



The National Policy Programme for Older People's Physical Activity

Health and well-being from physical activity

Publications of the Ministry of Education and Culture 2012:17

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For the Reader

This English translation is an abridged version of the original Finnish document, The National Policy Programme for Older People's Exercise. The recommendations have been translated as such but the responsible actors have been omitted. The responsible parties and actors are presented in the introductory chapter. The original chapter on background information presenting the motivation of the programme has been compressed to only include national challenges, and the information on the general situation of older people's health exercise in Finland has been omitted. This chapter is titled "Summary on background information".

Sources

The unabridged Finnish references can be read at

<http://www.minedu.fi/OPM/Julkaisut/2011/liitteet/OKM30.pdf>

The National Policy Programme for Older People's Physical Activity Health and well-being from physical activity

Abstract

The government appointed National Board on Health Promoting Exercise suggested that the executive board of the national Strength in Old Age Health Exercise Programme (2005–2014) should design a national policy programme for older people's physical activity. The policy programme was made in cooperation with the similarly aimed PASEO project funded by the EU.

The target group of the programme includes older people who do not get enough exercise for their health: 1) 60+ people who are retiring, 2) 75+ people living independently and having early problems of mobility, 3) older people in home services, service housing or long-term institutional care. The starting point was to increase everyday activity and physical activity independently or in guidance.

The background of the programme is formed by what we know about the challenges of population ageing, benefits of exercise for health and functional capacity, level of physical activity in older people in relation to exercise recommendations, significance of environment, quality and quantity of guided exercise, and need for exercise counseling. The promotion of everyday mobility and increase of exercise counseling and guided exercise requires cross-sectorial administrative cooperation. High quality development requires changes in attitudes and the assumption of new knowledge and methods of action. The policy programme offers recommendations in six areas:

Cross-sectorial cooperation and division of activity: 1) Health promoting exercise for older people is included in the legislation, government strategies, and other national actors' strategies, action plans and budgets concerning older adults. 2) Older people's health promoting exercise is included in municipal health strategies and in the strategies and action plans of local organizations that reach the target groups. 3) In municipalities there should be a cross-administrative cooperation group that promotes the health and well-being of older people and deals with physical exercise.

Environment and facilities: 4) Increasing safe and accessible walking and cycling routes as well as exercise facilities outdoors. 5) Construct, renovate and implement indoor exercise facilities for older people.

Exercise counseling and activities: 6) Increase exercise counseling for older people in municipalities. 7) Increase physical activities for older people with low or decreasing mobility in municipalities.

Public awareness, attitudes and expertise: 8) Encourage various educational and other organizations to add older people's exercise in their training programmes. 9) Secure the maintenance of training networks for older people's health exercise. 10) Organize municipal learning events for older people about physical exercise and voluntary work. 11) Produce and collect learning and guidance materials and descriptions of good practices in the field to create a data bank. 12) Organize campaigns and events that promote positive attitudes to older people with various degrees of functional capacity.

Dialogue between research and development: 13) Initiate research and coordinated development projects that address the challenges and needs of older people's health promoting exercise. 14) Organize regular, national forums on exercise and older people.

Coordination, follow-up and evaluation of the programme: 15) The nomination of responsible persons and method of action for the coordination and evaluation of the programme. 16) Create *quality criteria for the guided health exercise of older people* and assess the exercise activities based on those criteria.

The recommendations of the policy programme are directed to decision-makers and various actors nationally, regionally and locally.

Foreword

The increasing share of older people in the population is a fact and a challenge to social and health care services and exercise activities. The retirement of baby boomer generation as well as the increase in longevity and share of 75+ population puts pressure on supporting physically active life styles in older people and promoting independent living.

Regular exercise promotes health and well-being in all age groups. For older people it is vital. Finnish older people are mobile in everyday life and in individual exercise hobbies. Nevertheless, about one fifth of pension-aged people do not exercise regularly and only a small number fulfills the recommendations for endurance and muscle strength.

Differences in mobility between older people vary considerably. There are active veteran athletes and exercisers as well as people who need care services. With the population changing and under financial stress, the decision-makers and actors should recognize the significance of physical exercise in promoting health and well-being. Research has shown that exercise is an efficient and cost-effective way of preventing the deterioration of older people's functional capacity. Exercise is also a natural and often pleasant activity for older people.

