

# Inequalities related to participation in Physical Education classes among South American adolescents: a pooled analysis with 173,288 participants

Desigualdades relacionadas à participação em aulas de Educação Física entre adolescentes sul-americanos: uma análise com 173.288 participantes

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#### ABSTRACT

We aimed to describe the prevalence of participation in Physical Education (PE) classes among South American adolescents according to sociodemographic correlates. We used nationally representative data from 11 South American countries, comprising 173,288 adolescents (>11 to 19y). Participation in PE classes was self-reported (0, 1, 2, and  $\geq$ 3 days/week). Sociodemographic correlates were gender, age group, and food security status. Poisson Regression models were used to estimate the Prevalence Ratios. Around 16% of South American adolescents did not participate in PE classes, while 27% participated  $\geq$ 3 days/week in PE classes. There were more boys in the  $\geq$ 3 days/week category [1.10 (1.03; 1.19)] and no gender difference in the 0 days/week category [1.03 (0.91; 1.16)]. Older adolescents ( $\geq$ 16y) had a higher prevalence of 0 [1.50 (1.11; 2.02)] and 1 day/week [1.18 (1.05; 1.33)], and a lower prevalence of 2 [0.70 (0.58; 0.85)] and  $\geq$ 3 days/week [0.73 (0.60; 0.89)] compared to the younger adolescents (12-13y). Adolescents who reported food insecurity had a higher prevalence of 0 [1.20 (1.06; 1.36)] and  $\geq$ 3 days/week [1.07 (1.02; 1.12)]. In conclusion, approximately 16% of South American adolescents do not participate in PE classes, with differences related to gender, age, and food security status.

**Keywords**: Adolescent; Physical education; Physical activity; Global School-Based Student health survey.

#### **RESUMO**

O objetivo do presente estudo foi descrever a prevalência de participação em aulas de Educação Física (EF) entre adolescentes sul-americanos de acordo com correlatos sociodemográficos. Foram utilizados dados de 11 países sul-americanos, compreendendo 173.288 adolescentes (>11 a 19 anos). A participação em aulas de EF foi autorrelatada (0, 1, 2 e ≥3 dias/semana). Os correlatos sociodemográficos foram gênero, faixa etária e status de segurança alimentar. Modelos de regressão de Poisson foram usados para estimar as razões de prevalência. Cerca de 16% dos adolescentes sul-americanos não participaram de aulas de EF, enquanto 27% participaram ≥3 dias/semana em aulas de EF. Meninos tiveram maior probabilidade de participar de aulas de aulas de EF ≥3 dias/semana do que meninas [1,10 (1,03; 1,19)], não havendo diferença de gênero na categoria 0 dia/semana [1,03 (0,91; 1,16)]. Adolescentes mais velhos (≥16 anos) apresentaram maior prevalência de 0 [1,50 (1,11; 2,02)] e 1 dia/semana [1,18 (1,05; 1,33)], e menor prevalência de 2 [0,70 (0,58; 0,85)] e ≥3 dias/semana de aulas de EF [0,73 (0,60; 0,89)] em comparação aos adolescentes mais jovens (12-13 anos). Adolescentes que relataram insegurança alimentar apresentaram maior prevalência de 0 [1,20 (1,06; 1,36)] e ≥3 dias/semana de aulas de EF [1,07 (1,02; 1,12)]. Assim, aproximadamente 16% dos adolescentes sul-americanos não participam de aulas de educação física, sendo observadas diferenças de gênero, entre faixas etárias e entre status de segurança alimentar.

Palavras-chave: Adolescente; Educação física; Atividade física; Global School-Based Student health survey.

#### CORRESPONDING

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#### DOI

10.12820/rbafs.29e0357



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#### Introduction

Physical Education (PE) class has an essential role in students' education through bodily expression, playful experiences, social relationships<sup>1,2</sup>, and potential health-related outcomes (e.g., decreasing anxiety)<sup>3</sup>. PE is also associated with increases in students' total physical activity<sup>2,4,5</sup>, and benefits such as cardiorespiratory fitness, muscular strength, reductions in body fatness indexes, and improvements in fundamental motor skills, cognition, and academic performance<sup>2,6,7</sup>.

