

# language guidelines for change4life



Eat well Move more Live longer

# Tone of voice

- Change4Life is created to be a friendly imperative to change. This spirit informs everything that the brand does, and inspires the way we write copy
- The following five words and their definitions should be kept in mind when writing copy

## **Friendly**

The brand treats this serious subject in an approachable way. It manages to remain upbeat and optimistic even when delivering heavy news.

The movement consists of real people and so uses real people speak, not medical dictionary terminology. Where possible, it makes dry information accessible, snappy and memorable.

*'Reducing the amount of excess sugar in our bodies by choosing lower sugar or sugar free foods'* becomes *'sugar swaps.'* It rarely uses the word obesity.

## **Imperative**

Beneath its welcoming tone, the movement is nevertheless gently firm on the need to change. It's not shy of delivering sometimes unpleasant news, although always manages to do this in an engaging manner. It insists, it chivvies, it cajoles. But it manages to do this without being felt to be 'telling us what to do'.

This is a skill that mums know all about!

## **Encouraging**

People generally don't like change. Nevertheless, change they must, if Change4Life is to achieve its goals. So whilst making the imperative to change abundantly clear, the methods of achieving it are kept flexible and accessible.

Small changes, easy swaps, choices and alternatives, plus a good measure of support, encouragement and mutual reinforcement.

## **Child friendly**

Whilst the target audience is mums (and dads), the movement embraces kids for the simple reason that mums know they have to work with their kids, not against them. The movement therefore speaks in a way that mums know their kids will understand. Whilst it falls short of being childish, its language is deliberately written in child accessible ways, using simple hooks like rhyming, 1–2–3, alliteration, colloquialisms etc.

## **Supportive**

The brand looks ahead.

It does not look back, or blame, or criticise. It offers help for the future.

Its aim is to improve the future life expectancy of a generation (and generations to come).

Now there's an incentive to start making changes, and to continue.

## **Example copy**

**FUN IS THE BEST GYM**

You don't need a gym to keep you and your kids active.

Play in the park, walk the dog, dance, kick a ball around. Anything.

Every little activity stops you from storing up dangerous levels of fat in your body.

And the only thing you will store up is happy memories.

# How to talk about the movement

- People from all over the country are coming together in a movement called Change4Life. Our aim is to prevent people from becoming overweight by encouraging and supporting them to eat well, move more and live longer
- Modern life has brought many positives, but it has also made it harder for us to make healthy choices. Modern life has made it too easy for us to eat unhealthy foods and lead a sedentary life
- Change4Life recognises these modern day pressures parents are under and is here to help
- Our ambition: *'To be the first major nation to reverse the rising tide of obesity and overweight in the population by ensuring that everyone is able to achieve and maintain a healthy weight.'* (Healthy Weight, Healthy Lives, 2008)
- *'Our initial focus will be on children: by 2020, we aim to reduce the proportion of overweight and obese children to 2000 levels.'* (Healthy Weight, Healthy Lives, 2008). This is reflected in the PSA 12 child obesity indicator: to reduce the rate of increase in obesity in children under 11 years old

## Claims/facts about obesity and associated diseases

- The Foresight report 'Tackling Obesities: Future Choices' launched by the Government Chief Scientific Advisor, Professor Sir David King in October 2007, highlighted the scale of the problem of excess weight in the UK. One quarter of adults were found to be obese and 38% were classified as overweight, while 16% of children were found to be obese and 14% overweight
- The World Health Organisation states unambiguously that *'overweight and obesity are major risk factors for a number of chronic diseases, including diabetes, cardiovascular diseases and cancer. Risk increases progressively as BMI increases.'*  
<http://www.who.int/topics/obesity/en/>

