

Area 1- Level 3: Examples for HESA Strategies/Action Plans



DTB Gymwelt Strategy: Fitness- & Health-Oriented Sports

A. The creation process of the strategy

Fitness & health-oriented sport activities are central goals of the German Gymnastic movement! In the early 19th century, for example, Friedrich Ludwig Jahn asserted in his *“Turnkunst”* that everyone must systematically develop their abilities. If this isn't done, those abilities would wither away, with many negative consequences for physical and mental fitness and health. For Jahn gymnastics represented a "habitual art of the body and of life" – one which everyone should possess in order also to remain fully fit and healthy. This view of exercise was a continuation of the tradition of gymnastics, whose roots can be traced back to ancient times. Such practice-oriented suppositions regarding the positive effect of gymnastics and exercise on people's development and health were already confirmed by the end of the 19th century by doctors and biologists such as Wilhelm Roux, among others, through research into the "functional adaptation" of the organism. This is the tradition that the German Gymnastic Federation DTB still follows today, with its responsibility to promote the systematic and effective strengthening of fitness and health in the population.

The creation process:

- The aim of HEPA promotion is deeply rooted in the tradition of DTB since its foundation in 1848
- Since 25 years a particular quality oriented approach to HEPA –called “Health & Fitness Sports”– has been created and has become a success story for the development of the federation.
- After rather unstructured, but dynamically progressing development the DTB HEPA promotion program had been based on a comprehensive strategy in 2013

With the adoption of the GYMWELT concept by the central committee on 19/11/2011, the DTB has traced out a contemporary conceptual framework for the fitness- and health-oriented sport activities. The GYMWELT concept has clarified the understanding of the fitness & health-oriented sport activities fields, and helped to identify prospects for the development of these fields in terms of activity programs, instructor training, structures and marketing. In addition to the concretisation and gradual implementation of these perspectives, the discussion showed the need for differentiation and supplementation, on the one hand with the national gymnastics associations LTV ("Landesturnverbände") with the annual GYMWELT meetings and the formation of educational dialogues, and on the other hand with the German Olympic Sport Confederation DOSB, with national sports associations, and with other sports associations (e.g. German Disabled Sport Association DBS).

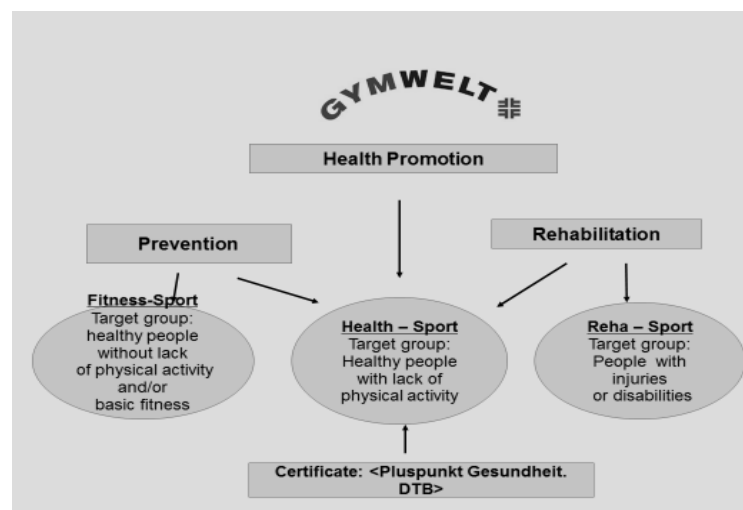
This concept should be understood accordingly as a continuation of the achievement of the fitness and health-oriented sports concept in GYMWELT. The positioning of the DTB should be as compatible as possible with the (quality) requirements of health policy² and of the healthcare sector³. Moreover it's underpinned by a scientific expertise created on behalf of the DTB.

B. Description of the sectors in the area of Fitness- and Health-Sport

PREVENTION, REHABILITATION AND HEALTH Promotion

Definitions (based on WHO):

- Prevention is aimed at the avoidance and elimination of health risk factors, injuries, and illnesses.
- Rehabilitation literally means "Re-establishment of capabilities ", is closely connected with disability and injury, and includes measures to promote recovery, as well as to enable an independent life.
- Health promotion should enable people to be in control of their own health, and thereby to improve their physical, psychological, and social well-being. Strengthening resources, the development of healthy behaviour, and health-strengthening relationships are in focus.



Overview of significant correlations, referred to in greater detail below. The focus of DTB physical activity programs is traditionally the fields of fitness- and health-oriented sport. Rehabilitation-Sports (Reha-Sports) has also been offered at high quality in some national gymnastics associations.

The areas of Fitness-, Health- & Reha-Sports

Fitness Sports specifically and systematically targets the strengthening of fitness factors (endurance, strength, flexibility, coordination, relaxation) – which makes it a central part of prevention. Such strengthening can be done in terms of individual fitness factors such as by joining a walking club (especially endurance) or in combination with fitness factors such as fitness gymnastics. In Fitness-Sports especially, the central preventive quality is ensured by the qualification of trainers and managers. To that effect, they should be able to structure exercises for strengthening fitness factors, and to conduct them in a group-oriented manner.

The promotion of some psycho-social resources (particularly emotional experience, social inclusion) is important, but it's usually carried out by the trainers in an intuitive rather than systematic manner.

Fitness-Sports focuses primarily on adolescents, as well as on adults up to advanced old age, who already have a certain "fundamental fitness" and who want to maintain or improve that fitness. Motivation for participation in fitness sports ranges from "obtaining/improving fitness" and "staying in shape" to "showing up and feeling good" and "experiencing social inclusion".