There is a growing concern about the participation of children and adolescents in PE classes. For instance, data from a worldwide survey indicates that PE is not implemented in line with state policy legal requirements in 29.0% of the countries8. In Latin America and the Caribbean, 11% of the countries did not implement PE following expectations/obligations8. In addition, although being consolidated in the school curricula, evidence has been raised on PE inequalities among South American (SA) countries. For example, in Brazil, despite PE classes being mandatory, girls and adolescents in lower socioeconomic conditions tend to report lower participation in PE classes than boys and adolescents with higher socioeconomic conditions, respectively<sup>9,10</sup>. Considering that, even with SA countries presenting different legislations (e.g., at the state and national level), they do not change according to gender and socioeconomic status.

In addition, some gaps persist in the literature, as there are no multi-country studies including exposures related to economic indicators with harmonized datasets from  $SA^{11,12}$ . As far as we know, only one previous study<sup>13</sup> with SA countries used food security status (proxy of socioeconomic status) to identify whether participation in PE differs between those more and less socially favored. However, the previous study used a dichotomic indicator of participation in PE ( $\geq 3$  days/week)<sup>13</sup>, and possible differences in other weekly frequencies of PE are unknown.

Although some studies have been carried out data from multiple countries<sup>12</sup> or with a focus on Latin American and Caribbean countries<sup>13</sup>, only data from the Global School-based Student Health Survey (GSHS) were used, which did not cover all SA countries (e.g., Brazil). Furthermore, GSHS data from Colombia and Ecuador are not nationally representative so far<sup>13</sup>. However, once Brazil, Colombia, and Ecuador have their own nationally representative surveys with adolescents, harmonizing and analyzing these surveys

could improve regional representativeness as well as country-level estimates.

The South American Physical Activity and Sedentary Behavior Network – SAPASEN has sought to harmonize and analyze nationally representative datasets to provide continuous evidence on movement behaviors <sup>14</sup>. By summarizing the information through nationally representative datasets, it is possible to understand the gaps in participation in PE, guiding new policies and research on the subject. For example, providing useful information for countries to plan and evaluate legislation on PE across the school years, as well as providing information on the most needed subgroups in relation to PE promotion. Therefore, this study aims to present the prevalence of participation in PE among SA adolescents according to sociodemographic indicators (i.e., gender, age, and status of food security).

#### Methods

We used nationally representative cross-sectional data from Argentina (GSHS, 2018)15, Bolivia (GSHS, 2018)15, Brazil (Brazil National School Health Survey, PeNSE 2015)16, Chile (GSHS, 2013)15, Colombia (Colombia National School Health Survey, ENSE 2017)17, Ecuador (Ecuador National Health and Nutrition Survey, ENSANUT 2018)18, Guyana (GSHS, 2010)15, Paraguay (GSHS, 2017)15, Peru (GSHS, 2010)<sup>15</sup>, Suriname (GSHS, 2016)<sup>15</sup>, and Uruguay (GSHS, 2012)<sup>15</sup>. When the countries presented two or more surveys, only the latest was used. Details on the sampling strategy are available elsewhere<sup>13</sup>. All surveys were previously approved by local ethics committees in each country, and informed consent was obtained from the students and/or parents/legal guardians, as required by the local ethics review board.

The Ecuador surveys comprised data from individuals aged 5 to 18 years old, while the lower age category in other surveys was ≤11y. Thus, aiming to harmonize the surveys, we excluded all participants aged ≤11y and those with no data for exposures and/or outcomes. Those ≤11y represented ~8% (15,976/200,827) of the initial sample. After that, 11,563 participants were excluded by missing data, and the final sample was comprised of 173,288 adolescents from Argentina (n = 53,315), Bolivia (n = 7,052), Brazil (n = 14,368), Chile (n = 1,926), Colombia (n = 74,319), Ecuador (n = 9,000), Guyana (n = 2,244), Paraguay (n = 2,894), Peru (n = 2,827), Suriname (n = 2,031), and Uruguay (n = 3,312). More details are shown in Supplementary Chart 1.

#### Physical Education classes

The GSHS (Argentina, Bolivia, Chile, Guyana, Paraguay, Peru, Suriname, and Uruguay) and *ENSE-2017* (Colombia) assessed the participation in PE classes by the question "During this school year, on how many days did you go to physical education classes each week?". The PeNSE-2015 (Brazil) used the question, "During the last seven days, how many days did you go to a physical education class at school?". Two questions were used in the ENSANUT-2018 (Ecuador). First, "in a normal week, when you go to school, do you go to the physical education classes?". Second, "on how many days did you go to a physical education class per week?". The participants who answered did not go to PE class in a normal week were coded as 0 days. The answers were coded as "0 days/week", "1 day/week", "2 days/week", and "≥3 days/week".

