Last update: 13/10/2025

Metadata – Physical Activity in adults

Description	Proportion of the population aged 18 years and over who perform at least 150 minutes per week of at least moderate-intensity aerobic physical activity
Rationale	Lack of physical activity is one of the leading risk factors in terms of both morbidity and mortality for a series of chronic conditions, including cardiovascular diseases, cancer, and diabetes. Moreover, regular physical activity, when reaching a certain threshold, can have significant benefits for health. The World Health Organization (WHO) [1] recommends that adults aged 18-64 perform at least 150 minutes of moderate-intensity physical activity throughout the week.
Primary Data source	Sciensano, Belgian Health Interview Survey (HIS), 2018 [2]
Indicator source	Sciensano, Belgian Health Interview Survey (HIS), 2018 [2]
Periodicity	HIS: every 3-5 years
Calculation, technical definitions, and limitations	To date there is no consensus on the method for estimating levels of physical activity based on self-reported surveys: the use of different instruments and of different cut-off points for classifying the levels of activity make it very difficult to compare results within and between countries. In the Belgian Health Interview Survey (HIS), in waves 2001 to 2013, physical activity was measured with the short version of the International Physical Activity Questionnaire (IPAQ). Since 2018, the EHIS-PAQ questionnaire is used as recommended by the European Health Interview Survey (EHIS) whereby time trend analysis is no longer possible, but international comparability is enhanced. The indicator “practicing at least 150 minutes per week of at least moderate-intensity aerobic physical activity (PA_1)” is constructed based on several questions. Participants are asked the number of days and the average time they spend practicing leisure physical activity (PA07, PA08) and cycling to travel (PA04, PA05). The total time reported for these 2 activities per week is computed and should reach the threshold of at least 150 minutes per week. The exact questions can be consulted in the face-to-face HIS questionnaire at https://his.wiv-isp.be/fr/SitePages/Questionnaires.aspx.
International comparability	Availability and comparability: Following the change to the EHIS-PAQ questionnaire in 2018, comparison will be possible between European countries participating in the European Health Interview Survey (EHIS).

Metadata – Physical Activity among adolescents

Description	Proportion of adolescents 11-18 years old who perform at least 60 minutes of moderate- to vigorous-intensity physical activity per day. Proportion of adolescents 11-18 years old who have a sedentary behaviour, i.e. spend more than 2 hours of screen-related time daily on weekdays.
Rationale	Lack of physical activity is one of the leading risk factors in terms of both morbidity and mortality for a series of chronic conditions, including cardiovascular diseases, cancer, and diabetes. Moreover, regular physical activity, when reaching a certain threshold, can have significant benefits for health. The World Health Organization (WHO) [1] recommends that children and teenagers aged 5-17 perform at least 60]minutes of moderate- to vigorous-intensity physical activity per day.
Primary Data source	Health behaviour in school-aged children (HBSC) surveys 2014, 2018, 2022. Two separated HBSC surveys are conducted in Belgium: - HBSC in the French community (conducted by the Université libre de Bruxelles) - HBSC in the Flemish community (conducted by the University of Ghent) For international comparisons among adolescents, the HBSC international report published by the World Health Organization was used.
Indicator source	ULB for HBSC French community 2014-2022 UGent for HBSC Flemish community 2014-2022 WHO international reports on the HBSC 2021/2022
Periodicity	HBSC: every 4 years
Calculation, technical definitions, and limitations	The HBSC surveys are filled by students between the 5th grade of primary to the 6th grade of secondary in the classroom. 2 distinct surveys are taking place in the French-speaking school system and in the Dutch-speaking school system. - The **physical activity** indicator was constructed based on the question: “During the 7 last days, i.e. during one week, how many days were you physically active for a total of at least 60 minutes (one hour) per day?”. This question was preceded by an explanatory paragraph stating that: "Physical activity is any activity that makes your heart beat faster and sometimes makes you breathless. Physical activity can be a sport, a gym class, playing with friends, or even walking to school. Examples of physical activities are cycling, playing ball, walking the dog, climbing stairs, swimming, dancing, playing basketball, football, rollerblading or another sport”. Eight response options ranging from "never" to "7 days" were offered to students. This question was derived from the PACE+ (Patient-Centered Assessment and Counseling for Exercise Plus Nutrition) measure, which has been tested for reliability and validity against accelerometer data. Students who were physically active for at least 60 minutes on moderate- to vigorous-intensity physical activity each day were considered to meet the WHO recommendation for physical activity. In 2020, the WHO recommendations have been modified by adding an activity frequency factor. In addition to the duration of activity, which has remained the same as in 2010, they also recommend that adolescents should engage in vigorous-intensity activities, as well as activities that strengthen muscles and bones, at least 3 days a week [1]. However, it is

not possible with the current questions in HBSC to evaluate the most recent WHO recommendations in young people.