- Obesity is responsible for 9,000 premature deaths a year in England. It reduces life expectancy by, on average, nine years
- Obese and overweight individuals place a significant burden on the NHS – direct costs are estimated to be £4.2 billion. This is forecast to more than double by 2050
- Helping a person to lose weight significantly reduces the risk of type 2 diabetes, thereby reducing the cost of treatment on the NHS. Estimated costs indicate a saving of £950 per person each year
- In addition, these also bring costs to society and the economy more broadly – for example, sickness absence reduces productivity. The Foresight report estimates that problems attributable to excess weight in the UK already cost the wider economy in the region of £16 billion, and that this will rise to £50 billion per year by 2050 if left unchecked
- Foresight predicts that based on current trends, levels of obesity will rise to 60% in men, 50% in women and 25% in children by 2050
- The report also suggests that by 2050, 9 out of 10 adults will be overweight or obese

## Diabetes

- We only refer to type 2 diabetes (rather than type 1 diabetes, or just diabetes), as obesity is only associated with type 2 diabetes
- Around 90% of people with diabetes have type 2 diabetes
- Diabetes is one of the biggest health challenges facing the UK today. It causes heart disease, stroke, amputations, kidney failure and blindness, and more deaths than breast and prostate cancer combined
- If current trends continue, there will be four million people diagnosed with diabetes in the UK by 2025
- There are around 20,000 children in the UK with diabetes

- Around 1 in 10 deaths are attributable to diabetes – this figure is higher in deprived areas and if current trends continue, 1 in 8 deaths will be attributable to the condition by 2010
- The number of people with diabetes in the UK is set to double to four million by 2025
- Diabetic retinopathy is the leading cause of blindness in the UK's working age population
- Estimates suggest that people with type 1 diabetes have a reduced life expectancy of up to twenty years. The lives of those with type 2 diabetes could be cut short by up to ten years
- Being physically active and maintaining a healthy weight can dramatically reduce the risk of developing type 2 diabetes

## Cancer

- There is convincing evidence that being overweight or obese increases cancer risk
- After quitting smoking, keeping a healthy body weight is one of the best ways to reduce your chances of getting cancer
- Research has shown that many types of cancer are more common in people who are overweight or obese
- 10% of all cancer deaths among smokers are related to obesity (30% of endometrial cancer)
- Among post-menopausal women, obesity is a significant risk factor for breast cancer

# Watch outs when using claims

- It is important to be clear the prediction is that 9 out of 10 of today's children could *grow up to* have unhealthy levels of fat in their bodies and therefore be at greater risk of diseases when they *become adults* i.e. not as children
- Also, as the claims are all predicted, we must always refer to the strong *possibility* of negative outcomes, rather than making them definitive

So

We can say

- If current trends continue, 9 out of 10 of our kids risk growing up with dangerous levels of fat in their bodies which makes them more likely to get heart disease, type 2 diabetes and cancer, and many could have their lives cut short

Or

- We're eating too much and moving too little. If we go on like this, 9 out of 10 of our kids will grow up to have dangerous amounts of fat in their bodies. Which could lead to things like heart disease, type 2 diabetes and cancer. And eventually to a shorter life

We can't say

- 9 out of 10 of our kids *will* grow up with dangerous levels of fat in their bodies *which leads to* heart disease, type 2 diabetes and cancer, and many *will* have their lives cut short
- All kids will suffer from disease or premature death – it is just those who are extremely obese as adults
- Kids will die before their parents – this is not true – they will still live into adulthood, but are more likely to suffer a premature death

# Specific words to use/avoid using

- Do blame modern life for the problem, don't blame parents
- Whenever we talk about making changes to diet, we should also talk about making changes to activity levels
- If we highlight a problem, we should also offer a solution
- Talk about 'fat in the body' rather than 'a fat body' (it's harder to discount yourself)
- Talk about 'activity' rather than 'exercise' (it feels more accessible)
- Keep language colloquial, as if you're talking to a friend
- Use 'kids' not children
- Always talk in the third person 'We've got a problem...'
- Change4Life is always a collective 'join us...'
- Our target audience will shy away from 'signing up', so say 'join us' rather than 'join in'
- If posing suggestions for behaviours, 'how about' or 'could you' work better than 'why not' (as 'why not' gives rise to a contrary response) e.g. 'could you walk it?' works better than 'why not walk it?'
- Refer to Change4Life as a 'movement' rather than a campaign (more scalable and more inclusive)