#### Sociodemographic correlates

Information about gender, age group (12-13; 14-15; ≥16 y.o), and food security status were collected. The question used to assess food security status was, "During the past 30 days, how often did you go hungry because there was not enough food in your home?" For analysis, responses to how often the student reported being hungry due to the absence of food were grouped into the following two categories: "food security" (never/rarely) and "food insecurity" (sometimes/most of the time/always)¹¹. In the present paper, we used food security status as a proxy for socioeconomic status. Food insecurity is closely associated with socioeconomic status indicators among adolescents, such as lower parental education and lower-income²¹. Among the analyzed countries, only Ecuador did not report information on

food security status.

#### **Statistics**

All analyses were conducted using Stata 15.0 (StataCorp., College Station, TX, USA). Descriptive statistics were performed using relative frequencies and their respective 95% confidence intervals (95% CI). The command "metaprop" was used to estimate the weighted frequencies of the PE classes. To identify possible differences in each PE class category, we created dummy variables for the outcome. For instance, in the first model, considering gender as exposure, we sought to identify if the probability of reporting zero days of PE classes per week was different between boys and girls. In the second model, we verified possible differences in one day of PE classes, and so on. Crude Poisson regression models were used to identify the association of the sociodemographic correlates with frequencies of PE class. The command "metan" was used to run the random-effects meta-analysis models. The heterogeneity was assessed using the Higgins' I<sup>2</sup> statistic. All analyses accounted for appropriate sample weights for each country.

#### Results

The sample characteristics are presented in Table 1. The proportion of girls ranged from 49.0% (Bolivia and Brazil) to 54.3% (Uruguay), while the sample was older in Uruguay and Bolivia. Suriname and Guyana had the highest prevalence of food insecurity.

Table 2 presents the participation in PE classes among SA countries. The pooled analysis revealed that 16.0% (95% CI: 10.0; 21.0) of SA adolescents did not

**Table 1** – Sociodemographic characteristics of adolescents from 11 South American countries (n = 173,288).

	Gender		Age group		Food insecurity
	Girls	12-13 y	14-15y	≥16y	Yes
Argentina (2018)	52.3 (51.5; 53.2)	20.8 (20.1; 21.5)	46.9 (46.1; 47.8)	32.3 (31.6; 33.1)	11.4 (10.8; 11.9)
Bolivia (2018)	49.0 (47.8; 50.2)	11.1 (10.4; 11.9)	39.4 (38.2; 40.5)	49.5 (48.3; 50.7)	20.2 (19.2; 21.1)
Brazil (2015)	49.0 (47.9; 50.2)	27.5 (26.6; 28.4)	31.2 (30.2; 32.3)	41.3 (40.1; 42.4)	12.1 (11.3; 12.9)
Chile (2013)	51.4 (48.8; 53.9)	22.2 (20.4; 24.0)	34.5 (32.1; 37.0)	43.3 (40.7; 46.0)	8.2 (6.9; 9.9)
Colombia (2017)	53.6 (53.0; 54.2)	20.6 (20.1; 21.1)	43.5 (42.9; 44.1)	36.0 (35.4; 36.5)	7.3 (7.0; 7.7)
Ecuador (2018)	48.3 (46.5; 50.0)	35.7 (34.0; 37.4)	34.2 (32.5; 35.9)	30.1 (28.5; 31.8)	-
Guyana (2010)	51.5 (49.3; 53.6)	24.0 (22.1; 25.9)	60.6 (58.5; 62.7)	15.4 (13.9; 17.0)	33.1 (31.1; 35.2)
Paraguay (2017)	51.6 (49.7; 53.5)	21.0 (19.5; 22.6)	40.8 (39.0; 42.6)	38.2 (36.4; 40.1)	11.4 (10.3; 12.7)
Peru (2010)	49.5 (47.6; 51.4)	21.2 (19.7; 22.8)	62.5 (60.7; 65.3)	16.3 (14.9; 17.7)	19.3 (17.9; 20.9)
Suriname (2016)	50.9 (48.6; 53.2)	25.0 (23.1; 27.0)	43.9 (41.6; 46.1)	31.1 (29.0; 33.3)	32.8 (30.6; 35.0)
Uruguay (2012)	54.3 (52.6; 56.1)	7.3 (6.4; 8.2)	22.6 (21.1; 24.1)	60.5 (58.7; 62.2)	16.9 (15.6; 18.3)

Note: The values are presented through percentage and their respective 95% confidence intervals.

participate in any PE class. The highest and lowest prevalence of 0 days/week of PE classes were in Guyana (49.7%, 95% CI: 47.5; 51.8) and Ecuador (3.2%, 95% CI: 2.7; 3.9), respectively. Approximately 27.0% (95% CI: 19.0; 35.0) of SA adolescents participate in PE classes on ≥3 days/week, with the higher and lower proportions being observed in Bolivia (40.3%, 95% CI: 10.4; 11.9) and Peru (2.2%, 95% CI: 6.8; 8.8), respectively. The most common pattern of PE classes is once a week (38.0%, 95% CI: 26.0; 50.0).

