



Success story

Supporting a Physically Active Society Through Cross-Sectoral Collaboration



Initiative type: National cross-sectoral policy commitment

Sector: Health | Education | Sport | Transport | Urban planning | Workplace | Social affairs

Target group: Whole population, with a focus on regional and local decision-makers and practitioners

Implementation stage: Early implementation

Transferability: Yes

About the initiative

Sweden's Joint Commitment to a Physically Active Society 2026–2030 builds on the Swedish network on HEPA (SWHEPA), established in 2017 by the Public Health Agency of Sweden. The network brings together national government agencies from several sectors to strengthen cross-sectoral action on health-enhancing physical activity.

In 2025, the network proposed an overarching structure for long-term HEPA promotion, leading to the joint commitment signed by 12 national government agencies. Rather than creating new organisations, the approach uses existing mandates, legislation and policy frameworks to identify opportunities to strengthen physical activity promotion across sectors.

What is making it successful?

Key success factors include strong national coordination through the HEPA focal point, an established cross-sectoral network and a shared understanding that physical activity is a societal issue requiring action beyond the health and sport sectors.

High-level leadership commitment and the involvement of 12 national agencies provide an important foundation for implementation.

.....



What could other countries learn?

The approach is transferable, particularly because it builds on existing governance structures rather than requiring new institutions. A strong national HEPA focal point can help bring relevant sectors together, initiate dialogue and identify opportunities within existing policies and mandates. High-level political commitment and a shared understanding of HEPA as a cross-sectoral responsibility are also important.



Key challenges to promote HEPA

Sweden's wider challenge for physical activity promotion

A persistent challenge is translating strong national recommendations and cross-sectoral cooperation into systematic implementation at regional and local level. Implementation remains uneven across municipalities and regions, and further integration of HEPA into policies and everyday practice is needed. Sweden also needs to address inequalities in opportunities for physical activity, using proportionate universalism to combine population-wide measures with additional support for groups and communities facing greater barriers.

Country-level barriers to advancing HEPA

The following barriers are most persistent to advancing HEPA policy in the country.



BARRIER	IMPACT
Limited funding/resources	MINOR
Weak intersectoral coordination	EXTREME
Political prioritisation	EXTREME
Lack of workforce capacity	MAJOR
Insufficient monitoring/data	MAJOR
Limited research translation into policy	MODERATE
Regional/local implementation gaps	MAJOR
Inequities in participation/access	EXTREME
Public engagement challenges	MAJOR
Other	MODERATE

What is needed?

Sweden identified the need for:

- Continued cross-sectoral collaboration
- Stronger integration of HEPA into existing policies and strategies
- Building on existing governance structures rather than creating parallel systems
- Stronger implementation support at regional and local levels
- Continued knowledge exchange and capacity building
- Greater focus on equity and proportionate universalism
- Better links between evidence, policy and implementation



How can the HEPA Europe Network help?

HEPA Europe can help bridge the gap between evidence, policy and implementation by connecting researchers, policymakers and practitioners. Peer learning, evaluation, monitoring and exchange of real-world implementation experience can help countries adapt and scale effective approaches while ensuring that HEPA policies are both effective and equitable.



Co-funded by
the European Union

This publication was funded by the European Union. Its contents are the sole responsibility of the WHO Regional Office for Europe and do not necessarily reflect the views of the European Union.