





Growing up unequal: gender and socioeconomic differences in young people's health and well-being

Physical activity among adolescents in the Russian Federation

Fact sheet based on the results of Health Behaviour in School-aged Children (HBSC) survey 2013/2014



This fact sheet summarizes the main findings on physical activity among adolescents from the 2013/2014 Health Behaviour in School-Aged Children (HBSC) survey in the Russian Federation.

HBSC, a WHO collaborative cross-national study, is conducted every four years and provides information about the health and well-being, social conditions and behaviour of 11-, 13- and 15-year-old boys and girls in 42 countries and regions across the WHO European Region and North America. More than 4700 young people from the Russian Federation took part in the survey, the sixth to have been held in the country.

Graphs in this fact sheet show differences between the 2013/2014 survey and the previous HBSC survey from 2009/2010.

Summary of results

- Only 15% of girls and 23% of boys in the Russia Federation meet the current WHO guideline of 60 minutes of moderate-to-vigorous physical activity (MVPA) every day.
- This nevertheless represents a six percentage-point rise in girls and a seven percentage-point increase in boys from the 2009/2010 survey.
- Boys are more physically active than girls, but prevalence decreases with age.
- Family affluence has a significant influence on physical activity levels in girls and boys.

Background

Research focusing on levels of physical activity and fitness in young people in the late 2000s showed that schoolchildren in the Russian Federation reached only 60% of the level achieved by their peers from the 1960s and 1970s. Children's physical activity levels reduced by half in the years between starting and leaving school, while vision and posture disorders increased five times, mental health disorders four times, and gastrointestinal diseases three times. Lack of physical activity leads to cardiovascular and musculoskeletal problems, and greater susceptibility to injuries (1).

Age differences

Levels of physical activity among children and young people decrease with age. Girls' levels reduce consistently between 11 and 15, while for boys, there is a reduction between 11 and 13 before a levelling-off at 15.

Gender differences

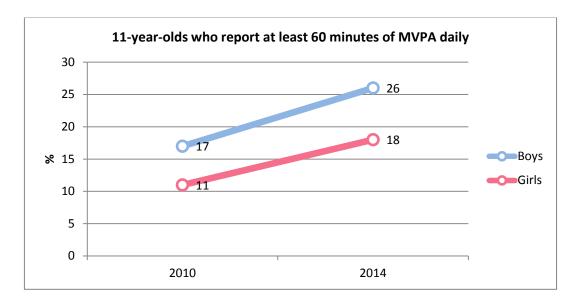
Physical activity levels are higher in boys across all three age groups.

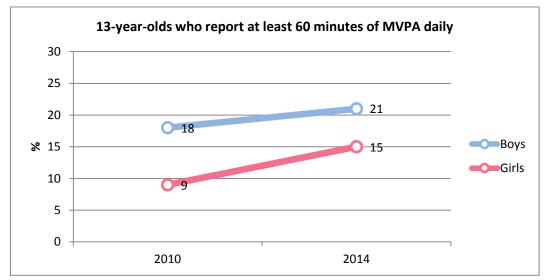
Family affluence

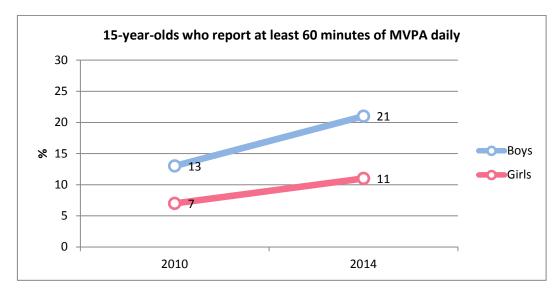
The relationship with family affluence is statistically significant for girls and boys.

Differences from the previous HBSC survey

Level of daily physical activity have grown marginally in boys and girls across all age groups since the previous HBSC survey in 2009/2010. Positive change is especially noticeable among boys aged 11 (a nine percentage-point increase) and 15 (eight percentage points). The overall proportion of adolescents who meet WHO recommendations on physical activity nevertheless remains small.







How can policy help?

Children and young people share low physical activity levels with other groups of the population of the Russian Federation. A federal law on physical activity and sport was passed in 2007 to increase levels across the life-course. This features an emphasis on delivering physical education in education institutions, promoting and encouraging school and student sport, creating school sport clubs, and gradually introducing the national Ready for Labour and Defense complex, which sets qualifying standards in accordance with students' ages and levels of physical fitness.

Physical education in schools aims to strengthen schoolchildren's health and increase their physical activity. The HBSC survey suggests some success has been achieved as physical activity levels have risen since 2009/2010, although they remain low overall.

The strategy for development of physical activity and sport to 2020 supports the creation of a new national system of physical and sports education for the population, development and implementation of a package of measures to promote physical activity and sport, and modernization of physical education for population groups. Basic targets identified for 2020 are to:

- increase the proportion of citizens involved in physical activity and sport to 40%;
- increase the proportion of schoolchildren and students regularly involved in physical education and sport to 80%; and
- raise weekly physical activity levels relative to age and other features.

WHO's global plan for prevention and control of noncommunicable diseases for 2013-2020 recommends increasing physical activity levels to reduce incidence of hypertension by 25% and hinder growth in the number of cases of diabetes and obesity.

The HBSC survey shows that further actions to promote healthy lifestyles and interest in physical activity among adolescents are needed. This includes the development of new training methods and physical education programmes. Future HBSC studies will demonstrate how successful measures carried out today to increase physical activity in 11-, 13- and 15-year-old schoolchildren in the Russian Federation have been.

Reference

Latypov I.K. Children's health and problems of schoolchildren's physical education. Pedagogy, Psychology and Medico-biological Problems of Physical Education and Sport 2009;10:102 (in Russian).

For more information please contact:

Dr Martin Weber Programme Manager, Child and Adolescent Health WHO Regional Office for Europe, Copenhagen, Denmark weberm@euro.who.int

Dr Anna Matochkina HBSC Principal Investigator in the Russian Federation St. Petersburg Scientific-Research Institute of Physical Culture anna.matochkina@hbsc.org

Report findings available as app:

The latest HBSC report is available as a smartphone application, presenting data on 11-, 13- and 15-year-old boys and girls health and well-being, social environments and health behaviours, as well as the health inequalities many of them face. It is searchable by country and a wide range of health topics and connects to the WHO European Health Information Gateway.

¹ The smartphone application can be accessed at: http://www.euro.who.int/euro-healthstats