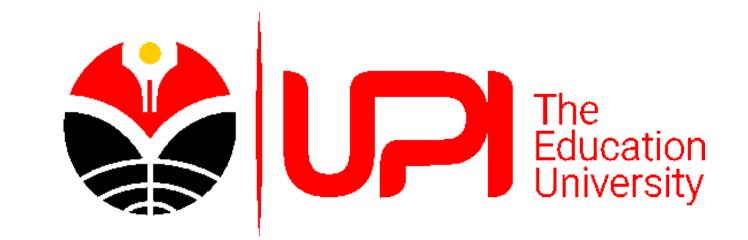
THE 2022 INDONESIAN REPORT CARD ON PHYSICAL ACTIVITY FOR CHILDREN AND ADOLESCENTS









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ABSTRACTS

1) Background/Objective:

Indonesia's 2022 Report Card on Physical Activity for Children and Adolescents is the first effort ever made to comprehensively evaluate of physical activity level and all others related indicators based on the 10 common indicators provided by the Active Healthy Kids Global Alliance. This report will serve as an advocacy tool to promote physical activity among children and adolescents among Indonesian children. 2) Methods:

Several national surveillance data were used as the main sources to depict all the ten indicators. All data sources are the best available data and nationally representative in nature. All the data is matched with the AHKGA's rubric and benchmarks on each indicators, resulting a set of grade for the ten indicators.

3) Results:

2022 Indonesian's Report Card on Physical Activity for Children and Adolescent is set as the followings: Overall Physical Activity: F; Organized Sport and PA: F; Active Play: F; Active Transportation: D-; Sedentary Behavior: B; Physical Fitness: F; Family and Peers: F; Schools: F; Community and Environment: D-; and Government: B-

4) Conclusion:

Indonesian children and adolescents have poor level on almost movement behaviors, from overall PA, organized sport and PA, active play, active transportation to physical fitness. Sedentary behaviors level on the other hand has favorable level, partly due to the demographic profile in general. At other pole, the sources of influence also have unfavorable level, for family and peers, community and environment as well as school have poor grades. Only government have favorable level.

INTRODUCTION

The Active Healthy Kids Report Card is an evidence-based synthesis of children's and adolescents' attitudes towards physical activity. This is realized by using a series of indicators related to individual behavior, settings, and sources of influence, as well as strategies and investments. In addition, this evidence is further evaluated and interpreted by an expert consensus panel, which produces the "value" of the letters. The report card aims to consolidate existing evidence, facilitate international comparisons, promote more physical activities and evidence-based health policies, improve its surveillance, and, most importantly, promote and accelerate such opportunities among children and adolescents in the country.

This research aims to summarize the results of Indonesia's Report Card on Physical Activity realized with ten indicators set by the AHKGA for its Global Matrix 4.0 to be launched in Abu Dhabi by 2022. AHKI leaned solely on the best available data collected through national surveys and sources from various relevant government agencies such as the Ministry of Health, Ministry of Women's Empowerment and Child Protection, as well as Ministry of Youth and Sports, and the Ministry of Education and Culture. All data sources are the results of the survey carried out from 2015 to 2021. In addition, this information was juxtaposed with other academic and non-academic sources used as the primary material for the Indonesia Report Card.

METHODS

To produce grades for Indonesia Report Cards, AHKI assigned a research team working groups (RWG) on each indicator to discover and collect the best available sources with two fundamental characteristics. First, the data needs to meet the national representativeness, and second, it should include a sufficient number of participants, both have to be from the most current period.

Following collections were found and finally agreed upon by the team to be used as the primary data sources for determining the grade of all indicators:

- 1.Central Agency on Statistic of Indonesia: 2018 Statistic on Social and Culture. Jakarta.
- 2. National Report of 2018 Baseline Health Research. Ministry of Health of Indonesia: Health Research and Development Agency. Jakarta.
- 3. Global School-Based Student Health Survey 2015. Health Risky Behaviors in Middle and High School Students in Indonesia. Ministry of Health of Indonesia. Jakarta: 2016.
- 4. National Sports Development Index Report 2021, Sports for Human Development Investment. Jakarta: Director of Sports Partnerships and Awards- Ministry of Youth and Sport. 2021.
- 5. Presidential Decree on Grand Design for National Sports Program. Jakarta. Ministry of Youth and Sport. 2019.
- 6. Profile of Indonesian Children 2019. The Ministry of Women's Empowerment and Child Protection, Indonesia, collaborates with the Central Statistics Agency 2019.
- 7. United Nations Children's Fund (2020). The Situation of Children in Indonesia – Trends, Opportunities, and Challenges in Fulfilling Children's Rights. Jakarta: UNICEF Indonesia.

RESULT

Using the earlier mentioned data sources, the research team created grades determined by comparing various standards, mapped them in the form of tables, and paired them with the benchmarks set by AHKGA and the magnitudes of their rubrics. In addition, values were generated on each indicator, as shown in the following table.

Indicator	Grades
Overall Physical Activity	F
Organized Sport and Physical Activity	F
Active Play	F
Active Transportation	D-
Sedentary Behaviors	В
Physical Fitness	F
Family and Peers	F
School	F
Community and Environment	D+
Government	B-

GRADES OF INDONESIAN CHILDREN

CONCLUSION

Children and adolescents in Indonesia have low physical activity and fitness levels, and their behaviors toward active play and transportation are still poor. Fortunately, the level of sedentary behavior is still favorable, partly due to the demographic profile, in which the population outside of Java Island still lives in poverty. This makes them unfamiliar with the tendency to use or spending their time on the screen. On the other hand, family and peers, community and environment as well school also had poor grades, despite the Government's positive tendency to pay more considerable attention to the low level of physical activity and sport in society. They are not doing enough to improve the situation with policies, programs, and other strategic efforts. There needs to be a comprehensive guideline from the Government and non-governmental agencies regarding the physical activity routine. Besides, there must also be a push to all agencies responsible for the activity and health of children to synergistically make a comprehensive guideline to affect the 24 hours of behavioral movement. Schools play a critical role in shaping the positive habits of this 24-hour-of-movement and working together to create a friendly environment as well as to motivate the kids by designing more active play and transportation programs as the supporting factors...

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