A large number of older people engage in independent physical activity. Guided exercise is needed especially for people with decreased mobility and people who are not used to physical activity. The problem is that there are not enough exercise counseling and groups for this target group. It is often unclear whose responsibility it is to organize and coordinate local activities.

The national policy programme for older people's exercise presents concrete suggestions for national, regional and local levels, for decision-makers and various actors. The development suggestions are directed in six different areas of action: Cross-sectorial cooperation and division of activity; Environment and facilities; Exercise counseling and activities; Public awareness, attitudes and expertise; Dialogue between research and development, and Coordination, follow-up and evaluation of the programme. The introduction of the policy programme requires commitment from the decision-makers and dialogue and cooperation between the actors.

The programme has been designed by the executive board of the Strength in Old Age Programme together with other experts. This work has been authorized by the National

Board on Health Promoting Exercise. With cooperation between the public sector, third sector and private service providers it is possible to promote the resources of older people for the benefit of individuals and the society. We can change the direction to a more mobile and functional old age.

Helsinki, October 2011

Director Harri Syväsalmi
Ministry of Education and Culture

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I Starting point and background

1 Starting point of The National Policy Programme

1.1 Authorization and aim

The government appointed National Board on Health Promoting Exercise gave the executive board of the national Strength in Old Age Health Exercise Programme (2005-2014) the task of suggesting a national policy programme for older people's physical activity. Based on the suggestion, the Ministry of Education and Culture and Ministry of Social Affairs and Health could start to promote the financing and development of older people's physical activity together with Finland's Slot Machine Association. It was decided that the policy programme would be made in cooperation with the PASEO project (www.paseonet.org) funded by the EU.

The national policy programme aims to promote the well-being of Finnish older people with the help of physical exercise. The starting point of the recommendations is formed by the needs of older people's physical activity. The recommendations are directed to actors and decision-makers in various national, regional and local sectors. In this English translation, the recommendations are preceded by a summary on the background information that describes the exercise behavior of Finnish older people and the current status of physical activities in the country.

1.2 Target groups

The policy programme concerns *the 60+ people who, according to current exercise recommendations, do not get enough physical activity for their health*. The starting point is the promotion of comprehensive mobility in older people including independent and/or assisted mobility in everyday life and physical exercise independently or in guided groups.

The variation in older people concerning functional capacity and mobility is important when considering measures for promoting mobility. In the Finnish quality recommendations for the guided health exercise of older people, it is suggested to examine the promotion of physical activity from the perspective of three levels of functional capacity: older people with good functional capacity, older people with decreased functional capacity, and frail older people with deficiencies of mobility. This division can be utilized in the organization of guided exercise. In the programme the target group is characterized by lack of physical activity and low functional capacity as well as period of life and living environment.

The target groups include:

- 1 60+ people going into retirement whose life style has not included exercise and whose mobility decreases after retirement.
- 2 75+ people living independently in their homes but whose independent coping is threatened by early problems of mobility, memory illnesses, depression or loneliness.
- 3 Older people living in home services, service housing or long-term institutional care with decreased functional capacity and lowered mobility.

Attention should be paid on special groups inside these categories including persons discharged from hospitals, persons with sensory handicaps or progressive neurological diseases, and people who are excluded for social reasons, such as family caregivers, immigrants and older people in rural areas.

The target group includes people working with older people's physical activity:

- 1 Public sector, including municipal authorities in sports, social and health care, education, and environment.
- 2 Third sector, including pensioners' organizations, sports associations, public health organizations, and congregations.
- 3 Research and development organizations.
- 4 Ministries and other sources of funding.

2 Summary of background information

2.1 Guidelines on health promoting exercise for older people

There have been several national resolutions and recommendations on health exercise and an amount of literature on the subject during the last decade. National health exercise programmes and projects have included development measures. Older people's exercise has been included in many documents and publications.

The documents and publications are based on the knowledge that physical activity and exercise are beneficial for older people's health, functional capacity, independent coping, and quality of life. There is also evidence on the economic benefits of exercise promotion and the costs of immobility or lack of mobility. Injuries caused by falls are a good example of the individual and social costs caused by weak mobility that could be prevented with physical exercise.

