

1. Introduction

- The first Active Healthy Kids Scotland Report Card was published in 2013.¹
- Physical activity (PA) surveillance of children and adolescents in Scotland is based largely on the representative Scottish Health Survey² (SHeS) which uses parent-report measures of PA.
- SHeS makes the unlikely assumption that all reported PA is of moderate-to-vigorous intensity.²
- SHeS provides a misleading basis for national policy, and there is need for a critique of Scottish PA surveillance and policy.

The Active Healthy Kids Scotland Report Card aims to:

- improve surveillance of physical activity
- facilitate international comparisons
- encourage more evidence-informed physical activity and health policy

2. Methods

- The Active Healthy Kids Canada Report Card methodology was used.^{3,4}
- 10 indicators, divided into:
 - Health Behaviours and Outcomes (7)
 - Settings and Influences on Health Behaviour (3)
- Grading system detailed in [section 3](#)
- Research working group searched for relevant evidence from Scotland, prioritising representative surveys.
- Grades based on representative surveys which took place after publication of the Active Healthy Kids Scotland Report Card 2013.
- For the 10 indicators draft grades were assigned.
- Draft report card grades considered by the Stakeholder Group.
- Stakeholders were asked to address the following questions:
 - Were any relevant Scottish data missed?
 - Were any data misinterpreted or misunderstood?
 - Were any relevant stakeholder groups or individuals omitted?
 - Which indicators not included should be included in future?
- This consultation process informed the final grades in the [Active Healthy Kids Scotland 2016 Report Card](#), launched in June 2016 www.activehealthykidsscotland.co.uk



References

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- Barnes JD, Colley RC, Tremblay MS. Results from the Active Healthy Kids Canada 2011 Report Card on Physical Activity for Children and Youth. *Appl Physiol Nutr Metab* 2012; 37: 793-797.
- Janssen I. Active play: an important physical activity strategy in the fight against childhood obesity. *Can J Publ Health* 2014; 105: e22-27.
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3. Grading

- A** = We are succeeding with a large majority of children (80-100%)
- B** = We are succeeding with well over half of children (60-79%)
- C** = We are succeeding with about half of children (40-59%)
- D** = We are succeeding with less than half of children (20-39%)
- F** = We are succeeding with very few of children (0-19%)

INC = Incomplete Grade, where Scottish data were not available, inadequate, or where there was no benchmark.

- a '+' if there was evidence that trends were improving
- a '-' if there was evidence of marked socio-economic inequalities.

4. Results

- Five of the seven Health Behaviours and Outcomes Indicators could be graded with a high degree of confidence
- The indicators 'Active and Outdoor Play' and 'Organised Sport Participation' could not be graded (Scottish data limited or absent)
- Grades for the indicators of 'Influences on Physical Activity and Health Behaviours and Outcomes' were generally much better than grades for health behaviours and outcomes

Health Behaviours and Outcomes	Grade
Sedentary Behaviour	F
Physical Activity	F
Active Transportation	C
Active and Outdoor Play	INC
Sports Participation	INC
Diet	D-
Obesity	F-
Settings and Influences on Health Behaviour	Grade
Family and Peer Influence	D-
Community and the Built Environment	B
National Policy, Strategy and Investment	B

5. Conclusions

- Grades were identical to those in 2013¹
- Scotland has a favourable environment for physical activity, but low physical activity and extremely high sedentary behavior
- Gaps in physical activity surveillance:
 - lack of objectively measured physical activity in national surveys
 - policy does not include sedentary behaviour
 - no monitoring of some indicators (active play and sports participation)
- The theme, 'Unplug and Play' was chosen as active and outdoor play represents a potentially important opportunity to increase MVPA levels⁵
- Differences in MVPA between children in high-income versus low-income countries might be attributable to differences in the amount of time spent in active and outdoor play⁶

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