

Including the Physical Activity Report Card* for Dutch Children & Youth with a Chronic Medical Condition



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Introduction

The Active Healthy Kids the Netherlands (AHKN) Report Card consolidates and translates research and assesses how the Netherlands is being responsible in providing physical activity (PA) opportunities for healthy children and youth and youth with a chronic medical condition (CMC) (<18 years).

Methods

The Principal Investigator and Project Manager formed a research work group (RWG) together with involvement of research institutes and (non)-government organizations in the Netherlands. National representative data sources were identified and 12 indicators were graded during 2 meetings using the AHKGA RC development process. Data were graded for both healthy children and youth (RC) as well as children and youth with a CMC (RC+). The grading scheme can be found in Table 1. The indicators can be found in Table 2. Data sources relied upon most heavily were national surveys and included the Questionnaire Leefstijlmonitor, developed by Statistics the Netherlands (CBS) in collaboration with RIVM (2017 data) and the report Physical Education at the end of the Primary Education (data 2015-2016; Dutch Inspectorate of Education).

Resulte

<u>Overall Physical Activity:</u> 52% of the children and 31.6 of the adolescents met the Dutch PA Guideline. For children and adolescents with a CMC 47.2% and 26.6% were meeting the guidelines respectively.

<u>Organized sport participation:</u> 64% of the children, and 77% of the adolescents were weekly sport participants. In the group of children with a CMC, these numbers were 64 and 69% for children and adolescents respectively.

Active play: the healthy children 33.6% are playing outside daily for at least 60 minutes and the children with a CMC this number was 30.8%. Active transport: 75% of the children and 91% adolescents commuted actively (cycling or walking) to school on at least 3 days per week. In children and adolescents with CMC this was 63 and 82% respectively. Sedentary behavior: Only 44% of the children and 17% of the youth were meeting the screen time guideline. Numbers were comparable for children and youth with CMC.

<u>Organized Sports Participation:</u> 64% of the children, and 77% of the youth were weekly sport participants. In the group of children and youth with a CMC these numbers were 64% and 69%. Sports participation highly contributed to overall physical activity: children: 136 min/week, youth: 270 min/week. Children and youth with CMC: 144 and 226 min/week respectively.

Physical Fitness: was graded as Incomplete.

<u>Family and Peers:</u> 52% of parents were meeting the Dutch guidelines for PA. This number is higher compared to adults without children (of those 42% are meeting the PA guidelines). For parents of children and youth with a CMC no data was available, and was graded as incomplete.

<u>Schools:</u> in primary education ~50% of the schools have access to a nearby gymnasium, in the schools for special education 90% of the schools have access to a nearby gymnasium.

<u>Community and Environment:</u> was graded as Incomplete, although the Netherlands has a great infrastructure that promotes PA.

Government: was graded as Incomplete.

<u>Sleep:</u> 91% of the healthy children and 87% of the children with a CMC were adhering to recommendations for sleep. Of the healthy adolescents 73% a+dhered to sleep guidelines and 64% of the adolescents with a CMC.

<u>Weight status:</u> national (self-reported) data showed that 9% of the Dutch children and 12% of the youth were overweight or obese. For CMC these numbers are 14.3% and 18.7% respectively.



Key-Findings and Perspective

For many indicators there were self-reported data available. The grades are provided in Table 2 . Although Dutch children and adolescents with and without CMC frequently participate in sports, active transport and active play, most Dutch children and youth do not meet the national guidelines for healthy physical activity, active play and sedentary behavior. Sports participation highly contributed to overall physical activity: children: 19 min/day, youth: 38.5 min/day. Children with CMC 20.6 min/day and youth with CMC 32.5 min/day. The participation of children and youth in organized sports and active play and reducing sedentary behaviour should become a national health priority. Especially in youth, we should prevent a dropout from sports. In the future we recommend to obtain more objectively (device-based) measured physical activity data. Also we recommend to systematically monitor physical fitness outcomes in Dutch children and youth. Although these outcomes are often monitored in schools, data are not yet available for surveillance.

Table 2. Indicators, definitions and results for the 2018	the Netherlands
Report Card and Report Card+.	

	Indicator	Definition	RC	RC+
	Overall Physical Activity	% of children and youth that are meeting the national physical activity recommendations	C-	D+
	Organized Sport Participation	% of the children and youth are weekly sport participants	В	B-
	Active Play	% of the children play actively outside more than 1 hr on every day of the week.	D	D
	Active Transportation	% of the children and youth that commute actively (cycling/walking) to school on at least 3 days per week.	Α-	B+
	Sedentary Behaviours	% of the children and youth that spend more than 2 hours per day watching tv, and % that are using other screen devices for more than 2 hrs/day.	D	D
7	Physical Fitness	% of children and youth that are meeting the norm value on physical fitness tests for strength, endurance or flexibility.	Inc	Inc
	Family and Peers	% of parents that are meeting the Dutch Physical Activity Guidelines	С	Inc
	School	% of schools where the majority (= 80%) of students are taught by a PE specialist, and % of the schools with own sports hall.	C+	A-
	Community and Environment	Quality of the infrastructure that promotes physical activity (bicycle roads, 30km/h speed limit, playgrounds).	Inc	Inc
	Government	Number of projects, and standardised policies to promote physical activity.	Inc	Inc
	Sleep	% of children and youth meeting the recommended hours of sleep per night (4-12 yr: 9-13 hr; 12-18 yr: 8-10 hr)	A-	B+
	Weight status	% of children and youth with a BMI indicating overweight or obesity.	A-	A-





