# How to use and talk about the 8 changes we're encouraging

- The most important phase of the Change4Life campaign involves the seeding and rooting of eight positive diet and activity 'changes' or 'habits'
- These are eight key areas of diet and activity that parents need to focus on in order for their family to live a healthier lifestyle
- Each habit communicates why it is important for families to adopt it and provides simple, practical tips on how they can go about doing this
- These tips are essential in providing parents with the tools to effectively make a change to their children's lifestyles
- The changes were developed in consultation with an independent expert advisory group, The Department of Health's own physical activity and nutrition policy teams and the Food Standards Agency
- The changes were identified as those that would make the biggest difference in terms of preventing weight gain amongst children aged 5-11
- The habits are written in the accessible, friendly, helpful tone of Change4Life, and each has a catchy title and visual to aid memorability
- This document provides context and guidance for each of the eight changes. It includes the insights that inspired them and provides pointers on how they should be used and the advice that we can offer people around each

# General

- Care must be taken when talking about particular foods and food groups. There isn't a black and white definition of good foods and bad foods, as what is important is an overall balanced diet. Rather than talking about good and bad food, we talk about healthy and unhealthy food. Specific foods can be available as both healthier and unhealthier versions e.g. a yoghurt may be high in fat and sugar but can also be available as a lower fat/sugar version; chips can be fried and high in fat or baked in the oven and lower in fat
- Since 'low fat' and 'low sugar' actually have a specific legal meaning in terms of content; when suggesting alternatives it's important to refer to 'lower fat' or 'lower sugar' versions where they exist e.g. 'lower fat yoghurt' (as yoghurt is not universally low in fat) or 'lower sugar drinks' or 'drinks with no added sugar'
- There is nothing inherently wrong with fizzy drinks (carbon dioxide doesn't make you fat!), the problem is the sugar in them (whether they are fizzy or not) – so use the term 'sugary drinks'
- There is no difference between saturated and unsaturated fat in terms of calories so they are the same from an obesity angle. Equally salt is not an obesity issue. However we need to limit our saturated fat and salt intake for a healthy heart/lower blood pressure so our messages are consistent with this
- Semi-skimmed milk is not recommended for small children (under 2s)
- We generally do not refer to calories if possible, as this alludes to dieting. Rather, in the context of activity we talk about 'burning up energy' or 'burns off excess energy'. When we talk about balance of diet and activity we refer to 'energy in and out'
- We are not suggesting people completely replace all the potentially unhealthy foods and live on a perfect diet – our research has told us this is seen as punitive and unrealistic, so where possible prioritise swapping things or cutting down rather than replacing something altogether

- Do not make additional claims regarding the benefits of eating well e.g. children's behaviour will improve if they eat more healthily, they'll do better at school, breakfast is the most important meal of the day – these may be common beliefs but they are not proven scientifically
- Do not assume everything will have food labelling such as traffic lights. There are different forms of front-of-pack food labelling in use (some using traffic lights and some with percentages), and they do not cover all food stuffs
- When asking people to compare the labels, ask them to compare like for like in terms of quantity and type of product e.g. compare % fat per 100g on both labels of two similar products
- Where possible, mention the cost benefits of the changes we are suggesting. Our research showed many people feel being healthy is expensive and beyond their reach. Given the current economic environment we need to take every opportunity to point out ways people can save money by following our tips e.g. walking instead of using the car for short trips, buying fewer snacks
- Avoid using brand names
- Activity/being active aids healthy growth and development as well as burning energy
- When referring to these suggestions, eight 'changes', 'habits' or 'tips' is encouraged
- Talk about fast food rather than junk food

