

NATIONAL INSTITUTE FOR HEALTH AND CLINICAL EXCELLENCE

PUBLIC HEALTH PROGRAMME GUIDANCE

SCOPE

1 Guidance title

Promoting physical activity, play and sport for pre-school and school-age children in family, pre-school, school and community settings

1.1 *Short title*

Promoting physical activity for children

2 Background

- (a) The National Institute for Health and Clinical Excellence ('NICE' or 'the Institute') has been asked by the Department of Health (DH) to develop guidance on a public health programme aimed at promoting physical activity, play and sport for pre-school and school-age children in family, pre-school, school and community settings.
- (b) NICE public health programme guidance supports implementation of the preventive aspects of national service frameworks (NSFs) where a framework has been published. The statements in each NSF reflect the evidence that was used at the time the framework was prepared. The public health guidance published by the Institute after an NSF has been issued will have the effect of updating the framework. Specifically, in this case, the guidance will support the following NSFs:
 - children and young people (DH 2004a)
 - coronary heart disease (DH 2000)
 - diabetes (DH 2001)

- (c) This guidance will support a number of related policy documents including:
- 'Choosing health' (DH 2004b); 'Choosing activity: a physical activity action plan' (DH 2005); 'At least five a week' (DH 2004c) and 'Health challenge England' (DH 2006)
 - 'Getting serious about play' (Department for Culture, Media and Sport 2004)
 - 'Public service agreements 2005–2008' (i) Enhance the take-up of sporting opportunities by 5 to 16 year olds. (ii) To halt the year-on-year rise in obesity among children under 11 by 2010 (HM Treasury 2004)
 - Department for Transport 'Walking and cycling: an action plan' (2004)
 - Department for Education and Skills (DfES) 'Every child matters' (2004) and 'Youth matters' (2005a) frameworks, and 'Early years foundation stage: direction of travel paper' (2005b).
- (d) This guidance will provide recommendations for good practice, based on the best available evidence of effectiveness, including cost effectiveness. It is aimed at professionals with public health as part of their remit working within the NHS, education, local authorities and the wider public, private, voluntary and community sectors. It will also be relevant to parents, grandparents, other carers, professional carers and children.

3 The need for guidance

- a) Participation in physical activity is fundamental for healthy growth and development. It can reduce the risk of chronic conditions (for example, obesity) and improve children's health and wellbeing. Current guidelines recommend that children should do a minimum of 60 minutes of at least moderate intensity physical activity each day (DH 2004c). The best way to encourage children to be physically active may differ according to age and gender.
- b) Up to a third of children aged 7 years and under are not active enough on a daily basis to meet the recommended levels of physical activity (DH 2003). Improving younger children's motor skills and general ability to partake in physical activity (their physical literacy) may help increase their activity levels throughout childhood and into adulthood, by making physical activity more enjoyable.
- c) Girls are less likely than boys to achieve the recommended physical activity levels. While this is true throughout childhood, it is particularly the case for 11 to 15 year-old girls (only 52% of them are physically active for at least 60 minutes, 7 days a week, compared with 70% of boys). The average time that girls spend participating in physical activity declines steadily with age, from 13 hours per week among 2 year olds, to 9.6 hours per week among 15 year olds (DH 2003).
- d) The number of children who walk to school has fallen significantly during the last decade. In 1992/93, 61% of 5–10 year olds and 44% of 11–16 year olds walked to school. In 2002/03, these figures fell to 52% and 40% respectively. In the same year, only a small number of children cycled to school (a negligible number of 5–10 year olds and 2% of 11–16 year olds) (Department for Transport 2005).

- e) The 2005/06 'School sport survey' (DfES 2006) found that 80% of pupils in the schools surveyed participated in at least 2 hours of 'high quality' physical education (PE) and school sport in a typical week, compared with 62% in 2003/04. (Sixty one per cent of them achieved this through curriculum-based activities – up from 44% in 2003/04).
- f) Physical inactivity in England is estimated to cost £8.2 billion a year and this is predicted to rise. It includes the direct costs of treating major lifestyle-related diseases and the indirect costs of sickness absence (DH 2004c). Physical inactivity is also estimated to cause 54,000 premature deaths a year (Department for Culture, Media and Sport 2002).

4 The guidance

- a) Public health guidance will be developed according to NICE processes and methods. For details see section 5.
- b) This document is the final scope. It defines what this guidance will (and will not) examine, and what the guidance developers will consider. The scope is based on a referral from the DH (see appendix A).

4.1 Populations

4.1.1 Groups that will be covered

Children and young people up to the age of 18 years, with a specific focus on those aged 7 years and under and 11 to 18 year-old girls.

4.1.2 Groups that will not be covered

Children and young people who have a medical condition requiring clinical assessment or monitoring immediately prior to and/or during, physical activity.

4.2 Areas

4.2.1 Areas that will be covered

a) This guidance will cover policies, strategies, campaigns, interventions and other approaches that help pre-school and school-age children in England to:

- improve their motor skills and general ability to partake in physical activity (physical literacy)
- incorporate physical activity into daily life
- increase formal and informal recreational activity.