Table 3 presents the prevalence and prevalence ratios (PR) of participation in PE classes according to gender. The pooled analysis revealed that boys had more probability to participate in PE classes on  $\geq$ 3 PE days/week than girls [PR = 1.10 (95% CI: 1.02; 1.19),  $I^2 = 88.0\%$ ].

Table 4 presents the proportion of participation in PE classes according to age groups. The older adolescents (≥16y) were less likely to participate in PE class compared to the younger adolescents (12-13y). Adolescents aged 14-15y and ≥16y had more probability to participate in PE class on 1 day/week than younger adolescents [PR<sub>14-15y</sub> = 1.13 (95% CI: 1.05; 1.21) I² = 87.2%; PR<sub>≥16y</sub> = 1.18 (95% CI: 1.05; 1.33), I² = 94.4%, respectively], but they had less probability to participate in PE classes on 2 days/week [PR<sub>14-15y</sub> = 0.85 (95% CI: 0.76; 0.94), I² = 84.1%; PR<sub>≥16y</sub> = 0.70 (95% CI: 0.58; 0.85), I² = 94.8%, respectively]. Lastly, adolescents aged 14-15y and ≥16y had a prevalence of ≥3 days/week of PE classes 12.0% and 27.0% lower than younger adolescents, respectively.

Table 5 presents the proportion of participation in PE classes according to food security status. The pooled analysis revealed a U-shaped association, where adolescents with food insecurity had a higher prevalence of 0 and ≥3 days/week of PE classes than adolescents with food security [PR<sub>0 days/week</sub> = 1.20 (95% CI: 1.06; 1.36),  $I^2 = 80.1\%$ ;  $PR_{≥3 days/week} = 1.07$  (95% CI: 1.02; 1.12),  $I^2 = 35.4\%$ ], but a lower prevalence of 1 day/week [PR = 0.97 (95% CI: 0.93; 0.97),  $I^2 = 23.6\%$ ].

0 days/week of PE class than adolescents with food security [PR = 1.20 (95% CI: 1.06; 1.36),  $I^2$  = 80.1%]. However, the proportion of  $\geq$ 3 days/week of PE classes was higher among adolescents with food insecurity [PR = 1.07 (95% CI: 1.02; 1.12),  $I^2$  = 35.4%].

#### Discussion

The present study described the prevalence of participation in PE among SA adolescents according to sociodemographic correlates. Our results show that almost a fifth proportion does not participate in PE classes. Students mostly report PE once a week. Boys seem to participate in PE more frequently in a week than girls and older adolescents seem to participate less in PE classes than their younger pairs. Food insecurity presented a U-shaped association with the weekly frequency of PE.

Our pooled analysis showed that approximately 16.0% of the SA adolescents reported not participating in PE classes; prevalence similar to that found in a previous study with 54 countries/territories, but lower than in regions such as Central Asia, Middle East, and North Africa (24.0%), Oceania (27.0%), and Sub-Sa-

Table 2 - Proportion of participation in Physical Education classes in 11 South American countries (n = 173,288).