# Sugar Swaps

- Mums associate sugar with tooth decay and to a lesser extent hyperactivity, but not weight gain. Reducing the risk of tooth decay is another benefit of reducing sugar, but is not our primary message
- Sugary drinks account for ~25% of kids' sugar intake, with confectionary a close second. At risk families tend to treat fizzy or sugary drinks as the default drink to go with and between meals, often with unlimited access
- This behaviour is about reducing the *added* sugar in food and drink, not natural sugars which occur in fruit or milk
- There is much confusion over 'natural sugars' e.g. in fruit. Parents will use the existence of 'good sugars' to justify allowing all kinds of sugar to their kids
- Any association we make between sugar and obesity or ill health should link excess sugar with energy which in turn could lead to stored fat in the body if not burned off, and ultimately to diseases like heart disease and type 2 diabetes
- Mums tend to picture sweets and bowls of sugar as the enemy and tend not to think about the hidden sugar in food and drink
- There is nothing inherently wrong with fizzy drinks from a snacking perspective (carbon dioxide doesn't make you fat!), it is the sugar in them, rather than whether they are fizzy or not – so use the term 'sugary drinks'. This also avoids dental health issues associated with fizzy drinks
- If promoting fruit juice, it should be unsweetened
- If promoting milk, under 2s should have full-fat milk, ages 2 – 5 should have semi-skimmed milk if consuming a varied diet, and over 5s should have semi-skimmed, 1% or skimmed, assuming they have a varied diet
- Asking kids to give up things they like is regarded as too big a compromise and can be seen as borderline cruel! Hence swapping, which is less about denial and more about substitution
- Sugar Swaps can make a significant, but not huge, difference to diet – be careful not to overclaim

# 5 A DAY

- Five a day should be written in lower case when in our title font **5 a day** and then in capitals (5 A DAY) when in text
- It has been estimated that eating a variety of at least five portions of fruit and vegetables a day on average could lead to reductions of up to 20% in overall deaths from chronic diseases such as coronary heart disease, stroke and some cancers
- It has been estimated that diet might contribute to the development of one third of all cancers, and that a healthy diet is the second most important cancer prevention strategy, after reducing smoking
- Fruit and veg is only one part of a healthy diet, so we cannot overclaim health benefits. Just eating more fruit and vegetables won't help control weight unless it squeezes out less healthy foods or provides an entry point to other healthier behaviours
- There is widespread awareness of the '5 A DAY – Just Eat More Fruit & Veg' message, but that doesn't mean everyone's doing it. We need to be continually asking the question 'Have you and your kids eaten their five portions of fruit and veg today?'
- It's important for the audience to understand the health benefits of 5 A DAY and also how to go about getting them each day. E.g:
  - Understanding 'what counts' towards your 5 A DAY i.e. portion size
  - Fresh, frozen, chilled, canned, 100% juiced and smoothies all count, as do dried fruit and veg
  - What's more there's no limit to how much fruit and veg you can consume – so the more you eat, the better
  - It's also good to know that you should eat a variety of fruit and vegetables to get the maximum nutritional benefits. This is because they each contain different combinations of fibre, vitamins, minerals and other nutrients
- Many parents will use confusion over portion size to excuse not complying with 5 A DAY. We can't qualify what portion sizes are for each item, but equally we should suggest that it's about finding more ways to eat more fruit and veg, rather than worrying about precise amounts. However, as a guide, a portion is roughly a handful

**Here's some useful advice to counter some commonly perceived barriers:**

**1 Children's fussiness** – the main issue may be to get them to eat anything healthy at all – one portion of fruit or veg per day might be seen as a victory. Fussiness can be overcome via many of the tips, such as subtly adding grated or chopped veg to sauces and stews etc or blending fruit (and veg such as carrots) into smoothies. It's about introducing the child to a variety of fruit and veg and keeping on trying. There are so many tastes, colours and textures to choose from

**2 Cost** – some mums understand little about buying fruit and veg in season i.e. when it's cheaper. There are other alternatives to buying fresh produce e.g. canned, frozen and dried, which can be just as nutritious. They're versatile, easy to store and can be cheaper and potentially have less waste. Parents can also look out for supermarket 'value' ranges or stock up on special offers. This can help overcome stereotypes of too posh, organic, goody goody, not for people like us etc

