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1	Global Matrix 3.0 Physical Activity Report Card Grades for Children and Youth: Results and
2	Analysis from 49 Countries
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23 Abstract

24 Background

Accumulating sufficient moderate to vigorous physical activity (MVPA) is recognised as a key determinant of physical, physiological, developmental, mental, cognitive, and social health among children and youth (5-17 years). The Global Matrix 3.0 of Report Card grades on physical activity was developed to achieve a better understanding of the global variation in child and youth physical activity and associated supports.

30 Methods

31 Work Groups from 49 countries followed harmonized procedures to develop their Report Cards by

32 grading 10 common indicators using the best available data. The participating countries were divided into

three categories using the United Nations' Human Development Index (HDI) classification (low or

34 medium, high, and very high HDI).

35 **Results**

36 A total of 490 grades, including 369 letter grades and 121 "INC" grades, were assigned by the 49 Work

37 Groups. Overall, an average grade of "C-", "D+", and "C-" was obtained for the low and medium HDI

38 countries, high HDI countries, and very high HDI countries, respectively.

39 Conclusions

The present study provides rich new evidence showing that the situation regarding the physical activity of
children and youth is a concern worldwide. Strategic public investments to implement effective
interventions to increase physical activity opportunities are needed.

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196 Introduction

Physical inactivity, defined as engaging in insufficient levels of physical activity and not meeting the 197 current physical activity recommendations,¹ has been identified as the fourth leading risk factor of 198 premature mortality in adulthood.² In contrast, accumulating sufficient moderate to vigorous physical 199 activity (MVPA) is recognised as a key determinant of physical, mental, social and environmental 200 health.^{3,4} Among children and youth (5-17 years), several systematic reviews have reported physical 201 202 activity benefits on physical, physiological, developmental, mental, cognitive, and social health as well as academic achievement.⁵⁻¹⁰ Despite these benefits, it has been estimated that 80% of youth (11-17 years 203 old) worldwide do not reach the minimum recommendation of 60 minutes of MVPA per day.¹¹ This is 204 alarming given that physical inactivity among school-aged children and youth has been found to be 205 associated with adverse physical, mental, social and cognitive health outcomes^{5,8,12,13}, lower physical 206 fitness.¹⁴ and lower physical activity levels in later life.¹⁵ 207

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209 To achieve a better understanding of the global variation in child and youth physical activity and its correlates, the Global Matrix of Report Card grades on physical activity was launched for the first time in 210 2014.¹⁶ Physical activity Report Cards were developed based on the Canadian Report Card model,¹⁷ 211 using a harmonized process for data gathering, assessing, and assigning grades to indicators. For over a 212 213 decade, the Canadian Report Card has been successful in raising awareness and influencing policies for childhood physical activity promotion. However these efforts have not yet translated into improving the 214 physical activity levels of Canadian children and youth.¹⁸ Fifteen countries in 2014 (Global Matrix 1.0), 215 and 38 countries in 2016 (Global Matrix 2.0), developed and launched Report Cards presenting grades for 216 nine physical activity indicators, allowing for international comparisons and offering insights from global 217 data.^{16,19} The first two Global Matrices enabled the identification of several gaps in surveillance and 218 219 research practice. Also, a paradox of higher physical activity and lower sedentary behavior in countries

reporting poorer infrastructure, and lower physical activity and higher sedentary behavior in countries
 reporting better infrastructure was highlighted.^{16,19} While participation in the Global Matrices 1.0 and 2.0
 facilitated capacity building, professional networking, research collaborations, and international
 comparisons, the Global Matrix framework still needs to be continuously expanded, improved, replicated
 and widely disseminated.¹⁹

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226 The Global Matrix initiative is led by the Active Healthy Kids Global Alliance (AHKGA), which is an 227 incorporated not-for-profit organization consisting of researchers, health professionals and stakeholders who collaborate to advance physical activity in children and youth from around the world.²⁰ In 2017, the 228 229 AHKGA invited previous participating countries and called for new countries to register for the Global 230 Matrix 3.0. As a result, work groups from 49 countries completed the full registration process and followed the harmonized procedures to develop their Report Cards by grading 10 common indicators 231 232 (Overall Physical Activity, Organized Sport and Physical Activity, Active Play, Active Transportation, 233 Sedentary Behaviors, Physical Fitness, Family and Peers, School, Community and Environment, and Government) using the best available data. 234

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Countries in different development stages may have different challenges and priorities to inform 236 237 strategies to improve physical activity among children and youth. Countries involved in the Global Matrix 238 3.0 were classified within three categories using the Human Development Index (HDI): low and medium 239 HDI (< 0.70), high HDI (≥ 0.70 to < 0.80), and very high HDI (≥ 0.80). The HDI, ranging from zero to one, is a composite index calculated using data on education, life expectancy, and income per capita,²¹ and was 240 created by the United Nations Development Programme to rank countries on a scale of human 241 development conceptualized in terms of capabilities of humans within the countries to function.²² Nine of 242 the participating countries were classified as low or medium HDI (Bangladesh, Botswana, Ethiopia, 243

Ghana, India, Nepal, Nigeria, South Africa, and Zimbabwe), 10 as high HDI (Brazil, Bulgaria, China,
Colombia, Ecuador, Lebanon, Mexico, Thailand, Uruguay, and Venezuela), and 30 countries and
territories as very high HDI (Australia, Belgium [Flanders], Canada, Chile, Chinese Taipei [Taiwan],
Czech Republic, Denmark, England, Estonia, Finland, France, Germany, Guernsey, Hong Kong, Japan,
Jersey, Lithuania, Netherlands, New Zealand, Poland, Portugal, Qatar, Scotland, Slovenia, South Korea,
Spain, Sweden, United Arab Emirates, United States, and Wales).

This special issue of the *Journal of Physical Activity and Health* includes 49 extended abstracts documenting the main Report Card findings from each participating country. A manuscript presenting the international impact of the Report Cards and the Global Matrices on the international scientific community, on raising awareness among general population and stakeholders, and on powering the movement to get kids moving closes this special issue.²³ In addition, three papers were developed to present and discuss results from the Report Cards by pre-determined HDI categories as follows:

- "The Indicators of Physical Activity among Children and Youth in Nine Countries with Low and
 Medium Human Development Indices: A Global Matrix 3.0 Paper";²⁴
- "Report Card Grades on the Physical Activity of Children and Youth from 10 Countries with
 High Human Development Index Global Matrix 3.0";²⁵
- "Report Card Grades on the Physical Activity of Children and Youth Comparing 30 Very High
 Human Development Index Countries".²⁶

The aim of this integrated article is to combine and compare the findings from each of the HDI (low and medium; high; and very high) papers and present, compare, and discuss further analyses of the results from the 49 countries participating in the Global Matrix 3.0.

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267 Methods

268 Creating the Global Matrix 3.0

In April 2017, the AHKGA invited interested countries to participate in, and register for the Global 269 Matrix 3.0 through an open call that was distributed via established networks. Between April 2017 and 270 271 January 2018, 49 countries from six different continents (Africa, Asia, Europe, North America, Oceania, 272 and South America) registered and paid a registration fee based on their HDI classification to cover costs 273 associated with the Global Matrix 3.0 initiative. Three different tiers of registration fees (\$500 USD for 274 the low HDI countries, \$750 USD for the medium HDI countries, \$1,000 USD for the high HDI countries, and \$1,500 USD for the very high HDI countries) were offered to encourage equitable 275 276 participation from around the world. Individuals who registered on behalf of their country were 277 responsible for leading the effort to form a multidisciplinary Report Card work group of national physical 278 activity experts and stakeholders. Furthermore, one to three Report Card leaders/co-leaders per country 279 were designated officially to manage the national Report Card development, and to ensure effective 280 communication between the AHKGA Executive Committee and the Report Card work group.

281

A mentoring system was developed for the Global Matrix 3.0. New Report Card leaders and teams were 282 283 paired with an experienced Report Card leader from a country who participated in the Global Matrix 2.0. In addition, six members of the Executive Committee of AHKGA were assigned to be regional mentors 284 285 for each involved continent to provide help and guidance to the countries when needed and report their progress to the AHKGA Executive Committee. Finally, the AHKGA Executive Committee served as the 286 287 coordinating center of the Global Matrix development, and provided information including background papers, previous Report Cards and Report Card papers, fundraising suggestions, and a theoretical 288 289 framework to support the preparation of grant proposals, scholarship and funding applications. The AHKGA Executive Committee also provided guidance through monthly e-blasts by sharing milestones,and upcoming deadlines.

