



Parental Perceptions of the Canadian Sedentary Behaviour Guidelines for the Early Years

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Summary

This article summarizes a study of parental perceptions of the Canadian Sedentary Behaviour Guidelines for the Early Years and presents potential strategies to effectively communicate the guidelines to parents, to increase their adoption.

Background

Minimizing sedentary behaviour, in particular screen time, in the early years is important for healthy growth and development of children (LeBlanc et al., 2012). One response to this identified health issue has been the development of the first Canadian Sedentary Behaviour Guidelines for the Early Years, released by the Canadian Society for Exercise Physiology in 2012 (Tremblay et al., 2012).

The guidelines recommend minimizing prolonged sitting or being restrained (e.g., stroller, high chair) for more than one hour at a time. Additionally, for children under the age of 2, screen time is not recommended and for children aged 2 to 4 years, screen time should be limited to under 1 hour per day (Tremblay et al., 2012).

Recent national data tells us that only 18% of Canadian children aged 3 to 4 years met the screen time limitations recommended in the guidelines (Colley et al., 2013).

To find out how the guidelines could most effectively be communicated to parents to increase adoption, this study sought to examine parental perceptions of the new guidelines.

Methods

Parents with a child, aged 4 years or less, who attends a child care centre were purposefully recruited from child care centres that largely served professionals in Edmonton, Canada. Seven semi-structured focus groups (FG) with 2 to 5 parents were conducted from August to November 2013. Participants were given the Canadian Sedentary Behaviour Guidelines information sheet to review (Tremblay et al., 2012). A total of 27 parents participated.

Findings

Six themes that addressed the study objective were identified:

1) General impressions about the guidelines

Overall, parents thought the guidelines were easy to understand and helpful. However, parents experienced feelings of guilt after reading the guidelines and described several barriers to meeting the guidelines. For example, one parent stated, "I know my kids sometimes watch more TV than that, because I need to get stuff done. So I immediately felt bad" (FG6).

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2) Is all sedentary time created equal?

Additionally, there was some confusion about the non-screen-based sedentary behaviour recommendation. Some parents thought that the guidelines painted all sedentary behaviour as “bad”. One parent stated, “Reading is a sedentary activity, and I think reading does enhance learning” (FG4).

3) Sometimes it's just not possible: we need the “Electronic Babysitter”

Parents also described the need to rely on sedentary behaviour (especially screen time) in order to accomplish daily tasks. One parent explained, “When my husband's working, I've got three kids and I'm trying to make supper, so [the television] is my babysitter...” (FG1).

4) Tech-savvy tots and the ubiquity of technology

Additional barriers to limiting screen time were the prominent presence of television and electronic devices in the home and children's ability to use these devices. As one mother said, “...my son is four and he knows the password for my phone and he can get on the Netflix app...” (FG4). Another key point that emerged was the importance of parental modeling, as parents described their own reliance on and use of screen technology.

5) The weather

Edmonton's cold climate also acted as a barrier to achieving the guidelines. As one parent stated, “It says take children outside every day. We do try to do it in the winter, but it's just too cold” (FG4).

6) In their own words: what parents need and want


Parents expressed they would like the guidelines communicated to them via a pediatrician. Parents emphasized the importance of communicating the guidelines to them early (i.e., during pregnancy) because screen time habits are difficult to break once they are set. As one parent described, “If I had heard [about the guidelines] from our pediatrician from the very beginning, then I would've just totally gone along with it” (FG6).

Parents also suggested communicating the guidelines positively and emphasizing what parents could do instead of what they should not do, so they are not “turned off”. Parents thought emphasizing the benefits of children's cognitive and social development was particularly important. Further, many parents expressed a need for more specific ideas and strategies to be communicated along with the guidelines, to increase their capacity for adopting or meeting them.

Practical Implications and Conclusion

Overall, our findings suggested:

- the most effective way to boost adoption of the guidelines may be to offer supplementary messages to parents about the benefits to children's cognitive and social development that may be realized by meeting the guidelines;
- that providing the guidelines to parents early is important; and
- that parents are open to receiving more practical ideas and strategies for minimizing sedentary behaviour in both themselves and their children.

In our view, these findings will be helpful in future revisions of the guidelines and can be useful to people and groups who are currently disseminating the guidelines. Future research is needed with other demographic groups of parents to confirm and potentially build upon these findings. 

Key Terms

Sedentary Behaviour: Any waking behaviour characterized by low energy expenditure while in a sitting or reclining posture (Sedentary Behaviour Research Network, 2012).

Screen Time: Specific types of sedentary behaviours that are screen-based, e.g., television, computers, and electronic games.

Early Years: Children aged birth to 4 years.

About the Authors

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For More Information

- Carson, V., Clark, M., Berry, T., Holt, N. L., & Latimer-Cheung, A. E. (2014). A qualitative examination of the perceptions of parents on the Canadian Sedentary Behaviour Guidelines for the Early Years. *International Journal of Behavioral Nutrition and Physical Activity*, *11*, 65-72. doi:10.1186/1479-5868-11-65