More specific target group definitions make sense against this background (e.g. according to fitness level, motivational conditions and socio-demographic characteristics). The scope of services offered includes traditional "functional gymnastics" as well as fitness trends and equipment-supported training. Services in fitness sports are based on motivational and diverse contents (including movement forms from other cultures), as well as overall prevailing conditions, such as music, materials, equipment, nature.

Health-Sports consists of services or programmes that meet the "core objectives" as well as the quality requirements of health promotion within the meaning of the WHO:

- Strengthening physical resources (fitness factors) and, therefore, also prevention and reduction of physical stress symptoms, particularly risk factors.
- Strengthening psychosocial resources (knowledge, mood, self-efficacy, body concept, integration, and support) and thus also
- Coping with psycho-social stress symptoms (or complaints)
- Forming an active lifestyle (commitment).
- Development of prevailing conditions for exercise programs (this includes systematic programme development and evaluation, education of instructors, forming networks and quality circles, creating favourable infrastructural conditions).

Health-Sports thus has a primarily preventive function (resource strengthening, risk preventions), and is also targeting changes in behaviour and living circumstances (health promotion).

The overlap between Health-Sports and Reha-Sports includes the inclusion of specific target groups

The sectors in the area of HEPA promotion:

- Based on the general definitions of WHO the DTB strategy defined the HEPA sectors of "Fitness-Sport", "Health-Sport" and "Rehabilitation Sport" as different approaches within the DTB strategy.
- The DTB strategy is pursuing a high and controlled quality of HEPA programs through the quality marks "Pluspunkt Gesundheit.DTB" and "Präventionsgeprüfte Gesundheitssportprogramme.DTB"



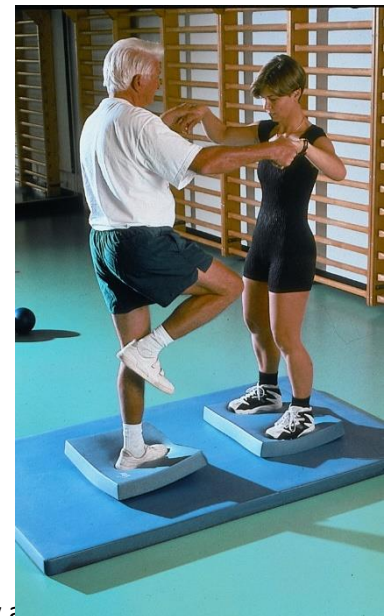
(see below), and that between health-oriented sports and fitness sports includes the consideration of objectives regarding fitness strengthening (see above). Many entry-level services from Health-Sports can also be pursued as "low-threshold" permanent services from fitness sports.

Health-oriented sports focuses in particular on adults up to advanced old age with the risk factor of physical inactivity⁵ (beginners and people who are returning), i.e. on people who have limited fitness; on adults with specific health problems⁶ (e.g. back pain, obesity); and on children and young people whose health is particularly vulnerable (e.g. those who are severely overweight). Motivations for participation in the adult target groups are, in the beginning especially, "tackling health problems" and "improving fitness" – and among those who persist in the services, these health motivations continue, but soon grow to include "showing up and feeling good" and "experiencing social inclusion". More specific target group definitions are useful and necessary against this background (e.g. in accordance with motivational conditions, socio-demographic characteristics, fitness and/or risk status, special complaints).

Quality in health-oriented sports is assured by structured and documented programmes (manuals) that are tested and evaluated in terms of their effects; the qualifications of trainers; supportive internal and external networks (internal e.g. with quality circles, external e.g. with health insurance companies or cooperation with doctors); and by good prevailing conditions (e.g. group sizes).

Reha-Sports aims – in conjunction with the measures of medical rehabilitation – to strengthen and restore basic physical and psychosocial resources in order to enable an independent life with disability and injury, as well as to reduce associated health problems. Reha-Sports on the one hand contains the goals of Fitness-Sports, and partially those of Health-Sports as well (depending on the target group). On the other hand it has a focus on special "classes" of persons with disabilities and injuries (e.g. diabetes, osteoporosis).

A target group definition relates primarily to those "classes" of disabilities and injuries, but more specific criteria for determining the target group of health-oriented sports can be used as well (e.g. motivational conditions, socio-demographic characteristics, fitness status). Participants have heterogeneous motivations. In addition to the motivations named for participants in Fitness-Sports and Health-Sports the central one is "improving health conditions" and "coping with everyday requirements".



(More or less) qualified offers and programmes for groups are currently available for the following target groups: # stroke groups; # diabetes groups; # cancer follow-up care groups; # back groups (spinal disorders, inter-vertebral disc prolapse, etc.); # sports for people with osteoporosis; # sports for people with respiratory diseases (asthma, among others); # rheumatism groups; # addiction groups; # dementia groups (Parkinson's & Alzheimer's, among others).

The quality of such group offers in rehab sports should be secured in the future: # through structured and documented programmes (manuals) that have been tested and evaluated in terms of their effects; # through the qualification of sports and/or movement therapists and trainers; # by supporting internal and external networks, as well as through good overall conditions.

PLUSPUNKT GESUNDHEIT.DTB

The PLUSPUNKT GESUNDHEIT.DTB seal of quality is compatible with the SPORT PRO HEALTH seal of quality from the DOSB umbrella organization. Such a certificate is awarded based on the fulfilment of the following 6 quality criteria:

- Target group based offers (the core objectives of health-oriented sport, especially, are consistently implemented by the course's contents and methods).
- Qualified trainers (the "Sports for Prevention" instruction program).
- Uniform organizational structure (including group sizes, the rhythm and duration of the exercises).
- Preventive health check (preventive medical check-up).
- Accompanying quality management (including participation in quality circles).
- The association as health partners (including cooperation and networking).



