

Sports

Introduction

Adequate exercise is of major importance for healthy development in childhood and adolescence. Children have a natural urge for movement which can be met through both everyday physical exercise as well as targeted sport exercises. Sport can be referred to here as a specific form of physical activity, which is often of a playful or competitive character and which is performed with the aim of sustaining or increasing performance (Caspersen et al. 1985; Bouchard et al. 2012). Depending on which type of sport is played, totally different types of motor skills can be trained, such as strength, endurance, speed and responsiveness. There are proven positive effects for the cardio-vascular system and the muscular-skeletal apparatus (USDHHS 1996; Janssen, LeBlanc 2010). In addition, sport contributes to personality development and general well-being (Eime et al. 2013). Through membership in a sports association children and adolescents can establish contacts outside of their family, child day care facility and school and acquire important social skills (Diehl et al. 2014). Also sport can contribute toward integration (BMI 2010). The health risks of sport include injuries and complaints as a result of mis- and over-loading (DGSP 2013).

Indicator

Data with regard to the extent of physical activity is available in KiGGS Wave 1 pertaining to children and adolescents aged between 3 and 17 years. For children aged between 3 and 10 years a parent answered the question relating to sporting activity, whilst adolescents aged 11 and above were surveyed themselves directly. Sporting activity was surveyed by means of the question “Does your child/do you do any sport?” (Response categories: “yes”, “no”). There was no explicit consideration in the survey regarding sport in child day care facilities or school sport. In addition, questions were also asked regarding the type of sport, frequency and time spent doing sports activities. In this context it was also asked whether or not the respective sport was practised in a club (Manz et al. 2014).

The tables on the one hand show the proportion of children and adolescents that generally do sports and on the other hand report the proportion of children and

adolescents who are active in sports as part of a club. The respective prevalences are shown separately for girls and boys, as well as being stratified according to age and social status.

Key results

- ▶ More than three quarters (77.5%) of children and adolescents in Germany do sports, 59.7% are active in a sports club.
- ▶ Overall, boys are admittedly not more frequently active in sports than girls (78.8% v. 76.1%), however, they do significantly more frequently sports in sports clubs (62.5% v. 56.8%). This is in particular attributable to gender differences in the 14 to 17 year-old age group.
- ▶ Children between 3 and 6 years generally do sport less frequently and less frequently as part of a club than older children and adolescents. In addition, among girls in the 14 to 17 year-old age group there is a comparatively lower percentage active as part of a sports club.
- ▶ There is a significant relation between social status and doing sports among children and adolescents: the lower the social status, the lower the proportion of boys and girls who play sports or are active in a sports club.

Conclusion

Despite the increasing competition from other leisure activities, above all the diverse possibilities for the use of electronic media, it can be seen using the data from KiGGS Wave 1 that the vast majority of children and adolescents engage in sports activities even outside of child day care centres and school. In doing so, more than half of all girls and boys are active as part of a sports club. Due to changes in survey methods a comparison with the data of the KiGGS baseline, which was conducted from 2003 to 2006 can only be made with regard to club sport for the 3 to 10 year-olds (Lampert et al. 2007). However, no statistically significant changes can be determined (Manz et al. 2014). High levels of participation

in sports amongst 11 to 15 year-old school children is also confirmed by the results of the study “Health Behaviour in School-aged Children” (HBSC) 2009/2010 (HBSC-Team Germany 2011). The HBSC data also shows in agreement with the findings of KiGGS that boys of youth age are more active in sports than girls and that social differences exist to the detriment of adolescents from families with low social status. With this as a backdrop, measures specific to certain target groups to encourage sporting activity in childhood and adolescence should be implemented more.

Note: A detailed description of the study as well as explanations on the method are available on the KiGGS study website, www.kiggs-studie.de, and in Lange et al. (2014). Further results regarding sport can be found in Manz et al. (2014).

