Factors influencing sedentary behaviours

While sedentary behaviours can occur in a variety of ways throughout the day, screen-based activities, ie, television (TV) and computer use, have been the most widely studied. Factors known to be associated with sedentary behaviour are listed below. However, researchers are unable to say if the factors below cause increases in sedentary behaviour. All that is known is they are general present alongside sedentary behaviours.

Adults

Biological factors

- Sedentary behaviour generally increases with age and rises sharply from age 70 years onward.
- It is difficult to establish whether men or women are generally more sedentary.
 - Women are more sedentary up the age of 40 years.
 - In those aged 60 years and above, men are more sedentary.

Demographic factors

- Screen-based sedentary behaviour in leisure time is greatest in low socio-economic groups.
- There is currently no evidence on how social, cultural and environmental factors influence sedentary behaviours.

Children

Biological factors

- Sedentary behaviour increases throughout childhood and into adolescence.
- In young children TV and computer use do not differ between boys and girls.
- During adolescence, boys typically spend more time than girls watching TV or using a computer (especially playing computer games).

Demographic factors

- Sedentary behaviour tends to be higher in low socioeconomic groups.
- Levels of TV viewing are typically higher in 'non-white' ethnic groups.

Social/cultural factors

- Young people tend to have high levels of sedentary behaviour if their parents or siblings also have high levels of sedentary behaviour.
- Having more TVs or computers within the home and having a TV in the bedroom are linked with higher use.
- Parental rules regarding TV and computer use are connected with lower levels of sedentary behaviours in young people.

Implications for practice

Everyone should try to learn about sedentary behaviour and its consequences. Practitioners should aim to reduce these behaviours both in themselves and in those they work with. Robust monitoring and evaluation should be built into local programmes to help develop the evidence base on effective interventions to reduce sedentary behaviours.

Commissioners should:

- commission interventions aimed at reducing sedentary behaviour, particularly focusing on settings and age groups where there is greatest potential to reach high numbers of people who are sedentary for extended periods of time, for example programmes which focus on the workplace or older adults
- commission family and home-level interventions to help reduce sedentary behaviour in children and young people.

Policy makers should:

- introduce policy measures to help reduce sedentary behaviour and its potential health risks
- make sedentary behaviour reduction a standard policy item in guidance documents on health
- assess in advance the intended and unintended impacts any policy proposal is likely to have on sedentary behaviour

- provide educational opportunities on sedentary behaviour for different professional groups
- support and encourage employers to minimise sedentary behaviours in employees, including regular breaks from sitting at a computer
- support and encourage schools to consider how they can reduce extended periods of sitting for pupils.

Practitioners should:

- work to minimise the risk and provide strategies to reduce sedentary time in their target audience
- educate all age groups in the potential health risk of sedentary behaviour
- encourage regular active breaks be taken during work and school time
- should focus interventions on times of day when sedentary behaviours are mostly likely to compete with physical activity, eg, after school/work or weekends
- work with families to encourage healthy screen viewing habits, such as setting quotas in screen-time or removing TVs or video games machines from bedrooms
- encourage parents to be good role models by reducing their personal sedentary behaviours.

References

Factors influencing sedentary behaviours

Health Survey for England 2008. Volume 1: Physical activity and fitness. Leeds: The NHS Information Centre for health and social care; 2009. Matthews CE, Chen KY, Freedson PS, Buchowski MS, Beech BM, Pate RR, et al. Amount of Time Spent in Sedentary Behaviors in the United States, 2003-2004. Am J Epidemiol. 2008 04/01;167(7):875-81.

Stamatakis E, Hillsdon M, Mishra G, Hamer M, Marmot M. Television viewing and other screen-based entertainment in relation to multiple socioeconomic status indicators and area deprivation: the Scottish Health Survey 2003. J Epidemiol Community Health. 2009 09;63(1470-2738; 0143-005; 9):734-40. Marshall SJ, Ramirez E. Reducing Sedentary Behavior: A New Paradigm in Physical Activity Promotion. Am J Lifestyle Med. 2011;DOI: 10.1177/1559827610395487.

Gorely T, Marshall SJ, Biddle SJ. Couch kids: correlates of television viewing among youth. Int J Behav Med. 2004;11(1070-5503; 1070-5503; 3):152-63. Hinkley T, Salmon J, Okely AD, Trost SG. Correlates of sedentary behaviours in preschool children: a review. Int J Behav Nutr Phys Act. 2010;7(1479-5868; 1479-5868):66.

Cillero IH, Jago R. Systematic review of correlates of screen-viewing among young children. Prev Med. 2010 07;51(1096-0260; 0091-7435; 1):3-10. van der Horst K, Paw MJ, Twisk JW, van Mechelen W. A Brief Review on Correlates of Physical Activity and Sedentariness in Youth. Med Sci Sports Exerc. 2007 08;39(0195-9131; 0195-9131; 8):1241-50.

Pate RR, Mitchell JA, Byun W, Dowda M. Sedentary behaviour in youth. Br J Sports Med. 2011;45:906-13. Salmon J, Tremblay MS, Marshall SJ, Hume C. Health Risks, Correlates, and Interventions to Reduce Sedentary Behavior in Young People. Am J Prev Med. 2011;41(2):197-206.

🔰 @ssehsactive

This resource was written and produced by the British Heart Foundation National Centre for Physical Activity and Health. It was last updated July 2012.

T: 01509 226421 E: ssehsactive@lboro.ac.uk

www.ssehsactive.org.uk