

# Promoting Healthy Lifestyle over the Lifespan

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# About the EIWH

The European Institute of Women's Health is a health NGO launched in 1996.

The EIWH aims to ensure a gender-sensitive approach to health policy, prevention, treatment, care and research in order to reduce health inequalities and improve quality of life.

## **Organisation:**

Extensive multi-national, multi-disciplinary network of patient groups, health NGOs, researchers, gender experts, politicians, and medical professionals

Expert Advisory Board



# Why Womens Health

“The health of women has a direct bearing on the health of the future generation, their families, and communities, and ultimately, the health of societies.”

**NIH Office of Research on Women's Health (2010)**

# Physical Activity in the EU



According to a Eurobarometer survey from the end of 2013:

41% of Europeans exercise or play sport at least once a week. 59% of EU citizens never/seldomly exercise.

The statistics have not changed much since the survey in 2009.

EU citizens never exercising or playing sport has increased from 39% to 42%.

In the EU, men exercise or engage in other physical activity more than women.

The gap is the largest in the 15-24 age group with 74% of young men regularly exercising compared to 55% of young women.

Regular exercises decreases with age; 71% of women and 70% of men in the 55+ age groups never or seldomly exercise.

# Gender and Exercise



QD1 How often do you exercise or play sport?

	Regularly	With some regularity	Seldom	Never	Don't know
EU28	8%	33%	17%	42%	0%



## Gender

Man	9%	36%	18%	37%	0%
Woman	7%	30%	16%	47%	0%



## Gender and Age

Man 15-24	15%	59%	13%	13%	0%
Man 25-39	9%	42%	23%	26%	0%
Man 40-54	8%	32%	22%	38%	0%
Man 55+	8%	22%	14%	56%	0%
Woman 15-24	8%	47%	20%	24%	1%
Woman 25-39	6%	35%	19%	39%	1%
Woman 40-54	7%	29%	19%	44%	1%
Woman 55+	8%	21%	10%	61%	0%

# Disease Burden-Gender Matters

**CVD**- Number one killer of men and women worldwide. 17.1 million people die each year. A substantial number of these deaths caused by tobacco smoking, which is on the rise for women.

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**Cancer** - Some cancers are preventable such as cervical cancer. Access to screening and HPV vaccine varies through the EU 28.

**Diabetes** is on the increase in women with many issues and complications -  
in pregnancy can result in Miscarriage, Premature or stillbirth. Preeclampsia etc.

# Chronic Disease



From an early age, differences in gender-based attitudes towards sports and physical activity and opportunities to access them can have a significant influence on children's participation.

“Physical inactivity is estimated to be the main cause, globally, of around 27% of diabetes, 30% of ischaemic heart disease and 21% to 25% of breast and colon cancer.

Approximately 31% of the world's population is not sufficiently physically active to prevent these serious health problems and to obtain the protective health benefits that moderate activity can confer”.

WHO-Promoting physical activity through the life course, A regional Call to Action

# Obesity



Based on latest available data, more than half (52%) of the adult population in the European Union are overweight or obese.

