

Conclusions of workshop on physical activity surveillance (23-24 February 2009)

There are challenges regarding PA surveillance in EU countries

- Use of non-standardized instruments in national surveys but often time series available
- Often standardized instruments not applied or analyzed according to protocol
- Considerations regarding switching to standardized instruments (IPAQ or GPAQ) with loss of time series
- Use of different definitions of physical activity as well as recommendations for sufficient physical activity for health
- Thus low level of comparability of physical activity/inactivity measurements within and across countries
- Difficulties with comparability of time series of existing European surveys
- Considerations regarding comparability with other world regions (IPAQ versus GPAQ)

BUT more and more PA surveillance and monitoring data becoming available

Conclusions (2)

- Initial overview carried out of existing data on physical activity patterns from European and/or national surveys (background paper)
 - Data from European surveys on EU25, not for trends
 - National surveys identified for 19 EU countries
 - Will be completed with further information, including from non-health sources (e.g. travel surveys)

Conclusions (3)

- “Physical activity”: meant is the current definition, i.e. at least of moderate intensity
- Database indicators for adults and for children identified
- Definition of such core indicators by WHO is welcome by countries to support their surveillance efforts
- Final operationalization will be done based on complete overview of available data and in close collaboration with advisory group, Headquarters, feedback from participants

Indicators recommended for inclusion – adults

1. Percentage of population not reaching recommendations of low levels of physical activity (<600 met-minutes per week or 5x30 mins)
2. Median and interquartile range of average time spent doing physical activity per day
3. Median minutes spent sitting on average per day
4. Trends through repeated cross-sectional over time

As additional possible indicators recommended to countries:

- Domain specific indicators such as walking (probably most feasible at the moment), cycling, leisure time/sport, occupational
- Intention to change / self-perception of PA-level

Indicators recommended for inclusion – young people

1. Percentage of young people not reaching recommendations for low levels of physical activity (at least 60 minutes of moderate physical activity per day)
2. Distribution of average time spent doing physical activity per day
3. Screen-time related indicators
 - Percentage of young people watching TV more than 2 or 4 hours per day
 - Percentage of children watching TV on a daily basis
 - Time spent in minutes watching TV per day
 - Percentage of young people using the computer more than 3 hours per day
 - Percentage of young people playing computer games more than 4 hours per day
4. Median mean minutes spent sitting on average per day
5. Trends through repeated cross-sectional

Additional indicators:

- Mandatory PE classes / legislation
- Fitness-based indicator / fitness-assessment at schools

Conclusions regarding inclusion of surveys

- Defined sampling frame:
 - population-based for adults
 - population-based and school-based for children and adolescents
- Representative for the population in question
- Minimum sample size: 1000 except if nothing else available, larger samples preferred to allow sub-group-analysis
- Complete original survey reports (including questionnaire) and publications that provide details of the sampling methods
- Use of standardized instrument
- Provision of information on validity and reliability
- For the time being all years available included

General conclusions and next steps

- All countries should carry out regular surveillance of physical activity
- Ideally covering different age groups:
 - Children
 - Adolescents
 - Adults
 - Elderly
- Should ideally be based on a simple but “robust” instrument, aspire at being a “good enough” methodology (surveillance, not research)
- Administration of surveys and data cleaning and analysis according to protocols is crucial

General conclusions and next steps

- Member States are interested in support from WHO to carry out surveillance and to address challenges
- Further explore objective measurement, especially in young children
- WHO Euro will continue close coordination with ongoing projects and HQ
- WHO should further promote application of standardized tools
- WHO should further promote that tools are being used that have been tested for reliability and validity