## Settings and Influences on Physical Activity and Health

## **Family and Peer Influence**

• 31% of adults reported a high level of physical activity, on the other hand; only 23% of adults reported a moderate level of physical activity Qatar Stepwise Report, 2012



• Parents support for their children's physical activity needs to be studied at national level

## **Community and School**



• 57% of 13-15 years old, were taught about the benefits of physical activity GSSH5, 2011

• 31% of 13-15 years old, had two or more physical education classes per week GSSHS, 2011

• National surveys focus on availability, accessibility and perceived safety of places to play

### National Policy, Strategy, and Investment



• Action plan for physical activity and nutrition at national level was made http://www.nhsq.info/strategy-goals-and-projects/preventativehealthcare/nutrition-and-physical-activity

 National physical activity guidelines was developed, 2014

http://namat.qa/Publications.aspx#

• Data on implementation and evaluation of physical activity and health policies is not adequate



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### **Next Step:**

This is the first QAHK report card. It provided a synthesis of the available evidence on children and youth physical activity. The card is important for advocacy, policy and program development.

The QAHK report card is planned to make international comparisons as part of the Global Summit on the Physical Activity of Children (Bangkok, 2016).

The major limitations associated with this report include inadequacy of some information on physical activity and the extracted data may not reflect the current situation in Qatar.

The plan is to publish the second QAHK report card in 2018 and to develop a more detailed 'long form' version.

For further information please contact: *Healthylifestyle@aspetar.com* 

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# SMALL CHANGES CAN MAKE A LARGE DIFFERENCE

## Qatar Active Healthy Kids Report Card

#### Qatar Active Healthy Kids Report Card

Qatar Active Healthy Kids (QAHK) report card aims to give an update on the physical activity status of children and youth in Qatar.

The QAHK report card, developed in 2015 was based on the Scottish Report 2013. This card was set up to provide a synthesis of all available evidence on physical activity and health behaviours of children and youth aged 5 to 18 years.

This report card is intended to be accessible to a wide variety of users: physical activity policy makers, health professionals, and researchers. It is anticipated that this initiative will be at the forefront of physical activity advocacy.

Two categories of the nine health indicators

A Physical Activity, Health Behaviour and Outcomes

1. Physical activity



#### 2. Sedentary behaviors



#### 3. Active and outdoor play



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#### 5. Dietary habits



6. Organized sport participation



Settings and Influences on Physical Settings and Influence
Activity and Health

7. Family and peer influence



9. National policy, strategy, and

investment



## **Grading Qatar Report Card**

The grading system used for the OAHK report card was determined by the current best available evidence for each of the nine health indicators, judged against a well-established benchmark.

The Working Group evaluated the collected data and discussed the grades to be assigned to each indicator. The grades were assigned by the percentage of children and youth who meet guidelines or recommendations:





Where there is no data, or insufficient evidence, to assign a grade.

Grades are also assigned a '-' if they are getting worse over time and/or if there is significant inequality (e.g. by gender), and a '+' if they are improving over time and/or there is little or no inequality.



## **Physical Activity, Health Behaviours and Outcomes**

## **Physical Activity**

 Only 10-15% of children, 13 to15 years old, were found to be physically active for a total of at least 60 minutes daily for five days or more during the week GSSHS, 2011

• An objective physical activity measurement should be carried out at national level to improve our evidence on this grade

## **Sedentary Behavior**

 Among 13 - 15 years old children; only 27% met Qatar national physical activity recommendation for school age children to limit recreational screen time less than two hours/day and to reduce sitting time GSSHS, 2011

 Oatar National Physical Activity guidelines were developed recently, these might be useful to assess the sedentary behavior of children and youth using objective measurements

http://namat.ga/Publications.aspx#

### **Active and Outdoor Play**

• There was not enough data in Oatar, and no enough evidence to benchmark this indicator

true level of outdoor play

 Specific recommendations/benchmarks need to be developed, and national surveys need to be considered



## **Physical Activity, Health Behaviours and Outcomes**

## **Obesitv**

• 19% of 6-12 years old (24% of boys and 17% of girls) were obese Al-Khateib etal, 2013



- 25% of 11-18 years old (28% of boys and 21% of girls) were obese Mamtani etal, 2014
- Child and youth obesity in Qatar showed increasing trends during the last decade

## **Dietary Habits**

• 25% of 13-15 years old met the recommended five servings of fruit and vegetables per day GSSHS, 2011



- 37% of 13-15 years old had breakfast most of the times during the month GSSHS, 2011
- Future surveys on dietary habits will be supported by the newly developed National Dietary Guidelines http://eservices.sch.gov.ga/adaportal/images/SCH DG GUIDE ENG.pdf

Weekly reported time playing outdoor may not give the



## **Organized Sports Participation**

- 25-30% of children in Oatar participated in organized sport throughout the year National survey 2013
- 48% of 13-15 years old joined one or more sport teams during the last year GSSHS, 2011
- Although sport facilities are well built and accessible : utilization by children and youth has not been assessed



