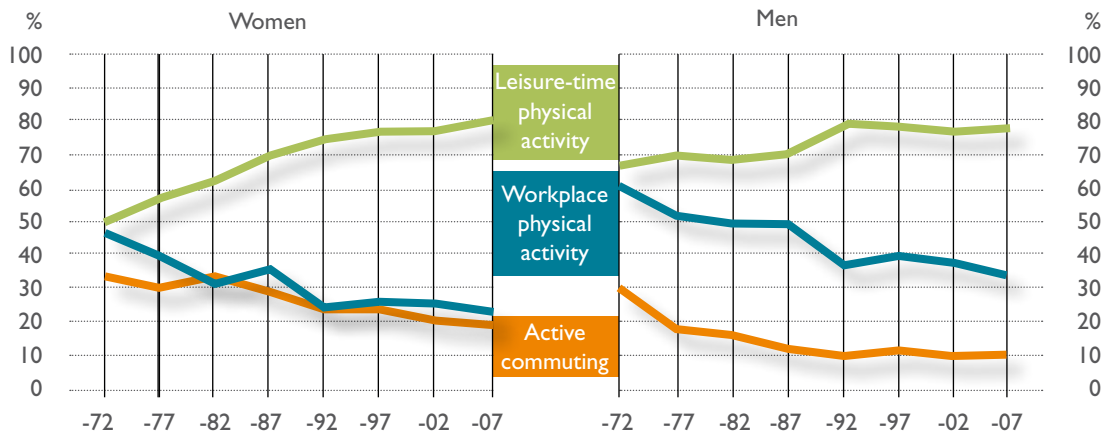

FIGURE 3
Physical activity among Finns. Proportion of different types of physical activity among women and men in the years 1972-2007 (Finriski 1972-2007).

Socio-economic gaps in physical activity, health and lifestyles

Even though in overall terms the state of health and life expectancy of the Finnish population have improved, there are major socio-economic differences between population groups. Those in lower social positions are in poorer health and have a lower life expectancy than those in the upper echelons of the social hierarchy. There are also major differences between men and women. Women live longer: life expectancy among women is 82 years, while the life expectancy of men is slightly more than 76 years. The health gaps between population groups have not narrowed, even though this has been one of the most important health policy aims in Finland.

It is known that the popularity of physical activity among children and young people depends on the socio-economic status of the family. School performance and education levels seem to be connected with physical activity among young people, such that those with weak school performance and those seeking a shorter education or training path do less physical activity than those selecting a longer education or training path. Studies indicate that the parents' socio-economic position influences both the education level and training path of young people and their physical activity routines later in life.

For children and young people, doing physical activity in sports clubs has become significantly more expensive during the past ten years. In many sports, the increase in training intensity, as a result of competitive targets, has meant higher costs, early specialisation in a single sport and too often a total discontinuation of the activity. Developing equal opportunities for leisure-time activities requires a social contract under which all parties generating costs for the activities, i.e. central and local government, national sports federations, individual sports organisations, sports clubs and companies, should think about their activities from the perspective of the costs incurred by individuals engaged in the activities.

Of those Finns in working life, physical activity is most popular among white-collar employees and entrepreneurs and least popular among farmers. Differences based on professional status are wider among men than among women. Students are the group most likely to commute or travel to their place of study on foot or by bicycle. Working women are the largest group of walking or cycling commuters. Those outside working life, such the unemployed, pensioners and students, are more likely to be engaged in light physical activity than those who are working. This is particularly the case with women. The popularity of physical activity among immigrants is lower than among the mainstream population. This is true of all population groups and particularly of immigrant women. Different population groups have different ideas about health and illnesses. A lack of information about the factors affecting one's own health makes it more difficult to make choices that promote one's health.

In addition to physical inactivity, other habits, such as smoking, the use of alcohol and an unhealthy diet, are also socio-economic risk factors causing significant gaps in morbidity and mortality. Smoking and the use of alcohol are more common among lower social groups, and the people in such groups are also more likely to have unhealthy diets and to suffer from being overweight. Particularly in terms of social and health care, measures concerning physical activity should be promoted as efficiency measures and as part of overall lifestyle improvements.

Opportunities for leisure-time physical activity

There are significant gaps in opportunities for physical activity in Finland. There should be more reasonably priced opportunities in such areas as leisure-time physical activity and competitive sports engaged in by young people, combinations of more than one physical activity and physical activity engaged in by families, adults and older people near their homes. According to the information based on different studies and surveys and everyday observations, there seems to be a discrepancy between the demand for and supply of physical activity. However, there is still too little information in order that the situation could be systematically verified. As regards adolescents, more research information has become available in recent years and the message it conveys is clear: sports clubs should provide children and young people with opportunities for leisure-time and competitive sports on a more ethical and equal basis and, in this manner, lessen the impact of the drop-out and drop-off phenomena. However, at the same time, schools, school health care and other public-sector institutions should provide more resources and stronger partnerships, as that would often be the best way to reach physically inactive people.

4

NATIONAL STRATEGY FOR PHYSICAL ACTIVITY PROMOTING HEALTH AND WELLBEING 2020

VISION 2020

We should be more physically active and spend less time in a sitting position during our lives

The role of physical activity should be understood as the basic requirement for the health, wellbeing and competitiveness of individuals and society at large.

Opportunities for a physically active life should be created in different administrative branches and organisations.

The promotion of physical activity should be based on the latest research information, partnerships between stakeholder groups, well-functioning structures and good management.

The factors of gender equality and non-discrimination[3] should be identified and a great deal of work should be done to influence them.

Individuals should use the improved opportunities to be more physically active each day.

Finland is stronger than previously as a model country for a physically active culture in Europe.

3 In this context, non-discrimination means the equality of human beings irrespective of age, ethnic or national origin, nationality, language, religion, belief, opinion, state of health, disability, sexual orientation, wealth, place of residence or any other reason concerning the person in question. (freely quoted from the Non-Discrimination Act 21/2004).

The following guidelines have been selected for developing physical activity promoting health and wellbeing:

GUIDELINE 1. *Spending less time in a sitting position as a part of everyday activities during the course of life.*

GUIDELINE 2. *Doing more physical activity during the course of life.*

GUIDELINE 3. *Making physical activity a central part of the promotion of health and wellbeing, the prevention and treatment of illnesses, and rehabilitation.*

GUIDELINE 4. *Strengthening the role of physical activity in Finnish society.*

The main purpose of the guidelines is to activate those who engage in too little physical activity in terms of their health and wellbeing and to make the operating cultures of organisations more oriented towards physical activity during different stages of life. Measures will also be targeted at groups whose level of physical activity should be the greatest cause for concern and on whom few development measures have been focused. These groups include children under school age and their families, children, youngsters and families with children who are in the weakest socio-economic position, young people at the lower secondary level, vocational students, ageing blue-collar workers and older people living at home. The central factor in the guidelines is to decrease, in a cross-cutting manner, exclusion from physical activity as a result of gender, age, socio-economic factors and other factors that increase inequality.

In Finland, improving the health and wellbeing of the population requires the promotion of physical activity and the reduction of physical inactivity at all stages of life. This must be based on the mainstreaming principle and the contribution and partnership of all administrative branches. In the future, both citizens and decision-makers must better identify the benefits of physical activity and embrace an active lifestyle as natural. Society at large, organisations and decision-makers must encourage, support and guide individuals and communities towards a physically active and healthy lifestyle. It is important that we are able to create a society that encourages its members, particularly children and the young, to be physically active.

The measures set out in the guidelines focus on improving the knowledge and skills of different population groups and on influencing the way in which the living environment, opportunities, structures and the culture are shaped. In order to ensure results, different sectors and organisations must take measures aiming at the same target.

The guidelines for physical activity promoting health and wellbeing and their implementation complement and deepen the existing measures promoting health-enhancing physical activity taken by the government. Many important aims are promoted in a comprehensive manner through such programmes as the Finnish Schools on the Move, Fit for Life, the National Policy Programme for Older People's Physical Activity, the Programme for Promoting Physical Activity among Immigrants, the National Overweight Programme and the National Strategy for Walking and Cycling. There are also active development measures under way that aim to promote physical activity among such groups as university students. It has been possible to select individual sectors or target groups from existing programmes and place them in the focus of the physical activity guidelines promoting health and wellbeing. The programmes and the targeted action strengthen the measures taken by the government to promote health-enhancing physical activity. The purpose of the national strategy for physical activity promoting health and wellbeing is to provide strong support for the comprehensive policy on health-enhancing physical activity pursued by the government.

4.1 GUIDELINE 1. Spending less time in a sitting position as part of everyday activities during the course of life

4.1.1 Present situation

Recent studies have shown that spending too much time in a sitting position is a health risk factor, even if one is engaged in leisure-time physical activity. Finns of all age groups spend too much in a sitting position: children and youngsters in early childhood education and care and at school, working-age people at workplaces and older people at home and in service housing. Natural mobility (non-exercise physical activity) has become rare as a result of computers, general digitalisation and the use of lifts and escalators and as people move from one place to another by car.

The main issue is how inactivity could also be reduced in our sedentary society by means other than increased physical activity. At least those working in a sitting position can choose between a broad range of different options each day. Already a small increase in activity may, over the course of the day, substantially boost energy consumption. For example, standing up from a sitting position increases energy consumption by 13 per cent. Low-level physical activity during the day may have a positive effect on such matters as weight control and the health of the musculoskeletal system.

The negative impacts of excessive sitting have only become known recently, and for this reason, few solutions to the problem have been proposed so far. A number of practical projects have been carried out in different states in Australia, making the country a pioneer in this field internationally. It is also known that a number of research-oriented trial projects have been carried out in Canada and the USA. In Finland, measures aimed at reducing sitting have been carried out at the UKK Institute and as a part of the Fit for Life (KKI) and the Finnish Schools on the Move (LK) programmes. The UKK Institute has carried out its first working life interventions on the subject. As part of the LK programme, a sitting card has been prepared, which lays out recommendations for sitting and enables the card holder to record the amount of time spent in a sedentary position. In the KKI programme, a version of the card has been produced for the working-age population. Reducing the amount of time spent in a sitting position is a central measure (in addition to increasing physical activity) in the LK programme. Experience has already been gathered on such approaches as sitting on a fitness ball while working and on being in an upright position when raising one's hand during class.

Excessive sitting has already been taken into consideration in the Current Care Guidelines intended for actors in the field of health care and physical activity. According to the guidelines, spending time in a sitting position is harmful to health and there is also increasing epidemiological evidence on the negative impacts of sitting on blood circulation and metabolism.

4.1.2 Objectives and measures

OBJECTIVE:
PEOPLE OF ALL AGES SHOULD SPEND LESS TIME IN A SITTING POSITION

Critical factors

In Finland, both the attitudes and operating culture favour a sedentary way of living, and making the lifestyle more physically active is a major challenge. However, it is possible to change the culture provided that we can reduce the amount of time spent in a sitting position each day by simultaneously working on a large number of activities that normally involve sitting. Early childhood education and care, school, studying and working days should include less sitting and sedentary periods and it should be possible to make the trips to and from school/studies/workplaces on foot or by bicycle. In most cases, this is at least partially possible. Travel chains should involve brisk physical activity outdoors. The time spent by the older people living in care institutions in a sitting position can also be reduced by helping and encouraging them to be more physically active and providing them with aids that support physical activity. People of all ages could make more personal business trips and other short trips on foot or by bicycle instead of using motorised vehicles.

During their leisure time, people could, instead of sitting in front of screens, spend more time engaged in physical activity or be otherwise physically active at home. Digital technology with games and other gadgets makes people (particularly children, youngsters and working-age people) physically more inactive. However, with public sector guidance, good planning and innovation, digital technology can be converted into a resource for physical activity.

A sea change in attitudes is needed in Finnish society. Citizens must become aware of the harmful effects of sitting and the benefits that can already be achieved with a small amount of physical activity. Society must encourage people to spend less time in a sitting position and permit physical activity whenever possible. Unfortunately, sitting is often the only socially acceptable form of being and too many restrictions are imposed on an active lifestyle. For example, children may be prohibited from going to school by bicycle, playing ball games in the yards of residential buildings may be banned, one must be in a sitting position at meetings and older people in care institutions may be prevented from being physically active. There must be suitable and safe indoor and outdoor facilities for physical activity in early childhood education and care units, in schools, at workplaces, in service housing, in offices and in leisure-time facilities.

Urban structures, municipal planning, bicycle and pedestrian paths and physical exercise facilities must

be developed so that they promote health-enhancing physical activity. Providing safe, barrier-free and pleasant everyday environments and keeping them in good condition will allow people of all ages to engage in physical activity. Well-kept and easy-to-access greenspace, such as yards, parks and recreational paths, will encourage people be physically active instead of being in a sitting position. For good examples, check the following databases: *www.liikuntakaavoitus.fi* and *www.lahiliikuntapaikat.fi*.

CENTRAL MEASURES

Actors at the national level:

- ensure that reducing excessive sitting and providing breaks at work are incorporated into steering documents, such as the rationale and application instructions of the Occupational Safety and Health Act and the Act on Care Services for Older Persons;
- highlight approaches promoting functionality and physical activity in early childhood education and care, pre-primary and basic education and upper secondary education, while making use of the documents steering their activities, the early childhood education and care plan and the national core curriculum;
- draw up national guidelines for reducing sitting, which include restrictions on sitting, operating and structural models for day care, schools, studying and working days and for supported housing and institutional care of older people and the most important practical measures for individuals of different ages and communities;
- the most important working-life actors need to use their influence to reduce the amount of sitting and the amount of monotonous stress during working days;
- produce innovations and tools and disseminate operating practices aimed at reducing excessive sitting. For example, they should encourage those companies producing games to create physically activating digital games and traditional board, card and other games for children, young people and families and encourage other software designers to develop digital tools for people of all ages that help to reduce sitting and increase physical activity;
- incorporate more information on the harmful effects of excessive sitting into sports, health, early childhood education and care and teacher training programmes and the teaching material used in the training programmes;
- strengthen the role of physical activity in basic studies and continuing education in urban and environmental planning and the construction sector;
- support the implementation of the National Strategy and Action Plan for Walking and Cycling 2020 by increasing the use of physically active modes of transport for trips to and from day care centres, schools and places of study and work and personal business trips.

Local-level actors:

- reduce sitting in the operating cultures of early childhood education and care, schools, places of study, workplaces, hospitals and the care of older people by instilling into their everyday routines operating and working practices that reduce sitting (hobby crafts, drawing and talking on the telephone in an upright position, physical activity during school breaks and other breaks, physically active recovery breaks, walking up the stairs and engaging in more physically active playing and singing moments, classes, conferences, meetings and seminars);
- improve the opportunities for changing playing, study and working positions with the help of adjustable workstations and other activating furniture and equipment.

PRACTICAL EXAMPLES

The schools taking part in the programme Finnish Schools on the Move *have introduced several different ways of arranging breaks between periods of sitting and have developed physically activating studying methods. The operating approaches can be divided into three categories: exercise breaks, active teaching methods, changes in learning environments and moving between locations. These methods make children more alert and help them concentrate on teaching. Physical exercise during breaks may be in the form of joint class walks and morning exercises and short exercise breaks coordinated by the pupils. Each class can draw up its own exercise break file. There are many examples of active teaching (such as being in an upright position when raising one's hand, indoor checkpoint tracks or learn-*

ing numbers in English by throwing a bag of peas from one pupil to another). Moving from one place to another within the school can be carried out by leaping. Joint morning assemblies involving physical exercise in the gymnastics hall, through the public address system or in the school yard are also widely used methods for preventing inactivity.