The guidance will focus on:

- active travel
- formal and informal non-curricular, school-based activities
- family activities, including those organised by community groups, professionals and private business.

b) The approaches outlined in a) may take place in one or more of the following settings:

- family – family home, parent and toddler groups
- pre-school – including playgroups, nurseries, crèches, the homes of registered child minders and school reception classes (for under fives)
- schools, education institutions and pupil referral units
- community – including schemes run by voluntary organisations, religious groups, formal and informal networks, sports and leisure centres, public parks, leisure facilities, private and industry-based play schemes.

4.2.2 Areas that will not be covered

The guidance will not cover:

- a) Interventions dealt with in previous NICE guidance (or guidance in development) aimed at pre-school and school-age children. (This includes changes to the urban and natural environment, building design and transport infrastructure – see section 6.)
- b) The school curriculum.

4.3 Outcomes

In examining effectiveness, the primary outcome will be changes in physical activity or improvements in physical literacy (as measured by a change in motor skills or the ability to undertake physical activity). Measurements of physical activity will include:

- changes in the proportion of children achieving a pre-determined level of physical activity
- number of minutes, frequency and intensity of physical activity
- numbers participating or using physical activity facilities.

The following secondary outcomes will be assessed where a study reports a primary outcome:

- affective, for example, intention and motivation to be physically active
- health, including: body mass index, coronary heart disease risk factors, bone density, and exercise-related injury
- psychological, including: reductions in fear and anxiety, and mental and emotional wellbeing (for example, self-esteem)
- educational, for example, improvements in examination results
- change in sedentary behaviours.

4.4 Key questions

The following questions will be addressed by the guidance.

- Which strategies, policies, campaigns, interventions and approaches are effective and cost effective in helping children of different ages (with low levels of physical activity) to become more physically active?
- What are the barriers and facilitators to children's participation in physical activity?
- Which physical activity strategies, policies, campaigns, interventions and activities are effective and cost effective in reducing health inequalities among pre-school and school-age children?

4.5 Target audiences and settings

The guidance will be aimed at professionals working in the NHS, education, local authorities, other public sector organisations and in the private, voluntary and community sectors who have a direct or indirect role in promoting physical activity. It will also be relevant to parents, grandparents, other carers, professional carers and children.

4.6 Status of this document

This is the final scope, incorporating comments from a 4-week consultation which included a stakeholder meeting on 22 March 2007.

5 Further information

The public health guidance development process and methods are described in 'Methods for development of NICE public health guidance' (NICE 2006) and 'The public health guidance development process: An overview for stakeholders, including public health practitioners, policy makers and the public' (NICE 2006) available at: www.nice.org.uk/page.aspx?o=299970

6 NICE related guidance

Published

Obesity. NICE clinical guideline 43 (2006). Available from:

www.nice.org.uk/guidance/CG43

Four commonly used methods to increase physical activity: brief interventions in primary care, exercise referral schemes, pedometers and community-based exercise programmes for walking and cycling. NICE public health intervention guidance 2 (2006). Available from: www.nice.org.uk/page.aspx?o=PHI002

Depression in children and young people: identification and management in primary, community and secondary care. NICE clinical guideline 28 (2005).

Available from: www.nice.org.uk/guidance/CG28

Under development

Guidance on promoting the mental wellbeing of children in primary schools.

NICE public health intervention guidance (due February 2008). Scope

available from: www.nice.org.uk/page.aspx?o=350205

Promoting and creating built or natural environments that encourage and support physical activity. NICE public health programme guidance (due

February 2008). Scope available from: www.nice.org.uk/page.aspx?o=338047

Appendix A Referral from the Department of Health

The Department of Health asked the Institute to:

'Produce guidance on physical activity, play and sport for pre-school and school-age children in family, pre-school, school and community settings.'

Appendix B References

Department for Culture, Media and Sport (2002) Game plan: a strategy for delivering government's sport and physical activity objectives. London: Cabinet Office.

Department for Culture, Media and Sport (2004) Getting serious about play. London: Department for Culture, Media and Sport

Department for Education and Skills (2004) Every child matters: change for children. London: The Stationery Office.

Department for Education and Skills (2005a) Youth matters: next steps. London: Department for Education and Skills.

Department for Education and Skills (2005b) Early years foundation stage: direction of travel paper [online]. Available from: www.everychildmatters.gov.uk/files/4C9A11CE243627228F27EA46CAC3F658.pdf

Department for Education and Skills (2006) 2005/6 school sport survey [online]. Available from: www.teachernet.gov.uk/doc/10442/2005-06%20Sch%20Sport%20Survey%20Report.doc

Department for Transport (2004) Walking and cycling: an action plan. London: Department for Transport.

Department for Transport (2005) Focus on personal travel including the report of the national travel survey 2002/2003. London: The Stationery Office.

Department of Health (2000) The national service framework for coronary heart disease. London: Department of Health.

Department of Health (2001) The national service framework for diabetes. London: Department of Health.

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Department of Health (2003) Health survey for England 2002. London: Department of Health.

Department of Health (2004a) The national service framework for children, young people and maternity services. London: Department of Health.

Department of Health (2004b) Choosing health: making healthier choices easier. London: Department of Health.

Department of Health (2004c) At least five a week: evidence on the impact of physical activity and its relationship to health. London: Department of Health.

Department of Health (2005) Choosing activity: a physical activity action plan. London: Department of Health.

Department of Health (2006) Health challenge England. London: Department of Health.

HM Treasury (2004) Public service agreements 2005–2008 [online]. www.hm-treasury.gov.uk/media/668/97/sr04_psa_ch14.pdf