Challenges

Older people's exercise needs coordination concerning organization and financing. In addition to short-term local projects there should be more comprehensive programmes with more permanent activities. The decisions concerning health promoting exercise should be based on the knowledge of the benefits of exercise and the costs of immobility. Older people's health exercise should be sponsored in relation to their share in population.

2.2 Older people and physical activity in Finland

The greying Finland and heterogeneous older population Finland is one of the fastest ageing nations in Europe. In 2009, 18 % of the population was 65 or over, and the share of 75+ people was 8 %. According to prognoses, the share of 65+ people will grow to 26 % in twenty years, and the share of 75+ people will go up to 14 %. The share of people in working age will drastically diminish in the near future. The retired population is unevenly situated in various parts of the country.

Older people form a heterogeneous group. Retiring people are healthier and have better functional capacity than previous generations but health differences are growing. Poor health is often connected with lower socioeconomic status. Among older people, increasing mobility problems, memory illnesses and depression impair independent coping at home. Women live longer than men but they confront mobility problems earlier.

The majority of older people live independently in their homes. There is a strong tendency in Finland to decrease institutional care. The structural change is slow because institutional care has long traditions. A 2009 survey showed that about 20 % of older people were dependent on family care, received home care services, lived in service housing or long-term institutional care.

Challenges

The number of older people and the regional variation in the population structure must be taken into consideration when planning exercise promotion. Exercise is a cost-effective way of health promotion that should be purposefully used when improving health inequalities.

Due to increasing longevity and memory illnesses, many older people will in the future be living in service housing and long-term institutional care. Opportunities for physical activity must be improved within home care, service housing and institutional care as part of a rehabilitative approach.

Physical activity in the lives of older people in Finland

Finnish older people report physical activity as their most important hobby. Walking is the most popular form of activity for men and women, and it is often a part of their daily activities. Other important forms of activity include home gymnastics, cycling, skiing and swimming. Older Finns are also active in picking berries and mushrooms. Men are active in hunting and fishing. Women are more active in guided exercise and dancing. Fitness gym and Nordic walking are currently gaining more popularity among both genders.

Nevertheless, older people's physical activity seems to have decreased in recent years. The current recommendations for physical activity (e.g. Physical Activity Guidelines for Americans, 2008) emphasize endurance, muscle strength and balance exercise but only a few percent of older people in Finland are active in this way. The significance of strength and balance exercise is extremely important in preventing falls, especially in the demanding winter conditions in Finland. But only a small percentage of older people participate in guided exercise. The majority of them are fit older people who are independently seeking physical activities.

Challenges

Older people's physical activity should be promoted toward the guidelines by influencing the individuals, environment, attitudes, activities and social support. In order to apply the guidelines into practice and in the everyday lives of older people, we need new activities and contents for decision-making, financing and organization of physical activities.

The reasons for immobility in various target groups have not been adequately recognized. Older people with inadequate mobility should be recognized in time to promote their equal opportunities to participate in physical activities. Physical activity has not been adequately utilized in the prevention, treatment and rehabilitation of mobility problems, memory illnesses and depression. The prevention of falls should gain more resources in all sectors.

2.3 Actors and operational environment of older people's physical activity

Local actors in Finland

In Finland, the municipal public sector, especially sports authority and social and health care authorities, is responsible for the organization and coordination of exercise counseling and guided exercise in municipalities. Municipal sports authority operates many facilities for physical activity.

Pensioners' organizations and many organizations of public health and physical activity organize guided exercise for older people. Adult education organizations have a number of groups of physical activity for older people. Physical activity is also available in various health exercise programmes.

According to surveys, the coordination of physical activities and information is poorly organized between actors. There are only limited opportunities for exercise counseling and transportation to facilities. Older people's physical activity is recorded in only a half of municipal well-being strategies.

Challenges

Municipal sports, social and health care authorities should more efficiently coordinate physical activities, information, transportation, support services and facilities. Social and health care authorities should carry out search activities and counseling for guiding older people with low mobility to physical activities. Sports authority is responsible for coordinating physical activities together with NGOs. The activities of peer instructors in NGOs should be encouraged. The amount of exercise counseling and physical activities should better correspond with the number and needs of older people. There should be more facilities, especially gyms, and guided exercise should be in accordance with current guidelines of physical activity.

