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INTRODUCTION

- Active Healthy Kids Malaysia was established in 2014 to develop the first Malaysia Active Healthy Kids (MAHK) Report Card, a knowledge translation tool to inform public policy of the current “state of the nation” for physical activity among Malaysian children and adolescents aged 5-17 years.
- This report card provides evidence-based recommendations on how to improve physical activity, and highlights research priorities in child and adolescent physical activity.

METHODS

- The MAHK Report Card 2016 was produced by the Research Working Group (RWG), supported by the Steering and Stakeholder groups consisting of local experts and members from government agencies and non-governmental organisations involved in physical activity promotion. Figure 1 summarizes key stages of work.

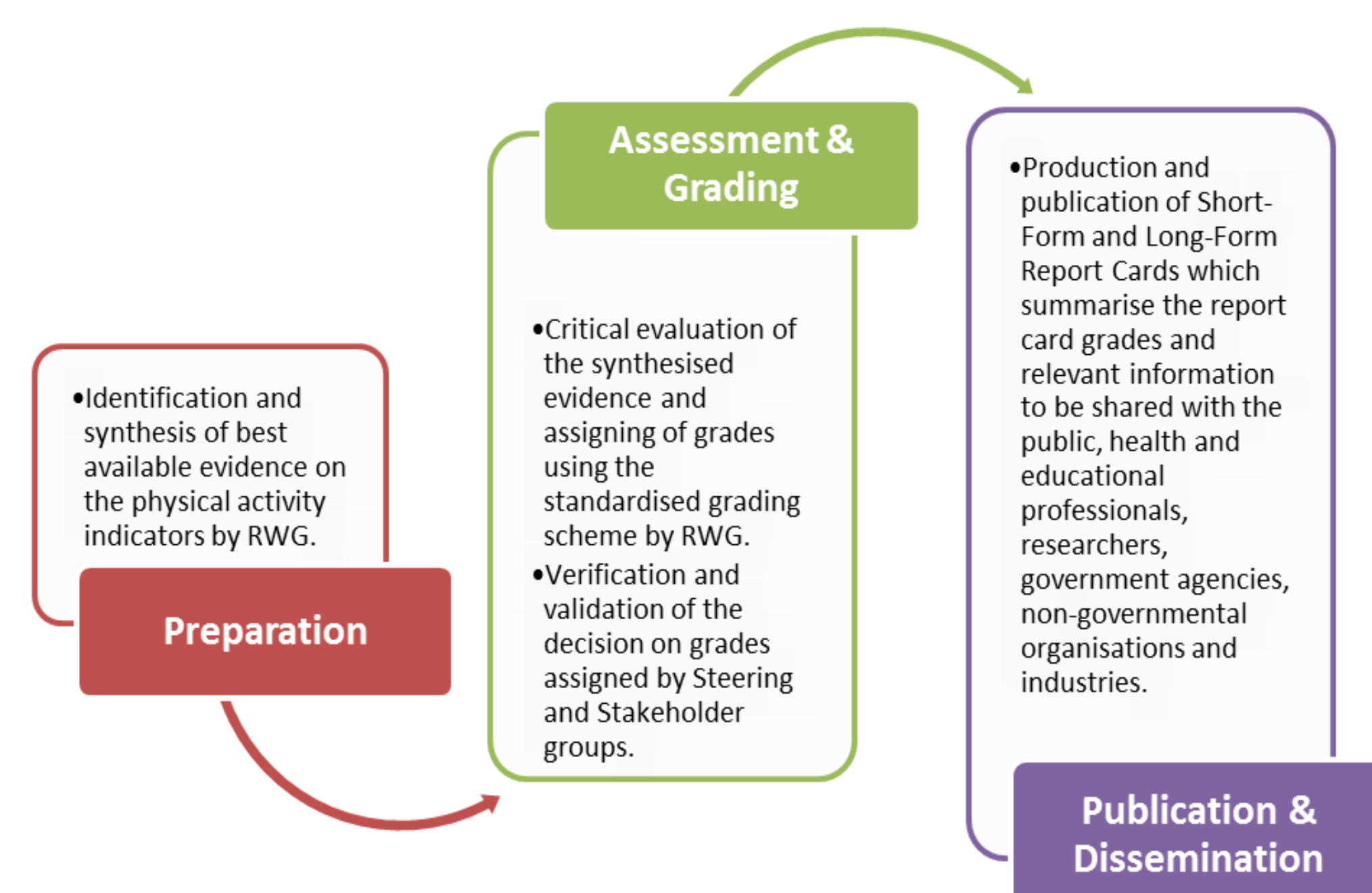


Figure 1. Key stages of developing the MAHK Report Card 2016

- Evidence from the following nationally representative surveys/reports were used as the main data sources to inform the grades:
 - a) Global School-based Health Survey (GSHS Malaysia 2012)
 - b) Nutrition Survey of Malaysian Children (SEANUTS Malaysia 2010-2011)
 - c) Report on School Sports Infrastructure and Programmes Survey 2014
 - d) Annual Report of Ministry of Health 2012
- The MAHK Report Card 2016 assessed 11 indicators relating to physical activity in children and adolescents that were grouped into four main categories (Figure 2):