**3 Negative perception of eating frozen, tinned and dried fruit and veg** – the cost barrier is exacerbated by a widespread belief that frozen, tinned and dried food is not as healthy as fresh. Frozen fruit and veg can be equally if not more beneficial, and canned food is not necessarily less healthy

Do need to caveat recommendations of canned fruit and veg by mentioning the need to watch out for added sugar or salt e.g. shop for canned fruit and veg in its own juice, which is healthier than eating fruit canned in sugary syrup or veg canned in added salt and sugar

**4 Lack of cooking skills and ideas/don't know how** – many also acknowledge limited cooking skills, are unsure how to prepare vegetables 'from scratch' and are hesitant to try new things; so prefer processed products. Simple shopping lists and recipes can help here

- Be specific about the nutritional content of fruit and veg e.g. say 'packed with/a source/a good source of *essential vitamins*, minerals and fibre', rather than 'packed with/a source of *good stuff*'
- Fruit contains natural sugar content so we can't refer to it as low or no-sugar – what it hasn't got is 'added sugar'

- Dried fruit can be high in natural sugar so it's best to eat it in small portions (e.g. a handful rather than a big bag) as a snack or part of a meal
- It's preferable not to depict dried apricots as these often come in large packs and are high in sugar. Rather refer to small bags of dried fruit/handful of raisins
- There is some concern about choking on small items like cherry tomatoes but it's OK to use these items in moderation
- Potatoes are not included as they are counted as a starchy food. However it's important to note they are still a healthy part of a balanced diet – they just don't count in your 5 A DAY
- Baked beans and other beans and pulses are included in 5 A DAY, but ideally they should be lower salt/sugar variety
- If suggesting dunking vegetables in a dip, caveat that the dip should be lower fat

## Meal Time

- This behaviour effectively covers two areas – not skipping meals and eating at regular, structured times. The emphasis depends on which at risk group you're addressing
- There is no evidence that three meals is the 'right' number so we have gone for a regular meal time message. However experts have told us having regular meals helps ensure children don't eat too many snacks and that they are more likely to eat essential nutrients
- Three structured meals a day is a guide, not a mandate, suggesting that kids don't miss any meals or double up and that they have a routine
- Cannot be too prescriptive with the specifics of this behaviour. All advice must fit within a family's lifestyle. That said, families may need to make some adjustments to their lifestyles to accommodate this behaviour – e.g. allowing more time in the morning

- Breakfast is a great opportunity to cross-reference 5 A DAY
- Can't authoritatively say that breakfast is the most important meal of the day (all meals are important)
- Eating together can help inform kids of better eating patterns and nutrient intake if they observe parents eating a balanced diet. However it may often not be practical in terms of timing
- Doubling-up of meals appears to be most common after school amongst children who go back to a friend/carer/grandparent
- Structured meals help reduce the risk of 'grazing' and excessive snacking throughout the day. Although note that the term 'grazing' is not understood. (See also comments on what constitutes a snack in the Snack Check section)
- There are some issues with the word 'meal' in connection with lunchtime – sandwiches, meals that are not served on a plate, and school lunches are not necessarily seen as 'meals'
- Avoid the phrase 'eating up', as may suggest eating lots
- Care needs to be taken with the concept of 'eating up well'. Parents are happy when children 'eat well' and clear their plates and regular structured mealtimes with limited snacking makes this more likely. However, see comments in Me Size Meals regarding overfeeding and encouraging kids to eat up
- Can't suggest that government is dictating what time to eat e.g. by using a clock in the visuals
- We need to include messages about school lunches where we can because eating school lunch is the easiest and cheapest way to guarantee children are getting a healthy and nutritious meal

- By law, any snacks and meals served in primary and secondary schools have to be healthy. This includes breakfast, mid-morning break, tuck shops, vending machines, after-school clubs as well as lunch
- The cost of a school meal should not mean that children miss out. If families are on Income Support or receive certain other benefits their child is entitled to a free school lunch

