



Project  
Actions for a healthy life



EUROPE

Seminar on "Active for life",  
an Italian Ministry of Health-  
Emilia-Romagna project on  
physical activity promotion

Bologna, 10th November 09



# TEN YEARS OF HEALTH PLANNING

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Department of Health Policy



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Regione  
Emilia-Romagna

4,337.966  
inhabitants

Capital: Bologna

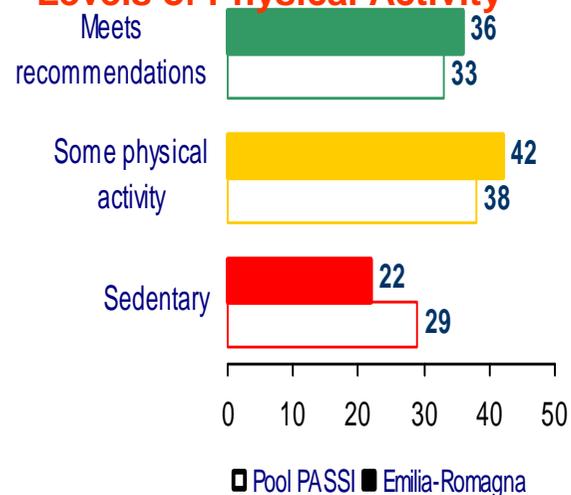
Principal towns:  
Piacenza, Parma,  
Reggio Emilia,  
Modena, Ferrara,  
Ravenna,  
Forli Cesena,  
Rimini



# Regione Emilia-Romagna

## Progressi delle Aziende Sanitarie per la Salute in Italia (Passi) The Italian behavioural risk factor surveillance system

### Levels of Physical Activity



### The behaviour of doctors and health workers

people who have been asked by a doctor or health worker if they practice Physical Activity	35%
sedentary people who have been advised to do Physical Activity by a doctor or health worker	35%

### Sedentariness by gender, age and social conditions 660,000 people (18-69)

<b>GENDER</b>	men	21%
	women	22%
<b>AGE</b>	18-34	17%
	35-49	24%
	50-69	25%
<b>EDUCATION</b>	none/primary	26%
	secondary school	23%
	further education	21%
	degree	11%
<b>VARIOUS ECONOMIC SITUATIONS</b>	severe difficulties	21%
	some difficulties	23%
	no difficulties	24%



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10 ANNI OF  
HEALTH  
PLANNING

Background:

CONTEXT

PARTICIPATION

ALLIANCES



# HEALTH PLANNING: WITH THE COMMUNITY

Our experience comes from a context characterised by a strong social capital with the intention of enhancing participatory culture, networks, the varied and rich voluntary sector and the strong, well-rooted presence of Local Authorities (mostly, councils).

The Health plans have been working on these variables by challenging Authorities, Institutions and the private sector to produce health promotion with the active participation of the population and with widespread dissemination throughout the community.

In other words, activating real health alliances.



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10 YEARS OF  
HEALTH  
PLANNING:  
HEALTH  
PRIORITIES  
INTERVENTION  
AREAS



## DEFINING HEALTH PRIORITIES AND INTERVENTION AREAS

From 2000 to 2009 around 60 projects have been started in the 11 Local Health Units in this region every year, with an average annual regional funding of € 500,000.00

The themes being dealt with, all of which are different, have been arrived at using Community profiles and via participatory tools that reveal perceived health needs (social integration, relationship and health support, safety, mobility, pollution and lifestyle).

Particular focus has been made to diet and physical activity, with integration in specific reference to overweight/obesity and investments that have grown over time and in different settings (schools, workplaces, the community).



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10 YEARS  
OF HEALTH  
PLANNING:  
CRITICAL/  
STRONG  
POINTS



# 10 YEARS OF HEALTH PLANNING

## STRONG POINTS

The importance of the overall “messages”  
Novelty and relevance of the methodology  
that has been adopted  
Cultural growth of all those involved and  
the communities reached  
Activation of new “working round tables”  
for a truly shared participatory vision

## WEAK POINTS

Complexity of the process  
Training of health workers  
Participation time/ need for feasibility  
Coherence between health objectives  
and evaluation tools



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