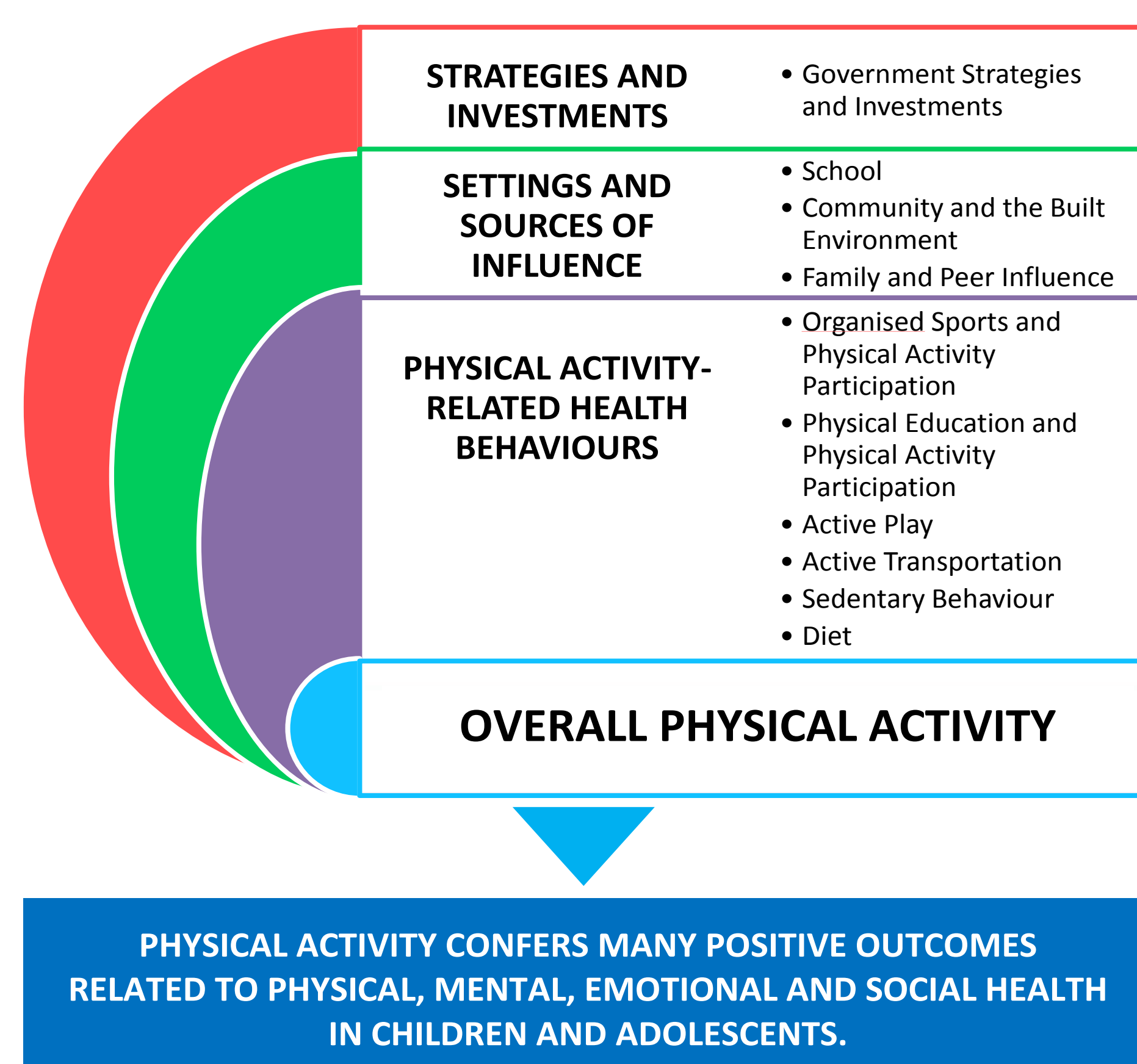


Figure 2. Summary of indicators for MAHK Report Card 2016

KEY FINDINGS

- Overall Physical Activity, Active Transportation and Sedentary Behaviour were given Grade D. The lowest grade of F was assigned to Diet, while School and Government Strategies and Investments were given Grade B. Five indicators were assigned INC (Incomplete) due to lack of representative data (see Table 1).



Figure 3. Front cover of MAHK Report Card 2016

Table 1. Summary of grades for indicators in MAHK Report Card 2016

Indicator	Grade
Overall Physical Activity	D
Organised Sports and Physical Activity Participation	INC
Physical Education and Physical Activity Participation	INC
Active Play	INC
Active Transportation	D
Sedentary Behaviour	D
Diet	F
School	B
Community and the Built Environment	INC
Family and Peer Influence	INC
Government Strategies and Investments	B

CONCLUSIONS

- The majority of Malaysian children and adolescents engage in low levels of physical activity and active commuting, high levels of screen time, and have poor compliance with dietary recommendations. These undesirable behaviours occur despite considerable efforts by the government and schools in promoting active and healthy lifestyles.
- This lack of connection between policy and practice/behaviour suggests the need for more efforts across sectors to address the root causes of physical inactivity while increasing the opportunities for children and adolescents to be more physically active in Malaysia.

RECOMMENDATIONS FOR ACTIONS

- Physical activity programmes and interventions should be inclusive, involve active participation, and give consideration to the social and cultural needs of children and adolescents from diverse backgrounds.
- Multi-sectoral partnerships are necessary to create supportive environments for effective implementation of physical activity promotion initiatives and strategies at different levels, such as school, community, and national level.
- Continuous monitoring and evaluation on the efficacy, cost-effectiveness, and sustainability of the physical activity interventions are required to ensure better understanding of their implementations and identify target areas for future plans of action.

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