- führung, Stichprobendesign und Response. Bundesgesundheitsbl–Gesundheitsforsch–Gesundheitsschutz 57 (7): 747–761
- Manz K, Schlack R, Poethko-Müller C et al. (2014) Körperlich-sportliche Aktivität und Nutzung elektronischer Medien im Kindes- und Jugendalter. Ergebnisse der KiGGS-Studie – Erste Folgebefragung (KiGGS Welle 1). Bundesgesundheitsbl–Gesundheitsforsch–Gesundheitsschutz 57 (7): 840–848
- U.S. Department of Health and Human Services (1996) Physical activity and health: a report of the Surgeon General. USDHHS, Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Atlanta

Literature

- Bouchard C, Blair SN, Haskell WL (Hrsg) (2012) Physical activity and health. 2nd edition. Human Kinetics, Champaign
- Bundesministerium des Innern (2010) 12. Sportbericht der Bundesregierung. BMI, Berlin
- Caspersen CJ, Powell KE, Christenson GM (1985) Physical activity, exercise, and physical fitness: definitions and distinctions for health-related research. Public Health Rep 100 (2): 126–131
- Deutsche Gesellschaft für Sportmedizin und Prävention – Deutscher Sportärztebund (2013) Prävention von Überlastungsschäden im Kinder und Jugendsport. DGSP, Frankfurt am Main
- Diehl K, de Bock F, Schneider S (2014) Bedeutung der sportlichen Aktivität für Kinder und Jugendliche aus soziologischer und pädagogischer Perspektive. In: Becker S (Hrsg) Aktiv und Gesund? Interdisziplinäre Perspektiven auf den Zusammenhang zwischen Sport und Gesundheit. Springer VS, Wiesbaden, S 311–329
- Eime RM, Young JA, Harvey JT et al. (2013) A systematic review of the psychological and social benefits of participation in sport for children and adolescents: informing development of a conceptual model of health through sport. Int J Behav Nutr Phys Act 10: 98
- HBSC-Team Deutschland (2011) Studie Health Behaviour in School-aged Children – Faktenblatt »Sportliche Aktivität bei Kindern und Jugendlichen«. WHO Collaborating Centre for Child and Adolescent Health Promotion, Bielefeld; www.hbsc-germany.de (Stand: 01.09.2014)
- Janssen I, LeBlanc AG (2010) Systematic review of the health benefits of physical activity and fitness in school-aged children and youth. Int J Behav Nutr Phys Act 7: 40
- Lampert T, Mensink GBM, Romahn N et al. (2007) Körperlich-sportliche Aktivität von Kindern und Jugendlichen in Deutschland. Ergebnisse des Kinder- und Jugendgesundheits surveys (KiGGS). Bundesgesundheitsbl–Gesundheitsforsch–Gesundheitsschutz 50 (5/6): 634–642
- Lange M, Butschalowsky HG, Jentsch F et al. (2014) Die erste KiGGS-Folgebefragung (KiGGS Welle 1). Studiendurch-

Table 1
Sporting activity among 3 to 17 year-old girls according to age and social status

	Physically active		Sport in club	
	%	(95% CI)	%	(95% CI)
Girls	76.1	(74.0–78.1)	56.8	(54.2–59.2)
Age				
3 to 6 years	68.4	(64.5–72.1)	53.6	(49.0–58.1)
7 to 10 years	80.8	(76.9–84.1)	64.6	(60.2–68.8)
11 to 13 years	79.9	(76.1–83.3)	60.3	(56.0–64.4)
14 to 17 years	75.8	(72.0–79.2)	49.4	(45.9–53.0)
Social status				
low	62.0	(55.3–68.2)	36.0	(30.0–42.4)
medium	78.0	(75.8–80.0)	59.7	(56.9–62.5)
high	86.5	(83.9–88.7)	70.1	(66.5–73.4)
Total (girls and boys)	77.5	(76.0–78.9)	59.7	(58.1–61.3)

Table 2
Sporting activity among 3 to 17 year-old boys according to age and social status

	Physically active		Sport in club	
	%	(95% CI)	%	(95% CI)
Boys	78.8	(76.9–80.5)	62.5	(60.4–64.5)
Age				
3 to 6 years	63.0	(59.0–66.8)	48.5	(44.4–52.5)
7 to 10 years	82.7	(79.1–85.8)	73.5	(69.4–77.2)
11 to 13 years	85.3	(81.3–88.5)	65.9	(61.5–70.1)
14 to 17 years	84.8	(81.7–87.4)	61.9	(58.1–65.5)
Social status				
low	70.4	(64.3–75.8)	48.7	(42.3–55.2)
medium	78.8	(76.6–80.8)	62.2	(59.5–64.9)
high	87.7	(85.6–89.6)	77.9	(75.0–80.5)
Total (girls and boys)	77.5	(76.0–78.9)	59.7	(58.1–61.3)

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