It's clear that if these six quality criteria are taken seriously, they (currently) apply mainly to health-orientated sports offers – because so far this the only one that has been consistently directed towards the "core objectives". In light of the target groups, the criteria in Reha-Sports must be consistently applied as well. Some of the six criteria should certainly also be fulfilled in Fitness Sports

"CERTIFIED for Prevention. DTB" HEALTH-SPORTS PROGRAMS

The DTB offers a series of Health-Sport programmes with the special quality mark CERTIFIED for PREVENTION.DTB. The preconditions for such an award are, in particular:

- The existence of a (preferably published) course manual in which at least 12 course units are described as examples, and which includes course materials.
- The existence of two expert opinions which confirm that the key objectives of Health-Sports are adequately implemented in terms of content and method, and that continuous references can be made to the clearly defined target groups.
- The existence of (at least) one evaluation that meets minimum scientific standards and that was also tested in the context of the above-mentioned expert opinion.

The CERTIFIED for PREVENTION.DTB quality mark is the core of a co-operation agreement between the DTB, the umbrella organisation of the substitute health insurance companies VDEK, and other health insurance companies. Reimbursement by those companies for the participants is, therefore, possible in all courses in which a CERTIFIED for PREVENTION.DTB program is present, and for which qualified trainers for the PLUSPUNKT GESUNDHEIT.DTB can be proven in addition.



C. PERSPECTIVES AND STRATEGIES OF GERMAN GYMNASTICS ASSOCIATIONS FOR FUTURE DEVELOPMENT

The engagement of the DTB and the regional Gymnastic Associations (LTV) serve the aim of building up the wide range of fitness and health related programs through gymnastics- and sports-clubs - under the GYMWELT brand –

Strategic goals to develop fitness- and health promotion within the federation:

- This chapter defines in details the goals and objectives the future development requirements in the different sectors of HEPA promotion, the education of HEPA instructors, and the internal task-sharing in the vertical structure of the federation and for staff resources.

to enable local gymnastics clubs to fulfil the demands at the doorstep. As well it's the aim to strengthen the DTB's leading position in the field of Fitness-, Health- and Reha-Sports.

Fitness-Sports

Considering the current trends, systematic strengthening of fitness factors and motivational variety of (permanent) offers are the central quality aspects of this important DTB activity sector!

Needs for further development

- Increased focus of programs for adolescents and young adults who have dropped out of competitive sports – but want to stay fit.
- Development of exercise programs /trend concepts specifically for men!
- Development of offers that specifically take the living conditions of elderly people into account.
- Development of attractive, simple, and easily implementable trend concepts that can be implemented on a large scale and with the character of a campaign (e.g. LaGYM, Functional Training, CrossFitness, 4F-Fitness, Parksport, etc.).
- A more consistent use of exercise programs in order to attract potential members and to advertise.
- Development of recommendations for networking with cooperation partners and dealing with potential competitors (including Adult Education Centres, professional Fitness- and Health Centres.
- Introduction of a quality certificate "QUALIFIED FITNESS Program"

For the fitness sector that isn't covered by the PLUSPUNKT GESUNDHEIT.DTB a particular certificate will be developed with reduced quality criteria and distinguished from the PLUSPUNKT. DTB quality mark. Such a certificate should mainly certify the acknowledged instructor quality, which is crucial for the program quality in the fitness sector, and with which gymnastics- and sport-clubs can set themselves apart from competitors in the field of commercial fitness services. In this context the certificate especially supports public relations, helps the clubs to position themselves locally as quality organisations, and should be linked to the DTB "Fitness and Health" and "All-Round Fitness" instructor licences.

Health-Sports

In accordance with the objectives outlined above, all Health-Sport programs developed by the DTB – mostly in the form of courses – establish a connection or a transition possibility to the field of fitness programs. It is important, however, to make the transition into a stable membership as simple as possible in GYMWELT. For the target group of children, whose health is particularly at risk (e.g. the obesity risk factor), a connection should be made to the normal children gymnastics activities. The DTB's evaluated course programmes (CERTIFIED FOR PREVENTION. DTB programs) together with the PLUSPUNKT GESUNDHEIT. DTB) excellently lend themselves to cooperation with health insurance companies and doctors, since the conditions of the GKV prevention guidelines (as amended on 27/10/2010) are fully complied with! The "Prescription for Physical Exercises" initiative can be linked directly with the DTB programs in the field of Health-Sports because the DTB programs meet the quality standards of the medical health sector!

Needs for further development

1. Stronger implementation of existing programmes in the clubs through...

- appropriate communication/increased publicity;
- higher demand on the level of the end-user;
- intensified demand for instructors , participating in the trainings and assurance of training

- courses;
 - coordination of training courses to ensure that they're provided nationwide and in sufficient numbers;
 - recording of training courses, subscriber data, and certificates, for documentation and for regular exchanges of data with contract partners (including VDEK, DOSB);
 - standardisation of programme- and training quality across LTVs.
2. Addition to the existing prevention-certified course programs
- A programme that satisfies the specific "gym in the club" situation (training on fitness equipment);
 - A nature sports/park sports programme (mix of urban fitness, hiking, hands-on elements, circuit training, etc.);
 - A Kegel Exercise programme;
 - A programme for the medium of water;
 - A programme based on Yoga and/or Pilates.
3. Complementary quality assurance/evaluations for every programme that has not yet been evaluated, or has been insufficiently evaluated.
4. Concepts for linking up of courses, both with subsequent permanent offers in clubs with member retention, as well as with health care institutions (particularly resident physicians, health insurance companies) for the recruitment of new members.

