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'I think being healthy's about eating broccoli...maybe sometimes tomatoes too' (Milly, aged 5)

Introduction:

Only 21% of boys and 16% of girls meet the minimum recommended guidelines for physical activity (PA) in the UK (Scholes and Mindell, 2013) and the UK Government has targeted the use of 'sport' as a potential solution to the problem (HMGov.Cabinet Office, 2015). Yet much of the justification for interventions to encourage activity lacks consideration of children's perspectives.

It has been suggested that cultural and social capital, i.e. the unwritten conventions of social and cultural engagement that influence behaviours (Putnam, 2000) could potentially also affect health behaviours and may be key features in establishing support networks to encourage physical activity (Everley and Macfadyen, 2015).

If we can gain an understanding of the nature of children's engagement in physical activity at a young age, it may be possible to establish interventions that ensure healthy active lifestyles are maintained throughout childhood.

Aims:

Building on previous research into the place of social and cultural capital in physical activity and health behaviours (Everley and Macfadyen, 2015) this study had three key purposes:

- Understand young children's perceptions of physical activity and health
- Identify key factors that influence engagement in physical activity and other health behaviours
- Identify the role that different forms of capital might play in children's engagement in physical activity

Method:

Facilitating children's ability to convey meaning (Everley and Macfadyen 2015), this study utilised children's drawings and play dough models to gain an understanding of perceptions.

Emphasis placed on individual expression rather than artistry or creativity ensures an intuitive and then conscious process that facilitates expression and represents the mental construction of meaning.

Constructing narratives in association with the presentation of arts based data decodes meaning and facilitates interpretation. Using multiple approaches enabled the discussion regarding engagement with physical activity to be revisited and developed in terms of depth and complexity.

28 primary school children (aged 5-6 years in year one, 12 girls and 16 boys) were involved in the research which therefore involved three distinct, interrelated phases that utilised the generation of artefacts and narrative construction of meaning.

The three phases of research:

Phase 1

- Activity: Children drew themselves being physically active
- Purpose: Empowering children to identify what is important for them in being physically active without researcher intervention – free expression, intuitive, expressive presentation of meaning

Phase 2

- Activity: Children were interviewed individually about their drawing and understanding of physical activity and health
- Purpose: Enables exploration of understanding of children's perceptions centring on the initial production of an artefact by children themselves hence giving them control of the research process

Phase 3

- Activity: Children modelled a representation of 'health' individually with the researcher whilst constructing a narrative around the process and their understanding of the concept
- Purpose: Giving insight into though processes associated with the concept of physical activity and health – use of modelling clay allows the construction and reconstruction of an artefact that is associated with process over product

References:
 Everley, S and Macfadyen, T (2015) 'I like playing on my trampoline; it makes me feel alive.' Valuing physical activity: perceptions and meanings for children and implications for primary schools, Education 3-13, DOI: 10.1080/03004279.2015.1069367
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 Putnam, R. 2000. Bowling Alone: The Collapse And Revival of American Community. New York: Simon and Shuster.
 Scholes, S., and J. Mindell. 2013. "Health Survey for England." Accessed <http://www.hscic.gov.uk/catalogue/PUB13218/HSE2012-Ch3-Phys-act-child.pdf>.

Findings

Descriptive data focussed on the location and type of activity with themed data focussing on sensory experiences and relationships that are integral to physical activity.

Descriptive data:

- Physical activity largely took place within the home or other environments associated with the family
- Activities were greatly varied with no single activity dominating in popularity
- The majority of activities were associated with unstructured play/lifestyle engagement

All children had a positive orientation towards physical activity with drawings featuring smiles and other environmental indicators of such as the sun shining - including in instances where drawings were of an indoor activity.

Most children identified themselves as active in social situations (n=26) with 17 children confirming that they were physically active with other members of their family. In particular, the nature of their relationship with parents and extended family was central to their engagement. Despite their age, children also indicated the role that they might play in influencing younger siblings.

Children largely associated the concept of 'health' with diet rather than physical activity and in particular, all children identified fruit and vegetables as an essential part of being healthy.