	0 days/week		1 day/week	:	2 days/weel	2 days/week		ek
	% (95% CI)	$I^2$	% (95% CI)	$I^2$	% (95% CI)	$I^2$	% (95% CI)	$I^2$
Argentina (2018)	12.0 (11.4; 12.6)		16.3 (15.7; 16.9)		34.3 (33.5; 35.1)		37.5 (36.6; 38.3)	
Bolivia (2018)	11.1 (10.4; 11.9)		42.8 (41.6; 44.0)		5.7 (5.2; 6.3)		40.3 (39.2; 41.5)	
Brazil (2015)	23.9 (22.9; 25.0)		40.2 (39.1; 41.3)		26.3 (25.4; 27.3)		9.6 (9.0; 10.2)	
Chile (2013)	8.8 (7.4; 10.3)		43.3 (40.7; 45.9)		15.1 (13.5; 16.9)		32.8 (30.4; 35.3)	
Colombia (2017)	7.7 (7.4; 8.1)		40.4 (39.8; 41.0)		14.4 (14.0; 14.8)		37.4 (36.9; 38.0)	
Ecuador (2018)	3.2 (2.7; 3.9)		23.7 (22.3; 25.2)		45.9 (44.2; 47.7)		27.1 (25.5; 28.8)	
Guyana (2010)	49.7 (47.5; 51.8)		22.3 (20.5; 24.1)		9.1 (7.9; 10.4)		19.0 (17.3; 20.8)	
Paraguay (2017)	15.2 (13.9; 16.6)		58.3 (56.5; 60.2)		6.0 (5.2; 7.0)		20.4 (19.0; 22.0)	
Peru (2010)	7.7 (6.8; 8.8)		86.0 (84.6; 87.3)		4.1 (3.4; 4.9)		2.2 (1.7; 2.9)	
Suriname (2016)	20.6 (18.8; 22.6)		40.6 (38.4; 42.9)		5.7 (4.7; 7.0)		33.0 (30.9; 35.1)	
Uruguay (2012)	12.6 (11.5; 13.8)		8.1 (7.2; 9.1)		44.3 (42.5; 46.0)		35.0 (33.3; 36.7)	
South America	16.0 (10.0; 21.0)	100%	38.0 (26.0; 50.0)	100%	19.0 (11.0; 27.0)	100%	27.0 (19.0; 35.0)	100%

Note: Days per week are not the same as hours or classes per week.

Table 3 – Association between gender and participation in Physical Education in South America (n = 173,288).