Reha-Sports

To consider an increased commitment in the field of Reha-Sports, with consideration of existing arrangements with the Sport-association for Disabled People (DBS), since the competitive situation in this field is growing more acute and some of the existing agreements between the respective federations are no longer respected. The engagement of LTVs in this labour-intensive field is very different due to the resources that are needed. While some LTVs offer training courses in this field and/or aspire to become recognised institutions, others are confined to collaborations with e.g. the DBS, or else they are not active in the rehabilitation sector at all. The Gymnastics- and Sports-clubs have to be supported in their efforts to operate successfully in the rehabilitation "market". The DTB and the LTVs are therefore joining forces to set up a competence network in order to build an appropriate support system.

Needs for further development

In order to allow all LTVs to be able to offer training courses in the rehabilitation field that are anchored in the DTB education system in the future, it makes sense to combine the expertise and resources of DTB and LTV:

- Collection of training concepts, training materials, lesson plans, etc.
- Generating an instructor pool.
- Offer of both central Reha-Sports training courses as well as on a decentralised basis in the style of a "Local DTB Reha Academy".
- Establishment of a "Reha AG", in the long term perhaps a "Reha Academy" (possibly together with DBS).
- Acceptance of gymnastic associations as partners in the pursuit of agreements with social security agencies.

PLUSPUNKT GESUNDHEIT. DTB

PLUSPUNKT GESUNDHEIT.DTB is currently a quality mark for offers from the entire field of health promotion, prevention, and rehabilitation. That means, from the entire spectrum of Fitness-, Health-

and Reha-Sports. The supplementary certificate CERTIFIED for PREVENTION.DTB is the core of the framework agreement with the private health insurance companies, and it signifies that it is an excellent offer with a standardised, scientifically verified and recognised Health-Sports programme that does not require the providers to make a more precise substantive examination regarding reimbursement.

PLUSPUNKT GESUNDHEIT.DTB programs currently make up 60% of all SPORTS PRO HEALTH offers from the DOSB. About 80% of SPORTS PRO HEALTH offers are probably already provided by gymnastics clubs or by clubs reported under gymnastics, but a large proportion of these offers aren't supervised by the respective LTV or awarded the PLUSPUNKT GESUNDHEIT.DTB quality mark.

The quality mark is an instrument for the DTB, the LTVs and the Gymnastics- and Sport clubs to show their achievements in the health sector. The strength of PLUSPUNKT GESUNDHEIT.DTB, however, can only be communicated to policy and partners in the field of health promotion as well as to DOSB when all programs and related data are collected centrally and uniformly, so that a regular flow of data on health insurance agencies or e.g. regular statistics creation is assured.

Needs for further development:

- The current review of quality criteria only includes instructor qualification; all other quality criteria named above are currently not ensured. As a consequence, the award of the quality mark should be focused on the verifiable quality of instructor qualification.
- Cooperation with health insurance companies should be expanded on this basis (trainer qualification) and moreover with the aid of the supplementary certificate CERTIFIED for PREVENTION (according to the requirements of the guidelines).
- Improved cooperation with the LTV as the supervising professional association is therefore necessary.
- Uniform recording of all PLUSPUNKT GESUNDHEIT.DTB programs in a centralised database should be sought.
- Securing and further development of the quality of internal communication (including provision of basic literature, web presence www.pluspunkt-gesundheit.de , PLUSPUNKT GESUNDHEIT Newsletter, Face-book Group)
- Securing and further developing the quality of external communication (including end-user flyers, posters, website, etc.).

Instructor Education

"Fitness and Health" training-courses on the 1st licence level as well as training on the 2nd licence level, "Sports in Prevention", have been running successfully for many years now, and are recognised. Newer training courses such as Trainer C "Fitness and Health - Focus on Summer/Winter Nature Sports" popular sports are starting to establish themselves. The "All-Round Fitness – Gymnastics, Exercise, Play" training course was approved in December 2011 and was conducted for the first time in 2012 as a model training course. By far the most performed is on the 2nd licence level, "Sports in Prevention", the "Posture and Movement" profile.

Needs for further development:

- The "Fitness and Health" training course as well as the 2nd licence level "Sports in Prevention" are not yet consistently oriented to the key objectives – the training courses and have to be adapted accordingly.
- The "Sports in Prevention" (basic and advanced module) profiles offered on the 2nd licence level (cardiovascular training, posture and movement, relaxation/stress management, and health promotion for children and the elderly) must be reconsidered accordingly.
- The "All-Round Fitness – Gymnastics, Exercise, Play" training course must be examined critically!

Staff assignment at the DTB

Actions and tasks compiled in this strategic concept must be successively processed based on staff reduction in the DTB's GYMWELT department.

Any takeover of tasks (e.g. for programme development) by LTVs with a correspondingly strong staff is welcome!

Some tasks, such as in particular the granting of PLUSPUNKT GESUNDHEIT.DTB awards, will be delivered to those LTVs in the future. The DTB then only can be charge for the coordination of quality standards, common application forms, etc.

D. Action-Plan

An overview of the tasks agreed between LTVs and the DTB and implemented in this concept is outlined in matrix form as an appendix.