In the renovated ***Faculty of Sport and Health Sciences of the University of Jyväskylä,*** *all employees have electrically adjustable desks. This allows the employees to alternate between sitting and standing when working with their computers. According to the ergonomics guidelines of the Finnish Institute of Occupational Health, working in a standing position increases energy consumption, eases stress on the back and is also suitable for those suffering from acute back pain when sitting is impossible. Furthermore, studies have shown that alternating between sitting and standing makes work more efficient. It is strongly recommended that employers consider solutions like this.*

The first working life project of the UKK Health Services aimed at increasing active living and reducing sitting was prepared for the employees of the ***Finnair*** *Group. The project was in the form of an intervention lasting six months and involving 100 persons. Project participants were given instructions aimed at increasing physical activity and active living that were based on their own activity and fitness levels. As part of the project, a number of discussion events on the topic were held for the staff members involved and they were also sent messages encouraging them to be physically active during their holidays. The employer also offered all participants a chance to take part in guided physical exercise sessions in the employer's facilities outside working hours. The project increased the level of light physical activity among the employees. When measured with objective indicators, the increase was about one hour every day.*

The Southwest Finland Service Centre for Sustainable Development and Energy (Valonia) *has created a board game with a physical activity theme. The game, called Liikkumis-Alias (Mobility Alias), is played using the rules for the board game Alias but the words to be explained are connected with smart physical activity. The game has a number of different dimensions (non-exercise physical activity, public transport, traffic safety and the health and environmental impacts of traffic and physical activity). The game also has a Move! category, in which the words are exclusively presented by moving (instead of speaking).*

4.2 GUIDELINE 2. Doing more physical activity during the course of life

4.2.1 Present situation

There is great concern about the physically inactive lifestyle of the Finnish population. Citizens of all ages should be more physically active during their daily routines. Leisure-time physical activity is fairly popular among the Finnish population. However, this is not enough to ensure the level of daily physical activity required for maintaining health and wellbeing, as there is too little non-exercise physical activity in early childhood education and care, at school, at work, when commuting and during leisure time. The most important factors behind the decrease in overall physical activity are the increasing use of technology and digitalisation and changes in the way work is done, changes in lifestyles and environmental changes. A large number of different measures have been introduced to increase physical activity at different stages of life. The main points of the most important measures are described below.

Children, the young and families

Perheliikuntaverkosto (family sports network) is a broad-based network of partners promoting physical activity among families, which has been in existence since 2003 and is part of cooperation in the field of health-enhancing physical activity overseen by the central government. The network, whose work is coordinated by the Finnish Gymnastics Federation (until 2012 the coordination work was the responsibility of Nuori Suomi), is an open organisation that is also seeking partners among other actors and networks. The aim of Perheliikuntaverkosto is to promote the interests of actors in the field of family-centred physical activity, the development of facilities and resources, and training and communications. Perheliikuntaverkosto disseminates information about family-centred physical activity, produces material and plans, and organises training in the field of family-centred physical activity.

Nuori Suomi (Young Finland; now part of the Finnish Sports Confederation Valo) has been the most important sports organisation developing and implementing **measures to promote physical activity as a part of early childhood education and care.** The activities have involved training, campaigns, development

projects, the compilation of networks and the dissemination of good practices. In addition to supporting the activities of Nuori Suomi, the Ministry of Education and Culture has also provided funding for regional and local development projects in the field of early childhood education and care. Tutkimusmatkalla varhaiskasvatuksen uusiin liikkumiskäytäntöihin network (Exploring new physical activity practices in early childhood education and care), which is coordinated by Valo, was launched in 2012. Its aim is to build a national programme for physical activity and wellbeing in early childhood education and care. The first pilot projects will be introduced in 2013 and in the same year a network of field day care centres and mentors will be established to support programme work. The network also aims to influence topical issues affecting physical activity in early childhood education and care.

The **school environment** has been the main focus area in the national efforts to develop physical activity among children and young people since the start of the millennium. Physical activity in the school environment can be divided into two areas: physical education provided by schools and orienting the school operating culture more in the direction of physical activity. Under the Government Decree on National Objectives and Distribution of Teaching Hours in Basic Education of 28 June 2012 (422/2012), the total number of physical education lessons will be increased so that as of 1 August 2016 it will be 20 lessons/week/year (or two more than previously). In practice, this means that, whereas until 2016 the average number of physical education lessons in basic education grades 1-9 will be two per week, the number of classes will, starting that year, increase by one during two grades.

The task of the **Faculty of Sport and Health Sciences of the University of Jyväskylä** is to promote the health of the population through physical activity by training sport and health experts and by producing research information for the development of the sport and health culture in different areas of society. For the past fifty years, all of Finland's physical education teachers and a large proportion of the professionals in leading positions in the sports administration have been trained in the Department of Sport Sciences. The ten teacher education departments of the faculties of education and faculties of behavioural sciences in a total of eight universities are responsible for the physical education of class teachers.

Cooperating with teacher education departments, the Department of Sport Sciences of the Faculty of Sport and Health Sciences provides continuing education for all physical education and health education teachers working in basic education and at the upper secondary level in different parts of Finland. The aim of the training is to improve the teachers' skills on a long-term basis and to promote the physical activity, health and wellbeing culture at schools. Physical education teachers play a central role in schools when efforts are made to make schools more oriented towards physical activity. Developing the training and skills of physical education teachers, and particularly developing the training and skills of all primary school teachers so that they can become professionals in all aspects of physical activity and wellbeing at schools, is one of the challenges when the curricula of universities are updated.

The nationwide **Finnish Schools on the Move** project was launched in 2010 and later expanded into a programme covering the years 2012-2015. The objective of the programme is to increase physical activity during school days and in connection with them. The aim is to change the operating culture at school so that it can better promote the health and wellbeing of the pupils, teachers and other staff members. The programme helps to disseminate best physical activity practices and physical activity guidelines to school-age children in all comprehensive schools throughout Finland. By 2013, a total of 75 municipalities had joined the programme. According to school personnel, school days involving more physical activity have made schools more pleasant and allowed classes to be conducted in a more orderly manner. Funding for the programme comes from the lottery proceeds entered as revenue to the Ministry of Education and Culture. The programme is an extensive joint project between the public sector and the third sector.

The Finnish School Sport Federation and the Association of Physical and Health Educators in Finland have the promotion of physical activity and physical education at schools as their basic task. Since 2008, the Finnish National Board of Education has given municipalities and private providers of basic education support for developing club activities.[4] In 2013, the support totalled eight million euros and involved a total of

4 School clubs are an activity referred to in section 47 of the Basic Education Act, which is laid out in the national core curriculum; the principles of these activities must be stated in the curricula. The type and extent of the activities are set out in the annual work plans of the schools. Taking part in the club activities is done on a voluntary basis and free of charge for the children and youngsters concerned (Finnish National Board of Education 2013).

288 municipalities (N=304). In 2013-2014, the clubs numbered about 27,500 and about 320,000 pupils took part in their activities. Of the pupils, some 71 per cent were in grade 1-6 and 29 per cent in grade 7-9. A total of 85 per cent of the clubs were physical activity and sports clubs. Physical activity also plays an important role in the morning and afternoon activities provided for pupils in grade 1 and 2 and for special needs pupils in grades 1-9 under the Basic Education Act.

Sports clubs are traditionally the basis for all organised physical activity involving children and young people in Finland. All in all, they reach about 40 per cent of all girls and 50 per cent of all boys. Club activities have been systematically developed in many ways over the years in cooperation with Nuori Suomi, individual sports organisations, other national sports federations and regional sports organisations. Development grants for club activities have been used for hiring full-time staff and for developing physical activity among children and young people in the sports clubs. In 2013, the grants amounted to 3.85 million euros and were given to a total of 309 projects. **Companies in the sports sector** have also expanded their services in the field of physical activity among children and young people during the past ten years. According to the Kansallinen liikuntatutkimus (National Sports Survey; 2010), girls make more use of private and municipal services than boys.

There has been concern about the steep decline in physical activity (drop-off) and the ending of leisure-time physical activity (drop-out) **during adolescence** for many years, but few solutions have been found. Development grants for individual sports organisations and clubs have been used to make the age group more physically active, both at the competitive and at the leisure level. The most important project in the last few years has been the Your Move event, in which 42,000 young people engaged in physical activity during a period of six days in 2011. Positive experiences have been gathered from the secondary schools taking part in the Finnish Schools on the Move programme on slowing down the decline of physical activity with age. The progress has mainly been achieved by developing the involvement of the young. Two reports on the decline in physical activity among young people were completed in 2013 by the Ministry of Education and Culture as sectoral studies.

The Cultural and Sports Association of Finnish Vocational Education and Training, SAKU, is responsible for developing physical activity among **vocational students**. The Finnish National Board of Education, Ministry of Education and Culture and SAKU have jointly developed a professional's work capacity passport; the aim of this passport is to motivate students to improve their work and functional capacity on their own initiative already during the course of their studies and to make it easier to consider work and functional capacity in the operations of the educational institutions and as part of the teaching of professional subjects. The Finnish National Board of Education provided government grants for supporting the introduction of the work capacity passport in 2008-2012. The grants were given to a total of 60 training providers.[5] According to a survey conducted by the Finnish National Board of Education, a total of 7,510 students obtained work capacity passports in 2011. A total of 1,400 work capacity passports had been granted by spring 2012. The ALPO.fi wellbeing portal has been constructed to support the work capacity passport.

Development of **physical activity in universities**[6] is the responsibility of the Finnish Students Sport Federation (OLL). The guidelines for physical activity in universities were introduced in 2011. The work on the document was coordinated by OLL, which also supports and monitors their implementation. In addition to its basic activities, OLL has also extensively developed projects involving the chain of health-enhancing physical activity services in universities and the activities of student sports clubs. There has been a substantial increase in the universities' own projects aimed at promoting physical activity in recent years. In 2013, the Ministry of Education and Culture provided assistance to a total of eight projects focusing on physical activity in universities.

Educational needs and criteria concerning the quality, impact and efficiency of operations will be major considerations when universities of applied sciences are granted new operating licences at the start of 2014. One such criterion will be the organisation of student services (including physical activity and wellbeing services). In its application for an operating licence, the applicant must provide information on how these services will be organised.

For young men, the **Finnish Defence Forces** also play a major role as an institution helping to promote a

5 On 1 January 2013, there were a total of 134 providers of vocational upper secondary education and training and the annual number of students specified in the operating licences totals about 150,000.

6 In autumn 2011, there were a total of 41 universities in Finland. About half of all Finns aged between 19 and 29 study in higher education institutions (universities and universities of applied sciences).

physically active lifestyle and physical fitness. The Finnish Defence Forces are also an active player, a member of different networks and a development partner in the field of physical activity in Finland.

Working-age population

The National Working Life Development Strategy, the preparation of which was coordinated by the Ministry of Employment and the Economy, was published in 2012. The aim of the strategy is to improve the quality of Finnish working life, and it discusses physical activity as one way of promoting health and wellbeing. In order to implement the strategy, the national Working Life 2020 cooperation project was launched in 2013. It involves the Ministry of Education and Culture and the Ministry of Social Affairs and Health as key players.

The **Fit for Life (KKI) programme** has been promoting physical activity among the adult population since 1995 with the support of the Ministry of Education and Culture and the Ministry of Social Affairs and Health. The aim of the programme is to support an active lifestyle among the adult population and to make healthy nutritional habits more popular. The activities carried out as part of the programme focus extensively on actors in the field of health-enhancing physical activity, from nationwide networks to local-level actors. Focus areas and themes of the KKI programme include developing and disseminating physical activity and weight control models, supporting the entity 'functional capacity for working life', activating men in poor physical condition and providing better conditions for non-exercise physical activity. Local-level measures introduced as part of the programme include financial project support, training for decision-makers and actors in the field of health-enhancing physical activity, and local tours aimed at strengthening local cooperation. The national networks coordinated by the KKI programme plan and promote the dissemination of the focus areas and themes on a joint basis.

One basic task of **Suomen Kuntoliikuntaliitto** (Finnish Leisure-Time Sports Association; now part of **Valo**) has been to promote physical activity among the adult population, workplace physical activity and fitness centres in Finland. The activities have included the long-term development and dissemination of information, the building of networks, the organising of seminars, the dissemination of good practices, and the production of tools, statistics, reports and other material. The focus area of Valo for 2013-2015 is to support work communities in the promotion of physical activity. In 2012, it started a project aimed at making workplace physical activity more popular nationwide. The project will cover the years 2012-2015 and has received a special grant from the Ministry of Education and Culture. The project will involve the development of tools, the dissemination of good practices and the carrying out of effectiveness surveys in cooperation with regional sports organisations, the KKI programme, the Finnish Institute of Occupational Health and the UKK Institute.

According to the National Sports Survey (2010), a clear majority of the Finnish adult population still engages in physical activity **on its own initiative** (81% do it alone and 55% in groups). A total of 19 per cent of adults engage in physical activity in **sports clubs and other sports organisations**, while 15 per cent use the services provided by the **private sector** and 11 per cent engage in physical activity at events organised by their employers. The biggest increase has been in the percentage of those using the private sector services. The results of a gender-based examination show that men are more active than women in sports clubs (16% vs. 12%), while women are more active users of the services of private providers than men (20% vs. 10%). The same pattern is noticeable among children and young people. Group sports for women and girls are now provided on a commercial basis. This is due to the large demand and inadequate offerings by organisations.

Older people

The environments, physical activity counselling and provision of extensive physical activity programmes that allow older people to remain physically active can significantly slow down the weakening of their functional capacity, extend independent living and strengthen the self-determination of the older people. Physical activity counselling for older people has been developed by means of research and by producing quality recommendations for guided health-enhancing physical activity for older people (MSAH Handbooks 2004:6). Extending the target group of the Fit for Life programme to those over the age of 60 has also been an important measure at the national level. Originally, the programme only applied to those between the ages of 40 and 60.

An important step in the promotion of physical activity among older people was taken in 2004 when the Ministry of Social Affairs and Health, the Ministry of Education and Culture and Finland's Slot Machine Association (RAY) jointly launched **Strength in Old Age**

(VV), a national health-enhancing physical activity programme for older people. The main purpose of the programme is to increase physical activity among the older people living at home in the field of muscular fitness and balance, to provide more training opportunities and to create and establish new ways of organising physical activity for older people and of testing their mobility. The central tools in the establishment process are mentoring and training.

The work on physical activity among older people expanded in 2011 with the preparation of the **National Policy Programme for Older People's Physical Activity**. The programme has the following target groups: 1) people over the age of 60 who are retiring and who are physically inactive; 2) people over the age of 75 whose independent living is threatened by mobility problems; and 3) older people within the scope of home care, service housing or long-term institutional care whose functional capacity has weakened and who do not engage in enough physical activity. The programme contains a large number of proposals for increasing cross-sectoral cooperation, for developing physical activity environments, for increasing physical activity counselling and activities, for improving general awareness, attitudes and expertise, and for developing research and putting the research findings into practice.

Barrier-free living environments and easily accessible local services are crucial factors for enhancing the non-exercise physical activity of older people. The development programme for the housing of older people for 2013-2017, prepared by the Ministry of the Environment, states that poorly planned and maintained living environments and, in particular, barriers to mobility significantly weaken the chances of older people to lead an independent life. Furthermore, social insecurity and the lack of meeting places in residential areas lessen their willingness to engage in physical activity. Among the measures contained within the programme are the need to promote the construction of living environments, to help older people maintain their functional capacity and to integrate the housing and services of different population groups by steering municipal and urban planning.

Special groups

Studies have shown that physical activity is of particular significance to people suffering from a long-term illness or disability. Even though health and functional capacity are especially important in terms of the physical activity of special groups[7] (and adapted physical activity), the physical activity objectives of people belonging to special groups are largely the same as those of other people. Participation in special physical activity and disabled sports at the grassroots level can also support individuals in achieving their rehabilitation objectives. Guiding people with disabilities and long-term illnesses in physical activity requires expertise, the ability to tailor physical activity to individual needs and barrier-free facilities. At the local level, special and adapted physical activity and disabled sports are provided by municipalities, the sports organisations of special groups, public health organisations, organisations for people with disabilities, social and health care institutions and schools in cooperation with individual sports organisations and sports clubs. Some 90 municipalities have special sports instructors who coordinate physical activity services for special groups and support sports clubs in the organisation of special physical activity. Of the national actors, the Finnish Federation of Adapted Physical Activity and the Finnish Sports Association of Persons with Disabilities in particular help to ensure that physical activity can play a more central role throughout the lives of people belonging to special groups. A total of four successive national 'Erityisliikuntaa kuntiin' (special physical activity for municipalities) projects have been implemented to promote the physical activity of special groups. The projects have been carried out with the support of the Ministry of Education and Culture and the Ministry of Social Affairs and Health. The promotion of physical activity among special groups at the national level is coordinated by the special sports division of the National Sports Council.

