The size of the childhood obesity problem in Scotland: Results from the 2018 Active Healthy Kids Scotland Report Card

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Abstract

Introduction: The 2018 Report Card provides a 'state of the nation' assessment of the physical activity (PA) and health of children and adolescents in Scotland, focusing on obesity prevalence.

Methods: We graded eleven PA and health indicators based on data which were: recent, derived from nationally representative surveys, affected by minimal bias, and determined by the % of children and adolescents meeting an evidence-based recommendation, ranging from A+(94%-100%) to F (<20%).

Results: C grades were assigned to Active Transportation to school/nursery (49%) and Government (many policies target PA and obesity, however policy implementation and evaluation is more limited). Organised Sport and PA was graded as B (68%). Community and Environment was graded as B-, access to local play areas was high (92%), but perceived safety was lower. Active Play was graded as D-, 26% of 2-15 year olds participated in \geq 2 hours/day on weekdays and 40% at weekends. Family and Peers was graded as D, 77% of 2-15 year olds had fathers who met the adult PA recommendation (71% of mothers), 26% had at least one parent who ate 5+ portions of fruit & veg/day and 74% had at least one overweight or obese parent. Sedentary Behaviour was graded as D-, 68% exceeded the screen time recommendation (≥2hrs/day) on weekdays and 83% at weekends. Diet was graded as D, 13% of 2-15 year olds ate 5+ portions of fruit & veg/day and the average intake of sugar and saturated fat exceeded Scottish Dietary Goals. The F grade for Overall PA was carried forward from the 2016 report card because no recent survey measured this indicator appropriately. Physical fitness could not be graded due to lack of data. National surveys suggest 14% of 2-15 year olds are obese, however these substantially underestimate the true prevalence of obesity, because they do take adequate account of age, and because BMI-for-age has low sensitivity, thus Obesity could not be graded. For many of the indicators, prevalence estimates were worse among those from more deprived areas.

Conclusion: Scotland has a favourable physical and policy environment, and good grades for Active Transportation, and Organised Sport and PA. However, levels of PA are low among children and adolescents in Scotland and levels of sedentary behaviour are high. Furthermore, many children and adolescents are not meeting the Scottish Dietary goals and obesity prevalence is much worse than official figures suggest. Thus, greater focus on policy implementation is needed to improve the grades in order to prevent and control the childhood obesity problem in Scotland. Improved surveillance of PA and obesity is also required.