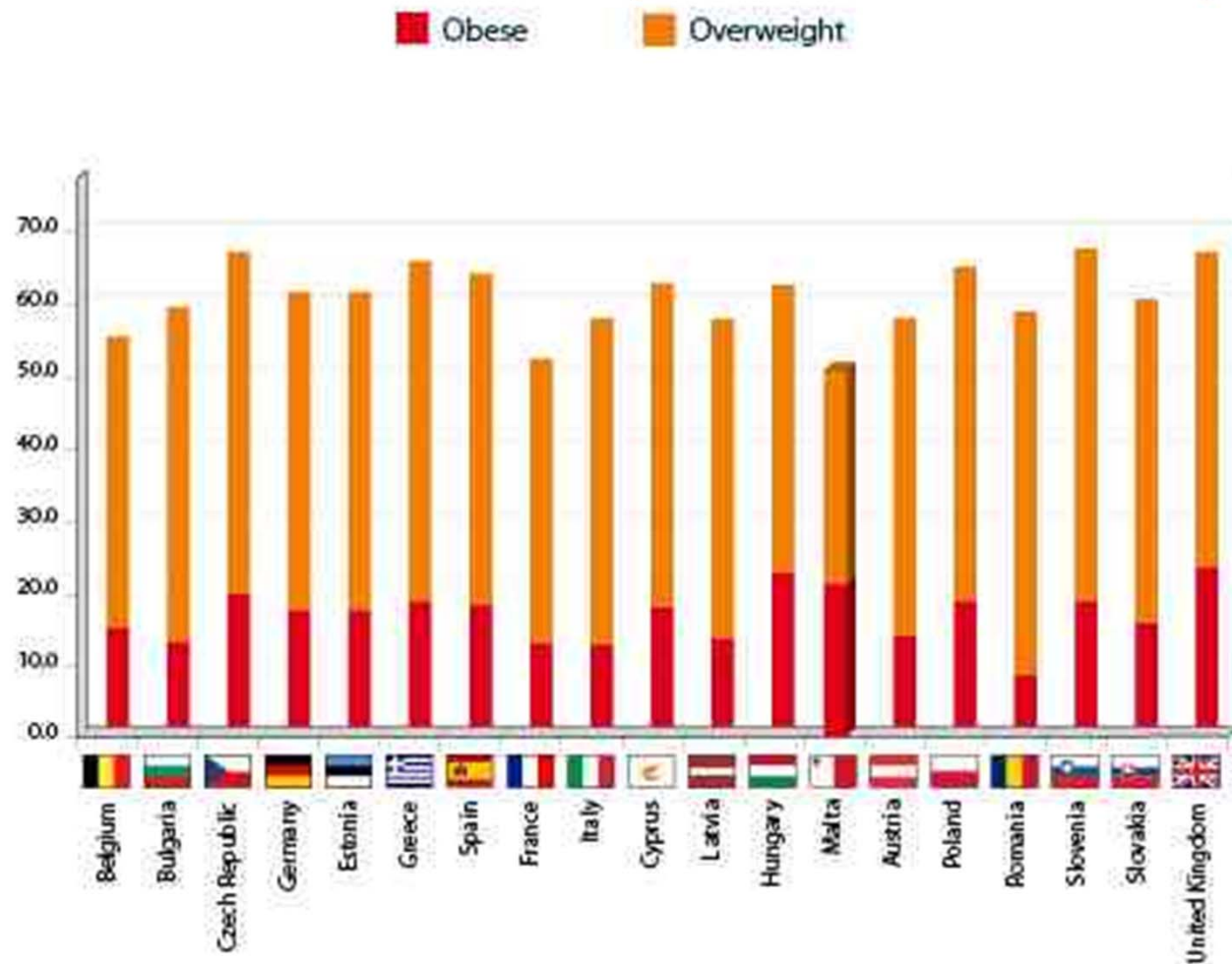
The prevalence of overweight and obesity among adults exceeds 50% in no less than 18 of 27 EU member states.

Obesity - which presents even greater health risks than overweight - varies threefold among countries, from a low of around 8% in Romania (and Switzerland) to over 25% in Hungary and the United Kingdom, although some of the variations across countries may be due to different methodologies in data collection.

