

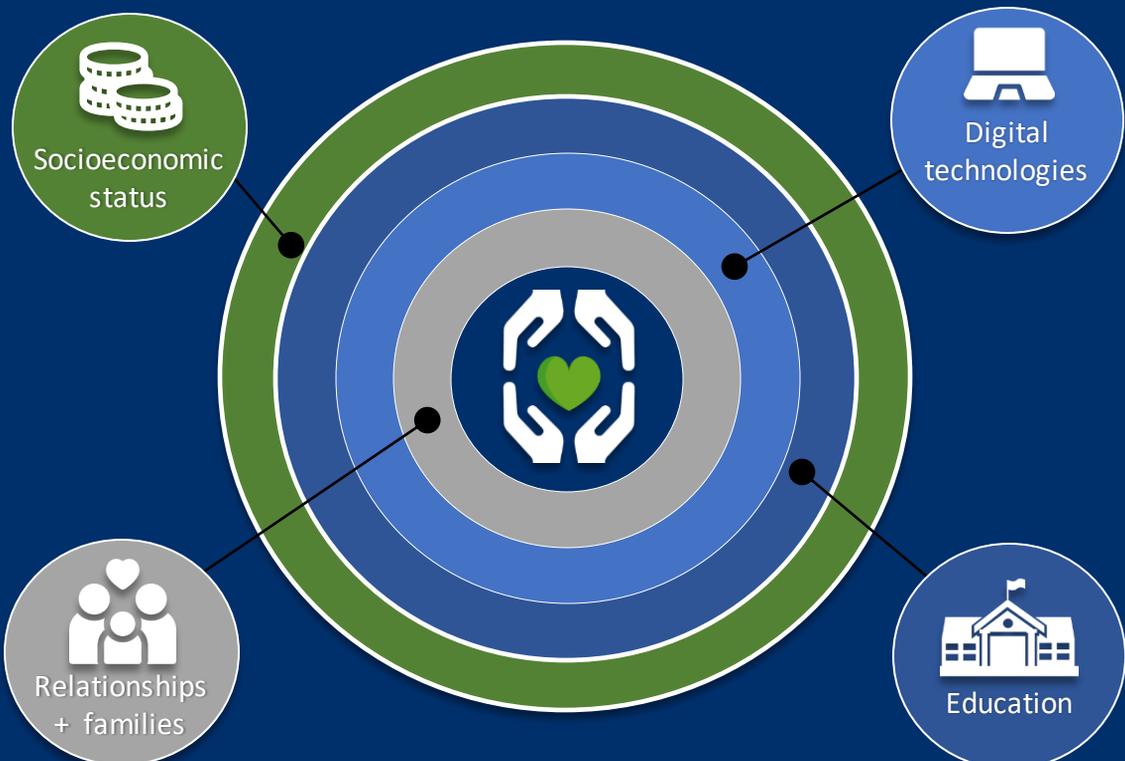


EDUCATION IN THE DIGITAL AGE: HEALTHY CHILDREN HEALTHY FUTURES

Establishing good physical health and healthy behaviours in childhood is essential for student learning and well-being. Healthy lifestyle habits in childhood persist into adulthood, supporting long-term learning, health and life success.

Education has a key role to play in promoting children's physical health and individual agency over wellbeing. It can provide the knowledge, awareness and model behaviours needed to develop lifelong healthy habits.

Factors affecting child health and health behaviours



PHYSICAL HEALTH TRENDS AND PATTERNS

PHYSICAL ACTIVITY



- Only 19% of children achieve the recommended 60 minutes per day.
- 49% of boys and 35% of girls participate in vigorous physical activity four or more times a week.
- Active transport (biking, walking) to and from school is declining.

NUTRITION



- Almost half of children do not eat fruit or vegetables daily.
- Rates of breakfast consumption are declining.
- About 16% of adolescents consume sugar-sweetened soft drinks daily.

ALCOHOL & TOBACCO



- Teen and preteen consumption of alcohol declined from 1994 to 2014.
- Lifetime prevalence rates of smoking tobacco decreased since 2014.
- Rates of cannabis use by adolescents have remained stable.
- In some countries there has been explosive growth in use of synthetic opioids (e.g. fentanyl) by adolescents.

SLEEP



- On school days children sleep on average between 7 to 9 hours, and on non-school days this ranges from 9 to 10 hours.
- Older adolescents tend to sleep less and go to bed later.
- Some children report difficulty in getting to sleep.