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293 Harmonised Report Card Development

An updated list of indicators (to which grades would be assigned) and corresponding benchmarks were 294 created based on the previous Global Matrix methods,¹⁹ and feedback received during a workshop after 295 296 the Global Matrix 2.0 launch in Bangkok, Thailand (November, 2016). A new indicator, Physical Fitness, 297 and its corresponding benchmarks were added to the list. The benchmark for Overall Physical Activity was modified in accordance with the new Canadian 24-Hour Movement Guidelines for Children and 298 Youth,²⁷ where "at least 60 minutes of MVPA per day" was changed to "at least 60 minutes of MVPA per 299 day on average". Further modifications to the benchmarks were made during the development of the 300 301 Global Matrix 3.0 to address several issues that were reported by Report Card leaders to the AHKGA Executive Committee. The final version of the benchmarks for the 10 indicators is presented in Table 1. A 302 more detailed grading scheme using positive (+) and negative (-) mathematical symbols, was also 303 304 developed (Table 2). In some countries, because of the modifications of the benchmarks from previous Global Matrices, grades for some indicators have changed while in fact, the situation was relatively the 305 306 same. Consequently, while the Report Card work groups reported grades based on the revised 307 benchmarks for the Global Matrix 3.0, some countries reported different grades in their national Report 308 Grades (i.e., to be consistent with their previous methods). For example, in Colombia, with the new 309 benchmark, a "D+" was assigned to Overall Physical Activity for the Global Matrix 3.0, while a "D-" is reported in the Colombian country Report Card, based on the previous benchmark.²⁸ 310

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Each country work group identified and complemented the list of indicators to be graded (i.e., the 10common indicators and potentially additional ones that would be included in their national Report Card

but not in the Global Matrix 3.0) and gathered the highest quality of published and unpublished evidence, 314 315 or in some cases collected data prospectively. Due to the lack of data concerning physical activity among children in the early years (0 - 4 years) observed in the previous Global Matrices, consensus was reached 316 317 among the AHKGA Executive Committee that the 10 indicator grades should only be informed by data 318 from school-aged children and youth (~5-17 years-old) for the Global Matrix 3.0 to ensure consistency 319 across countries. Where possible, countries were also advised to consider and synthesize the best 320 available evidence from approximately the past five years for each indicator. Through a harmonized and 321 transparent Report Card development process, each country's work group collected and collated the best available evidence from local, national or international studies, national surveys, official reports, and 322 323 normative documents, and then synthesized findings and reached consensus for the grading of each 324 indicator. A draft of each country Report Card grades were submitted along with their rationale by Report 325 Card leaders and were audited by members of the AHKGA Executive Committee to ensure that the 326 grades were consistent with the harmonized benchmarks and grading scheme. This audit process led to 327 minor changes of the grades or rationale for most of the countries.

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329 Data Analysis

330 For analysis purposes, the 49 participating countries and regions were divided into three categories using 331 the United Nations' HDI classification (low or medium, high, and very high HDI) described above. 332 Sociodemographic data that are available online were compiled to identify the characteristics of the 333 participating countries. Descriptive statistics (average grade and standard deviation) were calculated after 334 converting categorical variables (letter grades) to interval variables (see corresponding numbers in Table 2), and the incomplete grades (INC) were converted into "No Grade" which was treated as a missing 335 336 value. Averages were calculated by country, indicator, and category of HDI from the interval values and 337 the floor (the number rounded down) was converted back to a letter grade. Three scores were generated

for the analysis: 1) Overall score computed as the sum of interval values for all indicators, 2) Behavioral 338 score (the sum of Overall Physical Activity, Organized Sport and Physical Activity, Active Play, Active 339 Transportation, and Sedentary Behaviors interval values), and 3) Sources of influence score (the sum of 340 341 Family and Peers, School, Community and Environment, and Government interval values). "INC" grades 342 were removed, and the scores were re-weighted accordingly (i.e., the missing grade was replaced by the sum of the interval values divided by the number of letter grades included in the score). Categorical 343 344 variables (letter grades) were grouped into four ("A-B", "C", "D-F", and "No Grade") based on the 345 overall score. These categories were then used to rank countries by the letter grade/score and category level in scatter plots. Correlational analyses between the 10 common indicators and sociodemographic 346 347 indicators were performed using Spearman's rank correlation coefficients. Only significant moderate to strong correlations were considered for the discussion in this analysis (r ≥ 0.30 or r ≤ -0.30 , p< 0.05).²⁹ 348 349 Pairwise deletion was used to treat missing data (INC grades) in order to minimize the number of cases excluded from the analysis. All statistical analyses were performed, and maps were created in R version 350 351 3.4.1 (The R Foundation for Statistical Computing, Vienna, Austria). Several packages were loaded to extend base R including corrplot,³⁰ ggplot2,³¹ UpSetR,³² and VIM.³³ 352

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354 **Results**

A total of 52 countries responded to the AHKGA and showed interest in participation in the Global Matrix 3.0, but only 51 fully registered on time, and later on two countries withdrew. Sociodemographic characteristics of the 49 countries participating in the Global Matrix 3.0 are presented in Table 3. The HDI scores ranged from 0.448 (Ethiopia) to 0.985 (Jersey). Ethiopia also scored the lowest for the following: Growth National Income per Capita (\$1,523 USD), mean years of schooling (2.6 years), Global Food Security Index (33.3), urban population percentage (17.2%), and prevalence of people using improved drinking water sources (44%). Qatar scored highest in the Growth National Income per Capita

(\$129,916 USD) and the Gender Inequality Index (0.542). Public health expenditure in percentage of Growth Domestic Product was the highest in Sweden (10.0%) and the lowest in Venezuela (1.5%). Life expectancy at birth ranged from 53.1 years in Nigeria to 84.2 years in Hong Kong. Hong Kong also had the highest urban population percentage (100%) and the highest population density (6,987 people/km² of land area). The lowest Gini index (least income inequality) was observed in Slovenia (25.4) and the highest (greatest income inequality) in Botswana (60.5).

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369 The physical activity grades for the 10 common indicators are organized by country in alphabetical order (Table 4). A total of 490 grades, including 369 letter grades and 121 "INC" grades, were assigned by the 370 49 Report Card work groups. A "Not Applicable" grade was assigned to Active Transportation by Oatar's 371 Report Card work group because of unsafe road conditions and a hot climate during most of the year.³⁴ 372 The grade count, number of "INC" grades, mean number grade, standard deviation, and mean letter grade 373 374 by indicator and group of indicators are presented in Table 5. The indicators with the lowest number of 375 "INC" grades were Overall Physical Activity and Active Transportation (n = 2), while the indicator with 376 the highest number of "INC" grades was Active Play (n = 29), followed by Physical Fitness (n = 27), and 377 Family and Peers (n = 22). The mean letter grades ranged from "D" for Overall Physical Activity to "C" for Organized Sport and Physical Activity, Active Transportation, School, Community and Environment, 378 and Government. An average grade of "C-" was obtained for the behavioral indicators combined, "C" for 379 the sources of influence indicators combined, and "C-" was the overall average grade for the 369 letter 380 grades. The average letter grades by indicator and group of indicators for the low and medium, high, and 381 382 very high HDI countries are presented in Table 6. For the low and medium HDI countries, an average of "C" was obtained for the behavioral indicators combined and "D+" for the source of influence indicators 383 combined, while for the very high HDI countries, an average of "D+" was obtained for the behavioral 384 indicators combined and "C+" for the sources of influence indicators combined. For the high HDI 385 386 countries, an average of "D+" was obtained for the behavioral indicators combined and for the sources of

influence indicators combined. Overall, an average grade of "C-", "D+", and "C-" was obtained for the
low and medium HDI countries, high HDI countries, and very high HDI countries, respectively.

389

A plot for the estimated overall score of each country from the 10 indicators is presented in Figure 1 and 390 391 the behavioral and sources of influence scores are shown in Figure 2 and Figure 3, respectively. Slovenia ranked first while China ranked 49th for the overall score (full rankings are shown in Figure 1); Nepal 392 393 ranked first, and Estonia ranked last for the behavioral score (complete rankings are shown in Figure 2); 394 and Slovenia ranked first while Venezuela ranked last for the source of influence score (see all country rankings in Figure 3). The Online Supplementary File S1 presents the correlation coefficients and their 395 396 associated p-values between and within the 10 core physical activity indicators and the sociodemographic 397 indicators. It showed that there were no statistically significant relationships between the Overall Physical 398 Activity grade and the other core indicator grades with the exception of Sedentary Behaviors for which a 399 statistically significant positive weak correlation was observed (r = 0.39, p<0.05). Finally, presented in the Online Supplementary File S2 is the distribution of the grades ("A-B", "C", "D-F", or "INC" grades) 400 for the 10 common indicators and the average grades per country. Slovenia was the only country out of 49 401 with a very high grade for Overall Physical Activity ("A-") while most of the other countries had "D-F" 402 (n = 38). A greater variability in grades was observed for Sedentary Behaviors, but poor grades ("D-F") 403 404 were observed in most of the very high HDI countries.

405

406 **Discussion**

407 As a result of the efforts of the Report Card work groups, the Global Matrix 3.0 allowed us to present 408 physical activity-related indicators for children and youth assembled across 49 countries with varying 409 levels of human development (nine low and medium HDI, ten high HDI, and 30 very high HDI 410 countries). While the average grades calculated for the indicators were all between "D" and "C" (Table

5), a great variety of grades was observed within and across the countries (Table 4), showing that every country is facing unique challenges and can learn from the successes or difficulties experienced by others. However, trends and comparable challenges identified across the physical activity indicators were identified within countries in the same HDI grouping despite their diverse sociodemographic, cultural, and geographical contexts. A discussion of the most and the least successful countries, followed by the interpretation of the findings from each indicator is presented in the following section, integrating the comparison of each HDI grouping.

418

419 *Most successful countries*

420 On the overall score, the very high HDI countries ranked generally higher than the low and medium, and 421 high HDI countries (Figure 1), but this is not corroborated with results presented in Table 6 where the overall averages were the same for the low and medium HDI countries and the very high HDI countries. 422 Slovenia obtained the best grade on average ("B"), followed by two other very high HDI countries (Japan 423 and Denmark) that both obtained an average grade of "B-". The specifics of childhood physical activity in 424 these three countries has already been discussed in the paper presenting the findings from the very high 425 426 HDI countries.²⁶ These three countries were also leading the ranking based on the sources of influence 427 score (Figure 3). The ranking of the behavioral score was dominated by two low HDI countries (Nepal 428 and Zimbabwe) and Japan (Figure 2). These rankings should be interpreted with caution given the large number of "INC" grades in their country Report Cards (two in Japan, three in Denmark, five in Nepal, 429 430 and two in Zimbabwe).

