Australian children lack the basic movement skills to be active and healthy

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Abstract
Just as children need to be taught their ABCs to read and write, they also need to be taught fundamental movement skills (FMS), such as running, jumping, throwing and kicking, to provide the strongest foundation for a physically active lifestyle. Children who are proficient at FMS are more likely to be physically active and have adequate cardiorespiratory fitness, and are less likely to be overweight or obese compared with children who are not proficient. In addition, FMS-proficient children are more likely to become adolescents who are more active and with higher cardiorespiratory fitness levels.

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**Australian children lack the basic movement skills to be active and healthy**

Just as children need to be taught their ABCs to read and write, they also need to be taught fundamental movement skills (FMS) such as running, jumping, throwing and kicking to provide the strongest foundation for a physically active lifestyle. Children who are proficient at FMS are more likely to be physically active, have adequate cardiorespiratory fitness and less likely to be overweight or obese compared with children who are not proficient (1, 2).

FMS proficient children are also more likely to become adolescents who are more active (3) and with higher cardiorespiratory fitness levels (4).

So what does FMS ‘proficient’ mean? There are two primary methods to assess children’s motor skills; ‘product’- or ‘process’-oriented. Product assessments measure, for example, *how fast a child can run*, while process assessments involve the use of observational criteria to determine if the child *moves their body to run efficiently*, or in a ‘proficient’ manner. For example, a process assessment of running might look for components such as the whether the arms move in opposition to the legs and with the elbows bent; if there is a brief period where both feet are off the ground; and if the non-support leg bends approximately 90 degrees (5).

Regrettably, preschools and schools are limiting children’s opportunities to learn and develop proficiency in FMS. Ideally children should develop FMS proficiency during early childhood and primary school through a range of opportunities including unstructured active play (6), interactions with parents, siblings, and caregivers (7, 8), quality physical education (9, 10), school sport, and community-based programs (11). Yet many children are entering secondary school lacking proficiency in many FMS. Approximately two-thirds of Year 6 children in NSW are not proficient at locomotor skills (e.g. running, jumping and hopping), and two-
thirds of girls and one quarter of boys have low object control skill proficiency (e.g. ball handling skills such as throwing and kicking) (1). With 85% of Australian adolescents not meeting the National Physical Activity Recommendations of at least 60 minutes of moderate to vigorous physical activity (MVPA) per day (12) insufficient physical activity (PA) among youth is a global health issue (13). Furthermore one quarter are either overweight or obese (12) and one third do not have adequate cardiorespiratory fitness (14). Therefore urgent action is needed to ensure all Australian children are provided with the opportunity to develop competence and confidence in FMS which will help them to be active, fit, and of a healthy weight.

Schools are universally recognised as important institutions for the promotion of physical activity in young people, with Health and Physical Education (HPE) and school sport programs being key potential vehicles for promotion and provision of physical activity opportunities. However, several recent and significant independent reports have addressed the issue of low levels of physical activity in Australian children and the role of schools in this. In 2009, the Crawford Report (15) highlighted the important role of schools, in particular the need to reinvigorate HPE and school sport in Australian schools. The report states: “It was concerning to learn from experts Australia-wide that the education system no longer reliably provides the platform upon which much of the nation’s sporting activity is based. It no longer consistently carries out the vital role of introducing children to physical activity and organised sport” (15). This report identified a lack of teacher training, poor facilities and a low priority for physical activity in schools as major issues. Recommendations pertaining to the school learning context were that sport in schools should be an ongoing priority, physical education a stand-alone learning area, and the national curriculum should be implemented as soon as possible (15). In the same year, the National Preventive Health Task Force
recommended a key strategy within HPE was to promote fundamental movement skills and that sufficient time was available during school for sport and recreation (16). These findings echoed those of a Senate Inquiry into Sport and PE conducted more than 20 years ago (17).

The link between FMS and health outcomes and the low competency levels found in Australian children and adolescents, coupled with the independent reports focusing on these issues, and the impending release of the HPE national curriculum, should provide a catalyst for change. Unfortunately, there exists a policy situation that does not reflect the importance of children developing confidence and proficiency in FMS. For pre-school-aged children, the National Physical Activity Recommendations state “it is important to provide opportunities to practice locomotor, stability and object control skills” (18), but the Australian Government Healthy Eating and Physical Activity Guidelines for Early Childhood Settings and national quality standards for early childhood education do not specify FMS development as a curriculum requirement (19, 20). Given the clear evidence of the importance of developing FMS proficiency during childhood, and its importance as a foundation for a physically active life, we strongly recommend that within the broader mandate for increasing the physical activity of Australian children, that FMS development be more clearly specified in all relevant policy documents.

While policy is important, it is only the first step. We need to take urgent action and implement change through both early childhood and school education settings. Assisting the early childhood sector to include FMS development programs is prudent to ensure all children enter school with basic FMS proficiency. We have good available evidence-based programs which target FMS development that are efficacious, translatable and scalable for
the early childhood sector to integrate. Examples include *Tooty Fruity Vegie in Preschools* (21, 22), found to have long-term beneficial outcomes (23, 24) and successfully translated across NSW as *Munch and Move’*(25) and *Jump Start* (26); currently being translated in childcare settings in Tasmania.

In school settings, a proposed solution to physical activity promotion and provision of quality physical education is to have physical education specialists in primary schools. A secondary option is to provide sufficient training and up skilling for generalist teachers to undertake this role. However this is cautioned by available evidence which shows there is strong and consistent consensus that generalist classroom teachers lack confidence to teach physical education, feel inadequately trained and prepared and tend to place physical education as a lower priority in an already “crowded” curriculum (9, 10). There is also an immediate opportunity with the development of the Australian National HPE curriculum for primary and high schools to place opportunities to develop FMS centre-stage in HPE programs. The public consultation phase for the Draft HPE curriculum has recently closed and it is currently being revised for publication in late 2013. Fortunately it appears that FMS will be one of the key categories in the curriculum’s movement and physical activity strand. However, it is unclear whether teachers will have to assess and report student achievement against FMS proficiency. Current practice would suggest this is unlikely (10), but given the evidence, this is what we should be striving for.

Solutions to address Australian children’s lack of mastery in the basic FMS (14, 27-29) needed to lead active healthy lives, requires cooperation and commitment between public health, education and early childhood sectors. There are three priority areas; firstly we need to ensure that FMS development is highlighted in all relevant policy documents; secondly to
ensure that children are given opportunities to be taught FMS during the preschool years and;
thirdly ensuring primary schools provide a quality HPE program accompanied by appropriate
teacher resources and professional development. We also need all Australian states and
territories to monitor children’s FMS proficiency through state-wide surveys (such as the
NSW SPANS(14)) as this will provide one dimension of children’s capacity to participate in
a range of physical activities and give us valuable information as to how we are tracking with
changing this situation. In the face of disparaging public reports and at a time when we are
currently considering a national curriculum now is the opportune time to take action in a
timely and coordinated fashion to up-skill our children for a lifetime of physical activity.
References


