Nutrition and Physical Activity: The Way Forward

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Those who argue for a radical approach towards child fitness and health realise that the picture must be widened to encompass and address the issue of nutrition within the context of physical activity. It is accurate to state this approach has not historically been auspicious. The 2016 European Football Competition illustrated the power that the food and drink industry has capacity to unleash, by means of sponsoring high profile events. For hour after hour, football enthusiasts in the continent’s population, including children, were subjected to on-screen and around pitch advertisements, no doubt acting as potential prompts to consume fast food and sugary drinks. At the 2012 London Olympics, the International Olympics Committee was roundly criticised for junk food sponsorship and The Children’s Food Campaign christened the event 'The Obesity Games' (Children’s Food Campaign, 2012 'The Obesity Games’ – junk food sponsorship of the Olympic Games).

The 2016 UK National Obesity Strategy might have offered the ideal opportunity to address such unfortunate trends but the policy thrust is not holistic. For example, the Strategy sidesteps the considerable increase in the consumption of energy/sports drinks, particularly amongst young children. These drinks, invariably endorsed by popular celebrities, appear to beneath the public health radar and are frequently presented as having a ‘health halo’ with real benefits for those striving for sporting glory. Despite limited evidence, the emphasis is now the need to hydrate the body with some schools now encouraging pupils to stop every 15 - 20 minutes during exercise to consume a brightly coloured ‘energy drink.’ Sports drinks are, however, traditionally laden with sugars and acids and should be displaying a health warning rather than a confused and confusing health endorsement. Children should ‘rethink their drink,’ especially when linked to sporting activities and hopefully choose water.

Yet the following countries are developing a healthier relationship between nutrition and physical activity and offer a constructive way forward.

France: In 2001, France launched its ongoing National Health and Nutrition Programme (PNNS) to encourage healthy eating with physical activity. The comprehensive approach relied upon a mixture of synergistic and complementary actions, measures, regulations and laws, It combined different strategies orientated towards education, communication, information and training of professionals in the nutritional environment.

Australia: Its Collaboration of Community-based Obesity Prevention Sites (Co-OPS Collaboration) is an excellent example of procreating an operational framework for effective action, systems for learning from one another, advice on what works and a platform for knowledge transmission and exchange. There is also a community-based obesity prevention plan for young children called ‘Romp and Chomp.’ The focus is upon promoting healthy eating and active play to achieve a healthy weight in children less than 5 years of age. Th behaviour change messages are: increase in daily activity and play, increase in water consumption and fruit/vegetables but a decrease in TV viewing and screen-based activities.

Denmark: In Holbaek a more individualised programme has been initiated for overweight children, covering multiple aspects of a child’s life. These include physical activity, diet, portion size, sleep time, intervals between servings and screen-time.

Italy: A ‘Class Sports’ programme promotes PE from primary school onwards combined with a paralleled promotion of fruit and vegetable consumption.

Spain: The ‘Som la Pers’ programme school-based intervention is designed to increase physical activity and encourage consumption of vegetable and fruit.

Portugal: Its ‘Growing up with a healthy weight’ programme in the Alentejo Municipality provides healthy eating and physical activity advice for the growing child.

Poland: Two well-structured programmes exist in Poland; ‘Keep Balance’, a national long term project of nutrition and physical activity and ‘Keep Fit.’

Austria: A number of programmes exist in Austria, including ’Exercise is Fun,’ Drink Smart,’ ‘School Buffet Check’ and ‘Fit for Austria.’

Canada: There is no healthy eating component in Canada, but an effective programme is the 12 year ParticipACTION Report Card on physical activity for children and young people, linking physical activity, sedentary behaviour and sleep. It is framed by the question ‘Are Canadian kids too tired to move?’ The focus centres upon Sweat, Step, Sleep and Sit and continues to have a positive impact nationally.


In the UK, although there has, as yet, been no holistic lead set by government for the inclusion of nutritional initiatives alongside physical activity content in increasing child health and fitness (thereby combating the diseases attendant upon persistent overweight and obesity) some programmes indicate the desired direction of progress.

Calderdale has created a Better Living Service in 2015 and made schools a priority to integrate weight management with physical activity services. They put on special health assemblies in schools focused upon physical activity and healthy eating and have noticed a marked increase in momentum. Across the UK. The HENRY (Health, Exercise and Nutrition in the Really Young) national scheme concentrates upon the 0-5 year group and has been a very successful 8 week programme. It complements support to older children in the areas of PE and nutrition.

The Wellbeing and Nutrition team from the London Borough of Newham has also taken a definitive lead in uniting nutritional best practice with physical activity. It delivers an Association for Nutrition certified ‘Physical Activity’ module to give early years’ practitioners confidence in how to best support families to become more active (http:www.assocaitionfornutrition.org/Default.aspx?tabid=333). The training connection to sessions such as the ActivTots programme for children aged 18 months to two and a half years engages this group and encourages them to be ‘naturally’ more physically active. There is an obvious and pressing need for good practice internationally to be collated, together with forward-looking schemes here so that a radical, holistic approach to child health and fitness is promulgated in which nutrition is inextricably linked with physical activity. There is scope for upgrading the PSHE syllabus within the National Curriculum so that strong messages about nutrition are developed and PE teachers empowered to deliver nutrition-related messages (GOVUK, 2015 ‘Schools, colleges and children’s services – curriculum and qualifications’ http://www.gov.uk/schools-colleges-childrens-services/curriculum-qualifications). A nationally-driven initiative could also encourage celebrity role models such as sporting professionals, to promote healthy eating and nutritional education as an intrinsic part of their UK ambassadorial activities.

In conclusion, attempts to place physical activity and nutritional good practice and observation in separate silos in the challenge to boost child fitness, health and wellbeing will be doomed to failure. Good nutrition, beneficial play and movement form a ‘virtuous circle’ and
a properly holistic approach for a Government that regularly pays lip service to a determination to combat the obesity epidemic. If this is to succeed, the professionals tasked with improving the nation’s health need to have the confidence rooted in training, encompassing:

- Nutritional knowledge for children and their families
- The benefits of school sports, PE and physical activity programmes
- The very different (and consistent) adult approaches; essential for successful playtimes.

All professional settings can make dramatic improvements to the mental and physical health and wellbeing of the children in their care. Those children will then develop positive patterns that they can, as adults, transmit to the children in their own care.

Good nutrition, movement, physical activity and play are all central to a ‘whole child’ strategy for health and wellbeing. Above all, the remit of ‘Physical Education’ needs to be broadened re-structured. In New Zealand, Physical Activity and Education is taught alongside health/health education and staff frequently take responsibility for teaching components such as mental health, food and nutrition, education in sexuality and body care alongside outdoor education and sports studies. Home Economics also sits within the learning area which is underpinned by four underlying concepts. These are ‘haurora’ – a philosophy of health and wellbeing that is unique to that country.

It could be instructive and productive for society in the UK as well.