Older people's health promoting physical activity should be recorded in municipal well-being strategies.

National actors in Finland

The key national actors in the financing and organization of research and development on older people's physical activity include the Ministry of Education and Culture, the Ministry of Health and Social Affairs and Finland's Slot Machine Association. Research and development on older people's physical activity is also carried out in several other expert organizations, such as the National Institute for Health and Welfare, UKK Institute, the Gerontology Research Centre at the University of Jyväskylä, Likes – Foundation for Sport and Health Sciences, the GeroCenter, the Age Institute, and the Finnish Society of Sport Sciences.

National organizations in health and social affairs and physical activity as well pensioners' organizations also have an important role in reaching the target group and developing and organizing activities. The Association of Finnish Local and Regional Authorities acts in distributing knowledge and guidelines about physical activity to municipalities.

Challenges

Older people's physical activity requires special emphasis in the cooperation between ministries and the Slot Machine Association because the position of older people in the structure of physical activity is not equal with other population segments. The dialogue between administration, funding, expert organizations, actors and the representatives of older people concerning older people's physical activity is not yet an established action.

So far, the share of public appropriation in supporting older people's physical activity and exercise counseling has been too small. The share of physical rehabilitation in the resourcing of older people's physical activity should be clearer to various actors. Research results and practical applications should be more effectively disseminated to the general public and exercise activities.

Environment and facilities

All physical activities are not guided. The majority of older people walk and practice physical activity as part of their daily activities. With ageing, everyday routes, environments that encourage mobility and suitable indoor facilities have an important role. The responsible parties for these include municipal sports authority, environment authorities, and other administrative actors. Environment and park authorities are responsible for developing safe and accessible environments for older people with varying levels of functional capacity.

In Finland, attention must be paid to the rapidly changing and often demanding winter conditions. In order to maintain their functional capacity, it is necessary for older people to be able to practice physical activity indoors whenever it is not possible to walk outdoors. The year-round maintenance of accessible walking routes must be ensured. Persons with aid equipment should be considered when designing facilities.

From older people's perspective the key environments of physical activity include walking routes, routes to services, parks, indoor facilities nearby, and the yards of service houses. Facilities for

children have been a focal point in the construction policies of the Ministry of Education and Culture.

training so they can support older people's health promoting physical activity.

Challenges

Accessibility, safety, access to services, and the use of green environments should be improved in the living environment of older people. The significance of green environments for older people should be considered at every stage of community planning from town planning to the planning of individual houses and yards. Special needs, such as aid equipment, lighting, railings, and benches, should be carefully considered.

The status of older people's health exercise in training and education

The training of teachers in physical education, exercise instructors, and physical therapists takes mainly place at the University of Jyväskylä and in polytechnics around Finland. Further training for these professionals, nursing personnel, and peers is offered, for example, at the Age Institute, UKK Institute and the Finnish Federation of Adapted Physical Activity. The Age Institute maintains the national instructor training network of older people's physical activity and produces training programmes for it. The Fit for Life Programme offers training support for peer instructor training.

Challenges

The share of older people's physical activity should be increased in the basic and further training of physical therapists, exercise and nursing professionals and other professionals involved in physical mobility (e.g., traffic and town planning). Municipalities and NGOs need more exercise and rehabilitation professionals as well as nursing personnel and peers specialized in older people's physical activity.

Older people need more learning opportunities for adopting new information about physical activity and for using it in their everyday lives. The instruction of physical activity should be part of activities in service housing. For this, the personnel in health and social services should have further

II Towards action

3 Policy recommendations

The required improvements concerning the quantity and quality of older adults' everyday mobility and guided physical activity can be achieved by promoting cross-administrative cooperation on national, regional and local levels. Everyday mobility is the easiest way of increasing mobility. In order to reach mobility recommendations, older people need more goal-oriented guided activities. The growing numbers of older population requires changes in attitudes, information and development on all levels of action. Research and practice should meet each other in a way that benefits both.

The policy programme offers recommendations in six areas:

- Cross-sectorial cooperation and division of activity
- Environment and facilities
- Exercise counseling and activities
- Public awareness, attitudes and expertise
- Dialogue between research and development
- Coordination, follow-up and evaluation of the programme

3.1 Cross-sectorial cooperation and division of activity

Development aims

- The responsible actors in health exercise cooperate, agree on the division of activities and allocate

resources in coordination in order to develop older people's everyday activity, exercise counseling and guided physical activity.