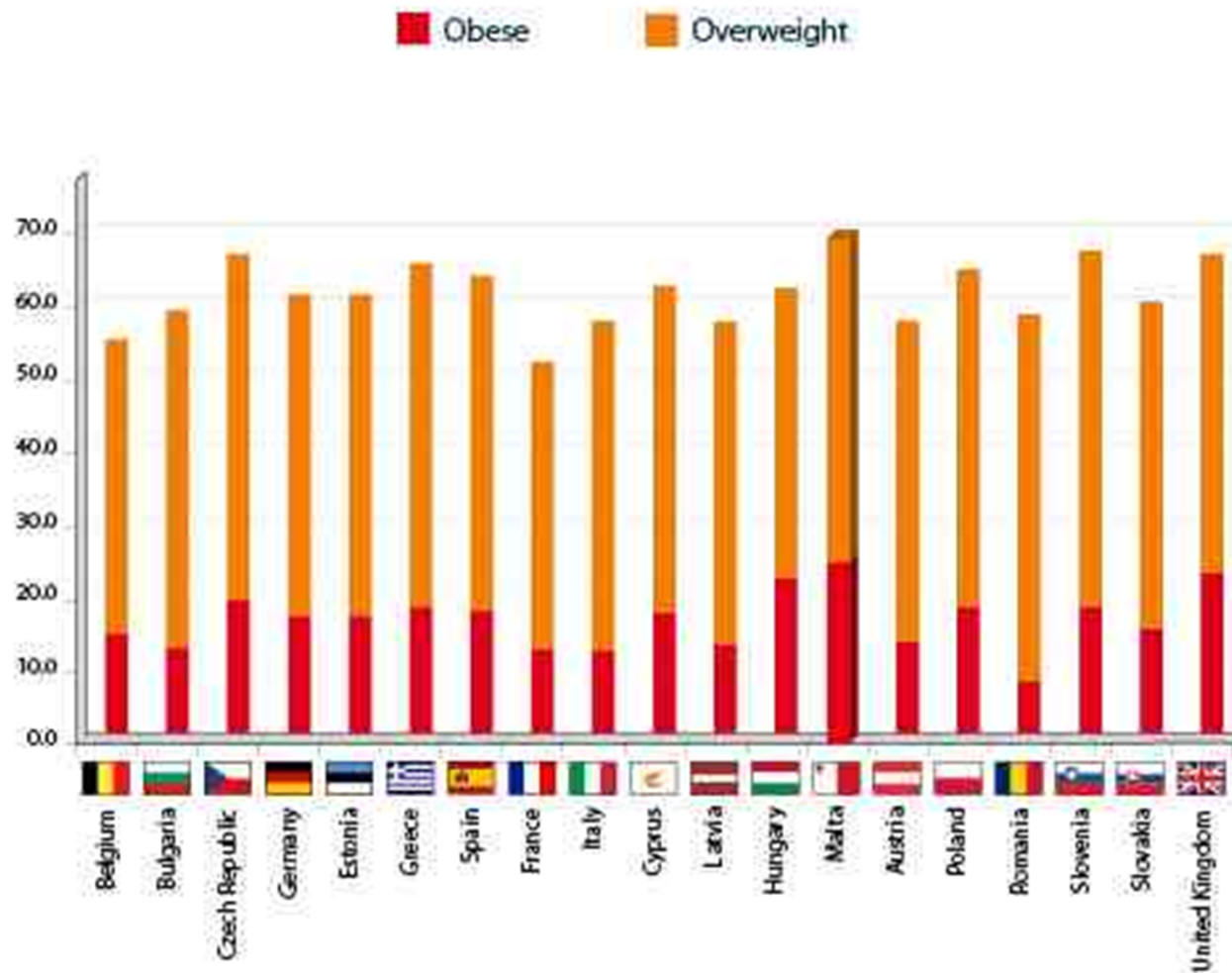
OECD Health at a glance 2012



# Overweight and Obese in EU Women (WHO, 2008)



# Overweight and Obese in EU Men (WHO, 2008)



# Obesity in Children



Obesity in children has increased so quickly over the past 30 years . More than 23 million, or 2 out of 3 children and teenagers are either overweight or obese. And rates continue to rise.

This increase seems to be particularly prevalent in girls from highly urbanised areas, some ethnic minorities and the disabled

Obesity in childhood is known to have significant impact on both physical and mental health, including hyperlipidemia, hypertension and abnormal glucose tolerance

Experts agree that exercise and diet play very important roles in a child's risk for building up unhealthy weight.

