

Cyflwynwyd yr ymateb i ymgynghoriad y [Pwyllgor Iechyd a Gofal Cymdeithasol](#) ar [Atal iechyd gwael - gordewdra](#)

This response was submitted to the [Health and Social Care Committee](#) consultation on [Prevention of ill health - obesity](#)

OB10 : Ymateb gan: Chwarae Cymru | Response from: Play Wales



Prevention of ill health-obesity consultation

1.1 Play Wales, the national charity for play in Wales advocates for the right and need for all children to play. Our key areas:

- raising awareness
- promoting good practice
- providing advice and guidance across all sectors.

1.2 Our work includes:

- Policy: Working with others to inform the development of policy and other children's play issues
- Information service: Promoting the value of children's play by providing timely and current information
- Advice and support: Providing specialist knowledge about all issues that affect children's play
- Workforce development: Contributing to the professional development of the playwork and play workforces.

1.3 We worked closely with the Welsh Government to develop its Play Policyⁱ, Play Policy Implementation Plan and on its groundbreaking 'Play Sufficiency' legislation. Section 11 of the Children and Families (Wales) Measure 2010ⁱⁱ places a duty on local authorities to assess and secure sufficient play opportunities for children in their area.

1.4 We also drafted the report for the Ministerial Review of Play Steering Group (2022) and accompanying background paper.ⁱⁱⁱ

1.5 Playing is the most natural and enjoyable way for children to be active, keep well and be happy. It is fundamental to children's wellbeing and healthy development as articulated in the Welsh Government Play Policy.

1.6 Play Wales is pleased to have an opportunity to input into this inquiry.

1.7 We welcome the opportunity to highlight the important role that playing has in supporting good health and wellbeing outcomes for children, both in the long term and in their everyday immediate experiences.

The importance of play

1.8 As the Ministerial Review of Play Background Paper points out, there is a well-established body of solid evidence that shows the contribution that play, particularly self-organised play, can make to children's long-term and immediate wellbeing, to their physical health and to their mental health and resilience.

1.9 In the context of this consultation, having opportunities to play is crucial for good health and wellbeing – being active through play helps children physically and emotionally, contributing to their health and happiness^{iv v}.

1.10 As concerns grow about the ‘epidemic’ of childhood obesity, anxiety and unhappiness, there seems to be an almost acceptance of the contemporary barriers that prevent and discourage children’s play. As the Ministerial Review of Play highlights, these barriers include:

- changes in neighbourhoods including increased car use, increased traffic, changing work patterns
- parental restrictions due to perceptions of neighbourhood safety
- an increase in participation in structured activities and educational demands
- increasing intolerance towards children and teenagers playing and meeting up.

Good environments for play and physical activity

1.11 The decline in children’s everyday freedoms can be directly linked to how the design and organisation of public space prioritises the economy over people, and adults over children. This is apparent in the increasing privatisation of land and in the way that cars, both moving and parked, dominate many streets and residential neighbourhoods. Because streets are seen as dangerous, children have been removed from them in the name of safety.^{vi} Over time, fewer and fewer children and adults are out and about on streets, leading to children being seen as ‘out of place’ on the street, and therefore magnifying other fears (stranger danger, bullying, harassment, violence, or parents’ concerns about being seen as negligent).^{vii}

1.12 This decline has been linked to the rise in contemporary concerns about children’s health and wellbeing such as obesity, lack of physical fitness^{viii} and poor mental health.^{ix}

Playing and being well – what the literature says

1.13 *Playing and being well*^x, a forthcoming publication from Play Wales, is an in depth review of recent research into children’s play, social policy and practice, with a focus on Wales.

1.14 The summary of *Playing and being well*^{xi} highlights the role that playing has on physical activity and obesity reduction. Evidenced benefits include:

- muscular strength, aerobic fitness
- increased agility, range of motion, flexibility, co-ordination and balance, and decreased fatigue, stress and depression
- lower blood pressure in children with hypertension (especially for aerobic activity), improvements in levels of cholesterol and blood lipids and in metabolic syndrome and bone mineral density.

1.15 In addition, movement helps increase blood flow and oxygen intake, and activates the lymphatic system, protecting against illnesses and allergies. Other benefits can include:

- protection from conditions such as cardiovascular disease, diabetes, cancer, osteoporosis, hypertension, depression and obesity
- improved mental health
- improved self-esteem and cognitive functioning.

1.16 The summary of *Playing and being well* discusses the clear connections with children's wellbeing:

'The joy, intrinsic motivation, sense of control and opportunity to experiment that is offered by physically active forms of play can promote physical literacy, developing motor skills, agility and competence as well as the motivation to continue with physical activity later in life.¹⁴⁷ Despite the broad range of physical, cognitive, social and emotional benefits, it is fair to say that the dominant benefit of "active play" is assumed to be for physical health, both through energy expenditure and physical fitness'

Things to consider

1.17 In a 2019 inquiry into physical activity in children, Senedd Cymru's Health, Social Care and Sport Committee expressed disappointment to hear that reductions in lunch breaks and break times are common in schools. It urged the Welsh Government to review how widespread this practice is in schools across Wales^{xii}.

