

School-based physical activity programmes have positive effects

Clinical question	How effective are school-based physical activity programmes for promoting physical activity and fitness in children and adolescents aged 6-18 years?
Bottom line	There is good evidence that school-based physical activity interventions are effective in increasing duration of physical activity, reducing blood cholesterol and time spent watching television; and in increasing VO2 max (maximal oxygen uptake or aerobic capacity; reflects the physical fitness level of an individual and generally increases as fitness levels improve). These interventions are not effective in increasing the percentage of children and adolescents who are physically active during leisure time, or in reducing systolic and diastolic blood pressure, body mass index and pulse rate. At a minimum, a combination of printed educational materials and changes to the school curriculum that promote physical activity result in positive effects.
Caveat	Limitations of these studies included lack of blinding of outcome assessors, and the use of self-report for outcome measures as opposed to more objective measures. Due to the level of variation among studies, meta-analysis was deemed inappropriate. The long term effects of school-based interventions are unknown at this time, given all but 1 study evaluated outcomes in the very short term (eg, 6 months or immediately post intervention).
Context	The World Health Organization estimates 1.9 million deaths worldwide are attributable to physical inactivity. Chronic diseases associated with physical inactivity include cancer, diabetes and coronary heart disease. Current evidence suggests school-based physical activity interventions may be effective in the development of healthy lifestyle behaviours among children and adolescents that will then translate into reduced risk for many chronic diseases and cancers in adulthood.
Cochrane Systematic Review	Dobbins M et al. School-based physical activity programs for promoting physical activity and fitness in children and adolescents aged 6-18. Cochrane Reviews 2009, Issue 1. Article No. CD007651. DOI:

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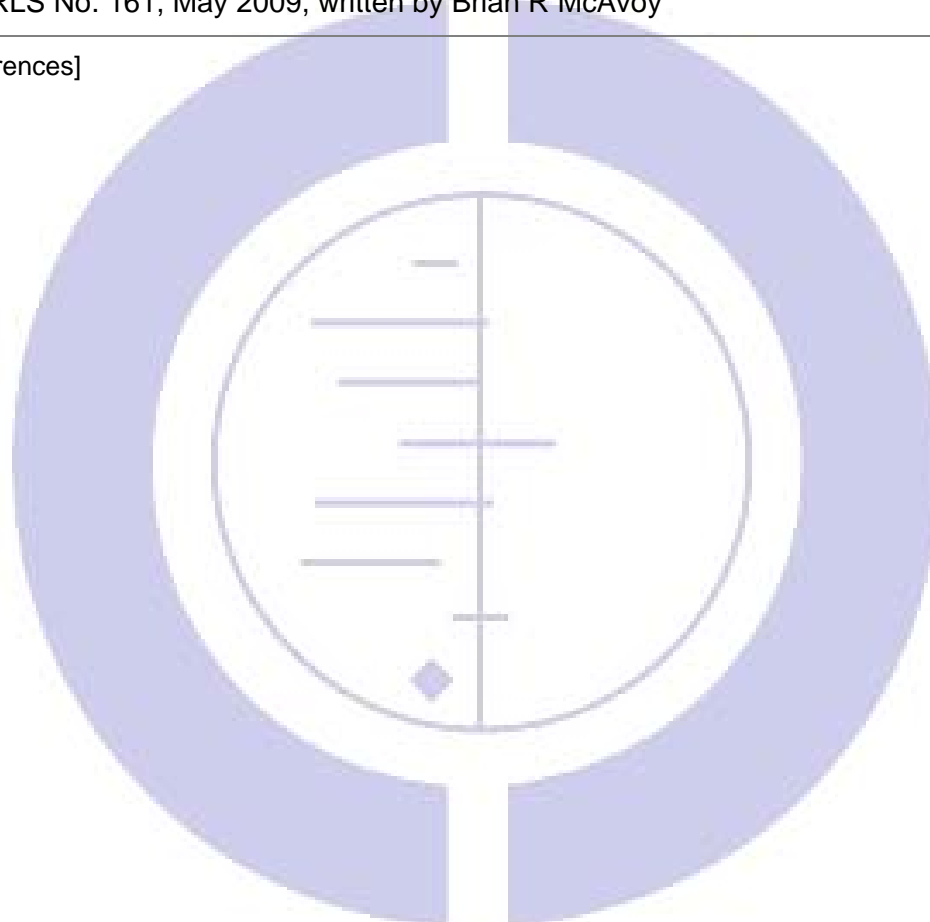
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10.1002/14651858.CD007651. This review contains 24 studies involving 25,938 participants.

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[References]



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