- To gain insight into adolescents' screen-related **sedentary behaviour**, four questions were asked regarding the amount of time spent watching TV, gaming, using a computer, and engaging with social media during leisure time on weekdays. The questions were: 'How many hours per day do you spend in your free time watching television, DVDs, or videos on websites like YouTube?'; 'How many hours per day do you spend in your free time playing games on a computer, game console, tablet, smartphone, or smart TV?'; 'How many hours per day do you spend in your free time searching for information or browsing the internet?'; and 'How many hours per day do you spend in your free time using social media?'. Response options ranged from 'not at all' to 'about seven hours per day or more'. Total screen time per weekday was then calculated based on a weighted average using the following formula: ((screen time on weekdays × 5)/5). Adolescents were subsequently categorized into two groups: those who remained within the recommended maximum of two hours of screen time per day, and those who exceeded this recommendation.

Limitations:

- The questions from the HBSC survey are self-reported by participants, which may introduce bias in the responses.
- Statistical analyses were weighted to improve the representativeness of estimates for the study's target population. In the French Community, individual weighting coefficients were calculated taking into account three elements:
- the probability of schools being included in the initial sample ;
- the variation in response rates according to school characteristics: region or province, educational network, socio-economic index (only in the Brussels-Capital Region) and total number of pupils;
- differences observed between students who took part in the survey and those in the reference population in terms of region, school year, gender (only in French-speaking Belgium) and educational orientation (from secondary 3 onwards). In the Flemish Community, the weighting factor was calculated based on the effective composition of the population by year of study, gender and type of education.

  In the Flemish Community, the data were also weighted. The weighting factor was calculated based on the composition of the population by grade, gender, and type of education of the year of the last survey (2022).
  However, since the two communities apply weighting based largely on similar characteristics, the results are comparable. [3-4]

- The HBSC survey collects data through questionnaires completed by students, drawn from a sample of schools that were randomly selected from the full-time education schools. The data used for the French Community covers students from Wallonia and the Brussels-Capital Region, while the Flemish Community only includes schools from Flanders and not those from the Brussels-Capital Region. [3-4]
- For adolescents, prevalence are also presented according to the type of education in which they are enrolled. However, the classification of types

	of education differs slightly from one community to another. In the French Community, three types of education are distinguished: general education, which also includes transitional technical education; qualifying technical education; and vocational education. In the Flemish Community, three categories are also used: general education, technical education, which also includes artistic education, and vocational education. [3-4]
International comparability	Availability: Yes, the HBSC is realized across 50 countries and regions. Comparability: The HBSC international standard questionnaire enables the collection of common data across participating countries. These data allow cross-national comparisons.

References

[1] Global recommendations on physical activity for health. Genève: WHO; 2010.

[2] Health Interview Survey. 2018. https://his.wiv-isp.be/fr/Documents%20partages/PA_FR_2018.pdf.

[3] Information, Promotion, and Health Education Service of the University Libre of Brussels (ULB). 2022. The Health Behaviour in School-aged Children (HBSC) study in the French Community, under the coordination of the Regional Office of the World Health Organization (WHO) for Europe. https://sipes.ulb.ac.be/

[4] Health Promotion Research Group of Ghent University (UGent). 2022. The Health Behaviour in School-aged Children (HBSC) study in the Flemish Community, under the coordination of the Regional Office of the World Health Organization (WHO) for Europe, the HBSC study funded by the Flanders Agency for Care and Health. https://www.jongeren-en-gezondheid.ugent.be/

[5] Spotlight on adolescent health and well-being. Findings from the 2021/2022 Health Behaviour in School-aged Children (HBSC) survey in Europe and Canada. International report. Volume 2. Key data, WHO Regional Office for Europe, 2022. https://www.who.int/europe/health-topics