

## Summary of Feedback on Draft Grades, and Changes Made to Final Grades

There was agreement with most of the draft grades from most respondents. Some respondents disagreed/requested clarifications, and a summary of their comments and our responses is provided below.

A number of respondents expressed concern at the major gaps in the 2020 report card compared to the previous report card in 2018. Even prior to Covid-19 a number of important health behaviours and indicators which had been monitored in Scotland up to the 2016 Active Healthy Kids Scotland Report Card (e.g. Active and Outdoor Play) were no longer being monitored by early 2020. Other important indicators (e.g. Physical Fitness) have never been monitored.

Absence of monitoring generally merits an incomplete ('INC') grade, and such a grade can be used to highlight the lack of monitoring as an important gap in public health surveillance in Scotland (e.g. as used for indicator 7, Physical Fitness). For some of the indicators graded INC there was a substantial amount of data- indicating concerns about levels of the behaviour, and/or marked inequalities. For example, Indicator 2 Overall Physical Activity- HBSC 2018 data suggest that levels of MVPA are too low, but the data were not suitable for grading.

### Indicator 2 Overall Physical Activity (Moderate-to-Vigorous-Intensity Physical Activity, MVPA)

- Some respondents argued for an INC grade since the HBSC 2018 data (the basis of the draft grade) does not measure or report data using the WHO 2020 and UK 2019 guideline (meeting an average of 60 minutes per day MVPA for school-age children and adolescents; HBSC measures the prevalence of meeting the previous guideline of 60 minutes per day every day). This argument was accepted, the draft grade was changed and the final grade of INC was assigned, but it does mean that there is now no public health surveillance of child and adolescent MVPA in Scotland relative to the current UK or WHO MVPA guidelines
- Some respondents argued that SHes physical activity data might be used to grade this indicator, but as noted in previous report cards and academic publications, 'no information on intensity of physical activity is collected' (SHes 2019) and what is measured and reported as MVPA massively overestimates actual MVPA

### Indicator 3 Organised Sport & Physical Activity

- One respondent agreed with this grade but suggested that report cards could focus more on why grades are high or low, citing a recent qualitative study on poverty and engagement with sport and physical activity in North-East Scotland. We accept that *why* questions are important- the report card can be used to answer why questions occasionally, and to generate why questions, but explaining why time spent in different behaviours is low or high relative to benchmarks and guidelines generally requires other research evidence

### Indicator 4 Active Play

- One respondent suggested that an INC grade (with the loss of surveillance of active play in Scotland) would be more appropriate than our draft grade, flagging up this important loss of surveillance data which might otherwise go unnoticed

**Indicator 6 Physical Fitness**

- In the consultation phase of the project we identified some UK citizen science data on cardiorespiratory fitness (20m bleep test; Booth et al BMC Medicine 2020; 18:2) –Scottish data were not available at the time we produced the card, and were unsuitable for grading as they were not research-based and not representative

**Indicator 7 Diet**

- One respondent felt that there was such a scarcity of dietary data (fruit and vegetable intake only) that this should be graded as INC. We agreed with that suggestion and changed our draft grade.

**Indicator 9, Family and Peers**

- One respondent suggested that we had placed too much emphasis on the % of adults meeting the muscle strengthening guidelines, given that the benchmark refers to adult meeting MVPA guidelines. We accept this point and have modified our rationale, no change to the draft grade was indicated though since the % of adults meeting the MVPA guidelines was also low (40% of men and 30% of women), and this is probably an overestimate because (a) it is self reported and (b) SHeS treats 16 year olds and upwards as adults when in fact the adolescent guidelines should apply to 16-18 year olds.

**Suggestions on a Post Covid-19 Report Card (to be produced in 2022)**

- One respondent cited evidence of dramatic increases in serious harms arising from screen-time in Scotland during the first year of the pandemic- these help make a strong case for a post-pandemic report card

## Appendix. Consultation Document

### Active Healthy Kids Report Card Scotland 2020. Draft Report Card Grades for Consultation in May-June 2021.

The fourth Active Healthy Kids Scotland Report Card [www.activehealthykidsscotland.co.uk](http://www.activehealthykidsscotland.co.uk) will be published at the end of June 2021. This is a Knowledge Exchange project based on methodology which has been published, standardised for global use since 2014, and used in over 70 countries so far. The 2020 report card will be a 'state of the nation' snapshot of childhood and adolescence in Scotland just prior to the Covid-19 pandemic in 2020. The 2020 report card will also be included as part of an International 'Global Matrix' of Active Healthy Kids Report Cards from 60 nations towards the end of 2022 ([www.activehealthykids.org](http://www.activehealthykids.org)).

A research group (Prof John Reilly and Dr Farid Bardid, University of Strathclyde; Dr Leone Craig and Ms Jenni Robertson, Robert Gordons University; Dr Simone Tomaz, University of Glasgow; Dr Avril Johnstone, MRC Social and Public Health Sciences Unit/University of Glasgow) identified and assessed published sources of data for the 2020 Scottish report card and have produced the draft grades.

We are asking you to comment on any or all of the indicators we have graded using Microsoft Forms available from the link

There are the following three questions (1-3) for each indicator, and at the end you are invited to comment on any indicators which are not currently in the report card which you think we should include in future.

- 1. Do you agree or disagree with our draft grades ?**
- 2. Are you aware of any relevant data sources we have missed ?**
- 3. Have we misinterpreted any data ?**
- 4. Are there any indicators not included in the 2020 report card which should be included next time round Comments are required by 15<sup>th</sup> June, and should be provided via our project website**

[www.activehealthykidsscotland.co.uk](http://www.activehealthykidsscotland.co.uk)

*You can provide feedback on any or all of the individual grades.*

*If you want to discuss the grades/provide more detailed feedback, the group which produced the grades will be available to discuss them in two drop-in sessions on Zoom (Monday 21<sup>st</sup> June am and Thursday 24<sup>th</sup> June pm)- further details from Prof John Reilly ([john.j.reilly@strath.ac.uk](mailto:john.j.reilly@strath.ac.uk))*

*Many thanks for your help.*