- Exercise for older people becomes established as municipal basic services.
- There are seamless exercise service chains available for older people with various stages of fitness.

Recommendations

1 Health promoting exercise for older people is included in the legislation, government strategies, and other national actors' strategies, action plans and budgets concerning older adults.

Starting point and contents: Based on population development, in order to keep the ageing population functional, we need to include the principles of health exercise in the strategies, action plans and budgets of various governmental, national and expert organizations. In the planning of health exercise, we need to hear experts on elderly exercise and older people themselves.

The starting point in the national resource allocation on older people's exercise is that the main responsibility lies on the municipal sports authority who closely cooperate in this area with social and health care authorities. The municipal sports authority oversees that there are an adequate number

of guidance personnel experienced in older people's exercise and adequate groups of applied exercise for older people. The social and health care authorities' task is to organize older people's physical activities as part of rehabilitation and activating nursing.

2 Older people's health promoting exercise is included in municipal health strategies and in the strategies and action plans of local organizations that reach the target groups.

Starting point and contents: Based on population development, in order to keep the ageing population functional, we need to include the health exercise perspective in municipal and organizational strategies and action plans. When planning health exercise, the voice of experts on older people's exercise and older people themselves must be heard.

3 In municipalities there should be a cross-administrative cooperation group that promotes the health and well-being of older people and deals with physical exercise.

Starting point and contents: The promotion of health exercise requires comprehensive and unbiased cooperation between various actors. The working group on the promotion of older people's health and well-being should include representatives from municipal authorities in social and health care, sports and exercise, education, culture, youth and environment. It is also important to hear the fire department and rescue service. A comprehensive representation is also needed from various organizations (old age organizations, pensioners' organizations, social and public health organizations, sports organizations, patients' organizations, disabled organizations, voluntary organizations, and congregations).

Criteria for success

- Older people's health promoting exercise is written in the legislation concerning older people and in the strategies and action plans of local and national actors.
- The actors financing older people's exercise are cooperating and they have agreed on their respective roles.
- Municipal cross-administrative working groups are functioning and they execute and assess older people's health exercise.

3.2 Environment and facilities

Development aims

- Developing walking and cycling routes in order to support independent mobility in older people.
- Increasing suitable exercise facilities for older people in the vicinity (indoors and outdoors).
- Developing service houses and their yards in order to promote physical activity.

Recommendations

4 Increasing safe and accessible walking and cycling routes as well as exercise facilities outdoors.

Starting point and contents: The most common method of mobility among older people is walking, as long as there are safe routes. The planning and construction of routes is especially important in areas where there are large numbers of older residents. Routes with separate lanes for walkers and cyclists are needed in every community.

The construction of exercise facilities in the vicinity of older people, such as functional parks and walking paths, also promote the everyday mobility of older people. Particular attention should be paid to the accessibility, safety and year-round maintenance of residential outdoor areas by increasing lighting, rails and sanding.

The yards of service houses should be developed to promote accessibility and active mobility. The yards require various areas and facilities for guided

group exercise, individual exercise, outdoor games and gardening. There should also be short, year-round accessible walking routes in the yards or in close vicinity.

5 Construct, renovate and implement indoor exercise facilities for older people.

Starting point and contents: Older people need accessible and safe senior fitness gyms, water exercise facilities and other indoor facilities. There is a great need for indoor facilities. The public sector can offer facilities for organizations and associations. Exercise for small groups can be organized by utilizing club rooms and schools. This requires multisectorial cooperation with the proprietors.

The residents in service housing should have an opportunity for walking safely indoors. There should also be facilities for senior fitness gym equipment, group exercise facilities and applicable aids for people who need them.

Criteria for success

- The number of accessible walking routes and exercise facilities for older people increase.
- The number of indoor exercise facilities for older people increases.
- The number of construction and renovation projects for functional exercise facilities for older people increase.

3.3 Exercise counseling and activities

Development aims

- Good practices in exercise counseling and activities for older people are developed and implemented more actively.
- More professionals in rehabilitation, physical exercise, nursing and social work participate in the promotion of older people's health exercise.
- Retiring persons participate more actively in volunteer and peer guidance and support.