431 Nepal lacked data to inform five of the 10 indicators that were assigned an "INC" grade (Organized Sport
432 and Physical Activity, Active Play, Physical Fitness, School, and Government). A "D+" was assigned to
433 Overall Physical Activity based on a study that found that only 39.8% of children and youth accumulated
434 at least 60 minutes of MVPA per day. Nevertheless, Nepal shared the best grade for Active

Transportation with Japan and Zimbabwe ("A-"), obtained a high grade for Sedentary Behaviors ("B+") 435 436 and also scored highest for the Family and Peers indicator ("A"). These grades were all informed by local studies focusing on adolescents.³⁵ Nepal's good grades in many of the indicators including Active 437 438 Transportation and Sedentary Behavior may be associated with low automobile dependency (e.g., 7.12 vehicles for 1,000 people in 2011),³⁶ and minimal opportunities and access to screen-based recreational 439 440 sedentary pursuits such as television- and computer-time, and time spent using the internet. Nepal had 441 5.30 televisions per 1,000 people (as of 2003); 4.37 computer (as of 2004), and 4.51 internet subscribers (as of 2012) for 1,000 people.³⁷ Due to the concurrent economic development in recent years in Nepal, the 442 number of motorized vehicles is increasing rapidly with the expansion of road networks in rural areas,³⁸ 443 444 and potentially more people have access to screen devices. These findings should be interpreted with 445 caution, but they do suggest that the situation can potentially be positive in Nepal in terms of child and 446 youth's active transportation and sedentary behaviors at present. Yet, these favorable behaviors might be 447 threatened by the economic growth and development and these physical activity behaviors may be more a 448 function of poor economic development than a freely chosen physical activity. Nonetheless, more good quality research with nationally representative data is needed to obtain more reliable estimates of the 449 450 physical activity of children and youth and to inform the grades with "INC" grades.

451

Zimbabwe had the second-best grade for Overall Physical Activity ("C+") after Slovenia, with high 452 grades for most of the behavioral indicators ("B" for Organized Sport and Physical Activity, "A-" for 453 454 Active Transportation, and "B" for Sedentary Behaviors); however, its sources of influence indicators were assigned grades between "D" and "C". In comparison with the previous Report Card in Zimbabwe, 455 456 the grades for School, Community and Environment, and Government, have improved due to recent 457 policy implementations and commitments made by the government to promote physical activity and nutritional status among Zimbabwean children and youth.³⁹ However, there is need for caution in 458 459 interpreting these grades as they were informed by limited and mostly unpublished data and expert opinion. Thus, more research is needed to obtain a reliable picture of the context of the physical activitylevel of children and youth in Zimbabwe.

462

463 Least successful countries

One low HDI country, Ethiopia, and two high HDI countries, Venezuela and China, were the least 464 465 successful countries based on the overall and the source of influence score rankings (Figures 1 and 3). An average grade of "D-" was assigned to China, and an average grade of "D" was assigned to Ethiopia and 466 467 Venezuela. China's Report Card work group developed a national surveillance protocol to collect nationally representative data for China's 2018 Report Card.⁴⁰ An "F" was assigned to four indicators 468 469 (Overall Physical Activity, Sedentary Behaviors, Community and Environment, and Government) and the remaining indicators were assigned grades between "D-" and "C+". The small proportions of 9-17-year-470 471 old children in China meeting the physical activity guidelines (13.1%) or the sedentary behavior guidelines (7.1%) are alarming.⁴⁰ With an estimated population of 1.4 billion,⁴¹ China is the most 472 populated country in the world, and the low prevalence estimates observed here suggest that the majority 473 of a large number of children and youth (approximately 160 millions of 10-19 year-olds in 2015)⁴¹ are 474 not engaging in sufficient amounts of MVPA to benefit their health. However, the high levels of air 475 pollution in China represents a major threat to the promotion of physical activity,⁴² and is a potential 476 477 barriers stopping the Chinese children and youth from exercising. The recent support from the Chinese 478 Ministry of Education in conducting national surveillance of children physical activity is however 479 encouraging, and hopefully this support will be expanded to future investments in the development of 480 interventions and policies designed to increase physical activity opportunities at community and 481 environment levels in China.

In Ethiopia, an "F" was assigned to Sedentary Behaviors, Family and Peers, and Community and
Environment, and the grades for the remaining indicators ranged between "D" and "C", with the

exception of Active Play that was graded "B". These findings should be interpreted with caution as the grades were informed by estimates based on experts opinion when data for an indicator were unavailable.⁴³ This method nevertheless did allow the Report Card work group to present an initial broad picture of childhood physical activity in Ethiopia.

Venezuela is currently facing a humanitarian crisis related to its economic and socio-political situation. 488 Between 2016 and 2017, marked increases in maternal mortality (65%), infant mortality (30%), and cases 489 490 of malaria (76%) were observed and the estimated prevalence of severe malnutrition among children under five years of age increased from 10.2% in February 2017 to 14.5% in September 2017.44 491 492 Nevertheless, a Report Card was developed, using published and unpublished national survey data, peer-493 reviewed literature, government and nongovernment reports and online content, and meetings with experts working for governmental (municipal) and non-governmental organizations.⁴⁵ The Venezuelan 494 495 Report Card work group assigned an "INC" grade to five indicators: Active Play, Sedentary Behaviors, Physical Fitness, Family and Peers, and School. An "F" grade was assigned to the Government indicator 496 while the remaining indicators were graded "D" or "D-", with the exception of Active Transportation 497 498 which was graded "B-". Though there were no physical activity data available for those under 15 years of 499 age, the work group found that the majority of adolescents older than 15 years do not engage in physical activity regularly. In addition, the high rates of crime were identified as a barrier to physical activity. 500 Currently, no governmental efforts to ensure safety and promote an active lifestyle in Venezuela are being 501 implemented.45 502

503

504 Overall Physical Activity

505 Only two countries assigned "INC" grades to the Overall Physical Activity indicator: Japan and 506 Botswana. Slovenia, where more than 80% of children and youth aged between 6 and 19 years (according 507 to subjective self-reported data), 88% of the 11 year-olds, and 66% of the 14 year-olds (according to

508 objective data) were meeting the physical activity guidelines, was the only country reporting a high grade 509 for this indicator ("A-").⁴⁶ For this indicator, the grades for the remaining countries ranged from "F" 510 (Belgium, China, Scotland, South Korea, and Taiwan) to "C+" (Zimbabwe).

511 The Overall Physical Activity grade was informed by various types of data across countries: objective measurement with accelerometers or pedometers, self-report or proxy-report questionnaire, and expert 512 opinion. Even among both the subjective and objective data, the methods varied substantially in terms of 513 instruments, analysis, age range, sample size, and representativeness of samples.^{24,25,47} In addition, the 514 515 available data in each country did not necessarily allow the Report Card work groups to use either of the 516 recommended benchmarks (see Table 1) strictly when estimating the prevalence of physically active children and youth in their sample.^{24,25,47} For such reasons, the comparability of these results among the 517 518 countries should be interpreted with caution.

Overall Physical Activity was the indicator with the lowest average grade: "D". A distinction was 519 520 observed between the low and medium HDI countries and the two other HDI groupings. The average grade for the low and medium HDI countries was "C-", whereas both the high and very high HDI 521 countries obtained an average of "D-", which could represent a difference of 14-26% in physical activity 522 523 guidelines adherence ("D-" = 20-26% vs. "C-" 40-46%). In accordance with this difference of grades, a significant low negative correlation was observed between the Overall Physical Activity indicator and 524 525 several sociodemographic indicators including the HDI (r = -0.3, p < 0.05) and the growth national income 526 per capita (r = -0.33, p< 0.05) (see Online Supplementary File, S1). The present study provides new evidence showing that the situation regarding the physical activity of children and youth is a universal 527 concern worldwide. This finding is consistent with the results from the previous Global Matrices^{16,19} and 528 recent global estimates.¹¹ Efforts should be made globally and collectively to develop standardized 529 530 physical activity surveillance systems adapted to the national context of each country. Furthermore, 531 developing effective strategies to increase physical activity opportunities for all should be a national public health priority in all countries regardless of the HDI background. 532

533

534 Organized Sport and Physical Activity

An "INC" grade was assigned for this indicator in seven countries: Bangladesh, Botswana, Ecuador, 535 India, Jersey, Nepal, and United Arab Emirates. The Organized Sport and Physical Activity grades ranged 536 537 from "F" (Lebanon and Uruguay) to "A-" (Denmark), with an average of "C". The benchmark 538 recommended for this indicator was the "percentage of children and youth who participate in organized 539 sport and/or physical activity programs" (Table 1), meaning that this indicator did not provide any 540 information on the dose (i.e., duration, frequency, intensity) of physical activity while participating in 541 sport and organized physical activities, because few countries have such data. The grade for this indicator 542 depends on the availability of organized sport opportunities and the availability of data reporting the 543 prevalence of children and youth who have taken advantage of these opportunities. This grade was mostly 544 informed by official reports from governmental and/or public institutions as well as self-reported surveys. 545

Organized Sport and Physical Activity was graded "C", "D+", and "C+" on average for the low and 546 medium HDI countries, the high HDI countries, and the very high HDI countries, respectively. Among 547 548 the nine low and medium HDI countries, five assigned a letter grade to this indicator, which ranged from 549 "D" to "B", with an average of "C". In these countries, the organized sport opportunities corresponded 550 mostly to school-based sports or sport teams and recreational sports organized by non-governmental organizations and communities. Among the high HDI countries, the grades ranged from "F" to "C+" with 551 552 an average of "D+". However, it is not possible to discern from the available data if these low grades 553 correspond to the limited availability of organized sport opportunities (i.e., distal correlates) or if there are 554 barriers (e.g., proximal correlates such as motivation, interest, time, or parental support) hindering children from participating while organized physical activities are readily available to them. In the very 555 high HDI countries, with an average grade of "C+", Organized Sport and Physical Activity was the 556 557 highest graded behavioral indicator. In these countries, organized sport opportunities are available to

children and youth in various settings: sport club and federations, school-based sport teams and organized 558 559 sport sessions, municipal sport programs, and sport programs offered by private businesses. In addition, 560 significant low to moderate positive associations were observed between Organized Sport and Physical 561 Activity and several sociodemographic indicators including HDI, life expectancy at birth, mean years of 562 schooling, growth national income per capita, public health expenditure (% of GDP), Global Food Security index, improved drinking water coverage, and summer Olympic medal count; while significant 563 564 low negative associations between this indicator and the two inequality indices (Gini index and Gender 565 inequality index) (see Online Supplementary File, S1) were observed.

