



2022

Results from the Lebanese 2022 Report Card on Physical Activity for Children and Youth

Prioritizing Physical Activity to Improve Health



ACTIVE HEALTHY KIDS
GLOBAL ALLIANCE

Lebanese Active Healthy Kids Report Card

Who are we?

The Lebanese Active Healthy Kids Work Group (LAHKWG) consists of five national and international researchers that aim to improve physical activity levels of Lebanese children and youth through collaborative research efforts.



What is a report card?

This report card is the second Lebanese research initiative that aims to comprehensively assess physical activity behaviors in several domains, and evaluate sources of influence on these behaviors.

Why do we need a report card?

With a report card we can:

- Evaluate Lebanon's current performance
- Foster current initiatives and create additional opportunities for physical activity
- Support efforts to influence physical activity policy

How did we conduct the report card?

Peer reviewed literature, national surveys, and gray literature published since 2017, on 10 indicators adopted by the Active Healthy Kids Global Alliance (AHKGA) were examined (<https://www.activehealthykids.org/tools/>).

- | | |
|---------------------------------------|---------------------------|
| 1 Overall physical activity | 7 Family and peers |
| 2 Organized sport & physical activity | 8 School |
| 3 Active play | 9 Community & environment |
| 4 Active transportation | 10 Government |
| 5 Sedentary behaviors | 11 Sleep |
| 6 Physical fitness | 12 Weight Status |

How were the indicators graded?

We used a grading and evaluation system that is recommended by the international research group. The grades represent the percentage of children and youth who are succeeding at meeting the benchmarks. Grades are assigned '+' when there are current attempts to improve them, and are assigned '-' when there is evidence that they are worse for some groups (example: boys or girls, public or private schools, different regions or economic backgrounds).

- | | |
|----------------------|---|
| A 80% to 100% | F < 20% |
| B 60% to 79% | INC Incomplete, insufficient or inadequate information to assign a grade |
| C 40% to 59% | |
| D 20% to 39% | |

Lebanon Score On Each Indicator

All graded indicators presented below (except the government indicator) were based on data from the 2017 Lebanese Global School Based Health Survey (GSBHS). The GSBHS was completed by youth aged 13-17 years, hence, the grading does not reflect Lebanon's performance with younger children (i.e., 5–12-year-olds).

1	Overall Physical Activity	D ⁻		20.7% of adolescents reported being physically active for at least 60 minutes per day on five or more days of the week prior to data collection.
2	Active play	INC		Data on active play have consistently been unavailable for report card grading.
3	Organized sport and physical activity	INC		There is a lack of nationally representative data that addresses any of the recommended benchmarks for this indicator.
4	Active transportation	D ⁺		63.2% of participating adolescents did not use active transportation means (i.e., walk or bike) to and from school in the 7 days prior to partaking in the GSBHS.
5	Sedentary behaviors	C		44.8% of study participants engaged in at least 3 hours per day in sedentary pursuits that included screen-based activities for leisure in addition to non-screen-based sitting activities.
6	Physical Fitness	INC		Since the first participation of Lebanon in the development of report cards, no data have been available to grade this indicator.

Lebanon Score On Each Indicator

All graded indicators presented below (except the government indicator) were based on data from the 2017 Lebanese Global School Based Health Survey (GSBHS). The GSBHS was completed by youth aged 13-17 years, hence, the grading does not reflect Lebanon's performance with younger children (i.e., 5–12-year-olds).

7	Family and peers	INC		There is lack of nationally representative data that addresses any of the recommended benchmarks for this indicator.
8	School	D		31.5% of participants attended a physical education (PE) class on two or more days per week during the year of data collection (meaning 2017).
9	Community and Environment	INC		There is a lack of nationally representative data that addresses any of the recommended benchmarks for this indicator.
10	Government	D		Evidence-based recommendations are provided on the integration of PA initiatives at schools in the Knowledge 2 Policy (K2P) center's policy brief. The brief indicates that only a few stakeholders in Lebanon are making a priority out of the promotion of PA.
11	Sleep	D ⁺		Approximately 37.2% of participating adolescents reported sleeping 8 hours or more per night on an average school night.
12	Weight Status	B ⁻		32.1% of adolescents were classified as being overweight or obese while 4.3% of them were underweight according to the WHO's classification for BMI using age and sex distribution for height

What's Next For Lebanon?

The LAHKWG strongly encourages relevant stakeholders to take concrete actions towards prioritizing PA promotion at a national level especially in the education sector. Offering more quality PA opportunities for Lebanese children and youth will be beneficial for their physical and mental health especially during the current economic and political crisis.

Recommendations

Prioritize schools as primary intervention sites to offer better quality PE, more opportunities for PA during and before or after the school day, and increase support to public schools.

Conduct national campaigns to reshape cultural norms regarding female participation in PE and PA opportunities.

Develop and enact a strategic plan to promote PA at a national level with a selected group of primary

Inform policy, funding and resource allocation that should occur to improve Lebanon's performance on organized sport as it must be accessible to all performance, in-

Lead national efforts to promote active play by enacting national sports days or week, or by implementing traffic calming or traffic limiting laws in residential neighborhoods.

Develop and implement a policy that requires schools to prioritize enrollment of students residing within the limits of the school district.

Assist schools in planning and implementing safe routes to school programs to ensure children and youth's safety.

Suggested Stakeholders

Ministry of Education and Higher Education (MEHE)
Private and Public Schools
NGOs and iNGOs

MEHE
NGOs and iNGOs
Beirut Marathon

MEHE
Ministry of Public Health (MOPH)
Decision makers - Influencers

Thinks Tanks
Universities
iNGOs

MEHE
MOPH
Ministry of Social Affairs (MOSA)
Decision makers

MEHE
Think Tanks
Parliamentarians
Media Channels

MEHE
iNGOs
Ministry of Public Works and Transport (MOPWT)

Indicator/s Addressed

Overall Physical Activity
Sedentary behaviors
School

Overall Physical Activity
Active transportation

Overall Physical Activity
Active transportation
Sedentary behaviors

Organized sport and physical activity

Active play
Community and Environment
Active transportation

Active transportation

Active transportation

What's Next For Lebanon?

Recommendations

Monitor fitness levels through regular assessments of [at least] health-related fitness components (e.g., cardiorespiratory endurance and musculo-skeletal fitness) in schools to estimate future trends of population health and facilitate comparisons to worldwide references.

Invite parents to participate in safe routes to school programs as they may also benefit from this additional opportunity to be physically active.

Make the two PE hours per week mandatory, and require that these sessions be led by trained PE specialists.

Identify features of the community and its environment that should be modified to facilitate PA behavior.

Initiate a national task force to develop and implement a national PA plan that includes a national surveillance system and numerous well-funded strategies to promote healthy behavior.

In addition to promoting PA behaviors, schools can become a site for the promotion and prevention of suboptimal sleeping behaviors.

Continued monitoring of weight status to ensure that the country is not experiencing an increase in the number of children and youth who live with a concerning low level BMI for their age and sex, or are not developing chronic malnutrition and stunting.

Suggested Stakeholders

MOPH
MEHE
Healthcare Facilities
Schools

Schools
Parents

MEHE
Private and Public Schools

Universities NGOs and iNGOs
Researchers
Think Tanks

MEHE
MOPH

MEHE
Public and Private Schools
MOPH

MOPH
Healthcare Facilities

Indicator/s Addressed

Physical Fitness

Family and peers

School

Community and Environment

Government

Sleep

Weight Status

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