Daily environment

The most important ministries influencing the promotion of opportunities for physical activity are the Ministry of Education and Culture, the Ministry of Transport and Communications and the Ministry

7 Physical activity of special groups (special physical activity, adapted physical activity) refers to the physical activity of such persons who, on account of a disability, illness or other weakening of their functional capacity or because of their social situation, have difficulty in taking part in physical activity offered to the public at large and whose physical activity requires adaptation and special expertise. The most important groups coming under the scope of this definition are people with disabilities and long-term illnesses and persons over the age of 65. Some elderly people have a fairly high functional capacity and because of this people whose functional capacity has weakened as a result of age, disability or a long-term illness are included in the special groups. (Report of the Committee for physical activity of special groups 2000, 1996).

of the Environment. The Ministry of Education and Culture creates opportunities for leisure-time physical activity and sports by steering and supporting the construction of sports facilities. Each year, the Ministry and the Centres for Economic Development, Transport and the Environment provide grants for establishing sports facilities and the leisure-time facilities connected to them. Most of the funding is granted to projects serving a large number of users, such as the renovation of indoor swimming pools and local sports facilities. The Ministry of Education and Culture also supports research and development projects aimed at improving the quality of sports facilities and ensuring that sports facilities are safe and accessible and serve people engaged in different types of physical activity.

The tasks of the Ministry of Transport and Communications in the promotion of physical activity are connected with the development of an everyday environment encouraging healthy mobility and, in particular, the strengthening of walking and cycling in the transport system. The Ministry supports research and development projects in this area. Practical work aimed at improving the mobility environment in this administrative branch is carried out by the Finnish Transport Agency and Centres for Economic Development, Transport and the Environment. The current **National Strategy for Walking and Cycling 2020** and its action plan are of importance for the efforts to promote walking and cycling. One of the aims of the strategy and the action plan is to increase the number of walking and cycling trips by 20 per cent. People are encouraged to do at least some of their trips on foot or by bicycle. There is change potential in municipalities of all sizes and in different population groups and for many different types of trips.

The Ministry of Education and Culture and the Ministry of Social Affairs and Health support the implementation of the strategy and the action plan with measures coming from their budgets. The Ministry of Education and Culture provides funding for the basic activities of the Finnish Network of Cycling Municipalities in cooperation with other partners. Moreover, between 2009 and 2013 the Ministry was one of the providers of funding for the walking and cycling research and development project (PYKÄLÄ) carried out by the Tampere University of Technology. As part of the Finnish Schools on the Move programme, work has been done since 2010 to promote school trips on foot and by bicycle in cooperation with the network of cycling municipalities, sports organisations and local projects. The KKI programme has been a partner in the funding and steering of physical activity steering project support coming under the Ministry of Transport and Communications. Measures promoting walking and cycling have also been included in the physical activity promotion projects funded by the Ministry of Education and Culture and Centres for Economic Development, Transport and the Environment and the projects funded as part of the KKI programme. Physical activity safety of children and young people has been promoted by the Safety in School Sports project and by producing, in cooperation with Liikenneturva - Central Organisation for Traffic Safety in Finland, online-based material to support traffic education in comprehensive schools from the perspective of promoting physical activity and safety.

In the administrative branch of the Ministry of the Environment, the objectives concerning health-enhancing physical activity are especially closely connected with the development of urban areas and the built environment and with the recreational use of natural environments. The built environment and structures influence people's lifestyles and their choices concerning the mode of mobility. People are more likely to choose walking, cycling or public transport involving walking if residential areas, workplaces, shops, schools and other services important in daily life are sufficiently close to each other. There is also a need for new physical activity ideas and opportunities that encourage more people to adopt an active lifestyle. The Ministry of the Environment and the Ministry of Education and Culture have jointly funded the preparation and updating of the liikuntakaavoitus.fi website. The Ministry also provides funding for other research and development activities regarding the built environment, natural environment and environmental protection, which include different themes concerning health-enhancing physical activity, and it organises training events as well. As part of the recreational use of natural environments, the Ministry funds and steers the activities of the Natural Heritage Services of Metsähallitus - the Forest and Park Service (national parks, strict nature reserves) and the activities of other state-owned hiking areas.

In addition to the ministries, many sports organisations (such as Valo and the Outdoor Association of Finland) and programmes promoting physical activity (Finnish Schools on the Move, KKI, Strength in Old Age) and networks (such as the Finnish Network of

Cycling Municipalities) work to improve a physical activity environment. The facilities group working under the steering group for the Committee on Development of Health-Enhancing Physical Activity (TELI) serves as the joint forum for parties aiming at a better physical activity environment. In the forum, the parties receive information on topical issues and agree on forms of cooperation aimed at better physical activity environments.

Chances for leisure-time physical activity and considering socio-economic gaps during the course of life

The state sports administration has for many years worked to encourage national sports federations and clubs to strengthen their input in leisure-time physical activity and among those people who do not have enough physical activity in terms of their health. The criteria governing the provision of performance-based grants for individual sports organisations are determined so that the physical activity of children and young people accounts for 50 per cent, the health-enhancing physical activity of adults for 25 per cent and competitive and top-level sports for 25 per cent of the funding. According to a sectoral report on sports organisations (2012), inadequate steering by the state means that the activities of the organisations have not developed in accordance with the objectives set by the public sector.

In 2012, top-level sports remained the biggest sector of the individual sports organisations, accounting for one third of their costs and for the largest increase in the number of staff. Physical activity for children and the young accounted for 24.5 per cent of the costs and the number of personnel working in this area had declined. Physical activity among adults was the smallest sector, accounting for 15 per cent of the costs. However, in a positive development, it has been growing for the past ten years. As a result of this undesired trend, the government has been forced to provide separate funding in order to boost such areas as the leisure-time physical activity of children, young people and adults and the promotion of gender equality. However, under the Sports Act the organisations should already take care of these areas as part of their basic activities and functions.

Since 2011, the state sports administration has paid particular attention to narrowing socio-economic gaps and strengthening equality in the field of physical activity. The most important measures have been the increase in the amount of development grants for sports clubs and the development of physical activity for immigrants. The support for sports clubs helps them implement the policies laid down in the Government Programme, particularly the sections concerning equality in the leisure-time activities of children and young people, and promote the development of low-threshold club activities. The aim is to increase citizens' participation in the field of physical activity, particularly among population groups whose participation is hampered by social, economic or cultural factors. The aim is also to increase physical activity among families and to decrease the drop-out/drop-off phenomena.

Concerning **immigrants**, the Ministry of Education and Culture is implementing a development programme to help immigrants in Finland become more integrated through physical activity. The development grants provided as part of the programme support projects that promote the participation of immigrants in leisure-time physical activity and create models for physical activity open to all. Other national measures aimed at narrowing the socio-economic gaps in physical activity have included the projects of Nuori Suomi to increase physical activity among excluded and disadvantaged children in 2009-2012 and the reports prepared on the subject in 2012-2013. Two reports on the drop-out/drop-off phenomena were also produced in 2013.

The role of **physical activity entrepreneurship** in the development and offerings of physical activity promoting health and wellbeing at all stages of life has grown during this millennium. Physical activity business is a growth sector and it is estimated that there are about 5,000 different enterprises in the field. The first development strategy for physical activity entrepreneurship was prepared in 2010 and was followed by an action plan in 2011. It is important to continue to strengthen the development of physical activity entrepreneurship as it provides a broad range of high-quality services in a mobile society.

4.2.2 Objectives and measures

OBJECTIVE 1.
PEOPLE OF ALL AGES DOING TOO LITTLE HEALTH-ENHANCING PHYSICAL ACTIVITY SHOULD ADOPT A MORE ACTIVE LIFESTYLE AND DO MORE PHYSICAL ACTIVITY.

a) As few people as possible should be completely physically inactive.
b) As many people as possible should meet the physical activity recommendations.

OBJECTIVE 2.
THE OPERATING CULTURES OF ORGANISATIONS SHOULD SUPPORT PHYSICAL ACTIVITY BETTER THAN THEY DO TODAY.

OBJECTIVE 3.
PEOPLE SHOULD BE ENGAGED IN MORE OUTDOOR AND INDOOR PHYSICAL ACTIVITY AND THE ENVIRONMENTS SHOULD ENCOURAGE PEOPLE TO BE MORE PHYSICALLY ACTIVE.

OBJECTIVE 4.
WALKING AND CYCLING SHOULD BECOME MORE POPULAR AS MODES OF MOBILITY.

OBJECTIVE 5.
SOCIO-ECONOMIC GAPS IN PHYSICAL ACTIVITY SHOULD BE NARROWED.

Critical factors

When people's course of life is examined, one can find periods of age and life and target groups that are especially important and demand particular attention in terms of physical activity. These include children under school age and children, youngsters and families with children in the weakest socio-economic position, young people at lower secondary level, vocational students, ageing blue-collar workers and older people living at home. Attention should be paid to periods of transition in the lives of individuals, such as the changeover from 6th to 7th grade or staying home with children as a mother or father. Measures focusing on these periods will be emphasised in strategies and action plans. It will be possible to make Finns more physically active during the course of their lives if physical activity can be flexibly integrated into different lifestyles and the different situations that people are in.

Positive experiences with physical activity during childhood and youth and the awakening of the motivation to be physically active provide a basis for physical activity as a life-long, leisure-time occupation. Pleasant physical activity sessions during early childhood education and care and with other family members serve as important factors for children in the creation and strengthening of a motivation to engage in physical activity. Even though the obligatory physical education classes at school are not enough to meet the physical activity needs of young people during their school-age years, they are of special importance as an instrument for helping pupils adopt a more active lifestyle with the help of physical activity. The broad-based physical education given by subject and class teachers provides the pupils and students with skills, information and experience; on this basis they can adopt a physically active and health-enhancing lifestyle. In addition to providing physical activity skills and a good physical condition, physical education at schools and engagement in sports clubs may also give young people the building blocks for healthy self-confidence and social skills and for other healthy living habits. Particular attention should be paid to increasing physical activity among girls, as they are physically more inactive than boys in all age groups.

The **operating cultures of organisations and communities** in which people spend most of the days are in a key position when efforts are made to tackle the challenge of physical inactivity in our society. There should be more time for physical activity when travelling to/from early childhood education and care, schools, educational institutions and workplaces and in service housing for older people. Organisations can develop operating approaches and conditions and create incentives and a positive atmosphere for physical activity. The support of and example set by the top management of an organisation are the basis for building an operating culture oriented towards physical activity. Physical activity should also be part of the organisation's overall and personnel strategy and wellbeing plans. An organisation can make the promotion of physical activity more effective by appointing a physical activity coordinator.

Close cooperation with the above organisations, maternity and child health clinics, school and student health care and occupational health care is particularly important for **motivating physically inactive people**. As regards older people and other groups requiring special services, such as mental health rehabilitees, it is crucial to strengthen an operating culture and a work approach that strengthen functional capacity in home and institutional care and in service housing. The Working Life 2020 project coordinated by the Ministry of Employment and the Economy provides an excellent basis for developing physical activity and cross-administrative and cross-operational cooperation involving physical activity as part of the broad-based development of the quality of Finnish working life. For more information on reaching physically inactive people through health care, see Guideline 3.

Early childhood education and care, school and the study environment are of crucial importance for physical activity among children and young people. Early childhood education and care, schools and educational institutions can encourage children and youngsters to be physically active as part of their basic activities (guided plays involving physical activity both indoors and outdoors, classes) during breaks, in clubs, when travelling to/from school, and during leisure time in the yards of day care centres and in school surroundings. Heads of early childhood education and care and principals, teachers and other staff of schools and educational institutions are in a key position when work is done to ensure that each child is engaged in physical activity each day in accordance with daily recommendations and that extensive opportunities for physical activity are provided. For example, it is of central importance that physical education classes are equally divided throughout the school year. At their best, the indoor and outdoor facilities of early childhood education and care units and schools and their adjacent surroundings are safe and act as an incentive for physical activity during and after school days.

Non-governmental organisations make a significant contribution in the efforts to provide reasonably priced physical activity services for people of all ages and all population groups. Traditionally, sports clubs and organisations have provided a broad range of different types of physical activity. Even though children and young people have been their main target group, services are also available for adults. Public health organisations and disability organisations also arrange different types of physical activity, and on account of the diagnosis they are often better placed to reach people who should be more physically active. Local associations and other actors could provide more low-threshold physical activity for those starting physical activity and for those engaged in physical activity during leisure time. Sports clubs and organisations could play a significantly larger role in the efforts to make physically inactive people more mobile. The most important thing is to incorporate physical activity promoting health and wellbeing into the strategies and action plans of individual sports organisations, other national and regional sports federations, sports clubs and other local organisations and actors.

All physical activity and **sports that people do at their own initiative** are important, irrespective of the type of physical activity and the way in which it is done. As society is changing, traditional sports have been joined by new types of physical activity, particularly as a result of the inventiveness of the young, such as skateboarding, snowboarding, parkour, wall climbing and other types of physical activity, many of which involve excitement and thrill. Doing a particular sport is often a strong way of life that brings people with similar mindsets together. It is important to accept these contemporary lifestyles, physically active ways of hanging out and types of physical activity and sports as part of the mainstream physical activity culture. In physical activity that children and young people are doing at their own initiative, it is important to make use of digitalisation in a new manner and to provide more physically active indoor and outdoor games and plays (Read more about the topic under Guideline 1).

Developing the Helsinki Olympic Stadium and its surroundings into the 'living room' of people of all ages engaged in physical activity is also an example of the new thinking. The traditional venue of competitive sports has excellent chances of developing into a vibrant place for physical activity and events by also serving as a place for fitness and leisure-time activities for people that are engaged in physical activity and leisure-time sports without competitive objectives. This also helps to make attitudes more positive towards physical activity in a broader sense and will make it easier for people to appreciate sports and physical activity. Such a trend would also be welcomed by other stadiums and large competitive sports venues in Finland.

Physical activity can only become more popular if it is easier for people to make choices favouring physical activity. At their best, **living environments** are pleasant and geared towards physical activity. This aspect must be taken into account in the planning, design and construction of residential areas. Outdoor exercise opportunities act as an incentive for physical activity in urban environments for people of all ages: greenspace, recreational tracks, nature and fitness trails, playgrounds and exercise points, rollator routes, skateboarding ramps, etc. There should also be sufficient opportunities for outdoor recreation on well-maintained bicycle and walking paths and nature and fitness trails. Well-maintained and well-planned yards and the surroundings of day care centres, schools and service housing and yard areas serve as an incentive for physical activity. There is plenty of development potential in the promotion of physically active ways of hanging out among boys and girls in such areas.

Easily accessible and high-quality **local sports facilities** are essential, particularly for the physical ac-

tivity that people are doing at their own initiative. It is important to use sports facilities during afternoons, evenings and weekends on a more efficient basis where they are only seldom used or their use is limited. In addition to purpose-built sports facilities, day care centres, schools, study places, workplaces and service housing units should have high-quality and accessible facilities that encourage people to be physically activity.

At the moment, **walking and cycling** have the greatest potential in the efforts to encourage Finns to be more physically active (and spend less in a sitting position). Measures to increase walking and cycling have gotten off to a brisk start in Finland, which is mainly due to determined environmental and physical activity steering and active cycling networks. This is a particularly well-suited area for multidisciplinary cooperation because promoting walking and cycling combines the synergy benefits of a number of different administrative branches: people become more physically active and healthier, there is less traffic congestion and atmospheric pollution, the learning capacity of schoolchildren increases and the work ability and efficiency of people in working life improve.

The most important aim is to improve the status of walking and cycling in the traffic system and traffic culture. Walking and cycling should be regarded as handy, quick and ecological modes of transport. In the urban development, it should be ensured that basic local services can be reached on foot or by bicycle. A comprehensive and high-quality network of bicycle and pedestrian paths, one which is also maintained during the wintertime, encourages people to be physically active throughout the year. Walking and cycling are made safer and more attractive by the fact that there are separate paths for both. It should be easy to make walking and cycling part of travel chains when travelling to/from work and school. Safety is an absolute requirement when children and young people travel to/from school. Safe and clearly laid out routes encourage people to be physical active at their own initiative. Considerably more should be invested in slowing down traffic (street bumps) in Finland near schools and day care centres and in residential areas so that motorists would drive more slowly and safety would be increased.

The **cost of children's leisure-time sports** has become too high for many families in recent years. The cost of starting sports is still fairly reasonable, but it should be possible to keep the increase in expenses under control as the training sessions become more frequent. At the moment, the chances of children and families to engage in physical activity depend too much on the costs. It should be possible to keep the costs of leisure-time sports under control and to reduce them through good planning, development measures, cooperation, direct or indirect financial support, taxation measures and other solutions. Developing equal opportunities for leisure-time activities requires a social contract under which all parties generating costs for the activities (central and local government, national sports federations, individual sports organisations, sports clubs and companies) should think about their activities from the perspective of the costs incurred by individuals engaged in the activities. It should also be remembered that families, too, can influence the choices concerning leisure-time activities and, consequently, the costs arising from them.