566

567 More research is needed to examine if affordable and appealing organized physical activity and sport 568 opportunities are offered to all children and youth equally and equitably—across different age, gender, 569 socioeconomic, ethnic, and special population groups-and to isolate the missing components of organized sports opportunities in each country. In addition, it would be interesting to add the 570 571 measurement of the dose of physical activity associated with organized sports and physical activities in 572 national physical activity surveillance systems. Filling these research and surveillance gaps is a necessary 573 step towards the development of effective strategies to promote physical activity by increasing organized 574 sport opportunities at the national level.

575

576 Active Play

Among the 20 countries that graded Active Play, this behavior was mostly measured by self- or proxyreport surveys, assessing the frequency or the time of active play/being active while playing,^{46,48–51} unstructured/unorganized active play,^{40,52–58} playing outdoors/outdoors activities/being outdoors,^{39,48,56,59–} and/or was based on expert opinion.^{39,43,62,63} A definition for active play was proposed in a recent systematic review: "a form of gross motor or total body movement in which young children exert energy in a freely chosen, fun, and unstructured manner".⁶⁴ A consensus definition, however, still needs to be

internationally agreed upon and acknowledged to allow the development of standardized measurementtools for this indicator in varying age groups.

585 Active Play was the indicator with the most "INC" grades where 29 of 49 countries were unable to find 586 available data to grade this indicator. The grades ranged from "F" (Estonia and Thailand) to "B" (Ethiopia and The Netherlands) with an average of "D+". The average grades for the low and medium HDI 587 countries, high HDI countries, and very high HDI countries were "C-", "D", and "D+", respectively. 588 Given the amount of "INC" grades and the variability of the data used to inform the grades for the Active 589 590 Play indicator, a valid comparison between the three HDI groupings was difficult. The low grades that were reported for this indicator aligned with the previous Global Matrices findings.^{16,19} Such low level of 591 592 engagement in active play can potentially be explained by the low detection capacity of instruments 593 utilized for its measurement. Active play during free time may be slowly disappearing in favour of screen 594 time in developed countries or is replaced with chores or work in developing countries. Perception of the 595 environment as unsafe can also be a potential barrier to this behavior. However, no relation was found 596 between Active Play and the Community and Environment indicators (Online Supplementary File, S1). 597 Further research is needed for the development of a consensus definition, measurement instruments, surveillance systems, and to identify the barriers and facilitators of active play. 598

599

600 *Active Transportation*

Only two countries did not assign a letter grade to Active Transportation: Qatar (not applicable) and United Arab Emirates ("INC"). The average grade for this indicator was D+ and ranged from "F" (Chile) to "A-" (Japan, Nepal, Zimbabwe). The recommended benchmark for this indicator was "the percentage of children and youth who use active transportation to get to and from places" (Table 1). For most of the countries, the grades were informed by data reporting the prevalence of children and/or youth actively commuting between home and school without information on different doses (i.e., frequency, duration,intensity).

608 Active Transportation was the indicator with the highest average grade for the low and medium HDI 609 countries ("C+") and for the high HDI countries ("C"). The average grade for the very high HDI countries was "C-" for this indicator. In three of the four very high HDI countries from Eastern Asia, very high 610 grades were assigned to this indicator: Japan ("A-"), Hong Kong ("B+"), and South Korea ("B+"). These 611 three countries share similar characteristics historically, culturally, and developmentally,⁶⁵ and have 612 613 shown a high percentage of urban population (83.3% to 100%, Table 3). A specific policy in Japan 614 (limiting the distance between the children and youth homes and the public elementary and junior high schools),⁶⁶ and the high density of Hong Kong, and Japanese and South Korean cities, allow children and 615 616 youth to live a short trip away from their school, which can minimize the use of car or other forms of motorized vehicles, and promote active travel.^{26,67,68} 617

618

619 High to very high grades for this indicator were also reported in several developing countries: Colombia ("B"), Nepal ("A-"), Nigeria ("B"), Venezuela ("B-"), and Zimbabwe ("A-"), while poor grades were 620 reported for 16 of the 30 very high HDI countries (with grades between "F" and "C-"). However, no 621 statistically significant relation was found between Active Transportation and Community and 622 623 Environment indicators or the HDI in the correlational analysis. These findings suggest that, for developing countries, active transportation may be driven by a necessity (i.e., no access to public or 624 family/personal motorized transportation) instead of a choice,⁶⁹ notwithstanding the safety of the 625 environment or the long distance to commute. The measurement of the dose and the characteristics of 626 627 children's and youth's active transportation internationally are necessary to identify the contribution of 628 active transport to overall physical activity levels, as well as the facilitators and obstacles for this behavior 629 in order to develop contextually adapted, effective ways to promote it. Strategies to improve safety

630 conditions and to promote active transportation as a desirable mode of transport are required in order to

631 maintain the high grades in the countries leading this indicator and to improve those that are lagging.

632

633 Sedentary Behaviors

Sedentary Behaviors is defined as "any waking behavior characterized by an energy expenditure ≤ 1.5 634 metabolic equivalents, while in a sitting, reclining, or lying posture".¹ Screen time, referring to time spent 635 in screen-based behaviors¹, is often used as a proxy for sedentary behavior in research. Screen time can be 636 637 performed while being sedentary or physically active,¹ however this behavior has been shown to be associated with a variety of negative health outcomes among children and youth.⁷⁰ This is why guidelines 638 639 recommending limiting screen time to two hours daily for 5-17 year-olds were developed for the first time in Canada.⁷¹ Further, it was also the reason why the benchmark for Sedentary Behaviors focused on 640 641 screen time: "percentage of children and youth who meet the Canadian Sedentary Behaviour Guidelines (5- to 17-year-olds: no more than 2 hours of recreational screen time per day)" (Table 1). However, the 642 comparisons between the countries should be interpreted with caution because of the variability of the 643 data that were used to inform the grades for this indicator. Several Sedentary Behaviors grades were 644 partially or totally informed by data reporting time spent sitting or doing other sedentary activities that did 645 not involve screens, and screen time cut-off points differing from the one in the benchmark (i.e., ≤ 1 646 hour/day, <2 used hours/day, ≤3 hours/day) were also used by some countries because of available data. 647

Three countries assigned an "INC" grade to Sedentary Behaviors: Ghana, South Africa, and Venezuela. The grades for this indicator ranged from "F" (China, Estonia, Ethiopia, Scotland, and Wales) to "A-" (Bangladesh), with an average of "D+". These findings are consistent with international estimates reporting that at least two thirds of the children exceed 2 hours of recreational screen time per day,⁷² although comparison may be limited by the heterogeneity in Sedentary Behaviors across countries. The low and medium HDI countries obtained an average of "C+" for this indicator, and only two of the eight

countries had a low grade: Ethiopia "F" and India "C-". The grades for the six remaining low and medium HDI countries ranged from "B" to "A-". The high and the very high HDI countries obtained an average grade of "D" and "D+", respectively, for Sedentary Behaviors. In 36 out of the 39 high and very high HDI countries that graded this indicator, a low or very low grade (between "F" and "C-") was assigned. Regardless, the Sedentary Behaviors grades were not related to HDI or to the other sociodemographic indicators except the mean years of schooling (r = 0.31, p<0.05) and the summer Olympic medal count (r = -0.57, p<0.05) in the correlational analysis presented in the Online Supplementary File S1.

The results presented here suggest that the situation concerning the childhood screen time is particularly 661 662 concerning in high and very high HDI countries. The moderately good grades for Sedentary Behavior in 663 the low and medium HDI countries are potentially threatened to decrease with their continuing economic 664 growth and development, which may lead to increased access to electronic devices. Several interventions 665 to reduce screen time have been developed and tested, and results from systematic reviews and metaanalyses reported that interventions to reduce children's screen time can have a small but significant 666 effect.⁷³ More research is necessary to accumulate more evidence on the effectiveness of specific 667 668 interventions across different contexts and settings, but investment from public health institutions in high 669 and very high HDI countries to support the implementation of these interventions in the child and youth population should become a priority. 670

671

672 *Physical Fitness*

Physical fitness represents the ability to perform daily activities with vigor, and the demonstration of traits and capacities that are associated with a lower risk of the premature development of diseases associated with physical inactivity.⁷⁴ Cardiorespiratory endurance, muscular endurance, muscular strength, body composition, and flexibility are the health-related components of physical fitness.⁷⁵ The Global Matrix 3.0 evaluated the Physical Fitness indicator for the first time, and 27 countries were unable

to find available data to inform the grade for this indicator in. In the remaining countries, the grade for Physical Fitness ranged from "F" (India) to "A" (Japan), with an average of "C-". India was the only country from the low and medium HDI countries with a letter grade for this indicator. Among the 10 high HDI countries, only four had a letter grade reported for this indicator: Brazil ("D"), China ("D"), Colombia ("D-"), and Uruguay ("C-"), with an average of "D". A letter grade was assigned to 17 of the 30 very high HDI countries, ranging from "D" (Canada, Chile, Hong Kong, and Jersey) to "A" (Japan).