1.18 Play Wales is a member of the expert group which produced The Active Healthy Kids (AHK) Wales 2021 Report Card.

1.19 The Active Healthy Kids Wales 2021 Expert Group makes recommendations that would contribute to overall physical activity for children^{xiii}:

- **Prioritising the views of children:**
 - Piloting and developing space assessment tools that put children at the centre of informing how local communities are being used and can be used to benefit own health and wellbeing.
- **Making the most of community assets:**
 - Schools, as a central resource for the local community, should consider the options to make their school grounds available for free play after school and at weekends.
- **Protecting play time:**
 - Schools should include a minimum amount of time for play and break time for all children.

- These breaks should not be withdrawn as part of behaviour management or to finish off work.
- Schools should offer a range of opportunities that allow for child-led play.

1.20 The Ministerial Review of Play Steering Group report makes similar recommendations for the Welsh Government to consider.

Conclusion

1.21 While the benefits of how playing improves general physical health are recognised it has been generally overlooked by mainstream health policy.

1.22 Four small-scale research studies, commissioned by Play Wales, have been undertaken since the commencement of the Play Sufficiency Duty^{xiv}.

1.23 The play sufficiency research studies have applied an assets-based approach to play sufficiency, by articulating throughout the reports that play is what children do when the conditions are right and establishing it as their way of maintaining their own health and wellbeing. This is most evident in the 2020 study^{xv}, which aligns the process of play sufficiency with the approach taken in the Well-being of Future Generations Act (Wales) 2015, the Social Services and Well-being Act (Wales) 2014 and by Public Health Wales, highlighting that ‘an assets approach identifies factors that support good health and well-being and relies on working locally with communities’.^{xvi}

1.24 Despite the obvious and well accepted views regarding the role that playing has in supporting good physical and mental health outcomes for children, we continue to advocate for a rights-based approach to policy making regarding play.

1.25 Interventionist programmes can be useful in encouraging more physical activity; however, they must be complemented by a focus on supporting children to be active participants in building their own resilience and resourcefulness.

1.26 We know that every aspect of children’s lives is influenced by their urge to play, and that self-directed, self-determined playing offered by quality play provision increases children’s opportunities to build their own resilience and support their own health and wellbeing.

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ⁱ <https://play.wales/wp-content/uploads/2023/03/Play-Policy.pdf>

ⁱⁱ <https://play.wales/play-policy-legislation/play-sufficiency>

ⁱⁱⁱ https://play.wales/news_category/ministerial-review-of-play-report-published

^{iv} UK Chief Medical Officers (2019) *UK Chief Medical Officers' Physical Activity Guidelines*.

^v Whitebread, D. (2017) Free Play and Children's Mental Health, *Lancet Child Adolescent Health*, 1(3), November, pp. 167-9.

^{vi} Shaw, B., Bicket, M., Elliott, B., Fagan-Watson, B., Mocca, E. and Hillman, M. (2015) *Children's Independent Mobility: An international comparison and recommendation for action*. London: Policy Studies Institute.

^{vii} Russell, W., Barclay, M., Tawil, B. and Derry, C. (2020) *Making it Possible to do Play Sufficiency: Exploring the conditions that support local authorities to secure sufficient opportunities for children in Wales to play*. Cardiff: Play Wales.

^{viii} Gray, C., Gibbons, R., Larouche, R., Sandseter, E.B.H., Bienenstock, A., Brussoni, M., Chabot, G., Herrington, S., Janssen, I., Pickett, W., Power, M., Stanger, N., Sampson, M. and Tremblay, M.S. (2015) What is the Relationship between Outdoor Time and Physical Activity, Sedentary Behaviour, and Physical Fitness in Children? A systematic review, *International Journal of Environmental Research and Public Health*, 12, pp. 6455-6474.

^{ix} Gray, P. (2011) The Decline of Play and the Rise of Psychopathology in Children and Adolescents, *American Journal of Play*, 3(4), pp. 443-463.

^x Russell, W., Barclay, M., Tawil, B. (in publication) *Playing and being well. A review of recent research into children's play, social policy and practice, with a focus on Wales*. Cardiff: Play Wales.

^{xi} https://play.wales/publications_category/summary-playing-and-being-well-a-review-of-recent-research-into-childrens-play-social-policy-and-practice-with-a-focus-on-wales/

^{xii} National Assembly for Wales Health, Social Care and Sport Committee (2019) *Physical Activity of Children and Young People*. Cardiff: National Assembly for Wales Commission.

^{xiii} Richards, A.B., Mackintosh, K.A., Swindell, N., Ward, M., Marchant, E., James, M., Edwards, L.C., Tyler, R., Blain, D., Wainwright, N., Nicholls, S., Mannello, M., Morgan, K., Evans, T. and Stratton, G. WALES 2021 Active Healthy Kids (AHK) Report Card: The Fourth Pandemic of Childhood Inactivity. *Int. J. Environ. Res. Public Health* 2022, 19, 8138.

^{xiv} See Play Wales website: [Play Sufficiency Research](#)

^{xv} *Making it Possible to do Play Sufficiency: Exploring the conditions that support local authorities to secure sufficient opportunities for children in Wales to play*.

^{xvi} *Ibid*, p.16.