The price of leisure-time sports and their accessibility should also be examined more from the standpoint of gender. Attention should be paid to the equal opportunities of men and women and boys and girls to engage in reasonably priced leisure-time sports near their homes. At the moment, it seems that women and girls must pay more for engaging in leisure-time sports than men and boys because private services play a greater role in organised leisure-time physical activity. Moreover, the services provided by sports enterprises are located further away from home more often than the club activities, which are mostly available in local recreational facilities. Recognising and taking these factors into account is of major importance when consideration is given to physically inactive people and people in the weakest socio-economic position.

We also need operating models and support structures for enabling disadvantaged children and families to engage in leisure-time sports. Integrating leisure-time sports into the time spent in day care centres and at schools and influencing children and families through these institutions will make children and young people more equal in matters concerning sports because these organisations reach most Finns under the age of 18. There have been good experiences with using school health care to promote physical activity among children and young people in the weakest socio-economic position (free/discount tickets to sports services, guidance to low-threshold groups, etc.), and such activities should be continued and strengthened.

Central measures

Actors at the national and regional level:

- strengthen the role of physical activity in the early childhood education and care plan and in the national core curriculum for pre-primary, basic and upper secondary education;
- include recommendations for physical activity and outdoor recreation of older people in the application instructions of the Act on Care Services for Older Persons and the National Framework for High-Quality Services for Older People, and monitor the implementation of the recommendations;
- strengthen the contents concerning the promotion of physical activity (particularly expertise in the field of advisory and service guidance skills) in basic and continuing training in health care, early childhood education and care, and the education sector;
- strengthen the development information on walking, cycling and other physical activity in basic and continuing training on urban, environmental and traffic planning and technology and construction, and strengthen multidisciplinary product development in urban planning and construction;
- individual sports organisations and other national and regional sports and public health organisations and other actors in the field of promoting sports need to ensure that the aspect of physical activity promoting health and wellbeing is included in their strategies and action plans;
- disseminate the good practices of physically active operating cultures in early childhood education and care, at schools and places of study, and at workplaces and service housing and support the physical activity and wellbeing programmes of organisations; - activities at workplaces need to be targeted at ageing and physically inactive employees;
- develop measures to increase healthy and safe physical activity and reduce weight problems among young people at the lower secondary level. Particular consideration should be given to girls;
- develop and disseminate the operating model of the professional's work capacity passport among training providers and work-life actors; - make the management and staff of educational institutions and the employer sector more familiar with the opportunities provided by the passport in such areas as the promotion of studying and work ability and job application situations;
- increase the physical activity opportunities among ageing people, particularly activities that help to improve muscular fitness and balance and outdoor recreation. In physical activity among older people, attention should also be paid to the prevention of injuries resulting from falls;
- provide more residential and living environments that encourage physical activity and also implement new positive physical activity ideas and opportunities;
- develop urban areas in such a way that local services can be reached on foot and by bicycle and so that they can be included in longer travel chains by means of public transport, and disseminate good practices and practices that take safety into consideration and encourage people to travel to/from places of early childhood education and care, school, places of study and workplaces in a physically active manner;
- develop large physical activity facilities and sports venues such as the Olympic Stadium and their surroundings and services for the use of people of all ages engaged in leisure-time sports and leisure-time sports events and school, student and work community sports;
- compile, develop and disseminate best operating models and practices with the particular aim of offering low-threshold leisure-time sports for children and young people and reducing the cost of sports among children and young people; - create operating practices and support structures for promoting leisure-time sports among children and young people and their families in the weakest socio-economic position.

Actors at the local level:

- include an increase in sports among physically inactive children and their parents in the municipal plans concerning the wellbeing of children and young people and the service programmes and plans for older people (this applies to all those working with children, young people, families and older people, including organisations);
- municipalities, early childhood education and care, schools, clubs, companies and other local actors need to develop their cooperation with the aim of providing more equal physical activity opportu-

nities for children, youngsters and families. Local actors should provide low-threshold leisure-time physical activity for people of different ages and families, which is open to all, irrespective of background or capacity. Particular attention should be paid to girls and immigrant women and girls;

- engage and hear children, young people and their families, older people and different minorities in the planning of activities, services and facilities;
- make their operating cultures more oriented towards physical activity in early childhood education and care, schools, places of study, workplaces and service housing;
- heads of early childhood education and care, principals, teachers, maternity and child health clinics, school/student health care, employers, occupational health service, parties responsible for the services of older people and providers of sports services should strengthen their cooperation with the aim of increasing physical activity among physically inactive children, adults and families and ageing workers and retired people;
- include wellbeing in physical activity in the pupil and student care plans of comprehensive schools and vocational education and training;
- take a critical view of the costs of leisure-time sports and reduce them through good planning, development measures, cooperation and the acquisition of resources and by avoiding unnecessary costs;
- improve the interiors and yards of early childhood education and care units, schools, places of study and service housing and their adjacent surroundings and (sports) equipment so that they are better suited to physical activity;
- create residential and living environments that encourage physical activity and interaction, increase cooperation between sports planners and planners in the field of youth work, libraries and cultural services, and urban planners and make leisure-time physical activity more accessible by providing information about them to different population groups in an active manner;
- improve the quality, usability, extent and maintenance of bicycle and pedestrian paths and make the paths located near day care centres, schools and sports facilities safer by such means as traffic calming measures/bumps and, at the same time, ensure the barrier-free accessibility of local services.

PRACTICAL EXAMPLES

Physical activity during school days should be increased in comprehensive schools in Vantaa as part of the ***activities of the City of Vantaa, which are being carried out as part of the Finnish Schools on the Move programme****. Pupils are encouraged to travel to school on foot or by bicycle with the help of family sports passports and different campaigns. Sitting during classes should be interrupted by such means as morning gymnastics and weekly exercise breaks using the schools' public address system. In Vantaa, particular consideration is given to children that, for specific reasons, are not engaged in physical activity. Reasons for physical inactivity may include social problems, the socio-economic situation of the family, motor problems or being overweight. School nurses reach the pupils in question during yearly health checks and provide them with free family swimming tickets, summer camp places and invitations to low-threshold sports clubs arranged in schools.*

A number of ministries *support the comprehensive wellbeing of their employees by encouraging them to adopt a physically active lifestyle. Many ministries encourage their staff to commute and arrive at meetings on foot or by bicycle. There are safe places for keeping bicycles, both indoors and outdoors, and facilities for washing and dressing are provided in the work premises. At the Ministry of Employment and the Economy, bicycle commuters are provided with bicycle maintenance days and in the summer months they are served free porridge in the staff cafeteria. A number of ministries have their own gyms and, as a staff perk, sports and cultural vouchers. Ministries have sports clubs that provide staff and club members with opportunities for different types of physical activity. Long departmental meetings and workplace wellbeing days should include a programme with physical activity. In a new incentive, staff of the Ministry of Education and Culture have a chance to take a morning sauna, which helps individuals to be mentally refreshed and contributes to social interaction within the work community. The Ministry of Social Affairs and Health and the Ministry of the Environment arrange sports days for their staff during which time participants become familiar with different types of physical activity and are provided with recreational opportunities in pleasant natural surroundings. Different ministries view ergonomic solutions for work as an important part of the everyday safe and healthy routines of the employees. An occupational physiotherapist surveys the ergonomic needs of the staff members and proposes measures,*

such as the acquisition of special chairs or adjustable worktops. Occupational health professionals chart the employees' lifestyles as part of health checks and encourage physically inactive individuals to engage in regular physical exercise. In the Ministry of Social Affairs and Health, the occupational physiotherapist prepares gym programmes for individual staff members on the basis of referrals provided by doctors. Internal communications of the ministries support the promotion of a physically active lifestyle among the staff by means of disseminating information (such as by publishing the names of the top cyclists in internal ministry competitions).

With a senior programme targeting employees over the age of 55, ***Berner Ltd.*** *managed to raise the average retirement age by more than three years (from 60.7 to 63.9 years) between 2008 and 2012. The programme included measures promoting coping with work, health checks, work ability and career planning and extra days off for seniors. It also included physical activity measures, such as an exercise programme prepared by an occupational health nurse that helps to strengthen and maintain physical work ability. The programmes were tailored to the needs of the employees in question and took into account their workload. In 2013, Berner Ltd. was awarded the Finnish National Prize for Innovative Practices in Employment and Social Policy for the programme.*

Imatran Ratsastusseura (Imatra Equestrian Society) *is developing an operating model aimed at preventing the exclusion of children and young people and supporting social growth by means of socio-pedagogic equestrian activities. The society is cooperating with the family services unit of the City of Imatra, which selects ten children/young people for the activities organised by the society. The activities are not solely about riding. There are children who do not want or even dare to ride but are happy when they are able to care for horses and be involved in the activity. The City of Imatra had examined the interest of children from disadvantaged families in the supported equestrian hobby. It is hoped that the school counsellors of the City of Imatra could also be involved in the work to find children and young people that might be in danger of exclusion and to whom the supported equestrian hobby could be offered. The City of Imatra also aims to cooperate with Save the Children and the Mannerheim League for Child Welfare in the project.*

In the ***applications for development grants for club activities****, the clubs themselves have proposed that costs could be cut as follows: using local sports facilities and school premises, holding training sessions immediately after school (no transport costs), rationalising equipment purchases and 'equipment markets' (exchange/sale of second-hand equipment), avoiding long trips to competitions, preparing food in the camps, involving parents in the preparation of events, doing fundraising through unpaid voluntary work or through corporate responsibility investments and reviewing the team costs with the parents.*

In the ***Toimintakykyisenä ikääntyminen (Ageing with good functional capacity) project carried out as part of the Kaste programme in Western Finland,*** *advisory services and low-threshold meeting points for older people have been set up in such municipalities as Raisio, Salo and Rauma. The meeting points offer a broad range of activities that are jointly organised by parties responsible for the care of older people, cultural events and sports activities. Active senior citizens and those taking part in the work of pensioners' organisations are involved in planning the programme and act as instructors in physical activity and gym groups. The information afternoons for older people, which are held in the dispersed settlements of the City of Salo as part of the project, always involve physical activity sessions. The opportunities for physical activity in the area and participants' hopes concerning future activities are also charted during the events. As part of the project in Salo, a rollator-friendly cultural walk has also been introduced. The meeting points have provided an opportunity to test different forms of physical activity. 'Sports bingo', in which this traditional game has been transformed into a new entity, has proved to be a popular new pastime.*

4.3 GUIDELINE 3. Making physical activity a central part of the promotion of health and wellbeing, the prevention and treatment of common illnesses, and rehabilitation.

4.3.1 Present situation

A physically inactive lifestyle has become a global public health problem and is comparable with obesity, smoking and alcohol consumption. There is indisputable and strong research evidence about the positive

impact of physical activity on human health and well-being. Despite this, physical activity is not used often enough as a tool in social and health care.

In the future, the promotion of physical activity must play the same role in social and health care as that of combating smoking and alcohol use, nutritional counselling and pharmacotherapy. This aim can be achieved through the systematic and long-term training of experts, the development of work processes and approaches, and broad-based partnerships.

Under the **Health Care Act (1326/2010),** municipalities and joint municipal authorities for hospital districts must create and strengthen practices concerning the promotion of health and the narrowing of health gaps. Under the act, municipalities must provide all age groups residing in their areas, including those outside working life, with counselling services that promote wellbeing, health and functional capacity. Health counselling and checks must form a functional entity with the other services provided by a municipality. Under the Health Care Act, municipalities must provide people residing in their areas with maternity and child health clinic services and school and student health care. These play a significant role in the promotion of a healthy lifestyle and physical activity among children, young people and families.

Further provisions on the content of the Health Care Act are laid down in the Government Decree on **Maternity and Child Health Clinics and School and Student Health Care** and Preventive Oral Health Care of Children and the Young (338/2011). Under the follow-up for implementing the Decree (2012), four-year-old children undergo extensive health checks in 88 per cent of the child health clinics, while pupils in first grade undergo extensive health checks carried out as part of school health care in 79 per cent of the health centres and children in fifth grade in 90 per cent of the health centres. Even though the implementation of the Decree poses challenges to municipalities and health centres, the trend has been positive since 2010.

Occupational health care plays a significant role in the promotion of a healthy lifestyle and, consequently, in physical activity among working-age people. Under the **Occupational Health Care Act** (1383/2001), the maintenance and promotion of employees' work ability and examination of their rehabilitation needs are the responsibility of occupational health care. Occupational health care provides advice and guidance at workplaces on how to carry out activities that maintain work ability. When the rehabilitation needs of employees are examined, consideration is given to their health and work, the working environment, the work community and the professional skills of the employees in question. Based on these examinations, measures will be taken to maintain or recover the employees' work ability as early as possible if there is a threat of disability. Promotion of employees' health in the area of physical activity can best be done through genuine cooperation between the workplace and occupational health care.

Under the Occupational Health Care Act, employers must provide all employees with occupational health care. A great deal of emphasis in the act is put on the role of occupational health care in promoting the health and work ability of employees. Occupational health care services carry out health checks on individual employees and draw up health plans. A total of more than one million health checks are carried out as part of occupational health care each year. In a large proportion of them, physical activity routines are also examined and, when necessary, employees are encouraged to be more physically active. Occupational health care organises short-duration and needs-based physical activity groups, such as neck and back groups. A large number of fitness tests are carried out as a part of health checks. Groups of longer duration that are intended for all employees are usually the responsibility of the providers of physical activity services.

Physical activity counselling is a major instrument in the efforts to encourage physically inactive people to adopt an active lifestyle. Physical activity counselling[8] must be carried out by health care professionals, be on a personal basis, involve face-to-face meetings and be a part of health counselling. In order to be successful, physical activity counselling must be in the form of multidisciplinary cooperation. What is required is cross-administrative cooperation between municipal social and health care services, early childhood education and care and school and sports services. Primary health care plays a central role because it can find the physically inactive people that are in need of counselling. These are precisely the client groups that can be reached via client contacts at health centres and materni-

8 In this connection, physical activity counselling means personal physical activity counselling involving face-to-face meetings, and it is a part of health counselling. In counselling, use can be made of different types of health measurements and material supporting physical activity, such as guides and other instructions. The people providing the counselling must possess adequate training in the field of health or physical activity. The counselling must also include an assessment of the negative impacts of physical activity and what are called contraindications.

ty and child health clinics, as well as through school and student health care and special health care. The chain of physical activity services from health care to other sectors must function in a seamless fashion. In achieving this, such instruments as the electronic referral system serve as useful tools. Sports clubs and physical activity enterprises and other providers of low-threshold physical activity services, such as public health organisations and folk high schools, should also be part of the service chain of physical activity counselling.

The practices of physical activity counselling have been extensively developed in recent years by expert bodies and as part of physical activity promotion programmes (see, for example, Kokemuksia toimivista liikuntaneuvonnan käytännöistä, Liikunnan ja kansanterveyden julkaisuja - Experiences of effective practices in physical activity counselling) 238). There is research information on the results of physical activity counselling. Health care professionals consider it important to promote and support physical activity among physically inactive clients. Short consultation hours and a lack of training are, however, deemed to be obstacles to counselling. Professionals who themselves are physically active or are of the view that patients benefit from a change in lifestyle are most likely to provide their clients with counselling. For this reason, the many individual-related and organisational obstacles connected with the professionals should be identified during the development of counselling practices so that physical activity counselling could be successfully integrated into health care. According to a survey carried out as part of the KKI programme (2013), physical activity counselling is provided in half of all municipalities (a total of 200 municipalities submitted responses to the survey). A total of 70 per cent of the counselling is coordinated by municipal sports services and 30 per cent by health services.

As part of the Suomalainen Sydänohjelma (Finnish Heart Programme; 2006-2011), and with the support of the Ministry of Social Affairs and Health and RAY, the Finnish Heart Association has developed the **Neuvokas perhe (Resourceful family) method**. The purpose of the method is to help families with children assess and promote their own physical activity and eating habits. The method contains tools and supplementary training supporting their use for maternity and child health clinics and school health care. A total of about 2,000 health care professionals will have received training in the use of the method by summer 2013. The method is a permanent part of the activities of the Finnish Heart Association and its development will continue as part of the Yksi elämä (One Life) project entity.