The processing of almost all tasks requires a coordinated approach between LTVs and the DTB. Communications platforms for coordination are, in particular:

- The annual GYMWELT meetings in late April/early May.
- The information letter from the DTB Vice President (several times a year) and corresponding information letters from the LTV Vice- Presidents; (highly desirable!)
- The "feedback rounds" on the first draft (often from the DTB) – e.g. for a new version of the PLUSPUNKT GESUNDHEIT.DTB proposal.
- Direct and spontaneous communication options via email, phone, etc.

(The action processing of the LTVs will not be discussed here, as they are largely the responsibility of the LTVs – and are to be considered in accordance with country-specific features.)

The detailed Action Plan describes concrete actions within the different HEPA sectors of the strategy and allocates the diverse tasks on one hand to the national and on the other hand to the regional level of the country federations. The plan needs to be continually adapted.

Fitness-Sports Tasks	DTB	LTV
Exercise programs for older children and young adults, who have dropped out of competitive sports	<ul style="list-style-type: none"> •4XF Cross-Training •4XF Games 	
Development of programs/trend concepts specifically for men	<ul style="list-style-type: none"> •DOSB project funds for compelling “best practices” in DTB •Conception “Functional circuit training 	
Development of attractive simple and easily importable trend concepts, that can be implemented on a large scale and with the character of a campaign	<ul style="list-style-type: none"> •LaGYM •4XF Games •4XFCross Training •4XF outdoor FitCamp 	Initiating training courses
A more consistent use of “course offers” in order to attract potential members and to advise	Brochure “Strategy and organization of courses in the club”	Distribution of the brochure; output in the training courses
Development of recommendations for networking with partners and dealing with potential competitors	Brochure “Sport Club as a Healthy Setting”	Implementation into the training courses on the 2 nd license level and into club consultation
Introduction of a new certificate “Qualified Fitness Program”	Design is available	Implementation into the clubs

Health-Sports tasks 1. Implementation of the existing programs (greater penetration)in the clubs	DTB	LTV
Appropriation communication	About all DTB media: Internet platform, newsletter, gymnastic magazines; Ü Magazine; PLUSPUNKT Magazine; congresses/conventions	About all LTV media and training activities
Higher demand on the level of the end-user	Press work regarding health insurance companies/vdek,	Ditto Use of already produced materials

	development of posters, flyers, advertisements	
Higher demand of instructors and club involvement		Stronger connection to qualification measures on the 2nd license level
Coordination of training measures	About "DTB Academy on the doorstep"	
Recording of training sessions, number of participants and awarded certificates for documentation and for regular exchanges of data with contract partners	Database maintenance	Data collection and transfer to DTB
Standardization of program and training quality across LTVs	Multiplier training/instructor training, teacher-training, Quality Management Guidelines	Uniform organization, implementation of the QM

Health-Sports Tasks 2. Supplement to the existing prevention-certified courses	DTB	LTV
Nature sports/park sports program	Searching for a partner, who will finance the evaluation	
Program for the medium water	In conversation with the insurance company AOK	
Program based on Yoga and/or Pilates	Not yet in the pipeline	
Complementary quality assurance/evaluations for every program that has not been evaluated or insufficiently evaluated	Searching for a partner, who will finance the evaluation	
Concepts for linking the different courses	X	
Communication of quality criteria and programs to partners (including health insurance companies)	X	

Reha-Sports Tasks	DTB	LTV
Collection of training concepts, training material, curricula development	X	
Generating an instructor pool	X	
OFFER OF BOTH CENTRAL Reha training courses as well as on a decentralized basis in style of a “Local DTB-Reha Academy”	X (cooperation with DOSB)	
Establishment of a “Reha Working Group”, in the long term perhaps a “Reha-Academy”	X (cooperation with DOSB)	
Acceptance of gymnastics associations as partners in the pursuit of agreements with social security agencies	X	X

Pluspunkt Gesundheit. DTB tasks	DTB	LTV
Examination and revision of the quality criteria and the application forms	X	
Cooperation with health insurance companies to be developed	X	
Improved assignment to the LTV as supervising professional association	Political situation required	
Uniform recording of all PLUSPUNKT courses in a centralized database		Improvement of data transfer
Securing and further developing the quality of internal communication	X	

Training/Education tasks	DTB	LTV
Better adjustment of “Fitness and Health” training courses as well as the 2 nd license level “Sports for Prevention” to core objectives	Coordination working group	Working group of LTV experts
Rethinking and adjusting the “Sports for Prevention” profile, offered on the 2 nd license level	Coordination working group	Working group of LTV experts
Critical examination of the “All-Round Fitness-Gymnastics” training course	Board of General Gymnastics	Feedback

Aging Fit – Strong in the GymWorld



Strategy of the German Gymnastic Federation (DTB) for the promotion of HESA for Elderly (Summary)

The societal and political background:

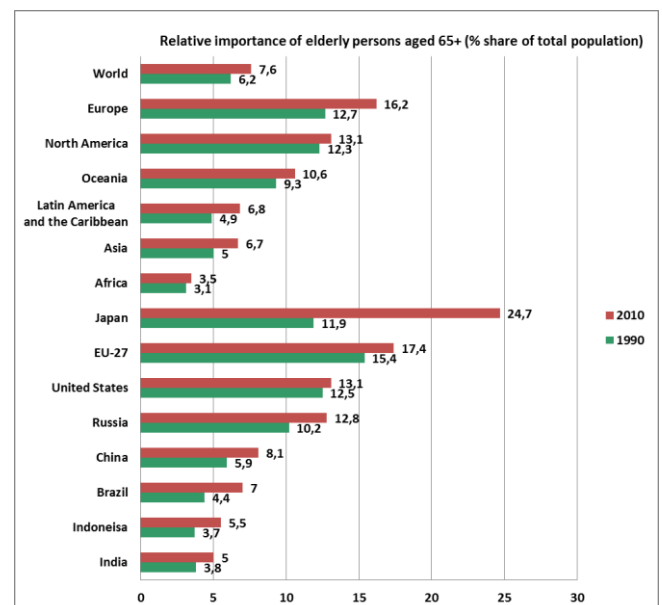
Like hardly another topic aging has moved into focus of public interest. The population in our modern societies is gradually growing older. The age pyramid has changed due to higher life expectancy and lower birth rates. Very soon the majority of the living persons will be older than 60 years. No generation before in history had the chance to reach a lifespan as long as now. Improved health care, better nutrition, ongoing activities and involvement in social life had contributed for many more people to maintain a greater vitality and to reach a longer lifespan.