OVERWEIGHT AND OBESITY

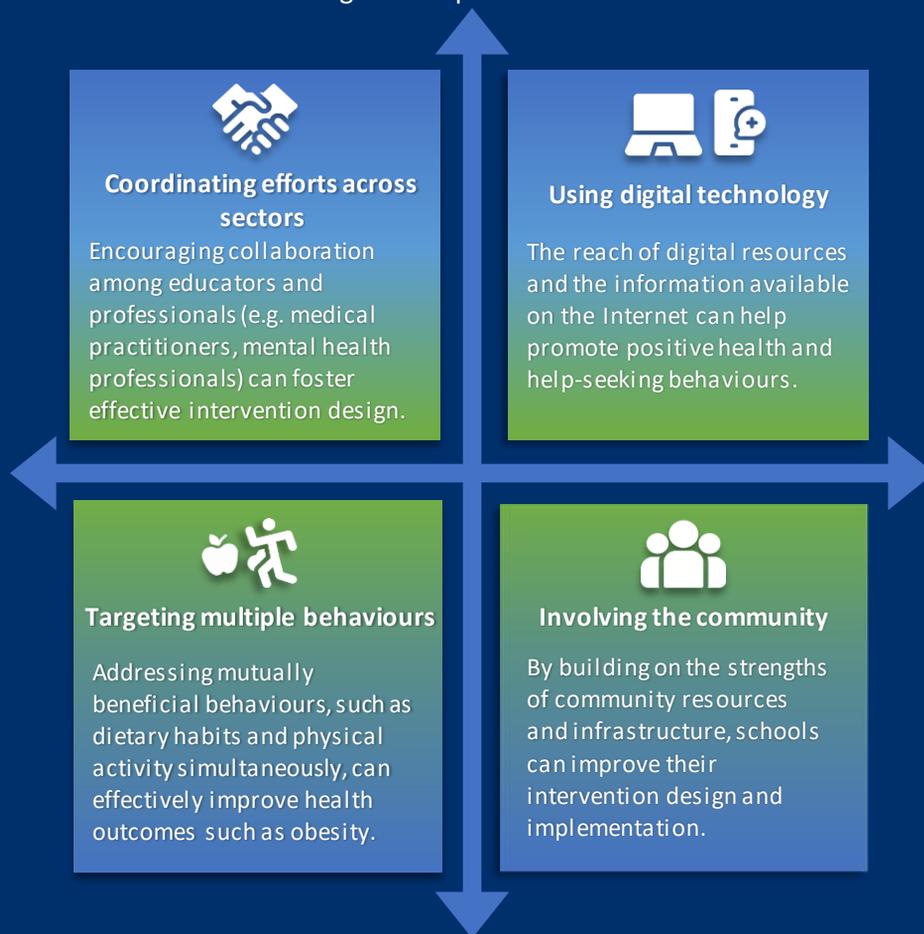
Childhood overweight and obesity is a public health priority. The global proportion of overweight or obese children (age 5-19) doubled from one in ten children to one in five between 2000 and 2016. In the OECD, some countries have succeeded in stabilising childhood obesity; but many still struggle. Child and adolescent obesity has been correlated with negative health and well-being outcomes such as depression, and children with a healthy weight are more likely to perform well in school.

Many factors are related to obesity, including:

- low physical activity and sedentary behaviour
- poor nutrition, including the consumption of ultra-processed food
- socioeconomic status

PHYSICAL HEALTH INTERVENTIONS

School-based interventions to improve health outcomes and healthy behaviours can have a number of different features. Involving parents and caregivers is important to building a healthier school environment and sustaining healthy habits. Other measures that can play a role in effective intervention design and implementation include:



LEARNING ABOUT PHYSICAL HEALTH

Health literacy empowers individuals to take control of their own health and understand how different habits can help or hinder well-being. Effective health literacy education starts early and continues throughout life. Strategies to strengthen health literacy include:



Updating national curricula to incorporate health education topics across subjects and prepare students to make informed decisions about their physical health.



Establishing sources of funding to finance and implement health interventions and learning opportunities in schools.

Measuring health literacy to help identify where investments are needed and whether interventions are effective in the short and long term.



Building key partnerships between education and health sectors to develop accessible health curricula and help support specific programmes.



SCHOOL MEALS

Access to healthy food at school helps student physical and emotional well-being as well as supporting learning and academic performance. Many children eat at least one meal per day at school.



Provision of free or subsidised meals

- Universal free school lunch programmes (Finland, Sweden)
- Needs-based provision of school lunches (Ireland)
- Means-based funding for school lunches (dependent on parental income) (France)
- Needs-based free breakfast programmes (Canada, France)

SCHOOLS AS HEALTH HUBS

Schools can play an important role in promoting equitable health outcomes for all students, even the most disadvantaged. Examples of programmes that aim to promote student health in schools include:

Building cooperation		The Pan-Canadian Joint Consortium for School Health (JCSH) (Canada) strengthens cooperation among ministries, agencies, departments, and others in support of healthy schools.
Guiding healthy policies		The Healthy School project (Flemish Community, Belgium) focuses on setting health policies in schools. Schools assess their unique situation, determine priorities and an action plan, followed by an evaluation and adjustment period.
Prevention		Health in your school (Mexico) aims to strengthen prevention and health care. School visits from health professionals promote healthy habits and monitor students' health; students who need extra attention are referred to local health centers.
Staff training		The Healthy Ireland Smart Start programme involves training pre-school staff in health promotion, including accident prevention, nutrition and physical activity.

KEY READINGS

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