Table 1: Location of engagement in physical activity:

Location	No. children
Home	11 (8 in garden, 3 indoors)
Park	6
Beach	3
School	3 (1 in the playground, 2 in physical education lessons)
Swimming pool	2
Grandparents' home	2
Sports club	1

Themed data:

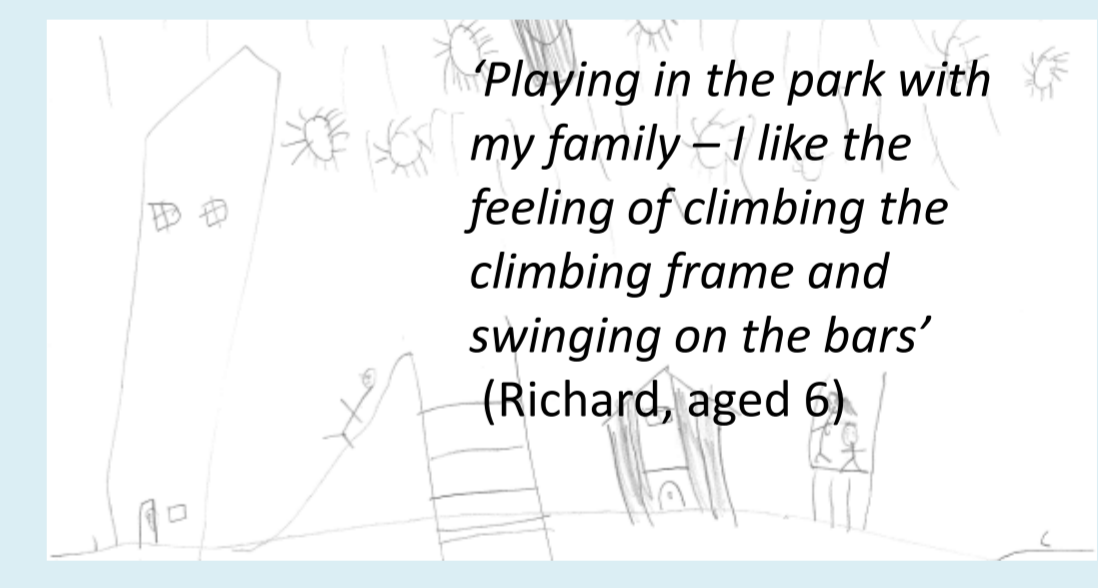
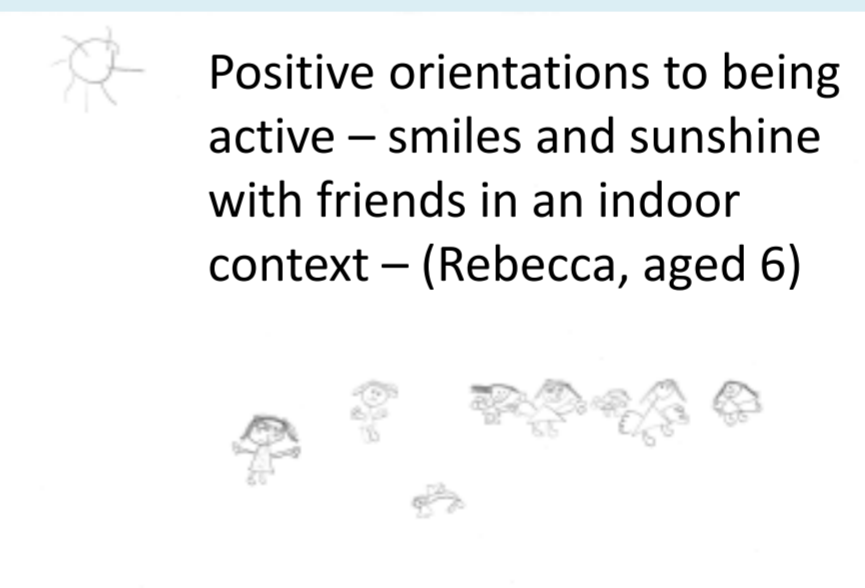
Experiential themes focussed on:

- Positive sensory experience
- Interactions with environment
- Social interaction with family

'I love going under water with my goggles – everything looks beautiful when you're under water' (Luke, aged 6)

With the key locations of physical activity as being within the family home, extended family home or other family oriented environments, it is unsurprising that the dominant theme for engagement in physical activity and health behaviours centres on family influence.

Nielsen et.al. (2012) identified the significance of the social environment as affecting children's engagement in physical activity, and for these children this clearly came predominantly from family. What is notable however, is that the engagement in physical activity was dependent on family interactions and did not appear to be subject to either ability or economic capital.



Discussion and conclusion:

Emphasis on adult designed, sports oriented solutions to children's inactivity is potentially culturally, socially and economically exclusive (Everley and Macfadyen, 2015). This study illustrates, that, prior to children becoming engaged in formalised sporting activities, they positively enjoy engaging in informal, play oriented physical activity that they socially engage in with their families, relatively unaffected by economic status.

Families play an essential role in the initial development of physical social and cultural capital. This is not a new concept, but what has yet to be explored is the way in which we might effectively utilise the development of this capital to encourage longer term engagement in physical activity. Therefore, findings from this study would indicate there is a need to:

- Explore the complexity of physical activity habitus of children in order to effectively target policy drives
- Consider the role that the development of social capital outside of school can impact on relationships within school in support of health behaviours
- Ensure that policy development adequately considers the subjective lifestyle experiences of children