This progress in personal human life creates on the other hand societal challenges. Higher expenditures for pensions, explosively rising costs for health care, poverty and social isolation of parts of the “growing grey generation” are some characteristics which mark socio-political challenges regarding the living situation of senior citizens.

Both, the individual expectations and needs for a longer life and the societal challenges of the “growing grey generation” are demanding an intensive involvement of the sport movement for the target group of senior citizens. We know today through a lot of scientific researches and through personal reports on experiences given by senior citizens that manifold improvements to the quality of daily life of senior citizens can be achieved through physical exercises and sports, namely

- Improvement of well-being, fitness and health
- Retention of independence and mobility
- Improvement of social situation through sociability, common interests, communication, co-operation, social exchange, social integration into a group
- Strengthening of personal identity and self-image
- Experiencing a new challenge and purpose of live.

Therefore physical activity and sport stands for an indispensable subject of successful and healthy aging!



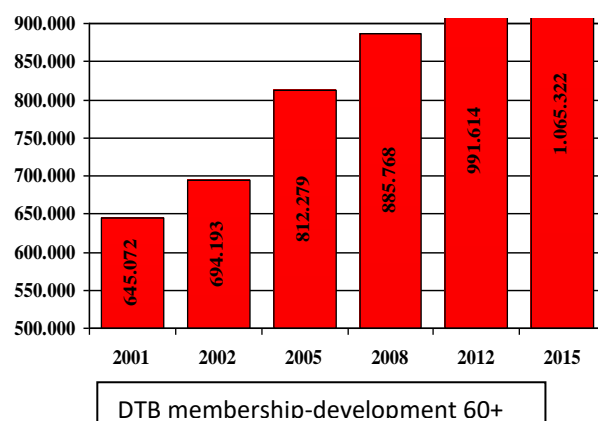
The position of DTB in the field of Active Aging

Activity programs for older club members have a long tradition in DTB. The importance of taking care for this target group is mentioned in different policy papers and rules and is based on particular working structures (functions) on all levels of the federation.

As the DTB counts more than 1 mill. members over 60 years old, he feels obliged to provide appropriate activities for this target group. Even if 56% of DTB clubs offer particular activities for older people there is a need to encourage more clubs and to increase the number of activity programs. From a recent scientific survey we know that our clubs want to establish two more activity groups on average.

Moreover the demographic development and changing behaviour of older people will challenge the clubs to take care for older persons not yet being physical active.

The strategy “Aging fit – Strong in the GymWorld” intends to inspire and enhance the further development to promote health-enhancing physical activities and sport for elderly people.



Main strategic goals:

- Retaining of aging members.
- Recruitment of new members
- Provision of services for gym-clubs to offer enough activities in a fairly good quality.
- To contribute to the social challenges in regard to older people.

Policy development:

Strategic goals;
implementation ;
procurement of resources;
PR

Product development:

Exercise programs; teaching
material; projects; quality
mark;

Basic elements of the DTB Aging-Fit Strategy

Human resources qualif.:

Instructor -, leadership-,
management qualification

Organizational developm.

working structure;
communication; external
cooperation

Table of content:

1. *Reasons for a new strategy for the target group of older people:*

- Demographic development and challenges for organised sport;
- Characteristic of aging and the influence of physical activity on the process of aging;
- Motivational alterations within the process of aging.

2. *Differentiation of sub-groups within the target group of elderly people in regard to physical activity and sport:*

- Active and fit older people.
- Older sedentary people, often with health problems and health risks.
- Old-old people with activity restrictions.

3. *Exercise program development:*

Objectives:

- To encourage more clubs to offer exercise programs
- To establish more groups in a club
- To initiate more differentiated (tailor made) exercise programs
- To initiate more programs in cooperation with external partners and in new settings.
- To activate passive elderly club members and to retain members in higher age.

Problems and problem solving in the development of exercise programs:

- Lack of facilities.
- Less willingness of older newcomers to become a club-member.
- Lack of innovation within traditional programs

4. Human resources development:

Objectives:

- To recruit, to educate and to retrain more instructors for groups of older people.
- To train available instructors to the needs of older people.
- To examine and revise the qualification curricula for the target group of older people.

5. Internal organizational development:

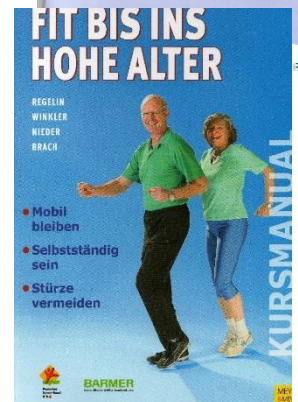
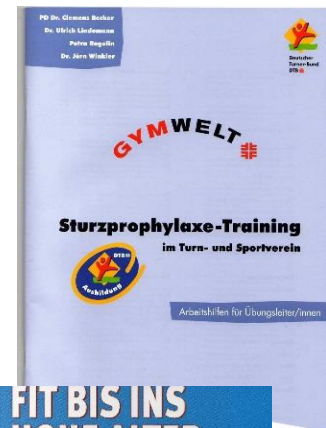
- Creation of functions and entities being responsible for the target group on all levels of the organization.
- Definition of responsibilities in the function concerned (job description).
- Securing internal communication structures.