684 The benchmark for this indicator corresponded to the average percentile achieved on certain healthrelated physical fitness components based on the normative values published by Tomkinson et al (Table 685 1).⁷⁶ However, many differences in the data informing the grades for this indicator were observed across 686 countries in terms of number fitness indicators reported, normative value used, age range and sample size. 687 688 Given the amount of "INC" grades and variability in the data informing the grades for this indicator, the 689 comparison between HDI groupings is difficult. Cardiorespiratory fitness (measured with the 20-meter 690 shuttle run test) was found to be associated with favourable indicators of adiposity and some indicators of cardiometabolic, cognitive, and psychosocial health in boys and girls from 32 countries in a recent 691 systematic review.⁷⁷ Therefore, cardiorespiratory fitness is an important indicator of current and future 692 693 health among school-aged children and youth, and can be used as a holistic indicator of population health in this age group.⁷⁸ These findings highlight that global surveillance of physical fitness, which represents 694 a simple and cost-effective assessment⁷⁹ that could be integrated in physical education classes, should be 695 696 a priority in all countries.

697

698 Family and Peers

The average grade for Family and Peers was the same among the three HDI groupings: "D+". An "INC" grade was assigned in 22 countries: four from the low and medium HDI group, six from the high HDI group, and 12 from the very high HDI group. The grades ranged from "F" (Chile, Ecuador, Ethiopia,

Ghana) to "A" (Nepal). This amount of "INC" grades and the letter grades reported are consistent with
 the previous Global Matrices.^{16,19}

Support from parents and peers is recognized as a correlate of physical activity in children and youth;⁸⁰ 704 705 however, the nature of this interaction is complex and no valid and internationally recognized instrument exists to measure the influence of family and friends on children and youth's physical activity at present. 706 707 This is why several benchmarks were proposed to capture a picture of the influence of Family and Peers 708 (Table 1), and variability in the data used to inform the letter grades for this indicator was observed. The number of "INC" grades and the measurement variation for this indicator limit the comparison and the 709 710 interpretation of the letter grades reported. However, these findings highlight the need for the development of standardized methods for the surveillance of this indicator in various settings and 711 712 contexts.

713

714 School

Given the potentially significant amount of time that children and youth spend at school, this environment is a strategically important setting for the promotion of physical activity. Physical activity opportunities can be provided to children and youth in the school environment through physical education, lunch and recess breaks, in-class physical activities, and in intramural competitive and non-competitive activities before or after school.⁸¹ However, school physical activity policies, if they exist at all, differ from one country to another, and are not always mandatory.

The average grade for the School indicator was "C", and Report Card work groups in eight countries could not assign a letter grade to this indicator (Bangladesh, Ecuador, Guernsey, India, Nepal, Scotland, Venezuela, Wales). This indicator ranged from "D-" (South Africa, United Arab Emirates, United States) to "A" (Finland, Portugal, Slovenia). The average grade for this indicator was "D+" for the low and medium HDI countries. For the high HDI countries, School was the source of influence indicator that

726 obtained the highest average grade ("C-"). The very high HDI countries obtained an average grade of "B-", and it is worth noting that only medium to favorable grades ("C" to "A") were assigned to European 727 countries (high and very high HDI counties included). The correlational analysis found a significant 728 729 moderate association between the School indicator and six of the sociodemographic indicators: the HDI (r = 0.53, p<0.001), the mean years of schooling (r = 0.51, p<0.001), the Gini Index (r = -0.66, p<0.001), the 730 731 Gender Inequality Index (r = -0.65, p<0.001), the Global Food Security Index (r = 0.52, p<0.05) and the 732 distance to Equator (r = 0.55, p<0.001). In other words, the grades for school indicator increased as the 733 HDI, the mean years of schooling, the food security and the distance to the equator increased, and as the Gender Inequality Index and the Gini index decreased. These findings align with the results of the Global 734 Matrix 2.0.¹⁹ 735

736 These findings further suggest that the quality and/or quantity of physical activity opportunities offered by 737 the school are associated with the economic and development status of a given country. Cultural values attributed to sport and or physical activity can also be potential barriers or facilitators for this indicator. 738 739 Quality school policies and programs related to physical activity for the three European countries leading this indicator (Finland, Portugal, Slovenia) have already been highlighted elsewhere.^{19,26} While mandatory 740 741 physical education classes is part of the school curriculum in most European countries for all school 742 grades, it is only optional in some other countries from other parts of the world. For example, in the United States, the percentage of schools delivering mandatory physical education classes, in each grade, 743 decrease from 97% in 6th grade to 42% in 12th grade.⁸² In the United Arab Emirates, only 26% of 744 adolescents aged 13-17 years reported participating in physical education class on three or more days 745 each week.⁸³ In South Africa, 32% of children do not participate in school physical education classes, 746 747 and no evidence of progress in the prioritization of physical education in the schools was found by the Report Card work group.⁸⁴ Similarly, two consecutive Report Cards from South Korea highlighted that 748 749 the emphasis on important subjects (e.g., math, science) for university admission overrides the importance of physical activity in the Korean education system.^{85,86} Though the new 2018 Korean national curriculum 750

requires schools to provide mandatory physical education, it is regarded as a minor subject and, with
 progressing school grades, it is devalued and neglected.⁸⁷

753 Evidence showed that adding more time to academic or curricular subjects by taking time away from 754 physical education programs was found not to enhance academic achievement in the corresponding academic subjects and to be potentially detrimental to health.⁸⁸ Conversely, allocating more time to 755 756 physical activity from other subjects can improve the time children spend engaging in MVPA without the risk of "hindering students' academic achievement".⁸⁸ The measure of the dose of physical activity 757 758 occurring in school should also be added to the national surveillance systems globally to identify the 759 needs in terms of policies and interventions aimed at promoting physical activity at school. In addition, 760 the Global Matrix 3.0 findings suggest that developing interventions or programs targeting schools in low 761 and medium HDI countries should be a priority on the international public health agenda.

762

763 *Community and Environment*

The Community and Environment indicator obtained an average grade of "C" and had 13 "INC" grades. 764 765 The grades ranged from "D-" (Venezuela) to "A" (Sweden). The low and medium HDI countries obtained an average of "D", and the high HDI countries obtained a "D+". Among the very high HDI countries the 766 Community and Environment indicator was the indicator with the highest average grade ("B-"). The 767 correlational analysis (see Online Supplementary File, S1) found a positive significant moderate to strong 768 769 association between the Community and Environment indicator and the HDI (r = 0.73, p<0.001), the life 770 expectancy at birth (r = 0.74, p<0.001), mean years of schooling (r = 0.64, p<0.001), Growth National 771 Income per capita (r = 0.80, p<0.001), public health expenditure (r = 0.67, p<0.001), Global Food 772 Security Index (r = 0.71, p<0.001), urban population percentage (r = 0.51, p<0.001), improved drinking 773 water coverage (r = 0.77, p<0.001) and distance to Equator (r = 0.58, p<0.001); and a negative significant 774 moderate to strong association was found with the Gini Index (r = -0.62, p<0.001) and Gender Inequality

Index (r = -0.83, p<0.001). These findings aligned with the results of the previous Global Matrices^{16,19} and reinforce the importance of income and gender equity for the physical activity and overall population health.

778 Characteristics of the built environment are recognized as a potential source of influence on the physical activity level of children and youth.^{89–91} Given that a great number of characteristics could potentially 779 influence the physical activity of children and youth, numerous benchmarks were proposed to evaluate 780 781 this indicator. A great variability of data were used to inform the grades for this indicator, limiting direct 782 comparisons between countries. Yet, the significant correlations suggest that despite the variability of 783 data available that was used to inform the grade for this indicator, the Report Card work groups assigned a grade that was coherent with the characteristics of the environment. The available evidence from this 784 785 indicator suggests that the characteristics of the built environment potentially influencing the physical 786 activity of children and youth are already favorable in the very high HDI countries, and that an increase of the grades for this indicator is expected with the further development of low, medium, and high HDI 787 788 countries.

789

790 *Government*

791 The average grade for the Government grade was "C", and an "INC" grade was assigned in eight countries. With an average of "C-", Government was the source of influence indicator with the highest 792 793 average in low and medium HDI countries. The high HDI countries obtained an average of "D+", and the 794 very high HDI countries a "C+". The highest grades for this indicator were reported in high and very high 795 HDI countries. The correlation analysis found significant low associations between the Government indicator and the growth national income per capita (r = 0.48, p<0.005), public health expenditure (r =796 797 0.48, p<0.005), Gini index (r = -0.45, p<0.005), Gender Inequality Index (r = -0.45, p<0.005), improved 798 water coverage (r = 0.44, p<0.005), and distance to the equator (r = 0.31, p<0.005).

799 Similar to the Community and Environment indicator, a government can potentially influence the 800 physical activity level of children and youth in multiple ways. As there is no official standardized method to evaluate this influence, the recommended benchmark for this indicator focused on evidence of 801 802 leadership and commitment, allocated funds and resources, and demonstrated progress for the promotion 803 of physical activity opportunities for all children and youth (Table 1). As a result, the grades were informed by very different types of data across countries, and the Report Card work groups did not 804 805 always have access to relevant quantitative data, and therefore graded this indicator mostly based on 806 expert opinion when required.

The low behavioral grades that were reported broadly in the Global Matrix 3.0 suggest that the government's efforts and physical activity policies are not reflected in an increase in the prevalence of MVPA among children and youth, and/or that there is an implementation gap between the strategy level (source of influence indicators) and individual level (behavioral indicators). More research is needed globally to identify the potential barriers for the engagement of children at the country and community level, in different contexts and settings.