# Inactivity in Children

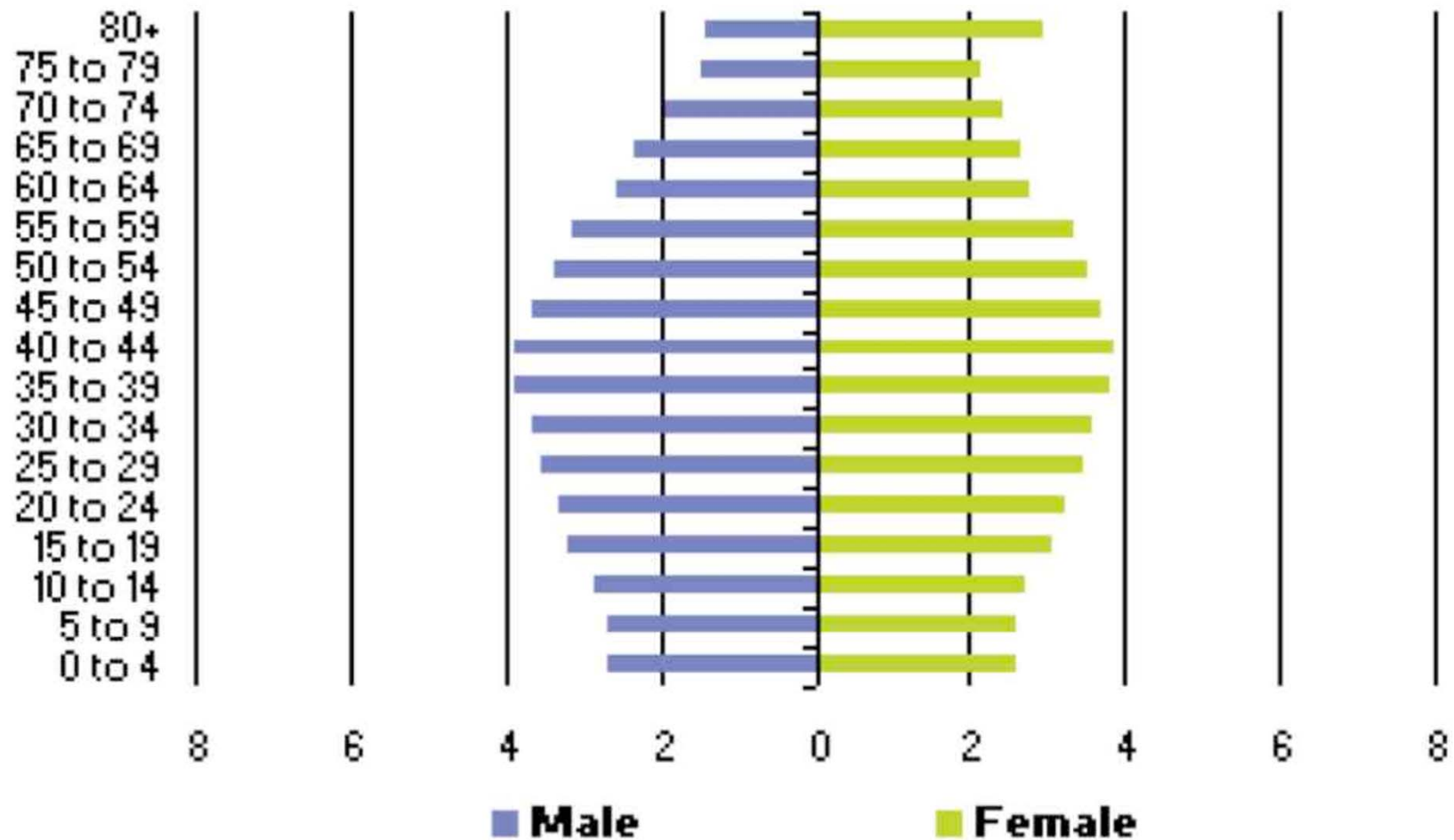


Inactivity has been described as a “silent killer”. Evidence shows that sedentary behaviour, such as sitting or lying down for long periods, is bad for your health.

Common examples of sedentary behaviour include watching TV, using a computer, using the car for short journeys and sitting down to read, talk or listen to music – and such behaviour is thought to increase your risk of many chronic diseases, such as heart disease, stroke and diabetes, as well as weight gain and obesity.

Previous generations were active more naturally but today we have to find ways of integrating activity into our daily lives

# Europe's Ageing Population 2030



# Adolescent Girls



Undertaking physical activity in adolescence is beneficial for health, and can set standards for adult physical activity levels, thereby influencing health outcomes in later life.