6. External organizational development:

- Establishment and taking care of a political-strategic network.
- List of cooperation partners/stakeholders on different levels of the organization.

7. Public relation and marketing:

- Creation of a brand/slogan ("Aging fit – strong in the Gym World").
- Press articles in newspapers.
- Contacts to editorial departments.
- Press conferences.
- Participation in contests.



8. Action Plan for implementation:

Measures on DTB-level:

- Presentation and discussion of the strategy with the regional states Gymnastic Federations.
- Creation of a contest "The age friendly gym-club".
- Creation of new exercise programs in cooperation with universities.
- Qualification of disseminators for the programs.
- Survey of the exercise- program and instructor situation in the gym-clubs.
- Collection of good practise of promotion concepts on club-level.
- Cross-sectoral networking on the federal level.
- Promotion of groups in clubs not yet involved in programs for older people.

Recommendations for measures in the regional state gymnastic federations:

- Declaration of the organizational readiness to follow the strategy.
- Appointment/election of leaders taking care for pursuing the strategy on the regional state level.
- Common initiative with DTB for the promotion of gym-clubs not yet being involved in programs for older people.
- Common initiative with DTB to create new groups for older inactive people.
- Public relation initiatives on regional state level.
- Cross sector cooperation and networking on regional state level.
- Political lobbying on regional state level.
- Provision of education courses for instructors.

Recommendations for measures in the regional district associations and for gym-clubs:

- The recommendations are very similar as before, but regarded to the district and club level.



9. Concluding:

Formal agreements

Experiences with the implementation of the strategy:

Some measures of the action-plan are already realised, others are still in the pipeline. The number of realised measures and the speed of implementation are very diverse and differ between the federations on the regional level. The implementation is mostly dependent on available resources.

The strategy is not an formally binding instrument within the DTB policy; it's created to give guidelines and recommendations for DTB leading entities on all levels of the federation to go once own for a more systematic and holistic approach to promote physical activities for older people. This openness is on one hand an advantage, but also its weakness. Concrete, verifiable working-plans are until now mostly not available.

Area 1- (Level 3)

Designing and evaluating HESPA-Strategies

Recommendations and a model to design a HESA promotion strategy

Each organization is specific! Each organization needs its own strategy!

But 4 main steps should be pursued in any case:

- A serious analysis of factors giving reasons for the creation of the plan should be conducted. Internal factors, related to the respective association should be considered as well as external conditions.
- The identified outcomes of the analysis have to become transformed into a general vision and mission, goals and objectives and operative modules.
- The implementation needs well considered and controlled procedures.
- The whole strategy needs serious evaluation and from time to time updating.

Recommended steps for planning and implementation of a HESPA strategy

1st step: Preparation for a SCforH strategy

- Outline the appropriateness of your sport for health benefits.
- Identify the internal preconditions and the potential for the promotion of SCforH programs within your organisation.
- Identify the external preconditions which may support your strategy.
- Take into consideration the different approaches of SCforH interventions and evaluate the suitability for your SCforH strategy.

2nd step: Creation of the SCforH strategy

- Transform the results of your analysis into a vision and mission paper, outlining the rationales for the strategy, listing the main strategic goals and operative measures.
- Present it to the leading bodies of your association and try to get it approved.
- Draw up the strategic plan for the S
- SCforH program.
- Get a formal approval of the strategy through the responsible bodies of your association

3rd step: Implementation of the SCforH strategy

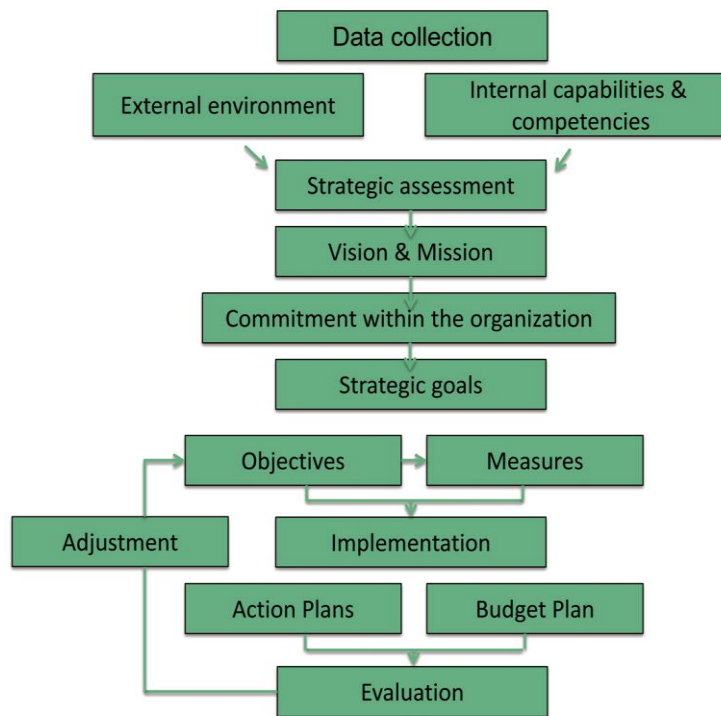
- Create operating plans/working plans for each of the subdivisions of your strategy with determination of priorities, timetables and authorised budget-plans.
- Set up and secure appropriate working structures on all levels of your association.
- Support and secure the competences of persons/working groups in leading functions for the implementation of the strategy.
- Conduct the working plans step by step and monitor the feasibility of the proceedings.