813

814 Integrated discussion

815 Overall, the average grades obtained for each indicator were low, and a small variation was observed within the 10 indicators ("D" to "C"). More diversity was observed between the three HDI groupings, 816 817 between the countries, and within each country. Higher behavioral grades and lower source of influence grades were generally observed in the low and medium HDI countries, while the opposite was observed 818 819 for the very high HDI countries, and generally low average grades were reported for each indicator in the 820 high HDI countries. It is important to highlight that the overall concerning levels of physical activity and 821 sedentary behavior among children and youth may be indicative of a global crisis. Moreover, this 822 phenomenon may get worse with the economic growth and development of low, medium and high HDI

countries, and very high rates of non-communicable diseases can be anticipated when the current
generation of children and youth reaches adulthood unless a major shift to a more active lifestyle happens
soon. Strategies to mitigate the projected reduction in habitual physical activity in developing countries
should learn from countries who have already navigated the physical activity transition.⁹²

827

828 Strengths and Limitations

829 A major limitation of this study was the amount of missing data to inform the grades, resulting in a total 830 of 121 "INC" grades of the 490 grades in total. In addition, the great variability of the data (e.g., in terms 831 of benchmark, measurement instrument, age range, sample size, quality, quantity) that were used to 832 inform the grades was observed between the countries for each indicator, and in many cases the available 833 data did not permit the Report Card work groups to align strictly with the recommended benchmarks. 834 Furthermore, a loss of information potentially occurred when translating original prevalence data to a letter grade, as letter grades provide less information than continuous variables. Consequently, all the 835 comparisons, correlations and interpretations involving the grades are limited and should be interpreted 836 837 with caution, as two identical grades for the same indicator can capture two very different contexts from one country to another. Excluding the countries with insufficient data and imposing to assign "INC" 838 grades every time the data did not fit exactly with the benchmarks for each indicator could have been an 839 840 alternative strategy. But this approach would have significantly reduced the number of countries and 841 grades included in the Global Matrix 3.0 and the relevance of conducting international comparisons. 842 Despite the limitations of the underlying data, this encyclopedia of global information of the physical activity of children and youth represents the richest source of such information compiled to date. 843

Another limitation of the Global Matrix 3.0 was the lack of representativeness of some areas of the world and some specific child and youth populations. Indeed, the participation of a total of 49 countries or nations meant that most of the countries around the world were still missing. In particular, the South

Pacific islands nations, where the average body mass indices for child and youth were estimated to be the highest of the world,⁹³ are missing, as well as countries from Central Asia, and North Africa. Additionally, children and youth with disabilities were not explicitly included in this analysis while the Global Matrix process could help to identify and circulate best-practice strategies in terms of physical activity promotion for these specific populations.¹⁹ Furthermore, the disparities and inequities across gender, socioeconomic status, or urban versus rural dwelling were mentioned in only a handful of Report Card articles, thus they were not analyzed or discussed in this study.

854 The correlation analyses showed that the Overall Physical Activity grade had a low positive association 855 with Sedentary Behaviors and was not statistically related with the eight remaining indicators (Online 856 Supplementary File, S1). This can potentially be the consequence of the aforementioned limitations, but 857 another hypothesis may explain this absence of relation. The absence of statistically significant 858 correlations between Overall Physical Activity, and Organized Sport and Physical Activity, Active Play, 859 and Active Transportation, may have resulted from the fact that the physical activity dose related to these indicators was not measured well. The absence of a relation between the source of influence indicators 860 861 and Overall Physical Activity may suggest that a favorable physical and social environment is not enough 862 to induce individual engagement in sufficient amounts of MVPA. In addition, the absence of choice (i.e., 863 children that have no other options than using active transportation regardless of safety and any other characteristics of the source of influence), child labor, and the cultural values attributed to physical 864 865 activity and sports were not evaluated in this study.

Major strengths of this work include the large number of countries who adopted the harmonized Report Card development process and the quantity of data used to inform an international, comprehensive and meaningful comparison of physical activity behaviors of children and youth. In addition, the AHKGA facilitated and supported the development of Report Cards from 49 countries, by providing the Report Card work groups from each participating country with a platform to capture, synthesize, interpret, and publish the findings with autonomy. With the 49 countries participating and the 10 common indicators

being graded by each participating country, the Global Matrix 3.0 represents the most comprehensive and meaningful comparison of the contexts of the physical activity of children and youth. In addition, the identification and discussion of major trends concerning the characteristics of the physical activity of children and youth among the three HDI groupings were realized for the first time.^{24–26} Finally, major research and surveillance gaps, including the need for the development and the international adoption of standardized methods to conceptualise and measure the ten indicators, were identified and highlighted for each indicator in the present paper.

879 The launch of the Global Matrix 3.0 is the result of a tremendous amount of work by the AHKGA 880 Executive Committee members and from the physical activity experts and stakeholders from all over the 881 world for the past 15 months. The 49 Report Cards were developed by supported and unsupported work 882 groups of professionals who acknowledge the importance of a healthy and active lifestyle for the present 883 and the future of the children and youth worldwide. The involvement of governmental and nongovernmental organizations in the development of some of the national Report Cards is a potential sign of 884 885 a growing interest in the childhood physical inactivity crisis; and it is hoped that this awareness will be 886 translated into support for the development of effective interventions increasing physical activity 887 opportunities for all. In addition, the development of a national Report Card of physical activity for children and youth, and the participation in the Global Matrix initiative, were found to contribute to 888 raising awareness on the childhood physical inactivity issue nationally and internationally, building 889 890 capacity within participating countries, and potentially influencing the creation of physical activity opportunities in the future.²³ It is hoped that more physical activity experts and stakeholders will rally 891 with AHKGA members to pursue and expand the Global Matrix initiative and will help filling the 892 893 identified gap in physical activity research and surveillance. The AHKGA, with the contribution of its 894 international network of researchers, will be available to offer guidance to the countries willing to develop 895 national surveillance of physical activity, and policies or interventions promoting physical activity among 896 children and youth.

897

898 Conclusion

A comprehensive summary of the grades, comparison and interpretation of 10 physical activity indicators 899 900 among 49 countries were presented in this Global Matrix 3.0 paper. Higher behavioral grades and lower 901 source of influence grades were generally observed in the low and medium HDI countries, while lower 902 behavioral grades and higher source of influence grades were observed for the very high HDI countries, 903 and generally low average grades for each indicator in the high HDI countries. International research and 904 surveillance gaps were also identified by the Global Matrix 3.0 and the Report Card initiatives. Internationally collaborative and collective efforts are needed to redirect the persisting trend of low 905 906 physical activity and high sedentary behavior among children and youth worldwide. Strategic public 907 investments to implement effective interventions within families, communities, and schools to increase 908 physical activity opportunities are needed. It is hoped that researchers and relevant stakeholders will 909 collaborate internationally to address the research and surveillance gaps highlighted in this paper and 910 expand the Global Matrix initiative to include more countries.

911

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Overall Physical Activity	% of children and youth who meet the Global Recommendations on Physical Activity for Health, which
Overall Thysical Activity	
	recommend that children and youth accumulate at least 60 minutes of moderate- to vigorous-intensity physi
	activity per day on average.
	Or % of children and youth meeting the guidelines on at least 4 days a week (when an average cannot be
	estimated).
Organized Sport and	% of children and youth who participate in organized sport and/or physical activity programs.
Physical Activity	
Active Play	% of children and youth who engage in unstructured/unorganized active play at any intensity for more than 2
	hours a day.
	% of children and youth who report being outdoors for more than 2 hours a day.
Active Transportation	% of children and youth who use active transportation to get to and from places (e.g., school, park, mall, frie
	house).
Sedentary Behaviors	% of children and youth who meet the Canadian Sedentary Behaviour Guidelines (5- to 17-year-olds: no mo
	than 2 hours of recreational screen time per day). Note: the Guidelines currently provide a time limit
	recommendation for screen-related pursuits, but not for non-screen-related pursuits.
Physical Fitness	Average percentile achieved on certain physical fitness indicators based on the normative values published
	Tomkinson et al. ⁷⁶
Family and Peers	% of family members (e.g., parents, guardians) who facilitate physical activity and sport opportunities for th
	children (e.g., volunteering, coaching, driving, paying for membership fees and equipment).
	% of parents who meet the Global Recommendations on Physical Activity for Health, which recommend the
	adults accumulate at least 150 minutes of moderate-intensity aerobic physical activity throughout the week of
	at least 75 minutes of vigorous-intensity aerobic physical activity throughout the week or an equivalent
	combination of moderate- and vigorous-intensity physical activity.
	% of family members (e.g., parents, guardians) who are physically active with their kids.
	% of children and youth with friends and peers who encourage and support them to be physically active.
	% of children and youth who encourage and support their friends and peers to be physically active.

1184 Table 1: Global Matrix 3.0 indicators and benchmarks used to guide the grade assignment process

School	% of schools with active school policies (e.g., daily PE, daily physical activity, recess, "everyone plays"
	approach, bike racks at school, traffic calming on school property, outdoor time).
	% of schools where the majority (\geq 80%) of students are taught by a PE specialist.
	% of schools where the majority (\geq 80%) of students are offered the mandated amount of PE (for the given
	state/territory/region/country).
	% of schools that offer physical activity opportunities (excluding PE) to the majority (> 80%) of their students.
	% of parents who report their children and youth have access to physical activity opportunities at school in
	addition to PE classes.
	% of schools with students who have regular access to facilities and equipment that support physical activity
	(e.g., gymnasium, outdoor playgrounds, sporting fields, multi-purpose space for physical activity, equipment in
	good condition).
Community and	% of children or parents who perceive their community/municipality is doing a good job at promoting physical
Environment	activity (e.g., variety, location, cost, quality).
	% of communities/municipalities that report they have policies promoting physical activity.
	% of communities/municipalities that report they have infrastructure (e.g., sidewalks, trails, paths, bike lanes)
	specifically geared toward promoting physical activity.
	% of children or parents who report having facilities, programs, parks and playgrounds available to them in their
	community.
	% of children or parents who report living in a safe neighbourhood where they can be physically active.
	% of children or parents who report having well-maintained facilities, parks and playgrounds in their community
	that are safe to use.
Government	Evidence of leadership and commitment in providing physical activity opportunities for all children and youth.
	Allocated funds and resources for the implementation of physical activity promotion strategies and initiatives for
	all children and youth. Demonstrated progress through the key stages of public policy making (i.e., policy
	agenda, policy formation, policy implementation, policy evaluation and decisions about the future).