## Snack Check

- Advice is to limit kids' snacking, not eliminate it completely – parents get very agitated about what they see, or fear, is a complete ban
- It therefore helps to acknowledge that a little snacking is allowable
- Many parents don't fully monitor their family's snack consumption. Many are surprised when they count up a week's snacks. So it's key to this behaviour for parents to start monitoring (hence the visual of a wall chart)
- Snacks can be interpreted by parents as anything from a biscuit to a quick fish and chips meal. Either way, the advice is to keep a check on it
- A snack that is more like a meal falls into the Meal Time advice – i.e. parents should try to stick to structured mealtimes rather than 'on the go' eating or interim meals
- As with 5 A DAY, parents will try to use confusion over what constitutes a snack to absolve themselves from the behaviour
- **2 Snax Max** – many parents have introduced '2 Snax Max' to help them keep track of their children's snacking. However, this is not official government guidance and so should not be pulled out as a headline on it's own
- The ideal advice is to try to move onto healthier snacks, such as fruit or nuts. However, like for like swaps are likely to be more readily accepted and useful e.g. lower fat/sugar options. Additionally, it is more realistic (and the advice is more likely to be heeded) if parents 'allow' a limited amount of less healthy snacking, provided it *is* limited

- Avoid using 'good' and 'bad' as descriptors for foods. For example, say 'high in fat/sugar/salt' rather than 'full of things that are bad for us'
- If recommending nuts, should recommend unsalted and in moderation as they can be high in fat. Additionally whole nuts are not recommended for children under the age of five
- Note that we don't want to actively promote unlimited snacking on fruit. There are dental health issues and we would rather families relied on regular structured meals. Fruit should therefore be suggested only as an alternative to a less healthy snack
- Dried fruit and fruit juice are good ways of getting 5 A DAY but they are high in sugar so shouldn't be encouraged for all snacks. Talk about a handful of dried fruit so as not to encourage eating large amounts
- Parents welcome a sense that other families are doing this too – they don't like to feel that their child will be 'left out' at school if not provided with snacks
- There is considerable overlap of snacking with treating and rewarding good behaviour. This is a complex and emotionally laden area. Our advice is to a) be aware when you are doing this and how often b) find other (non food) forms of reward

# Me Size Meals

- This is an extremely emotionally charged area as it touches on Mum's role as a 'good parent' and how they express their love for their kids (see also Snack Check)
- There is violent rejection of the concept of depriving children of food or serving them less
- Parents massively overestimate the danger of children not being fed enough 'and running out of steam'
- Hence this behaviour needs to be carefully positioned as ensuring kids are served the appropriate amount. The issue is about feeding children more than they need
- There is no absolute guidance on portion sizes for children and we currently can't provide a portion indicator. So we can only recommend children have smaller portions than adults
- Appropriate amount is relative to the energy needs of the child – the smaller they are the less they need. We use age as a simple short-hand to this but there is not a direct and proportional link to age and energy needs/portion size
- Need to avoid relating portion size to physical size of child – this would encourage giving fatter children bigger portions. Rather relate portion size to age
- Parents connect feeding children up with helping them grow. But there is little evidence that feeding a small child will help them to grow taller (but will make them more likely to put on excess weight)
- Cannot be highly specific about the relationship between height/age and portion size – children have relatively higher energy requirements to adults so a ten year old will need slightly more than half a 20 year old's portion

- There is no evidence to suggest that a child's fist is a specific measure of how much food they should be served; nor is there a relationship between fist size and stomach size. However the relative size of fists is a good guide – their fist is much smaller than yours, as their stomach is much smaller than yours
- Advice on portion size should be put in context of the size comparison between children and adults. There are issues with serving siblings different sized portions, as the younger siblings can feel left out or jealous
- Parents tend to have a learned cultural behaviour of nagging their children to eat up. A clean plate is highly regarded by parents and, dangerously, children are often rewarded for eating up and chastised for not. Rather, children actually start out when they're young with the ability to judge just the right amount of food they need to suit their appetite but we 'train' them out of it and actually teach them to over-eat
- This behaviour advocates not nagging children to eat up, but rather to achieve a clean plate by virtue of serving an appropriate portion in the first instance