Research supports the role that physical activity has in child and adolescent development, learning and well-being, and in the prevention and treatment of a range of youth health issues including asthma, mental health, bone health and obesity.

More direct links to adult health are found between physical activity in adolescence and its effect on overweight and obesity and related diseases, breast cancer rates and bone health in later life. (Hallal et al., 2006; Currie et al., 2012).

# Older Women



Exercise for older women has been shown to slow the signs of ageing and limit the development of heart disease, certain cancers, dementia, diabetes type 2 and other chronic conditions.

It's never too late to start.

Maintains your muscle and strength in your body (if you lead a sedentary lifestyle loss of muscle mass can start as early as your 40's and can increase to 1% per year once you pass 50.

Keeps independence and ability to continue doing daily tasks for yourself

A positive sense of wellbeing and self esteem

# Older Women



Interventions should promote physical activity early in life and throughout the life course.

Women who reported being physically active at any point over the life course, especially as teenagers, had a lower likelihood of developing osteoporosis and cognitive impairment in later life.

Maintains bone density and strength so injury to hips, knees etc are less likely and more manageable if it does occur (if you do have an accident but are in good health and fitness you are more likely to recover quicker and rebuild strength back into the affected area)

Helps lower high blood pressure-Maintains good cognitive (brain) function, which can start to decline in your mid 40s



# Women with Disabilities



Women with disabilities can be less active due to their functional limitations. Expectations of inactivity on their own part and that of others may compound their inactivity.

Attitudinal, social and physical access barriers as well as the prevailing trend to live a sedentary lifestyle may also increase the likelihood of physical inactivity.

Inactivity can also lead to an increase in dependence on others, a decrease in social interactions and the development of symptoms such as fatigue, depression, low functional capacity, obesity and pressure sores.

# EU Policy



The Commission's 2011 Communication on sport affirms that physical activity is one of the most important health determinants in modern society.

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The Council in its conclusions on health-enhancing physical activity of November 2012 calls on the Commission to present a proposal for a Council Recommendation, including a light monitoring framework. Stakeholders and experts consulted in the preparatory phase have strongly supported this initiative.

[http://ec.europa.eu/education/index\\_en.htm](http://ec.europa.eu/education/index_en.htm)

# Moving Forward



Action to control the determinants of health must include developing and understanding and skills, and promoting informed health choices.

Women mainly manage the health of their families this means informing women and communities about how to improve their health and wellbeing and empowering and motivating them to do so, whilst working to remove barriers that impede their ability to make healthy choices.

A life course approach to healthy ageing starts at birth and therefore reinforces the need to prioritise early intervention. Healthy ageing requires targeted, multi-sectorial interventions aimed at key risk groups in the population.

# Member State Example



## The National Guidelines on Physical Activity for Ireland

The guidelines establish a national consensus, based on international expert opinion and evidence, on appropriate levels of health enhancing physical activity for the Irish population. health promotion and public health workers;health professionals such as :GPs,nurses, dietitians and occupational health workers;teaching staff

The guidelines include recommendations for children and young people, adults, people with disabilities and older people

# Key Message



Physical activity is for everyone, at any age and any level of activity is better for your health than none.

Promoting physical activity complements national strategies to improve nutrition, and to reduce tobacco, drug and alcohol use. It also impacts positively on efforts to enhance social environments through reduced violence and improved social interaction and integration.

These widespread benefits underpin the need to establish and integrate public policy on physical activity in the context of health, education, environment, sport and transport at national and local levels.

# Health Inequalities

"Inequalities experienced in earlier life in access to education, employment and healthcare as well as those based on gender and cultural background can have a critical bearing on the health status of people throughout their lives.

The combination of poverty with other vulnerabilities such as childhood or old age, disability or minority background further increases health risks and vice-versa, ill health can lead to poverty and/or social exclusion."

***European Parliament Report on Reducing Health Inequalities in the EU***  
**Committee on the Environment,**  
**Public Health, and Food Safety (2011)**

Thank you. Any questions?



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