- Inform about the topical status and forthcoming actions regularly internally and externally.

4th step: Evaluation of the progress and impediments of the SCforH strategy

- Create and use evaluation tools (reports; questionnaires; external auditing; ...)
- Update the strategy continuously according to the evaluation.

Model to design a SCforH promotion strategy:



Evaluation of HESA Strategies/Action Plans

Self-Assessment Tool

This document may be used as a check-list to identify, which factors of strategic planning and implementation are taken into account of your strategy and which factors might be added. Furthermore the rough qualitative assessment of the individual factors may help to identify strong and weak points and to encourage improving the strategy-plan.

	We didn't do it	We did it some way	We did it quite well
1. Did you analyse the prevailing individual and social conditions of the target groups of your program?			
1.1 Did you consider the relevance of physical activity as a basic requirement for health and well-being (based on latest research information)?			
1.2 Did you identify the social-political importance of HEPA promotion?			
1.3 Did you consider the social living conditions and individual prerequisites of the target groups?			
2. Did you take into account the preconditions inside your organization to go for a HEPA promotion program or a strategy?			
2.1 Did you examine the general policy and goals of your association regarding the openness and obstructions for the strategy?			
2.2 Did you take into account the feasibility of the overall activities in your association in regard to health benefits?			
2.3 Did you take into account the current and prospective membership development (age groups, gender) of your association?			
2.4 Did you consider the availability of human and financial resources needed to implement the strategy?			
2.5 Did you consider to appropriateness of communication channels in your association to communicate the strategy?			
2.6 Did you identify possible external partners and competitors for your strategy?			
3. Did you describe what you want to achieve through the program/ strategy (vision and mission)?			

3.1 Did you outline a formal document to be accepted by the leading bodies of your organization?			
3.2 Did you get a formal agreement/confirmation for the program/strategy?			
4. Did you transform the analysis data of external and internal factors into concrete objectives and measures?			
4.1 Did you identify and describe the target groups(s), you want to include into your program/strategy?			
4.2 Did you outline guidelines/ criteria how to set up activity- or exercise- programs for the target groups?			
4.3 Did you give advice for the recruitment of instructors for HEPA programs?			
4.4 Did you give advice for the education of HEPA instructors?			
4.5 Did you give advice to internal organizational working structures?			
4.6 Did you give advice for external partnership and networking (e.g. cooperation with the Occupational Health Care System)?			
5. Did you outline implementation procedures?			
5.1 Did you set up a team to manage the program/strategy?			
5.2 Did you outline detailed operating-/working-plans?			
5.3 Did you give advice of the provision of relevant working resources (finances; human resources; working material)?			
5.4 Did you discuss your operating-/working-plans within the different working groups?			
5.5 Did you look for external expertise?			

5.6 Did you take care for regular exchange of information about the status of the working procedures?			
6. Evaluation procedures in the strategy-plan			
6.1 Did you consider evaluation procedures in the strategy-plan?			
7. Adaptation and Updating of your promotion-program and strategy-plan			
7.1 Did you take care for an adaptation and updating of your promotion-program or strategy-plan?			
8. Summarising assessment: Which are the strong and which are the weak points of your strategy-plan or program to promote physical activities for older people?			

SWOT-Analysis to assess internal preconditions of a sport-organization for strategic planning HESPA promotion programs

Strategic planning needs to match with the internal capabilities and competences of the sport-organization. The strong and weak preconditions should be analysed carefully as well as the opportunities for advancement and the potential dangers. The so called <SWOT-Analysis> is a suitable tool to identify and to assess the preconditions for a successful implementation of the strategy-plan. Such a SWOT- Analysis should be executed in the beginning of the entire procedure.

The following example refers to selected preconditions and assesses them regarding

- Strengths
- Weaknesses
- Opportunities
- Threats

Example from the German Gymnastic Federation SWOT-Analysis of the Strategy Plan “Fitness & Health”:

	Strength	Weaknesses	Opportunities	Threats
Attitude/policy/structure for the strategy topic	Historical, long tradition; readiness for innovation; deep structural anchoring (functions)	Differences in the engagement inside the vertical and horizontal structure of the federation.	Commitment to a common strategy. Club leaders want to create more groups (on average 2). More clubs are interested	Focus on competitive activities in parts of the federation structure
Appropriateness of the overall activity programs	Many appropriate. activity programs; high quality; strong in new, trendy program development	Too less sub-target-group differentiated exercise programs	Further improvement of quantity and quality of fitting exercise programs	
Current and prospective membership structure	Increasing membership in the age groups of children and elderly	Difficulties to retain and recruit adolescents and younger adults as well as men. Difficulties to recruit inactive people.	Campaigning for recruitment of still inactive older people. Entrainment of passive members	
Availability of human resources	Special HEPA instructor education profiles	Less staff resources. Too few instructors;	Recruitment and education of instructors	Enticement of instructors from external stakeholders
Availability of financial resources		Very low resources;	Good public funding opportunities through project call for tenders	Internal financial crisis
Internal and external stakeholders	Contact & cooperation with our regional associations	Regular communication;	Increasing cross-sectoral cooperation through project activities	Competitors inside and outside the sport system; commercial concurrence;