Move! - physical capacity follow-up system is a national information collection and feedback system focusing on the physical capacity of 5th and 8th grade pupils in basic education. It produces information that can be combined with the extensive health checks carried out on 5th and 8th graders. The main purpose of the system is to encourage individuals to take care of their physical capacity on their own initiative. The development of the Move! system, which was started in 2010, was the responsibility of the University of Jyväskylä Faculty of Sport and Health Sciences and the funding was provided by the Ministry of Education and Culture and the Finnish National Board of Education. Move! has been constructed in cooperation with the Ministry of Social Affairs and Health, the National Institute for Health and Welfare and the Trade Union of Education in Finland. The Move! system and the website are already complete, but nationally the system will only be launched during the school year starting on 1 August 2016, when the new national curriculum for basic education is introduced. However, there are no obstacles to testing and introducing the system on a local basis before 2016. Some of the material prepared for the system is specifically intended for the use of school health care.

Use of physical activity in the prevention and treatment of illnesses is well-justified and described in the continuously updated **Current Care Guidelines** intended for health care actors. The aim of the guidelines is to promote the use of physical activity in the prevention and treatment of illnesses and rehabilitation. The main tasks of doctors are to assess the grounds for physical activity and its dangers and the mobility restrictions arising from illnesses and to motivate people to be more physically active. When necessary, the physical activity programme is jointly planned by the doctor treating the patient, a physiotherapist or a physical activity professional and it will be carried out in accordance with the patient's needs — independently by the patient, under instructions or in a group led by an instructor. In health care, the information on physical activity is appropriately documented and the adequacy of the physical activity is assessed on the basis of health. The physical activity objectives are agreed upon with the patient. When referring patients to physical activity care, the health care professionals must be familiar with the local

network providing physical activity services (such as groups specialising in guided physical activity). There are centres and experts specialising in sports medicine in a number of localities.

The **physical activity prescription** has been developed as a tool for the physical activity counselling provided by doctors. The prescription was launched about ten years ago. According to the results of the physical activity prescription project (2001-2003), doctors had a fairly positive attitude towards the prescription even though a lack of time and routines and unfamiliarity with the matter made it more difficult to use the prescription. Physical activity counselling can only be increased if there are changes in doctors' work and operating cultures. This requires long-term efforts.

Basic and continuing training of health care professionals will play a key role when physical activity counselling is developed. A number of reports have been prepared on the position of health-enhancing physical activity and counselling skills in health care training programmes (for example, Terveysliikunnan ammatillisen koulutuksen kehittäminen, Terveyden edistämisen keskus - Development of vocational training in health-enhancing physical activity. Centre for Health Promotion 2006). The decentralised nature of the training is a major challenge in training programmes connected with health enhancement. Particularly in social and health sector training, too little attention has been paid to health-enhancing physical activity considering how important a role physical activity counselling plays in work tasks in these sectors. For this reason, the development of the contents of the training programmes will require intensive development work in the future.

Exercise-based rehabilitation has been part of the work carried out in the social and health sector for many years. It is an important instrument in the promotion of people's functional capacity in all age and population groups. Exercise-based rehabilitation is mainly carried out by physiotherapists in health centres, hospitals and rehabilitation institutions. Physiotherapists are the most important group of experts in exercise-based rehabilitation. In addition to physiotherapists, other social and health care professionals, such as practical nurses and bachelors of social services, are also involved in the exercise-based rehabilitation of the clients. According to an estimate by the Ministry of Education and Culture, about 100 sports instructors cooperate with physiotherapists in social and health care units. A large group of physiotherapists also work in different tasks in the field of physical activity promoting health and wellbeing and physical activity intended for people with disabilities and special groups. Exercise-based rehabilitation is also part of programmes and projects promoting physical activity among older people. There are no comprehensive studies on the present state of exercise-based rehabilitation.

4.3.2 Objectives and measures

OBJECTIVE 1.
STRENGTHENING PHYSICAL ACTIVITY COUNSELLING FOR PEOPLE OF DIFFERENT AGES AS A PART OF LIFESTYLE GUIDANCE IN SOCIAL AND HEALTH SERVICES BY ALL PROFESSIONAL GROUPS

OBJECTIVE 2.
PHYSICAL ACTIVITY COUNSELLING AS A PART OF THE DEVELOPMENT OF SOCIAL AND HEALTH CARE SERVICE CHAINS AND CARE PROCESSES

OBJECTIVE 3.
STRENGTHENING THE POSITION OF EXERCISE-BASED REHABILITATION IN FINLAND

Critical factors

Health care staff are in a key position when efforts are made to reach physically inactive people and when issues concerning physical activity are discussed — in maternity and child health clinics, in school and student health care, in occupational health care, in health centres, in care institutions for older people and elsewhere in social and health care. Social and health care professionals must be up to date on the health impacts of physical activity, understand the risks arising from excessive sitting and physical inactivity to health and wellbeing, and identify them in their practical work. They must also know how to serve and help people of different ages and backgrounds. Social and health care professionals must possess good counselling and motivating skills when encouraging people to become more physically active and able to engage in multidisciplinary cooperation with other health and physical activity professionals and early childhood education and care and schools. Health care clients must receive personal and systematic physical activity counselling and up-to-date guidance on the phys-

ical activity opportunities and providers in their areas, such as suitable physical exercise groups. The best options for beginners are groups engaging in low-threshold physical activity[9], such as groups with guided physical activity. There is a need for more tools in health care for promoting physical activity. Health care personnel also act as physical activity counsellors in such places as health centres and service housing units.

It has been noticed in development projects concerning physical activity counselling that it is of crucial importance for the success of the activities that the management, such as senior physicians and the directors of sports services, are committed to the activities. It is important to commit key persons to the activities so that the work can be provided with adequate financial and human resources. A continuing exchange of views between partners and marketing in the media are of particular importance for the continuity and success of the activities.

In order to put exercise-based rehabilitation on a more efficient basis, there is a need for more multidisciplinary cooperation among social and health care professionals. Good practices could be modelled on the basis of examples found in other Nordic countries, where exercise-based rehabilitation has a stronger position than in Finland. The training and practical work of physiotherapists could include more guidance for other health care (and early childhood education and care, school and social care) professional groups so that clients can be encouraged to be more physically active. This would not require new resources since it is primarily a question of changes in attitudes and operating practices in the work of each individual.

Rehabilitation services play an essential role in the maintenance of work ability. Too often the physical activity enthusiasm generated during rehabilitation fades away when the rehabilitation is over. Rehabilitation service providers, the Social Insurance Institution or other insurers, physical activity professionals and municipal sports services should jointly build a rehabilitation path that allows individuals to do exercise-based rehabilitation as independently as possible.

Municipalities should recognise the role of physical activity as a factor influencing the municipal economy and a factor making the municipality more appealing. Physical activity guidance and counselling and exercise-based rehabilitation must be firmly based on wellbeing, health and physical activity strategies and the age-policy strategies of individual municipalities. Municipalities must direct enough resources at physical activity counselling and exercise-based rehabilitation, the provision of focused physical activity services and related staff training. Strengthening these services in municipalities is possible since the structures of the social and health care service system are in a state of transition.

CENTRAL MEASURES

Actors at the national level:

- ensure that when the Decree on maternity and child health clinics is implemented, the clinics provide families with active support and guidance in physical activity;
- strengthen the contents connected with healthy lifestyles and physical activity and the guidance for these lifestyles and activity in the training for social and health care diplomas and degrees, in continuing education and in care guidelines;
  - prepare an initiative aimed at changing the contents of education and training;
  - provide continuing training in physical activity counselling for doctors and other health care professionals, increase the number of instructors and strengthen their expertise;
- develop training and continuing training for social and health care personnel aimed at reducing physical inactivity and sitting and make the training more accessible;
  - produce a continuing training model and online training in cooperation with training providers;
- make physically inactive people more aware of the factors affecting their health and of the health-enhancing impacts of physical activity;
- create new health service innovations by making use of wellbeing technology and by other means;
- ensure that there is room for physical activity information in social and health care databases;
  - draw up guidelines for system developers and producers;

9 According to the definition provided by Valo (2013), low-threshold activities have certain distinctive features and the activity must contain at least one of them before it can be classified as a low-threshold activity. These distinctive features include offering the activity at a reasonable price, organising the activity near people's everyday environments, adding broad-based contents, increasing the amount of basic information and skills concerning physical activity, and organising the physical activity separately or together. The accessibility of the activity is directly proportional to the number of criteria met.

- examine the role, tasks and extent of exercise-based rehabilitation as part of the work to examine multidisciplinary rehabilitation referred to in the Government Programme and prepare a development plan for strengthening the position of exercise-based rehabilitation.

Local-level actors:

- increase professional physical activity counselling aimed at changing lifestyles and information on factors affecting health, particularly in services that are used by a large proportion of the population: maternity and child health clinics (in primary health care), school health care, student health care, occupational health care, but also special health care, services for older people and pharmacies; the work should also involve the encouraging of special groups, people with disabilities, unemployed people and immigrants to engage in physical activity;
- increase cooperation and put the service chains on a more efficient basis at the municipal level with different actors (social and health care, physical activity and education sectors, expert institutions, organisations and companies);
- give consideration to the physical activity offerings of local social and health care organisations and provide organisations with extensive physical activity offerings with facilities suitable for physical activity;
- provide extensive information about health-enhancing physical activity and post information on the health-enhancing physical activity services available in individual municipalities in calendars, brochures or on the Internet;
- add physical activity to procurement agreements made by municipal social and health care services;
- strengthen the role of physical activity in care and rehabilitation plans, particularly in the case of patients suffering from musculoskeletal disorders and in student welfare services;
- gather, disseminate and instil successful physical activity counselling practices and strengthen the networking of actors by such means as the development forum of physical activity counselling and the exchange of information between experts by means of expert forums;
- strengthen expertise in the promotion of physical activity and exercise-based rehabilitation among different professional groups;
- make use of the expertise possessed by experts in physical activity and exercise-based rehabilitation, such as physical education teachers, experts in sports medicine and physiotherapists, in the guidance and encouragement of other professional groups to engage in physical activity and of the tools supporting the promotion of physical activity;
- strengthen multidisciplinary cooperation and teamwork, making use of successful models applied in other Nordic countries.

EXAMPLES OF GOOD PRACTICES

*At **the University of Turku, medical students** take the course Physical Exercise and Nutrition during the last joint study week of the sixth year of study. The course takes place in the Sports Institute of Finland in Vierumäki. The aim is that students get ideas by doing and experiencing things together. At the same time, they also learn how to deal with clients in practical situations, establish networks and take care of their own wellbeing. The University of Turku has given the Physical Exercise and Nutrition the award of the best course of the year, as it represents a new approach to medical education: studies take place in cooperation with the third sector and contain the new idea of close cooperation between health and physical activity sectors. The course, which has received an exceptional amount of positive feedback, has aroused genuine interest in physical activity and its health effects among the students.*

*As part of the **project to develop the physical activity service chain in the Lahti liikkeelle (Lahti on the Move) project in** 2006-2008, a path from the social and health services to the physical activity counselling available in the city's sports services and physical exercise groups was successfully implemented. Encouraging clients to adopt an active lifestyle using the LIIKU referral incorporated in the patient system proved a successful approach and clarified the operating model, in which health-enhancing physical activity was seen as a form of preventive care. The project had permanent results: health-enhancing physical activity became a focus area in the city's sports services and health-enhancing physical activity became more practically oriented. The city's sports services employed a physical activity counsellor and*

low-threshold physical exercise groups became more popular. A large number of service providers from different sectors also became involved. The fact that sports clubs increased their input in health-enhancing physical activity was a source of particular satisfaction in the project.

The ***Karhu Pharmacy in Pori*** *is one of Finland's physical activity pharmacies. The aim of the physical activity pharmacy concept, launched by the Fit for Life programme, the Association of Finnish Pharmacies and the Finnish Lung Health Association, is to incorporate health-enhancing physical activity into a pharmacy's product range and generate added value for the services provided by the pharmacy. The Karhu Pharmacy has a physical activity contact person on its payroll who cooperates with the networks of many local physical activity providers, such as the Finnish Sports Federation of Southwestern Finland, municipal sports services and sports clubs. The theme of health-enhancing physical activity is present in the pharmacy in the form of different activities and products. In cooperation with local networks, the Karhu Pharmacy has held thematic and test days for its customers. The pharmacy has tested a broad range of new methods encouraging people to be more physically active, such as the use of physical activity folders and the Askel (Step) campaign. All staff members have become motivated to take up health-enhancing physical activity issues with customers and have also become more physically active themselves. The physical activity contact person working in the pharmacy has taken part in health-enhancing physical activity training and also acts as an instructor in the physical exercise group for the staff members. In 2013, the Fit for Life programme awarded Karhu Pharmacy a prize for implementing the physical activity pharmacy concept.*

Supported by the Fit for Life programme, the ***Turku Traffic Lights project*** *has created a successful concept for reaching overweight people in working age and motivating them to take part in regular physical exercise in groups. At the same time, work has been carried out to develop cooperation between the wellbeing and leisure-time sectors. The project is based on the wellbeing programme of the City of Turku. The project involves increasing targeted health counselling for people who belong to the risk groups concerning diseases common in Finland. The service path of municipal residents from primary health care to the services of the sports sector works smoothly. The wellbeing sector focuses on encouraging significantly overweight people to join weight control groups. The leisure-time sector, cooperating with the third sector, arranges physical exercise groups for people of all sizes and fitness categories. There are two coordinators in the project, one of whom works in the wellbeing sector and the other in the leisure-time sector. The aim is to ensure that cooperation between the sectors and the successful practices created during Turku Traffic Lights will outlive the project.*

In the project ***'Liikuntapolkua pitkin aktiiviseksi liikkujaksi' (Becoming Physically Active on a Sports Path), carried out by the Finnish Heart Association****, physical activity counselling practices in the Helsinki region are developed so that everybody with a history of coronary heart disease is provided with physical activity guidance, is encouraged to engage in physical activity independently and finds suitable ways of engaging in physical activity. Cooperation helps to build a path of physical activity guidance from health care to the providers of physical activity services and independent physical activity. It is a question of the grading of physical activity guidance, of a clearer division of labour and of developing cooperation. As part of the physical activity guidance, a person with a history of coronary heart disease is provided with support, information and guidance concerning suitable and safe physical activity. The aim of the guidance is to increase engagement in physical activity in accordance with the recommendations concerning the disease. In addition to a model for physical activity guidance, guidance material should also be produced, while the expertise of the different actors in the field of physical activity guidance should be strengthened by means of continuing training. The project development process should be described and disseminated to other actors and those working with people suffering from other diseases so that they can modify it in accordance with their needs. The project is a joint effort between municipalities and organisations.*

4.4 GUIDELINE 4. Strengthening the role of physical activity in Finnish society

4.4.1 Present situation

The importance of physical activity promoting health and wellbeing has been recognised in the public documentation produced by the central government since the late 1990s. Health-enhancing physical activity has been considered in all government programmes since

1999 and it was added to the Sports Act in 1998 (1054). As we are progressing towards the 2020s, there are increasingly strong signals that the general atmosphere is becoming more favourable towards a more physically active society. One example of this is the following opinion of the Finance Committee of the Finnish Parliament:

In its report on the State Budget for 2013 (39/2012), the **Finance Committee** states as follows:

The aim of sports policy is to ensure the availability of sports services and to promote a physically active lifestyle. It proposed that a total of 152.4 million euros be allocated for sports expenditures, of which the planning of the renovation of the Helsinki Olympic Stadium would account for 6.3 million euros. The Committee states that the Finnish sports culture is facing major challenges. Most of the population is too physically inactive in terms of health, there is less non-exercise physical activity and the physical condition of different age groups has weakened. Physical inactivity, being overweight and smoking are a global public health problem. Physical inactivity connected with diabetes alone is costing Finland about 700 million euros each year. The Committee emphasises that the most important institutions of our society, such as maternity and child health clinics, the day care system, school, the Finnish Defence Forces, working life, health care and care of older people, must consider the importance of physical activity in their own decisions. Even though the resources allocated by the government to sports increased by 42 per cent during the previous government period, the change cannot be achieved with the work of the sports administration alone. The Committee emphasises adherence to the ethical principles governing sports and physical activity so that such unhealthy phenomena as doping, violence and match fixing can be eliminated. The Committee considers it necessary that the results achieved with increased funding and the impacts of the measures taken by the central government to promote physical activity should be carefully assessed. The Committee emphasises that sports funding should be focused on those areas that bring the biggest reductions in physical inactivity among the population.