## Cut Back Fat

- We all need some fat as part of a balanced diet and shouldn't cut it out completely – it's just that we tend to eat too much. Some high fat products have other necessary nutrients which contribute to dietary need e.g. calcium in cheese. While there are other sources of calcium in the diet, milk and dairy products (like cheese) can provide useful amounts of calcium for a growing child
- There is no difference between saturated and unsaturated fat in terms of calories, so they are the same from an obesity angle. Equally salt is not an obesity issue. However we need to limit our saturated fat and salt intake for a healthy heart/ lower blood pressure so our messages are consistent with this. The FSA's sat fat campaign is a good point of reference
- Be careful with the multiple meanings of fat. Be clear that we mean 'fat in food', not 'fatness'

- Parents understand the need to cut down on fat, but are not well informed on how to do this (not least because their kids are likely to have a preference for higher fat foods). Emphasis on this behaviour needs to be on ways of cutting fat
- There is a stereotyping of foods that are high fat – chips, pizza, burgers – with little association of fat in other foods, particularly non-savoury – biscuits, cakes, confectionary etc
- There is an assumption that the only way to cut back fat is to eliminate fatty foods from the diet and little awareness that things like method of preparation and cooking can have an effect
- Cannot be exact on the fat reduction from cutting visible fat off bacon – can say that cutting off bacon fat reduces its fat by about a half
- Lean meat means meat with skin and visible fat removed
- Can't just focus on food labelling such as traffic light system, as other systems also in place – must talk about food labelling in a more generic sense
- NB there is a long list of suggestions and tips for this behaviour, many of them not easily categorised

# 60 Active Minutes

- 60 is the minimum recommendation. Generally the more active kids are, the more health benefits they'll receive
- Parents overestimate and overstate the amount of exercise their kids get
- In particular, there is a tendency to assume kids get lots (or all of) their activity at school. This may not necessarily be true and can lead to low levels of activity after school and at weekends
- Need to stress any activity counts and that it is 60 accumulated minutes throughout the day, not in one hour long chunk
- It's good to encourage parents to break activity up through the day as it avoids kids being sedentary for too long
- Need to be clear that this is activity, not 'exercise' or sport
- Suggest that the required level of activity is anything that leaves kids hot, with raised heart beat or breathing faster/deeper
- Parents need some reassurance that this level of activity is natural and healthy. There is some concern about 'wearing them out'
- Caveat bike riding recommendations with taking the necessary safety precautions
- As well as the long-term benefits of avoiding disease in future, there are many motivating short-term benefits to activity e.g. fun, socialising, building children's confidence, creating shared family memories
- Parents can get involved too – kids love running around with mum, dad, sisters, brothers and friends
- Other physiological benefits include promoting good bone health (by stressing bones) and muscle growth

# Up and About

- Evidence indicates that excessive sedentary behaviour is more of a risk factor in obesity than insufficient exercise. i.e. a child could do their 60 Active Minutes, but still be at risk if they are inactive for the remainder of each day. They need to move around through the day, even if not to a level that increases their heart rate
- Parents need to distinguish between relaxing/chilling out (positive) and 'vegging out' (negative)
- Note that this behaviour is not advocating heavy activity; simply moving about the home qualifies
- When advocating 'feet first', position it as just as/more convenient given the length of the trip, rather than using exercise as the primary motivation
- Refer to screen time (which encompasses TV and computers), rather than just TV. (But note that we cannot be too damning of computer usage as much of it could be regarded as educational)
- Some families are setting a limit of '2 hours max' of screen time a day as a good way of keeping kids healthy. However, this is not official government guidance and so should not be pulled out as a headline on it's own
- Joint family activities are key to this habit to make it more enjoyable