1187	Table 2: Global Matrix 3.0 grading rubric
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Grade	Interpretation	Corresponding number for analysis
A+	94% - 100%	15
A	We are succeeding with a large majority of children and youth (87% - 93%)	14
A-	80% - 86%	13
B+	74% - 79%	12
В	We are succeeding with well over half of children and youth (67% - 73%)	11
B-	60% - 66%	10
C+	54% - 59%	9
C	We are succeeding with about half of children and youth (47% - 53%)	8
C-	40% - 46%	7
D+	34% - 39%	6
D	We are succeeding with less than half but some children and youth (27% - 33%)	5
D-	20% - 26%	4
F	We are succeeding with very few children and youth (<20%)	2
INC	Incomplete - insufficient or inadequate information to assign a grade	No Grade

1190 Table 3: Sociodemographic information of the 49 countries in the Global Matrix 3.0

Country (in alphabetica l order)	HDI ^a	GNI per capita (USD) a	Public Health Expenditur e (% of GDP) ^a	GШª	Life expectanc y at birth (years) ^a	Mean years of schoolin g (years) ^a	Gini index b	Global Food Securit y Index ^c	Urban Population Percentage d	Improve d drinking water coverage (%) ^d	Populatio n Density (people / km ² of land area) ^e	Summe r Olympi c Medal Count ^f	Distanc e to the Equator (km) ^g
Australia	0.939	42822	6.3	0.12	82.5	13.2	34.7	83.3	89.4	100	3	497	2796
Bangladesh	0.579	3341	3.7	0.52	72	5.2	32.4	39.7	28.9	81	1252	0	2620
Belgium (Flanders)	0.896	41243	8.3	0.073	81	11.4	27.7	79.8	97.5	100	374	148	5597
Botswana	0.698	14663	5.1	0.435	71.7	11.9	60.5	59.4	62.3	96	4	1	2470
Brazil	0.754	14145	3.8	0.414	74.7	7.8	51.3	67.7	84.9	98	25	128	1574
Bulgaria	0.794	16261	4.6	0.223	74.3	10.8	37.4	62.9	73.7	100	66	218	4733
Canada	0.92	42582	7.4	0.098	82.2	13.1	34	82.2	80.8	100	4	302	6223
Chile	0.847	21665	3.9	0.322	82	9.9	47.7	74.7	89.4	96	24	13	3949
China	0.738	13345	3.1	0.164	76	7.6	42.2	63.7	51.9	91	147	546	3970
Colombia	0.727	12762	5.4	0.393	74.2	7.6	50.8	60.1	75.6	92	44	28	505
Czech Republic	0.878	28144	6.3	0.129	78.8	12.3	25.9	75.8	73.4	100	137	56	5521
Denmark	0.925	44519	9.2	0.041	80.4	12.7	28.2	80.3	87.1	100	136	194	6238
Ecuador	0.739	10536	4.5	0.391	76.1	8.3	45	55.2	68	94	66	2	202
England	0.909	37931	7.6	0.131	80.8	13.3	33.2	84.2	79.7	100	271	NA	5803
Estonia	0.865	26362	5	0.131	77	12.5	32.7	NA	69.5	98	31	34	6498
Ethiopia	0.448	1523	4.7	0.499	64.6	2.6	39.1	33.3	17.2	44	102	53	1011
Finland	0.895	38868	7.3	0.056	81	11.2	27.1	81	83.8	100	18	303	6868
France	0.897	38085	9	0.102	82.4	11.6	32.7	82.3	86.4	100	122	716	5121
Germany	0.926	45000	8.7	0.066	81.1	13.2	31.7	82.5	74.1	100	236	1346	5671
Ghana	0.579	3839	4.8	0.547	61.5	6.9	42.4	47.9	52.6	86	124	4	879
Guernsey Channel Islands*	0.975	NA	NA	NA	82.6	NA	40	NA	31.7	NA	850	NA	5481
Hong Kong	0.917	54265	NA	NA	84.2	11.6	NA	NA	100	NA	6987	3	2478
India	0.624	5663	3.9	0.53	68.3	6.3	35.1	48.9	31.6	92	445	28	2278
Japan	0.903	37268	8.6	0.116	83.7	12.5	32.1	79.5	91.9	100	348	439	4008
Jersey**	0.985	NA	NA	NA	81.9	NA	41	NA	31.7	NA	845	NA	5453
Lebanon	0.763	13312	3	0.381	79.5	8.6	31.8	NA	87.4	100	587	4	3748
Lithuania	0.848	26006	4.4	0.121	73.5	12.7	37.4	NA	67.2	92	46	25	6116
Mexico	0.762	16383	3.3	0.345	77	8.6	43.4	65.8	78.4	96	66	69	2615

Nepal	0.558	2337	5.4	0.497	70	4.1	32.8	44.5	17.3	89	202	0	3142
Netherlands	0.924	46326	9.5	0.044	81.7	11.9	29.3	82.8	83.6	100	506	285	5778
New Zealand	0.915	32870	9.1	0.158	82	12.5	NA	81	86.3	100	18	117	4530
Nigeria	0.527	5443	5.3	NA	53.1	6	43	38.4	50.3	58	204	25	1004
Poland	0.855	24117	4.5	0.137	77.6	11.9	31.8	74.1	60.8	NA	124	284	5754
Portugal	0.843	26104	6.2	0.091	81.2	8.9	35.5	79	61.6	99	113	24	4363
Qatar	0.856	12991 6	1.9	0.542	78.3	9.8	NA	73.3	98.9	100	221	5	2805
Scotland	0.909	37931	7.6	0.131	80.8	13.3	33.2	84.2	79.7	100	271	NA	6263
Slovenia	0.89	28664	6.6	0.053	80.6	12.1	25.4	NA	49.8	99	103	23	5113
South Africa	0.666	12087	8.5	0.394	57.7	10.3	63	64	62.4	91	46	86	3382
South Korea	0.901	34541	4	0.067	82.1	12.2	31.6	NA	83.5	98	526	267	3975
Spain	0.884	32779	6.4	0.081	82.8	9.8	36.2	78.1	77.6	100	93	150	4481
Sweden	0.913	46251	10	0.048	82.3	12.3	29.2	81.7	85.4	100	24	494	6668
Taiwan***	0.885	45582	NA	NA	80.2	NA	33.6	NA	NA	NA	NA	24	2622
Thailand	0.74	14519	5.6	0.366	74.6	7.9	37.8	58.3	34.4	96	135	33	1755
United Arab Emirates	0.84	66203	2.6	0.232	77.1	9.5	NA	70.9	84.7	100	111	2	2592
United States	0.92	53245	8.3	0.203	79.2	13.2	41.5	84.6	82.6	99	35	2522	4107
Uruguay	0.795	19148	6.1	0.284	77.4	8.6	39.7	69.7	92.6	100	20	10	3600
Venezuela	0.767	15129	1.5	0.461	74.4	9.4	46.9	50.2	93.7	93	36	15	710
Wales	0.909	37931	7.6	0.131	80.8	13.3	33.2	84.2	79.7	100	271	NA	5778
Zimbabwe	0.516	1588	NA	0.54	59.2	7.7	43.2	NA	39.1	80	42	8	2103

1191 Note: HDI = Human Development Index, GNI = Gross National Income, GDP = Gross Domestic Product, GII = Gender Inequality Index, NA= not available. Sources of information: a., United Nations 1192 Development Programme;²¹ b. and e., the World Bank;^{94,95} c., the Economist Intelligence Unit;⁹⁶ d., 1193 1194 United Nations, Department of Economic and Social Affairs,⁹⁷ f., the Wikimedia Foundation,⁹⁸ and g., the distance to the Equator was calculated from the latitude and longitude from Latlong.net.99 * For 1195 Guernsey, the HDI sourced from the United Nations Economic and Social Commission for Asia and the 1196 Pacific,¹⁰⁰ the life expectancy at birth, population size, and the population density sourced from the 1197 United States Central Intelligence Agency,¹⁰¹ and the Gini index sourced from the State of Guernsey.¹⁰² 1198

- 1199 **For Jersey, the HDI sourced from¹⁰⁰, the life expectancy at birth, population size, and the population
- 1200 density sourced from the United States Central Intelligence Agency,¹⁰¹ and the Gini index sourced from
- 1201 the State of Jersey.¹⁰³ ***For Taiwan, the HDI, the GNI per Capita, the life expectancy at birth and the
- 1202 Gini index come from the National Statistics, Republic of China (Taiwan).¹⁰⁴ For England, Scotland, and
- 1203 Wales, the official data for UK were reported.