- More and more retiring persons and pensioners assume a physically active way of life.
- The special needs and participation of older people are considered in the development of exercise environments, counseling and exercise services.

Recommendations

6 Increase exercise counseling for older people in municipalities.

Starting point and contents: There is a need for easily accessible exercise counseling in municipalities. In counseling the various needs of older people should be considered. Exercise counseling should be included in general information (e.g. senior infos), health care centers (nurses, physiotherapists, doctors), house calls concerning health and well-being, and care and service plans. The assessment of mobility and functional capacity should be part of high quality exercise counseling.

The coordination and execution of exercise counseling is usually the responsibility of municipal social and health care authorities. Sports authorities and organizations should also participate in this. Good practices have been developed for exercise counseling.

7 Increase physical activities for older people with low or decreasing mobility in municipalities.

Starting point and contents: Physical activities in municipalities should be increased by comprehensive cooperation. Municipal sports authorities are responsible for creating opportunities and coordination for physical activities and they also have a partial role in organizing these services. It is important that sports authorities cooperate with various municipal actors (especially social and health care authorities and organizations) and support organizations and other actors in creating guided exercise for older people. The support can be financial, or providing facilities, training, consultation and equipment. People can

be encouraged in independent exercise by providing inexpensive senior cards.

Exercise for fit older people should be increased in sports clubs, pensioners' organizations and public health organizations and they can be encouraged to participate in peer training.

Exercise for older people with decreased functional capacity is organized in cooperation with service houses, home nursing, long-term care and with the help of organizations that include older people (e.g. memory organizations, associations for neurological diseases, osteoporosis etc.). Exercise activities should be organized for older family caregivers and immigrants whose numbers are growing in many countries.

The participation of frail older people in exercise and hobbies often requires support services such as transportation, service bus routes, schedules and assistants. Cooperation networks help to reach the target groups. The contents of exercise activities should be described in detail and personally informed.

The need for exercise activity and counseling is determined with service surveys and questionnaires directed to older people. Activities are developed according to the quality recommendations for older people's health exercise and ethical principles as well as by listening to the older people. Good practices are utilized in the organization of exercise activities.

Criteria for success

- Exercise counseling and activities, including support services, for various target groups of older people have increased to match their share of the population.
- The share of older people moving according to exercise recommendations and participating in guided exercise has increased.
- Nursing personnel, professionals in exercise and rehabilitation and peer instructors are more actively involved in exercise counseling and activities for older people.
- Older people are involved in the planning and development of physical activities.
- There are exercise counseling and activities for special groups in municipalities, such as immigrants, persons with memory illness, disabled persons and family caregivers.

3.4 Public awareness, attitudes and expertise

Development aims

- Increasing training concerning older people's physical activity in various professionals' basic and further education.
- Increasing information about health exercise for older people.
- High quality, comprehensive and accessible exercise materials available for older people.
- Positive image of older people as exercisers and peer instructors with various degrees of fitness.

Recommendations

8 Encourage various educational and other organizations to add older people's exercise in their training programmes.

Starting point and contents: The target groups for training include professionals in exercise and rehabilitation, nurses, doctors, fire and rescue personnel, social workers, environment officials and peer instructors.

These professional groups and volunteers need more expertise in the promotion of older people's physical activity. The contents of training include exercise according to health exercise recommendations, nutrition, exercise counseling, assessment of functional capacity and mobility, exercise instruction, equipment instruction and fall prevention.

9 Secure the maintenance of training networks for older people's health exercise.

Starting point and contents: Supporting the maintenance of multiprofessional training networks and securing the update of materials according to quality recommendations. Instructors are directed to carry out local training for various professionals and peers.

10 Organize municipal learning events for older people about physical exercise and voluntary work.

Starting point and contents: Special attention is paid to retiring persons who lack a physically active way of life (e.g. socioeconomic or educational background factors) and similar 75+ groups whose physical functional capacity is deteriorating and whose independent living can be supported with exercise.

- a Organize courses in pensioner's training based on exercise recommendations and leading to a healthy life style. Encourage older people to participate in voluntary work in exercise and peer instructor training.
- b Organize learning events for independently living 75+ older people about the health effects of physical activity and benefits of exercise in connection with healthy life styles and technological solutions supporting autonomy.