The opinion of the Parliamentary Finance Committee helps to underline the topical nature and necessity of the strategies for physical activity promoting health and wellbeing and serves as an obligation to prepare strategies that are based on strong objectives and measures. In its opinion, the Parliamentary Finance Committee recognises the role of physical activity in enhancing the health and wellbeing of the Finnish population and that it is a factor balancing the Finnish economy and providing it with more competitiveness. The Committee's opinion serves as a strong obligation to different actors at different levels of society to promote physical activity. Two main perspectives concerning the promotion of health and wellbeing stand out in the opinion: 1) Making decisions favouring physical activity using the cross-cutting principle in all institutions of society, and 2) directing physical activity funding at areas that bring the biggest reductions in physical inactivity among the population.

Under section 2 of the **Sports Act** (1054/1998), *the Ministry of Education is responsible for the overall management and development of the sports sector and for making it part of sports cooperation within the central government. At the regional level, the tasks are the responsibility of the regional sports services, while at the local level they are the responsibility of the municipalities.* The current Sports Act both allows and obliges sports authorities at different levels to take responsibility for the management of the physical activity sector. The preparations of the work to update the Sports Act began in 2013.

Successful and extensive **stakeholder cooperation** and high-quality **management and coordination** of the cooperation play a key role in the efforts to improve the status of physical activity in Finnish society. It is also very challenging as result of the broadening of the physical activity sector (wider range of actors and views). When the external stakeholder groups of the physical activity sector are examined, it can be noticed that there has been progress in such areas as cooperation between administrative branches in recent years. At the central government level, a number of ministries are represented in different working groups discussing physical activity (such as the steering group for health-enhancing physical activity, the Finnish Schools on the Move steering group and the TELI facilities group), while officials responsible for the physical activity sector are represented in the working groups of other ministries (such as the Ministry of the Interior's steering group for the comprehensive prevention of accident injuries and the smart mobility steering group of the Ministry of Transport and Communications). There is significant potential for future cooperation, at least in the administrative branches of the Ministry of Employment and the Economy, the Ministry of Transport and Communications, the Ministry of the Environment and the educational administration. Cooperation between

the sports sectors of the Centres for Economic Development, Transport and the Environment and regional state administrative agencies in the field of the social, health and education sectors has also been initiated during the past few years as part of programme-based work. Management and coordination of the diverse stakeholder groups has been successfully carried out in the extensive programmes promoting physical activity. The programmes can be characterised as intermediary organisations between the resourcing and steering originating from the government and the concrete measures arising at the local level. They have helped to create an open and trusting atmosphere between different stakeholder groups and a clear, regular and continuous cooperative structure.

The status of physical activity in Finnish society is to a great extent determined by the work to promote physical activity in **municipalities**. Each year, municipalities allocate a total of 45 million euros to clubs in grants, and in addition to this funding, special grants are also available to clubs in some municipalities. Indirect support by municipalities to clubs is larger than direct support and may total as much as 450 million euros. In 2010, in collaboration with an expert group, the Ministry of Social Affairs and Health and the Ministry of Education and Culture drew up guidelines for municipalities on how to promote physical activity. The aim of the guidelines is to encourage municipalities to make physical activity a central strategic choice.

Studies have shown that there is great variation in the status of health-enhancing physical activity between municipalities. In 2010, only 37 per cent of all municipalities had prepared a physical activity strategy or plan as part of a regional strategy or as an internal municipal project. Half of the municipalities reported that elected municipal bodies had made decisions aimed at promoting physical activity among the residents on an extensive basis. Such measures included the construction of sports facilities, providing sports facilities free of charge and developing the steering of physical activity.

The welfare report of a local authority describes the wellbeing policy pursued in a municipality. According to information on the health-promotion activities of municipalities available to the National Institute for Health and Welfare (2012), it seems that municipalities are discussing physical activity in more detail in their welfare reports than before. In 2012, a total of 36 per cent of all municipalities included a report on the level of physical activity among the residents in their welfare reports. Two years earlier, the figure had been 16 per cent. There has also been a slight increase in the role of physical activity in municipal strategies. In 2012, a total of 54 per cent of all municipalities discussed the promotion of physical activity in their strategies, compared with 47 per cent in 2012. There is not much clarity in the division of labour concerning the promotion of health-enhancing physical activity in municipalities. About 70 per cent of all municipalities had decided what administrative branch is responsible for coordinating health-enhancing physical activity. In 52 per cent of all municipalities, there was no agreement on the division of labour for primary health care.

Regions could also be important actors in the field of physical activity and contribute to the strengthening of the position of physical activity. However, few regions have produced physical activity strategies or made any other attempts to promote the matter. By preparing a regional strategy for health-enhancing physical activity for 2009-2020, Päijät-Häme has been a pioneer in this respect. Moreover, at least Kymenlaakso has drawn up a regional strategy for health-enhancing physical activity for 2013-2020. In the future, regions should make better use of their resources as entities coordinating the promotion of physical activity in their areas.

4.4.2 Objectives and measures

OBJECTIVE 1.
A PHYSICALLY ACTIVE LIFE IS A PART OF NATIONAL STRATEGY THINKING

OBJECTIVE 2.
THE POSITION OF PHYSICAL ACTIVITY IN MUNICIPALITIES WILL BE STRENGTHENED AS PART OF THE OVERALL EFFORTS TO PROMOTE THE WELLBEING OF THE RESIDENTS.

Critical factors

Incorporating physical activity into **national strategy thinking** means the recognition of physical activity as a central factor influencing different aspects of wellbeing in Finnish society and the consideration of physical activity in all areas of Finnish society using the cross-cutting principle — in decision-making, administration, policies, operating approaches, different activities, environmental matters, organisations and communities and

at the individual level. Strategy thinking is mainly the responsibility of the top management, and for this reason, it is important to ensure that the top management is committed to the promotion of physical activity.

Improving the status of physical activity in society at large is not a question of providing the efforts to promote physical activity with additional resources but, above all, of a comprehensive **change in thinking and operating approaches** sand a **new approach to management, coordination and construction.** We need to be more prepared to question current activities and approaches and have the inspiration to find new solutions to increasingly complex challenges that cross administrative boundaries. All this requires good communication and the development of an administrative and operating culture that is based on openness.

The change must be based on good **social relationships and networks** with the most important stakeholders and mutual **trust**. Good cooperation and partnership arise from recognising the core tasks, objectives and operating processes of different stakeholders and from finding reasons why promoting physical activity is a worthwhile investment for each party. For some people, physical activity is a means of promoting learning and the growth of the individual, for achieving a more peaceful working environment and for decreasing harassment. For others, physical activity is important because it helps to cut down on sickness absenteeism and to extend work careers, it makes it easier for employees to cope with their work and it boosts productivity. There are also those for whom physical activity is an end in itself, providing a source of joy, inspiration and happiness. Adopting this way of thinking and using it to find synergy benefits with other stakeholders will be essential in the future. On this basis, it is possible to start building a common debate and a longer-term structural dialogue.

When updating the **Sports Act**, it will be important to maintain or even strengthen the provision in the existing act under which the sports administration plays a leading role in the cross-administrative entity of promoting physical activity. In the changed society of the 2020s, physical activity will become a major factor contributing to the achievement of the aims of the welfare society and the aims of individual sectors. This new role will also mean that those in charge of physical activity must meet stricter criteria. Broadening the leading role of the physical activity sector and, in particular, providing good leadership are a challenging but not an impossible task. Building a joint management and work culture with the aim of promoting physical activity in society at large requires skilled, systematic, determined and long-term development efforts. It also requires an understanding of the role of shared leadership that is suitable for a networked approach. Furthermore, success will only come if, as a result of the changes, the physical activity sector manages to fill the vacuum in physical activity leadership as it grapples with an organisational and structural upheaval. The sector has been criticised for the existence of such a vacuum by researchers and experts.

When updating the Sports Act, it will be of central importance to define physical activity as broadly as possible and to specify the social obligation of the physical activity sector to promote gender equality and non-discrimination. These concepts, which have a variety of meanings and which leave room for interpretation when used in connection with physical activity, must also be defined in the rationale of the act. When these matters are taken into account, physical activity will, within the scope of the act, be well-placed to provide a strategic choice for Finnish society as a whole. When preparing the act, it should be considered whether the authorities should be obliged to assess the physical activity impacts of their decisions and whether municipalities should be obliged to appoint physical activity boards, divisions and networks or other similar steering, coordination and support groups. It is important that all ministries and institutions and the agencies coming under them be involved in the preparation of the act, which will make it easier for them to become committed to the objectives of the act in a pre-emptive manner. Furthermore, when implementing the act and when providing information on it, it will be important to carry out cross-administrative interventions. The longer-term system for monitoring the implementation of the act should already be planned during the preparations of the act.

The central government is excellently placed to become a pioneer and a trend-setter in managing the wellbeing at work of its personnel in the next few years. As part of the **central government reform project (KEHU)**, all administrative and service functions of the government[10] are expected to be brought under a joint administrative unit in the Prime Minister's Office by 2015. Building a joint wellbeing at work process for the government would make it possible to increase the number, quality and impact of programmes, measures

10 Here 'government' refers to the cabinet (Prime Minister of Finland and other ministers), government plenary session and individual ministries.

and services promoting wellbeing at work and physical activity and to dismantle inefficient and overlapping structures. Perhaps more than one ministry could manage with a joint occupational health service, which would include a physical activity counselling service, a joint gym and exercise programme, plus bicycles for job-related trips during the working day. Human capital (=personnel) is also a key to success in the government, and thus ensuring its work ability, that it copes with its work and that it remains in good physical condition represent a good investment.

Municipal management must recognise the importance of physical activity as a positive economic factor, a factor making municipalities more attractive and an important contributor to the health and wellbeing of the residents. Physical activity is a fundamental right of the municipal residents and it should have a strong basis in the wellbeing, health and physical activity strategies of individual municipalities. In municipalities, promoting physical activity should be part of a broader effort to promote health and wellbeing, one in which the roles of the different municipal sectors have been determined. Municipalities should have adequate resources for creating opportunities for physical activity for all residents, providing vulnerable target groups with physical activity, coordinating the work to make early childhood education and care units and comprehensive schools more oriented towards physical activity, and coordinating and developing cross-administrative cooperation in the field of physical activity. Municipalities should create a good basis for non-governmental institutions organising physical activity and cooperate with parties providing non-governmental physical activity. When constructing municipal sports facilities, focus should be on projects that serve physical activity promoting health and wellbeing and leisure-time physical activity among as many residents as possible. When residential areas are planned, consideration should be given to local sports facilities and facilities for non-exercise physical activity.

In the future, the status of physical activity in society at large should also be improved by examining different **taxation solutions and other public-sector support** (from outside the physical activity sector) that have or might have a contributing effect on physical activity or a preventive effect on sitting. No systematic or comprehensive efforts have been made in Finland to influence them in the physical activity sector. Examples of taxation and other instruments include the value-added-tax treatment of non-governmental corporations and the refunding of physical activity counselling by the Social Insurance Institution and its application instructions plus the interpretations of the instructions. The Ministry of Finance has examined sectoral subsidies that are harmful to the environment. This work is also important from the perspective of physical activity because it shows what solutions are detrimental to physical activity and provides a model that could be used for examining the matters from the perspective of physical activity. In terms of increasing physical activity, at least the incentives targeting walking and cycling might have significant potential.

For many years, Finland has been a pioneer in **digitalisation**. Nevertheless, the physical activity sector still has a lot to learn in the field of applying and developing digital reality. These opportunities are available to the professionals of the sports administration and actors involved in the practical aspects of physical activity as instruments for improving communications and participation. At the practical level, physically activating console games and net-based services encouraging people to be more physically active have already given us some idea about the positive aspects of digitalisation. In fact, these applications have become highly popular among children, youngsters and young adults. Virtual physical activity services have also been tested in remote areas and the results have been promising. Even though there has been a slow increase in the use of social media as a tool for promoting physical activity, its importance has not yet been properly understood. Social media is a part of daily life in Finland and thus physical activity should also be an integral part of it. There are good reasons for increasing the use of digitalisation at all levels as a way of promoting physical activity.

Gender equality and non-discrimination are central objectives in society and a prerequisite for a just society. In order to improve the social status of physical activity, it is essential to ensure that in a physical activity culture and with the help of physical activity, systematic efforts are made to promote **gender equality and non-discrimination**. They have a basis of the existing Sports Act, and they must also be entered in the Sports Act that is currently being updated in a precise manner. The strongest and most visible sectors of non-discrimination work in physical activity include the development of adapted physical activity and physical activity among immigrants and the narrowing of the socio-economic gaps pertaining to physical activity (for more about the topic, see Guideline 2). Gender equality in physical activity must be promoted by targeted action and by main-

streaming the gender perspective in all decision-making and when preparing legislation and budgets as well as significant programmes and projects.

Gender equality has been promoted in the Finnish physical activity culture with a varying degree of intensity since the early 1990s through working groups, reports, reviews, seminars, networks, rewards and the development of mentoring and training for coaches and instructors. The main responsibility for gender equality work in physical activity lies with the Ministry of Education and Culture, whereas practical coordination has largely been the task of the Finnish Sports Federation (now Valo). It will also be important in the future that there is an organisational base for gender equality work, that responsibilities for developing and coordinating the work at the national level are clear, and that there are human resources for carrying out the work. The actual work to promote gender equality takes place in programmes, projects, sports organisations, municipalities and other organisations and corporations in the field of physical activity culture (including day care centres and schools). However, in order to succeed the work needs a national support structure (such as training and guidance in gender equality matters in the area of physical activity). The participation of men in gender equality work should also be strengthened in a cross-cutting manner. This is because the promotion of gender equality requires this and because there are more and more gender equality issues concerning men.

It can be said that in the 2010s, the Finnish sports administration has entered the era of **management and administration by information** because there has been a significant strengthening of the role of research, reporting, monitoring and assessment information in the support of efforts to promote physical activity and decision-making and preparation in connection with them. This trend will continue and become a more systematic part of the different processes and approaches of the sports administration. For the information-based development of physical activity promoting health and wellbeing, it is essential to carry out research in different fields of science that is in accordance with the guidelines laid down in this document. The work should be done by continuing and deepening the successful work already carried out and by constructing new and innovative research and research cooperation that focuses on identifying information gaps and weak signals concerning the future.

In a global operating environment, it is becoming increasingly important to be more actively involved in the work to **develop physical activity promoting health and wellbeing at a global and, particularly, at a European level**. Physical inactivity is a major social problem in all developed countries and finding solutions to it will be greatly benefited by strategic and operative cooperation between different countries.

CENTRAL MEASURES

Actors at the national level:

- lead the work promoting physical activity in a high-quality manner and build strategic partnerships and provide them with regular dialogue structures in the field of activities, finances and funding cooperation;
- strengthen the fundamental right of citizens to daily independent or guided physical activity by influencing all major legislative reforms;
- strengthen the position of physical activity promoting the health and wellbeing of the whole population in the Sports Act that is currently being updated;
- enter into the government programmes and in the strategies of different levels and sectors the promotion of physical activity as an instrument for improving health and wellbeing and assess the physical activity impacts of their decisions;
- influence the chances of the public sector to support a physically active lifestyle and to remove obstacles to it by means of taxation solutions and different support practices;
- increase funding of and partnership projects in physical activity promoting health and wellbeing;
- examine the funding of physical activity promoting health and wellbeing in Finland;
- develop in the central government reform project the physical activity process of the personnel as part of the development of the joint efforts within the government to develop the wellbeing at work process;
- promote gender equality and non-discrimination;
- incorporate physical activity promoting health and wellbeing and themes concerning the cost-effectiveness of physical activity into the strategies and plans of sport and health sciences;
- examine themes that are in accordance with the guidelines laid out in this document by means of promoting health and wellbeing through physical activity;

- are actively involved in the work to develop physical activity promoting health and wellbeing at the European level;
- increase and improve the dissemination of information on and the contents of physical activity promoting health and wellbeing in different media and other national forums (giving particular consideration to sports media and forums) and direct it in a segmented fashion at the needs of different groups, while also making use of the opportunities provided by digitalisation.