1204

1206 Table 4: Grades assigned to the 10 core physical activity indicators for the 49 countries of the

1207 Global Matrix 3.0

	PA	SP	AP	AT	SB	PF	FAM	SCH	СОМ	GOV	AVG
Australia	D-	B-	INC	D+	D-	D+	C+	B+	A-	D	C-
Bangladesh	C-	INC	INC	C-	A-	INC	INC	INC	INC	C-	С
Belgium	F	В	INC	C+	С	INC	C+	B-	В	В	С
(Flanders)											
Botswana	INC	INC	D-	С	B-	INC	INC	C-	INC	С	C-
Brazil	D	C+	D+	С	D-	D	C-	С	C-	D+	D+
Bulgaria	D+	C+	C+	B-	D	INC	D	C	С	INC	C-
Canada	D+	B+	D	D-	D+	D	C+	B-	B+	C+	C-
Chile	D-	D-	INC	F	C-	D	F	D	В	B-	D
China	F	D-	D+	C+	F	D	D+	D+	F	F	D-
Colombia	D+	С	INC	В	D+	D-	INC	D	B-	В	C-
Czech Republic	D	B-	D-	C+	D-	C+	C+	B+	В	C+	С
Denmark	D-	A-	INC	B+	D+	INC	INC	A-	B+	A-	B-
Ecuador	D	INC	INC	C-	С	INC	F	INC	D+	INC	D
England	C-	D+	INC	C-	D+	C-	INC	B+	С	INC	C-
Estonia	D-	С	F	D	F	INC	D	C+	В	В	D+
Ethiopia	D	С	В	С	F	INC	F	D	F	D	D
Finland	D	C+	С	B+	D-	С	B-	A	B+	A-	C+
France	D	C-	INC	C-	D-	B-	INC	В	INC	С	C-
Germany	D-	В	D-	C-	D-	INC	B-	B+	B+	INC	С
Ghana	С	C+	B-	C+	INC	INC	F	D	D+	D	D+
Guernsey	D	C+	INC	D	С	INC	INC	INC	INC	D	D+
Hong Kong	C-	С	INC	B+	C-	D	D-	С	В	С	C-
India	D	INC	C-	B-	C-	F	D	INC	D	D	D
Japan	INC	B-	INC	A-	C-	А	C-	B+	B-	В	B-
Jersey	D-	INC	INC	D+	C	D	C	B-	С	D	D+
Lebanon	D	F	INC	D	C-	INC	INC	D	INC	C+	D

Lithuania	C-	С	INC	C-	C-	C+	D	C+	C	C	C-
Mexico	D+	С	INC	C+	D-	INC	INC	D+	D+	С	D+
Nepal	D+	INC	INC	A-	B+	INC	A	INC	C-	INC	B-
Netherlands	C	В	В	B-	C-	INC	INC	С	INC	INC	C+
New Zealand	D-	В	C+	C-	D	INC	C-	B-	В	B+	С
Nigeria	С	C-	С	В	B-	INC	INC	C-	INC	В	С
Poland	D-	D	INC	С	D	C-	C-	В	С	C+	C-
Portugal	D	B-	INC	C-	C-	C	С	А	В	В	C+
Qatar	D	D+	INC	N/A	D+	INC	INC	С	INC	B+	C-
Scotland	F	В	INC	C	F	INC	INC	INC	B-	С	D+
Slovenia	A-	C+	D	С	B+	A-	B+	A	В	A	В
South Africa	C	D	INC	С	INC	INC	C-	D-	C-	С	D+
South Korea	F	С	INC	B+	D	D+	INC	D+	INC	D	D+
Spain	D	В	C-	B-	B+	INC	INC	C+	INC	INC	C+
Sweden	D+	B+	INC	С	C+	INC	INC	C+	A	В	C+
Taiwan	F	D-	INC	C-	C-	B-	INC	B+	B+	B+	С
Thailand	D-	C-	F	С	D-	INC	В	В	B-	B+	C-
United Arab	F	INC	INC	INC	C-	INC	INC	D-	INC	B+	D+
Emirates											
United States	D-	C	INC	D-	D	C-	INC	D-	C	INC	D
Uruguay	D	F	INC	C	C-	C-	INC	C-	INC	D	D
Venezuela	D	D	INC	B-	INC	INC	INC	INC	D-	F	D
Wales	D+	C+	C-	D+	F	INC	D	INC	INC	C+	D+
Zimbabwe	C+	В	D+	A-	В	INC	INC	C	D	C-	C

1208

Note: PA = Physical Activity, SP = Organized Sport and Physical Activity, AP = Active Play, AT =
Active Transportation, SB = Sedentary Behaviors, PF = Physical Fitness, FAM = Family and Peers, SCH
= School, COM = Community and Environment, GOV = Government, AVG = Average, INC =
incomplete grade, and N/A = not applicable.

1214 Table 5: Descriptive statistics of the grades by indicator and groups of indicators for the 49

1215 countries of the Global Matrix 3.0

	Grade count	Incomplete grades	Mean number grade	SD	Mean letter grade
Overall Physical Activity	47	2	5.2	2.1	D
Organized Sport and Physical Activity	42	7	8.2	2.7	С
Active Play	20	29	6.5	2.7	D+
Active Transportation	47	2	8.3	2.5	С
Sedentary Behaviors	46	3	6.4	2.8	D+
Physical Fitness	22	27	7.1	2.9	C-
Family and Peers	27	22	7.0	3.1	D+
School	41	8	8.8	3.0	С
Community and Environment	36	13	8.9	3.0	С
Government	41	8	8.6	3.1	С
Behavioral indicators	49	0	7.0	1.6	C-
Sources of influence indicators	49	0	8.3	2.5	С
All indicators	49	0	7.5	1.6	C-

1216 Note: Behavioral indicators = Average of Overall Physical Activity, Organized Sport and Physical

Activity, Active Play, Active Transportation, Sedentary Behavior indicator grades; Source of influence indicators = Average of Family and Peers, School, Community and Environment, and Government indicator grades. Physical Fitness was not included in the behavioral indicators cluster. There are no missing grades for the bottom three rows because these scores are adjusted for missing grades.

1221

1223 Table 6: Average grades by indicator and group of indicators for the three HDI categories (low and

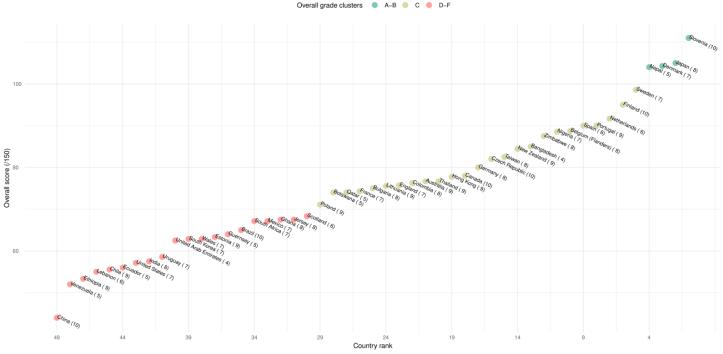
1224 medium, high, and very high)

	Low and medium HDI	High HDI	Very high HDI
Overall Physical Activity	C-	D-	D-
Organized Sport and Physical Activity	С	D+	C+
Active Play	C-	D	D+
Active Transportation	C+	С	C-
Sedentary Behaviors	C+	D	D+
Physical Fitness	F	D	C-
Family and Peers	D+	D+	C-
School	D+	C-	C+
Community and Environment	D	D+	В-
Government	C-	D+	C+
Behavioral indicators	С	D+	D+
Sources of influence indicators	D+	D+	C+
All indicators	C-	D+	C-

Note: HDI = Human development index; Behavioral indicators = Average of Overall Physical Activity, Organized Sport and Physical Activity, Active Play, Active Transportation, Sedentary Behavior indicator grades; Source of influence indicators = Average of Family and Peers, School, Community and Environment, and Government indicator grades. Physical Fitness was not included in the behavioral indicators cluster. There are no missing grades for the bottom three rows because these scores are adjusted for missing grades.

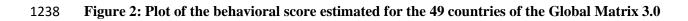
1232 Figure 1: Plot of the overall score estimated for the 10 core indicators for the 49 countries of the

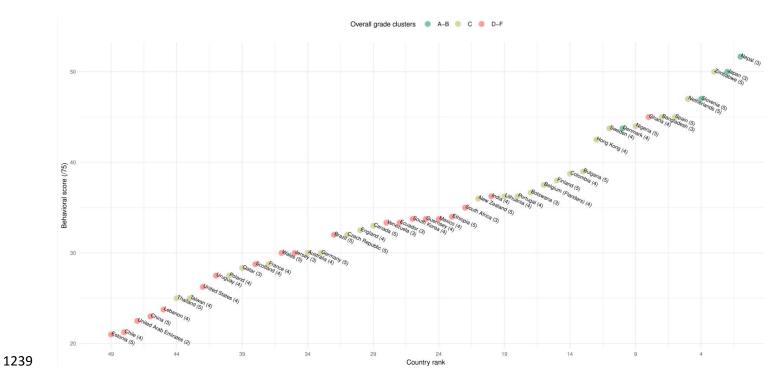
1233 Global Matrix 3.0



1234

1235 Note: The overall score was adjusted for missing and incomplete grades. The number in parenthesis1236 shows the number of grades available for the calculation of the score.



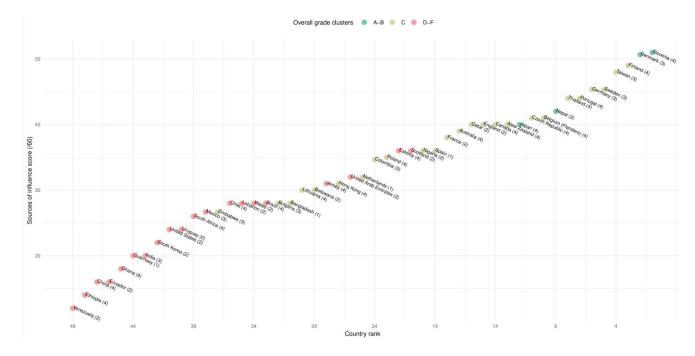


1240 Note: The behavioral score was adjusted for missing and incomplete grades. The number in parenthesis

1241 shows the number of grades available for the calculation of the score.

1243 Figure 3: Plot of the source of influence indicators score for the 49 countries of the Global Matrix





1246 Note: The source of influence score was adjusted for missing and incomplete grades. The number in 1247 parenthesis shows the number of grades available for the calculation of the score. These estimates of 1248 sources of influence score are interpreted with a high degree of caution as they are likely imprecise 1249 estimates of sources of influence due to the level of missing data used to determine this score.