11 Produce and collect learning and guidance materials and descriptions of good practices in the field to create a data bank.

Starting point and contents: Professionals in rehabilitation, exercise and nursing as well as volunteers and peers need concrete instructions for exercise instruction and counseling about recommended exercise, pedagogical methods, good practices and materials. Contents are also needed for the instruction of special groups (persons with memory illness, disabilities and mental challenges). The materials are collected in a data bank where they are easily and affordably available.

12 Organize campaigns and events that promote positive attitudes to older people with various degrees of functional capacity.

Starting point and contents: With campaigns and events the attention of decision-makers, actors

and general public can be drawn to the benefits of older people's physical activity. The campaigns are organized in comprehensive cooperation between various actors. Media, social media, television and radio are also utilized.

Criteria for success

- The number of professionals and experts in older people's health exercise has increased.
- The multiprofessional training network in older people's health exercise grows regionally and nationally.
- Health promoting exercise for older people is included in the training of key professionals.
- Older people have received information about exercise and healthy life styles.
- Health exercise materials are used by instructors and older people.
- Older people's exercise and voluntary action have gained positive media coverage.

3.5 Dialogue between research and development

Development aims

- Research and development projects are launched according to the policy programme.
- Research and good practices serve decision-makers and development.
- Cooperation forums are organized for researchers and developers.

Recommendations

13 Initiate research and coordinated development projects that address the challenges and needs of older people's health promoting exercise.

Starting point and contents: The research and development projects are focused on the physical activity of older people living in various environments with decreased mobility and special needs. Dialogue between research and development should be increased.

It is important that health promoting exercise programmes and projects enhance cooperation concerning, for example, training, materials and communication. Synergy benefits with programmes on other age groups are also utilized.

Research in the area should include both quantitative and qualitative projects. Suggested themes include:

- Exercise behaviour
- Lack of mobility, immobility
- Pedagogy and older people's exercise
- Psychosocial benefits of exercise
- Cost - benefit effects of exercise
- Significance of green environments in promoting physical activity and well-being

The research is collected into practical packages for decision-makers, actors and general public.

The aims of development projects include the production, implementation and dissemination of good practices in coordinated measures. The themes may include:

- Exercise environments and conditions for older people
- Developing exercise activities for older target groups
- Developing contents and tools for exercise counseling
- The expertise and experiences of older people in developing exercise services
- Older people as volunteers in exercise
- Fall prevention
- Developing exercise activities over generations
- Promoting physical activity in service housing and care services

14 Organize regular, national forums on exercise and older people.

Starting point and contents: Forums aim to reach decision-makers, researchers, exercise actors, educators in rehabilitation, exercise and elder care, environmental designers, older adults, and the representatives of media. Participants are invited

especially from municipalities with high numbers of older people and a need for developing older people's exercise activities.

Suggested themes for forums: the latest research on health exercise, good practices, environment and facilities, exercise contents and execution for various target groups, exercise counseling, fall prevention, learning materials, and further training.

Criteria for success

- There are research and development projects on the suggested themes.
- There are information packages available on research and good practices for decision-makers and actors.
- The actors in programmes and projects cooperate.
- Researchers, developers, professionals and decision-makers meet on various forums.

3.6 Coordination, follow-up and evaluation of the programme

Development aims

- The policy programme supports the planning and execution of health promoting exercise for older people.
- Guided exercise activities fulfill the quality recommendations.

Recommendations

15 The nomination of responsible persons and method of action for the coordination and evaluation of the programme.

Starting point and contents: The responsible parties design the plan and schedule for the programme. The progress of the programme is followed and evaluated annually.

16 Create quality criteria for the guided health exercise of older people and assess the exercise activities based on those criteria.

Starting point and contents: In Finland, the quality recommendations for the guided health exercise of older people were designed in 2004. These are supported by quality criteria with which decision-makers, actors and older people can evaluate and ensure high quality and ethical exercise activities for older people. The quality criteria are disseminated to all municipalities and training on the criteria is organized both locally and nationally.

Criteria for success

- The responsible parties coordinate the execution, follow-up and evaluation of the programme.
- The quality criteria are utilized in the development of local activities.

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