Actors at the regional and local level:

- contribute to the efforts to make physical activity a strategic choice in municipalities and regions in accordance with the directions laid out in this strategy document;
- support the coordination responsibility of the sector responsible for physical activity in the cross-administrative promotion of physical activity at the local government level, appoint municipal-specific coordinators for health-enhancing physical activity and agree on the responsibilities of different actors;
- continue disseminating municipal-level physical activity guidelines and instilling them at the practical level;
- support the construction of a partnership across organisational, administrative and professional boundaries and the implementation of cross-functionality and funding cooperation in local and regional efforts to promote physical activity;
- support the activities of organisations coordinating the work of sports clubs and physical activity and the prerequisites of their work, both directly and indirectly;
- promote gender equality and non-discrimination;
- put the dissemination of information on the impacts of physical activity promoting health and wellbeing and of the opportunities to engage in such activity on a more efficient basis and focus the provision of information in a segmented manner in accordance with the needs of different groups (such as immigrant women), while also making use of the opportunities provided by digital communications.

EXAMPLES OF GOOD PRACTICES

*Cooperation between the Ministry of Education and Culture, the **Ministry of Social Affairs and Health/ National Institute for Health and Welfare and Finland's Slot Machine Association (RAY)** in the funding of health-enhancing physical activity has increased during the past decade. Cooperation between the Ministry of Education and Culture and the Ministry of Social Affairs and Health in funding health-enhancing physical activity started in 1995 with the programme Fit for Life. The cooperation has been successful and has also led to an increase in cross-administrative funding for other programmes and projects in the field of health-enhancing physical activity. With the government resolutions on health-enhancing physical activity (2002 and 2008), the work to promote physical activity among the population has been put on a more long-term basis and its funding base has been strengthened. RAY made an important decision in 2005 when it started funding cooperation with the Ministry of Education and Culture and the Ministry of Social Affairs and Health during the first period of the programme Strength in Old Age. The funding cooperation has continued and it now also covers funding for the National Policy Programme for Older People's Physical Activity. Representatives of the Ministry of Education and Culture, the Ministry of Social Affairs and Health/National Institute for Health and Welfare and RAY meet every autumn at a conference for funding providers. The purpose of the meeting is to coordinate the promotion of physical activity among children and young people, the principles governing the support provided by RAY and the project applications received by RAY.*

*The **City of Oulu** has emphasised the role of physical activity as a strategic choice of the municipality. In its strategic objectives, the city has determined that Oulu is home to a large variety of cultural and sports activities and events and that it provides a safe and pleasant urban environment. An additional strategic objective is to ensure good and independent life management of all residents, which the city supports by encouraging residents to make choices promoting health and wellbeing. In its service programme, the city also emphasises non-discriminatory access to sports services and the development of multiculturalism. Promoting physical activity is part of the wider efforts to promote the health of the residents, and regular physical activity is a requirement for health and wellbeing during all stages of life. The sports services provided by the City of Oulu are intended for all population groups*

and they support the growth and development of children and young people, maintain the work ability and functional capacity of adults, increase self-initiative and happiness among older people, and strengthen community spirit. Supporting different types of vigorous leisure-time physical activity enhancing health is a central objective and mission of the City of Oulu.

In its strategy (2009), the ***City of Joensuu*** *set out a plan concerning a network of appropriately located service points as one of its future success factors. The need for the plan arose due to financial reasons and as a result of substantial changes in the urban structure following the incorporation of neighbouring municipalities into Joensuu. In early 2011, different administrative branches were asked to prepare their own service network plans (local, regional and centralised services) extending to the year 2020. With the help of extensive cross-administrative cooperation, Joensuu, in conjunction with Nuori Suomi, produced a survey on the current state of local sports opportunities, which included all yards at day care centres and schools, large playgrounds and local sports facilities. On the basis of the survey, a plan for developing local sports facilities was drawn up for Joensuu, which contained development proposals for each service area and a proposal concerning the building and priority of local sports facilities in the city as a whole. The plan provided the city with a good tool, and as laid down in the plan, three school yards have been built as local sports facilities.*

Under the project ***Rajattomasti liikuntaa Turun seudulla (Unlimited access to sports in the Turku region)****, network work models are being developed and produced for actors in the region. The models are jointly created by municipalities and experts and their purpose is to promote the physical, mental and social wellbeing of residents and communities. Physical activity of the population has been strengthened by means of communications by providing information about all sports facilities in the Turku region at one address: www.liiku.fi/ulos. A regional escort card has been created for people suffering from long-term illnesses and disabilities. Under the system, the escort may join the escortee in all municipal sports and cultural services free of charge. The partnership between the City of Turku and the associations has been developed by organising a regional forum of associations and a regional forum for adapted physical activity each year. All municipalities in the region are party to an agreement on the training of associations; as part of this agreement, associations are provided with training to develop the quality of their activities free of charge. The aim is to produce a joint regional programme for health-enhancing physical activity that can be made into municipality-specific applications.*

Cross-sectoral cooperation groups for health-enhancing physical activity for older people have been appointed in the municipalities taking part in the ***Strength in Old Age*** *programme, which is coordinated by the Age Institute. At the very least, the social and health sector, sports sector and organisations are represented in the groups. Municipal coordinators have been chosen from all three sectors and their task is to manage the practical development work in conjunction with the cooperation group and a responsible mentor from the Age Institute. Other administrative branches and the private sector are also represented in the cooperation groups. In a number of municipalities, there is also a steering group or a more extensive network of health-enhancing physical activity for older people.*

A number of ***European countries*** *offer significant* ***financial incentives to promote bicycle commuting****. In Belgium, companies and public-sector organisations may provide their staff members with a tax-free bonus, the maximum amount of which is 0.21 euros/cycled km/day. The bonus is paid for a maximum of 15 km/day. The upper limit of the bonus stands at about 660 euros/year. The system is organised so that the employer receives a tax refund for paying the bonus. Similar schemes are also in use in Britain and the Netherlands.*

5 RESOURCES

Central government promotes the development of physical activity promoting health and wellbeing through resource steering. The main task of the **Ministry of Education and Culture** in the field of physical activity is to promote the wellbeing, health and functional capacity of the population at different stages of life, with the focus being on physical activity among children and young people. Each year, the Ministry of Education and Culture allocates government grants for developing physical activity among children, youngsters and adults, the programmes Finnish Schools on the Move and Fit for Life, physical activity among immigrants, the activities of non-governmental organisations in the field of physical activity, municipal sports services, projects concerning the construction of sports facilities, research and development work on the construction of sports facilities, and training, research and dissemination of information in the field of physical activity. The grants are wholly or in part directed at physical activity promoting health and wellbeing. The appropriations for sports in the budget of the Ministry of Education and Culture totalled slightly more than 147 million euros in 2013.[11]

In the **Ministry of Social Affairs and Health**, the development of physical activity promoting health and wellbeing comes under the entity of health promotion as part of the work to influence other lifestyles. The main aim of the Ministry of Social Affairs and Health in the field of health-enhancing physical activity is to promote the health of the population through physical activity. Particular emphasis is put on the increase in non-exercise physical activity among all age and population groups. The focus is on children and young people, older people and people in the weakest position.

The Ministry of Social Affairs and Health started supporting projects in the field of health-enhancing physical activity in 2003 by earmarking a separate appropriation for implementing the Government Resolution on health-enhancing physical activity. In 2006, the Ministry included support for health-enhancing physical activity in its appropriation for health promotion, which is based on the Act on the Appropriation for Health Promotion. The appropriation for health promotion is used to support the strengthening of healthy living habits among the population (including support for research and development). In recent years, projects concerning health-enhancing physical activity have been granted about 350,000 euros a year. The role of the Ministry of Social Affairs and Health, together with the Ministry of Education and Culture and Finland's Slot Machine Association, in the funding of joint health-enhancing physical activity projects has focused on supporting extensive and effective physical activity promotion programmes, such as Strength in Old Age, the National Policy Programme for Older People's Physical Activity and Fit for Life.[12]

The tasks of the **Ministry of Transport and Communications** in the promotion of health-enhancing physical activity are connected with developing an everyday environment encouraging to healthy mobility and, in particular, strengthening the role of walking and cycling as part of the development of the transport system. The Ministry of Transport and Communications provides funding for the construction and maintenance of pedestrian and bicycle paths as well as for research and de-

11 This total also includes sports other than physical activity promoting health and wellbeing (such as competitive and top-level sports).

12 In the administrative branch of the Ministry of Social Affairs Health, the Fit for Life programme has been funded through RAY since 2010.

TABLE 1. Appropriation items of the different central government actors, which can be used to promote physical activity enhancing the health and wellbeing of the population and the largest co-funded programmes promoting physical activity

APPROPRIATION ITEMS	ADMINISTRATIVE BRANCH
Developing physical activity promoting health and wellbeing	
Ministry of Education and Culture appropriations for developing physical activity among children and young people	Ministry of Education and Culture/Sports Division (LY)
Ministry of Education and Culture appropriations for developing health-enhancing physical activity among adults	Ministry of Education and Culture/LY
Ministry of Education and Culture appropriations for integrating immigrants by means of physical activity	Ministry of Education and Culture/LY
Appropriations in the item 'For the use of the Ministry of Education and Culture' in the TEHYLI sector	Ministry of Education and Culture/LY
Health-promotion appropriations of the Ministry of Social Affairs and Health	Ministry of Social Affairs and Health/ Health Promotion Group (TERE)
Ministry of Social Affairs and Health appropriations for certain special projects.	Ministry of Social Affairs and Health
Largest areas of co-funding:	
Grants provided by the Ministry of Education and Culture and RAY for the programme Fit for Life	Ministry of Education and Culture/LY and Ministry of Social Affairs and Health/RAY
Grants provided by RAY, the Ministry of Social Affairs and Health and the Ministry of Education and Culture for the programme Strength in Old Age	RAY, Ministry of Social Affairs and Health and Ministry of Education and Culture/LY
Grants provided by RAY, the Ministry of Social Affairs and Health and the Ministry of Education and Culture for the National Policy Programme for Older People's Physical Activity	RAY, Ministry of Social Affairs and Health and Ministry of Education and Culture/LY
Facilities for health-enhancing physical activity	
Government grants for projects establishing sports facilities	Ministry of Education and Culture/LY
Research and development connected with the construction of sports facilities	Ministry of Education and Culture/LY
Construction of bicycle and pedestrian paths	Ministry of Transport and Communications/Finnish Transport Agency
Research and development by the Ministry of Transport and Communications in the sector of physical activity promoting health and wellbeing (TEHYLI)	Ministry of Transport and Communications/Finnish Transport Agency, Trafi
Research and development by the Ministry of the Environment in TEHYLI sector	Ministry of the Environment
Ministry of the Environment funding for the Natural Heritage Services of Metsähallitus for promoting the recreational use of natural environments	Ministry of the Environment
Ministry of Agriculture and Forestry funding for the Natural Heritage Services of Metsähallitus for promoting the recreational use of natural environments	Ministry of Agriculture and Forestry
Activities of non-governmental organisations	
Grants provided by the Ministry of Education and Culture for the activities of non-governmental organisations in the field of physical activity	Ministry of Education and Culture/LY
Grants provided by RAY for the activities of non-governmental organisations and foundations in the social and health sector	Ministry of Social Affairs and Health/RAY
Other non-categorised appropriations in the TEHYLI sector	
Special grants given by the Finnish National Board of Education to providers of teaching for promoting sports-oriented club activities	Ministry of Education and Culture/Department for Education Policy (KOPO)
Central government transfers to sports activities in municipalities	Ministry of Education and Culture/LY
Central government transfers and government grants to sports training centres	Ministry of Education and Culture/LY
Ministry of Education and Culture appropriations for education, training, research and communications	Ministry of Education and Culture/LY
Ministry of Social Affairs and Health appropriations for exercise-based rehabilitation	Ministry of Social Affairs and Health
Ministry of Agriculture and Forestry appropriations for rural development	Ministry of Agriculture and Forestry
Ministry of Employment and the Economy grants for business activities in the TEHYLI sector	Ministry of Employment and the Economy
Business development grants provided by the National Technology Agency of Finland TEKES in the TEHYLI sector	Ministry of Employment and the Economy, TEKES
EU funding	EU, national sources

velopment in the field of health-enhancing physical activity. In the administrative branch of the Ministry of the Environment, the objectives concerning health-enhancing physical activity are especially closely connected with the development of urban areas and the built environment (daily environments that encourage healthy mobility) and the sustainable use of natural resources (recreational use of natural environments). The Ministry of the Environment also carries out research in the field of health-enhancing physical activity. The Ministry of the Environment and the Ministry of Agriculture and Forestry also jointly support the Natural Heritage Services of Metsähallitus - the Forest and Park Service, with the aim of promoting the recreational use of natural environments.

In addition to ministries, the **Finnish National Board of Education** and **Finland's Slot Machine Association (RAY)** are also important providers of funding in the field of physical activity promoting health and wellbeing. The task of the Finnish National Board of Education is to implement the education and training policy and develop education and training. In the field of physical activity among children and young people, the Finnish National Board of Education gives special grants to the providers of teaching so that they can develop club activities oriented towards physical activity. RAY supports non-governmental organisations in the social and health sector that also work in the area of health-enhancing physical activity. RAY plays a particularly important role in the efforts to support the functional capacity of older people with the help of physical activity. RAY also provides funding for research activities.

In addition to national funding, it is also possible to apply for EU funding for projects involving physical activity promoting health and wellbeing from different national sources and directly from the EU.

In order to improve the health and wellbeing of the Finnish population and the competitiveness of society at large, funding and other resources for physical activity promoting health and wellbeing should be increased and directed at areas that generate the largest reductions in the amount of physical inactivity (see, for example, the report of the Parliamentary Finance Committee 39/2012, Guideline 4). At least the Ministry of Education and Culture and the Ministry of Social Affairs and Health intend to take these aims into account in their financial planning covering the next few years. One of the most important measures to be taken by the Sports Division of the Ministry of Education and Culture will be an increase in the general grants provided to those national and regional sports organisations that are considered to play a central role in the promotion of broad-based physical activity promoting health and wellbeing. The Sports Division of the Ministry of Education and Culture will also screen all of its grant systems and, to the extent necessary, change their criteria so that they support physical activity promoting health and wellbeing and its strategies.

The Ministry of Education and Culture and the Ministry of Social Affairs and Health also urge other ministries and the institutions under them to direct their resources to support the prerequisites of physical activity promoting health and wellbeing in their own sectors and reduce any granting of resources that are harmful from the perspective of the promotion of physical activity. An increase in physical activity serves the aims of a large number of administrative branches, and for this reason, developing strategic cooperation between the providers of funding and directing the funding to joint areas can make the use of existing resources more efficient and produce more effective results. Partnership funding is particularly important in the implementation of extensive national measures, which means that efforts should be made to increase this type of funding. Successful examples of national physical activity programmes that have received partnership funding are the programmes Fit for Life and Strength in Old Age and the coordination of the National Policy Programme for Older People's Physical Activity. In partnership funding, each party provides targeted funding for a specific part of the project or programme that has been determined in advance.

At the local level, the funding of physical activity is mainly the responsibility of households, municipalities, sports clubs and other organisations and companies. In order to boost physical activity promoting health and wellbeing, new funding sources and partnerships should be actively sought. In recent years, there have been interesting new approaches to funding such areas as physical activity among children and young people and developing day care centres and school yards by means of company partnerships.

The resourcing of physical activity promoting health and wellbeing can also be strengthened by directing funding for the coordination and follow-up on the measures concerning these strategies by means of performance agreements between the agencies under the Ministry of Education and Culture and the Ministry of Social Affairs and Health and other organisations receiving general grants.

6

FOLLOW-UP AND ASSESSMENT

The role of the follow-up and assessment as part of the implementation of the organisations' basic activities and different programmes, projects, acts and other separate measures has become more important in recent years. In the physical activity sector, the process of management by information has been developed through a large number of measures, such as by strengthening the assessment of the impacts of the sports policy measures, by directing research funding at research that is relevant to society at large and by providing resources for objective measurements of physical activity.

The purpose of the strategies concerning the physical activity promoting health and wellbeing is to provide strong support for this positive and essential trend. The purpose of the follow-up system is to encourage actors to promote physical activity, to improve the knowledge base and to follow and assess progress in the area. The follow-up system is partially linked with the health-enhancing physical activity monitoring system of the EU so that comparisons can be made at the European level.

The system for monitoring the strategies for physical activity promoting health and wellbeing has two parts: 1) **core follow-up**, or a limited number of indicators that provide an overall picture of the strategies, and 2) **extensive follow-up**, or assessing the impacts of the central government measures in the area of physical activity by the National Sports Council, as laid down in section 4 of the Sports Act.

Coordinating the core follow-up is the responsibility of the Ministry of Education and Culture and the Ministry of Social Affairs and Health in conjunction with the steering group for health-enhancing physical activity. Follow-up and assessment are carried out on a continuous basis as part of the work of the steering group for health-enhancing physical activity. Reporting on the follow-up is done in writing as part of the follow-up on the government programmes and the annual reports of the ministries and as separate reports produced as part of the overall reporting on the work of the steering group for health-enhancing physical activity in 2015 and 2019.

When preparing the assessment model of the National Sports Council, which will be completed by early 2015, consideration will be given to the strategies and action plan for physical activity promoting health and wellbeing. The model will be categorised in accordance with different age groups: children under school age (aged between 0 and 6), school-aged children and students at the upper secondary level (7-18), young adults (19-29), working-age people (30-63) and older people (64 and older). As part of the work, all measures taken by the central government (norm, resource and information guidance) will be considered from the standpoint of promoting physical activity. The work will be based on an examination of the results and impacts of the measures that have been carried out in relation to the objectives.

In overall terms, the assessment and follow-up system of physical activity promoting health and wellbeing requires maximum use of existing information-collection measures, improvements to them and, in part, the creation of new information-collection measures. Special consideration should be given to the development of existing information-collection approaches (surveys, barometers, reports) so that they take into account the strategic focus areas laid down in this docu-

ment and that they measure the results with the same criteria as in other important national and international studies and follow-up reports. At the same time, it is important to strengthen follow-up and assessment at the project and programme level and compile the results at research institutions.

Implementation of the strategy will be monitored on the basis of agreed upon indicators, which describe the amount of physical activity and sitting among the population at the national level. Core follow-up is increasingly based on population-level information collected with the help of objective indicators.

In recent years, the amount of physical activity and sitting among children and young people has been studied in an objective manner, particularly in connection with the nationwide Finnish Schools on the Move programme. Even though the programme only covers a limited proportion of school-aged children, it makes it possible to monitor the development of physical activity and inactivity, particularly concerning the measures that are the focus area of the programme. In addition to this, the WHO's global school-based student health survey is also an important instrument, as it allows the results to be compared with international findings. In the future, the questions on the global school-based student health survey concerning physical activity will be developed in cooperation with the University of Jyväskylä.

The most extensive follow-up of health and wellbeing of the adult population at the national level is carried out as part of the Alueellinen terveys ja hyvinvointi (Regional Health and Wellbeing; ATH) survey. Tens of thousands of citizens in different parts of Finland respond to the survey questions each year. The survey also contains questions on leisure-time physical activity, sitting and on how well the respondents have adhered to the guidelines concerning physical activity. In the future, the ATH survey could be used a tool for collecting survey-based information on physical activity. The survey Health Behaviour and Health among the Finnish Adult Population (AVTK) and the corresponding survey covering the population of retirement age (EVTK) could be used as alternatives to the ATH survey.

Internationally, increasing use is being made of objective physical activity indicators when physical activity information is collected on the population. In Finland, the first objective measurements concerning the physical activity, inactivity and fitness of the population were carried out in connection with the Health 2011 and FINRISKI 2012 surveys. In the future, objective measurements of physical activity, fitness and sitting can be carried out in connection with national FINRISKI surveys. The results of the objective measurements of the Health 2011 and FINRISKI 2012 surveys in the field of physical activity and inactivity can be used as a baseline in future surveys.

Core follow-up

GUIDELINES	OBJECTIVES	SURVEYS
Guideline 1: Reducing sitting	The average amount of time that primary-school-age children spend in a sitting position each day will decrease from the current 6.2 hours to 5.5 hours. The average amount of time that children at the lower secondary level spend in a sitting position each day will decrease from the current 8.8 hours to 7.5 hours. The average amount of time that adults spend in a sitting position each day will decrease from the current 7.5 hours to 6 hours.	**OBJECTIVE MEASUREMENTS:** **Measurements carried out as part of Finnish Schools on the Move** **HEALTH 2011 survey** (every ten years) 18-75+ years of age / FINRISKI 2012 (every five years) 25-74 years of age **QUESTIONNAIRE SURVEYS:** **WHO global school-based student health survey (every four years) 11-15 years of age** **Regional Health and Wellbeing ATH** (20–75+) **AVTK survey** (each year) 15-64 years of age **EVTK survey** (every second year) 65-84 years of age

GUIDELINES	OBJECTIVES	SURVEYS
Guideline 2: Increase in physical activity	Children under school age will have at least one hour of physical activity each day. The proportion of children aged between 7 and 12 who have at least one hour of physical activity each day will increase from 50 to 75 per cent. The proportion of children aged between 13 and 18 who have at least one hour of physical activity each day will increase from 17 to 35 per cent. The proportion of the adult population who are engaged in physical activity in accordance with the recommendations will increase from 10 to 20 per cent. The proportion of the adult population who are engaged in physical activity in accordance with the recommendations will increase from 3-4 to 10 per cent. The proportion of physically inactive (less than 30 minutes of physical activity each day) children aged between 7 and 12 will not exceed five per cent. The proportion of physically inactive (less than 30 minutes of physical activity each day) children aged between 13 and 18 will decrease from 20 to 15 per cent. The proportion of adults that do not engage in leisure-time physical activity on a regular basis will decrease from 15 to 10 per cent. Making the operating cultures of organisations (day care centres, schools, workplaces, old peoples' homes, etc.) more oriented towards physical activity The proportion of walking and cycling trips will increase from 30 to 50 per cent, which will mean about 300 million additional trips via these means.	**OBJECTIVE MEASUREMENTS:** **Measurements carried out as part of Finnish Schools on the Move** **HEALTH 2011 survey** (every ten years) 18-75+ years of age / FINRISKI 2012 (every five years) **QUESTIONNAIRE SURVEYS:** **WHO global school-based student health survey** **Regional Health and Wellbeing ATH** **AVTK survey** **EVTK survey** ***Assessment of the National Sports Council** **National Passenger Traffic Survey**

GUIDELINES	OBJECTIVES	SURVEYS
Guideline 3: Making physical activity a central part of the promotion of health, the prevention and treatment of illnesses, and rehabilitation	There will be a substantial increase in physical activity counselling and it will at least double the number of health care client contacts. [1] In 35 per cent of the municipalities, the discussion on the promotion of physical activity in social and health care documents will increase to 70 per cent.	***Separate studies and reports (such as those carried out by the UKK Institute and as part of the KKI programme)** ***Assessment of the National Sports Council** **TEAviisari (every second year)**
Guideline 4: Strengthening the role of physical activity in Finnish society	Physical activity will have a stronger role as part of legislative work, education and training contents and strategic planning in different administrative branches. In 54 per cent of the municipalities, consideration of the promotion of physical activity in municipal strategies will increase to 80 per cent.	***Assessment of the National Sports Council** TEAviisari (every second year)

* A new study

1 The objective will be defined later on the basis of the baseline study.

Annex 1. Main concepts

The most important concepts used in the strategy are described below.

Wellbeing

Wellbeing consists of many factors, such as health, livelihood, housing, a clean environment, security, self-fulfilment, education, training and close human relationships. Wellbeing includes both objectively measurable matters and subjective personal valuations and feelings. Generally, it can be said that people enjoying a high degree of wellbeing have, after meeting their basic needs, the strength and opportunities for recreation, rest, spending time with family members and close friends, self-fulfilment and learning. Promotion of wellbeing helps to ensure that one can lead an independent and dignified life at all stages of life. Achieving this requires that the structures and operating approaches of the welfare service system must be revised and made more diverse so that they can support the independent living of individuals and families (Freely quoted from the Hyvinvointi 2015 - Welfare 2015 programme, STM 2007).

Promotion of health

Promotion of health means investing in health, intentionally focusing resources and influencing the factors behind health. It means taking into account health issues when decisions on different policies are made and when the policies are put into effect. Promotion of health refers to the work of health care and other sectors, non-governmental organisations and industry to maintain and improve the health and functional capacity and work ability of the population, to prevent illnesses and to narrow the health gaps between population groups. (Terveyden edistämisen laatusuositus - Quality Recommendation for Health Promotion, STM 2006).

Physical activity promoting health and wellbeing

In this strategy, *physical activity promoting health and wellbeing* means all physical activity during different stages of life that helps to maintain and improve health and wellbeing in a wider sense without any negative effects arising from excessive physical activity. Health-enhancing physical activity can be categorised in many different ways, such as non-exercise physical activity, active commuting, workplace physical activity, physical activity at schools, physical exercise, physical activity in natural environments and leisure-time physical activity. (Freely quoted from such documents as Working Group Reports of the Ministry of Education 2008: 14; Kulmala, Saaristo & Ståhl 2011, 14; Tiihonen 2012). This new concept (and thus also the strategies) recognise the importance of physical activity to health, as an independent source of happiness and inspiration, as an instrument of education, learning and creativity, and as a building block in social capital. Most of these meanings were already incorporated into the previously used term of health-enhancing physical activity, which was widely accepted. However, we have now reached a stage where a term with a broader content is needed. The new term must have meanings with which it is easier for different administrative branches and actors to identify and to which they can commit themselves. Furthermore, the concept of physical activity promoting health and wellbeing is no longer exclusively about mobility, but also increasingly about combating physical inactivity. This is because it has become clear that excessive sitting is a major health risk in its own right.

Physical activity and inactivity

Physical activity means all work performed by muscles that increases energy consumption from the resting level. Physical activity is intentional and regular physical action, the purpose of which is to improve physical condition or health or simply to experience the happiness and enjoyment generated by physical activity. Physical activity that generates moderate but not excessive loading improves health when carried out on a regular basis. (Fogelholm, Paronen & Miettinen 2007). In this document, physical inactivity means a state of almost total physical inaction in which one only uses one's own muscle power for essential daily functions. If only little use is made of muscles, it will result in the weakening of bodily structures and functions, which will cause the risk of many diseases (Current Care Guidelines 2012). A physically inactive person opts to sit in front of a television set or a computer screen, drives a car or chooses to take the lift or escalators instead of engaging in a physically active lifestyle.

Annex 2. Steering group for health-enhancing physical activity 2012-2015

With a decision dated 14 December 2012, the Ministry of Education and Culture and the Ministry of Social Affairs and Health appointed a steering group for health-enhancing physical activity and its secretariat to prepare a new strategy and a new action plan for health-enhancing physical activity.

Chairpersons (personal deputy)

Taru Koivisto, Director,
Ministry of Social Affairs and Health
(*Veli-Matti Risku,* Senior Officer, Ministry of Social Affairs and Health, until 10 April 2012)
(*Marjaana Pelkonen*, Ministerial Adviser, Ministry of Social Affairs and Health, from 11 April 2012)

Riitta Kaivosoja,
Director General, Ministry of Education and Culture
(*Harri Syväsalmi*, Director, Ministry of Education and Culture)

Members (personal deputy)

Minna Paajanen, Secretary of the National Sports Council, Ministry of Education and Culture
(*Tiina Salminen*, Counsellor of Education, Ministry of Education and Culture, until 6 February 2012,
Johanna Moisio, Senior Advisor, Ministry of Education and Culture, from 6 February 2012)

Ritva Partinen, Senior Officer, Ministry of Social Affairs and Health
Paula Naumanen, Senior Officer (between 14 December 2012 and 25 October 2013)
(*Sirpa Sarlio-Lähteenkorva*, Ministerial Adviser, Ministry of Social Affairs and Health)

Veera Kojo, Senior Officer, Ministry of Transport and Communications (until 18 September 2012)
Saara Jääskeläinen, Ministerial Adviser
(from 19 September 2012)
(*Katariina Myllärniemi*, Ministerial Adviser, Ministry of Transport and Communications)

Marina von Weissenberg, Ministerial Adviser, Ministry of the Environment
(*Timo Saarinen*, Senior Architect, Ministry of the Environment)

Tommi Vasankari, UKK Institute
(*Jaana Suni*, UKK Institute)

Eino Havas, Director, LIKES - Foundation for Sport and Health Sciences
(*Jyrki Komulainen*, Programme Director, LIKES - Foundation for Sport and Health Sciences)

Kari Sjöholm, Senior Adviser, Association of Finnish Local and Regional Authorities
(*Niina Epäilys*, Sports Director, City of Oulu)

Juha Rehula, Member of Parliament, Finnish Sports Federation (until 30 December 2012)
(*Teemu Japisson*, Secretary General, Finnish Sports Federation, until 30 December 2012)

Matleena Livson,
Director, Finnish Sports Confederation VALO (from 1 January 2013)
(*Jukka Karvinen*, Director, Finnish Sports Confederation VALO, from 1 January 2013)

Timo Peltovuori, Chairman, Finnish Federation of Adapted Physical Activity (until 19 November 2012)
Anne Taulu, Director, Finnish Federation of Adapted Physical Activity (from 20 November 2012)
(*Janne Juvakka*, Director, SOSTE Finnish Society for Social and Health)

Extended steering group (meets as necessary)

Matti Santtila, Lieutenant Colonel, Chief of Physical Training and Sports, Finnish Defence Forces
Esko Ranto, Vice Chairman, National Sports Council
Antti Uutela, Research Professor, National Institute for Health and Welfare
Sirpa Lusa, Senior Researcher, Finnish Institute of Occupational Health
Matti Pietilä, Counsellor of Education, Finnish National Board of Education
Professor *Lasse Kannas*, Dean, Faculty of Sport and Health Sciences, University of Jyväskylä
Ulla Silventoinen, Adviser, Centre for Economic Development, Transport and the Environment for North Ostrobothnia
Heidi Hakulinen, Grants Officer, Finland's Slot Machine Association
Matti Nieminen, Sports Director, City of Heinola
Jorma Savola, Director, Kuntoliikuntaliitto
(until 30 December 2012)

Jukka Karvinen, Director, Nuori Suomi (until 30 December 2012)
Annukka Alapappila, Sports Expert, Finnish Heart Association (between 15 December 2011 and 30 March 2012 and from 1 January 2013)
Eeva-Leena Ylimäki, Regional Director, Finnish Heart Association (between 1 April and 30 December 2012)
Elina Karvinen, Line Manager, Age Institute
Jorma Hyytiä, Head of the Kuortane Sports Institute, Association of Finnish Sports Institutes
Professor *Taru Lintunen*, Finnish Society of Sports Sciences

Secretariat

Mari Miettinen, Senior Officer, Ministry of Social Affairs and Health
Päivi Aalto-Nevalainen, Counsellor for Cultural Affairs, Ministry of Education and Culture

Experts

The steering group will also hear other experts from other ministries, expert institutions, municipalities and organisations and other actors in the area, as necessary.

The following persons have taken part in the work on a regular basis:
Risto Järvelä, Building Counsellor, Ministry of Education and Culture, Chairman of the TELI facilities group
Kari Koivumäki, Senior Adviser, Ministry of Education and Culture, Chairman of the Strength in Old Age steering group
Sari Rautio, Chair, Perheliikuntaverkosto

Steering group

10 February 2012 (extended)
16 April 2012 (extended)
12 October 2012 (extended)
31 January 2013 (extended)
11 April 2013 (basic)
29 May 2013 (extended)
11 June 2012 (basic)
31 August 2012 (basic)

A total of eight meetings

The steering group for health-enhancing physical activity has had a working division that has prepared and processed the strategy in accordance with the decisions made by the steering group

Taru Koivisto, Director, Ministry of Social Affairs and Health (Chair)
Riitta Kaivosoja, Director General, Ministry of Education and Culture (Chair)
Harri Syväsalmi, Director, Ministry of Education and Culture
Minna Paajanen, Secretary of the National Sports Council, Ministry of Education and Culture
Mari Miettinen, enior Officer, Ministry of Social Affairs and Health (Secretary)
Päivi Aalto-Nevalainen, Counsellor for Cultural Affairs, Ministry of Education and Culture (Secretary)

Working division

20 November 2011
3 April 2012
30 May 2012
21 August 2012
02 October 2012
30 October 2012
17 January 2013
26 March 2013
16/22 May 2013
18 June 2013

A total of ten meetings

The following persons have served as permanent experts for the secretariat in the preparation of the strategy for health-enhancing physical activity:

Tommi Vasankari, Director, UKK Institute
Eino Havas, Director, LIKES - Foundation for Sport and Health Sciences

Meetings secretariat and experts

26 June 2012
14 August 2012
10 December 2012
9 January 2013
23 January 2013
27 February 2013
12 March 2013
5 April 2013

A total of eight meetings

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