Countries		0 day	s/week	1 day	1 day/week		s/week	≥3 days/week		
Countries	,	% (95% CI)	PR (95% CI)	% (95% CI)	PR (95% CI)	% (95% CI)	PR (95% CI)	% (95% CI)	PR (95% CI)	
A	Girls	11.8 (11.0; 12.7)	Ref	16.6 (15.7; 17.4)	Ref	36.8 (35.7; 37.9)	Ref	34.8 (33.7; 36.0)	Ref	
Argentina	Boys	12.1 (11.3; 13.0)	1.03 (0.93; 1.13)	15.9 (15.1; 16.8)	0.96 (0.89; 1.03)	31.6 (30.5; 32.8)	0.86 (0.82; 0.90)*	40.3 (39.1; 41.6)	1.16 (1.11; 1.21)*	
D 1: :	Girls	10.3 (9.2; 11.4)	Ref	44.6 (42.9; 46.4)	Ref	5.4 (4.6; 6.3)	Ref	39.7 (38.0; 41.5)	Ref	
Bolivia	Boys	11.9 (10.9; 13.1)	1.16 (1.01; 1.34)*	41.1 (39.5; 42.7)	0.92 (0.87; 0.97)*	6.1 (5.3; 6.9)	1.12 (0.92; 1.38)	40.9 (39.3; 42.6)	1.03 (0.97; 1.09)	
D. d	Girls	23.5 (22.2; 24.9)	Ref	40.2 (38.6; 41.8)	Ref	27.3 (25.9; 28.7)	Ref	9.0 (8.2; 9.9)	Ref	
Brazil	Boys	24.3 (22.9; 25.8)	1.03 (0.95; 1.12)	40.1 (38.6; 41.7)	1.00 (0.94; 1.06)	25.4 (24.1; 26.7)	0.93 (0.86; 1.00)	10.2 (9.3; 11.1)	1.13 (0.99; 1.29)	
	Girls	9.5 (7.6; 11.8)	Ref	43.8 (40.2; 47.5)	Ref	13.8 (11.7; 16.1)	Ref	32.9 (29.5; 36.5)	Ref	
Chile	Boys	8.0 (6.2; 10.3)	0.85 (0.61; 1.18)	42.7 (39.1; 46.3)	0.97 (0.86; 1.10)	16.6 (14.2; 19.3)	1.21 (0.97; 1.50)	32.7 (29.4; 36.3)	0.99 (0.86; 1.15)	
	Girls	6.8 (6.4; 7.2)	Ref	40.3 (39.6; 41.1)	Ref	14.9 (14.3; 15.5)	Ref	38.0 (37.2; 38.8)	Ref	
Colombia	Boys	8.8 (8.3; 9.4)	1.30 (1.29; 1.41)*	40.5 (39.6; 41.4)	1.00 (0.98; 1.03)	13.9 (13.3; 14.5)	0.93 (0.88; 0.99)*	36.8 (35.9; 37.6)	0.97 (0.94; 1.00)	
	Girls	4.1 (3.2; 5.2)	Ref	24.5 (22.4; 26.7)	Ref	45.4 (42.8; 47.9)	Ref	26.0 (23.7; 28.5)	Ref	
Ecuador	Boys	2.4 (1.9; 3.1)	0.59 (0.41; 0.83)*	23.0 (21.1; 25.1)	0.94 (0.83; 1.06)	46.4 (44.0; 48.9)	1.02 (0.95; 1.11)	28.1 (25.9; 30.4)	1.08 (0.96; 1.22)	
	Girls	51.0 (48.1; 53.9)	Ref	22.3 (20.0; 24.9)	Ref	8.5 (7.0; 10.3)	Ref	18.1 (16.0; 20.5)	Ref	
Guyana	Boys	48.2 (45.0; 51.5)	0.95 (0.87; 1.03)	22.2 (19.6; 25.0)	0.99 (0.84; 1.17)	9.7 (7.9; 11.8)	1.14 (0.87; 1.51)	19.9 (17.4; 22.6)	1.09 (0.91; 1.31)	
	Girls	16.2 (14.4; 18.1)	Ref	62.8 (60.3; 65.3)	Ref	5.5 (4.4; 6.7)	Ref	15.6 (13.8; 17.6)	Ref	
Paraguay	Boys	14.3 (12.5; 16.3)	0.88 (0.74; 1.05)	53.5 (50.8; 56.2)	0.85 (0.80; 0.91)*	6.6 (5.3; 8.1)	1.21 (0.90; 1.62)	25.6 (23.3; 28.1)	1.65 (1.41; 1.92)*	
	Girls	5.6 (4.5; 7.0)	Ref	87.8 (86.0; 89.5)	Ref	4.5 (3.5; 5.7)	Ref	2.0 (1.4; 3.0)	Ref	
Peru	Boys	9.8 (8.3; 11.5)	1.73 (1.32; 2.27)*	84.2 (82.1; 86.1)	0.96 (0.93; 0.99)*	3.7 (2.8; 4.8)	0.82 (0.56; 1.18)	2.4 (1.7; 3.4)	1.16 (0.69; 1.96)	
	Girls	21.8 (19.2; 24.6)	Ref	43.0 (39.9. 46.1)	Ref	4.2 (3.0; 5.7)	Ref	31.1 (28.3; 34.0)	Ref	
Suriname	Boys	19.5 (17.0; 22.2)	0.89 (0.75; 1.07)	38.2 (35.1; 41.4)	0.89 (0.80; 0.99)*	7.4 (5.7; 9.4)	1.77 (1.19; 2.64)*	35.0 (31.9; 38.2)	1.12 (0.99; 1.28)	
	Girls	12.3 (10.8; 13.9)	Ref	7.8 (6.6; 9.2)	Ref	45.0 (42.6; 47.4)	Ref	35.0 (32.7; 37.3)	Ref	
Uruguay	Boys	13.0 (11.4; 14.9)	1.06 (0.88; 1.28)	8.5 (7.1; 10.0)	1.08 (0.85; 1.37)	43.4 (40.9; 46.1)	0.97 (0.89; 1.05)	35.0 (32.6; 37.6)	1.00 (0.91; 1.11)	
	Girls	16.0 (10.0; 21.0)	Ref	39.0 (27.0; 52.0)	Ref	19.0 (11.0; 27.0)	Ref	26.0 (18.0; 33.0)	Ref	
South America	Boys	16.0 (9.0; 22.0)	1.03 (0.91; 1.16) I <sup>2</sup> (%) = 90.3	37.0 (26.0; 49.0)	0.95 (0.92; 0.98)* I <sup>2</sup> (%) = 67.2	19.0 (12.0; 27.0)	1.00 (0.93; 1.07) I <sup>2</sup> (%) = 76.0	28.0 (20.0; 36.0)	1.10 (1.02; 1.19)* I <sup>2</sup> (%) = 88.0	

Note: PR = prevalence ratio. 95% CI = 95% confidence interval; Ref = reference category. \*There is no overlap of 95% confidence intervals. Days per week are not the same as hours or classes per week

haran Africa (29.0%)<sup>12</sup>. In addition, we observed that prevalence of not participating in PE classes ranges from 3% (i.e., Ecuador) to 50.0% (i.e., Guyana) among

SA countries. PE is mandatory in many SA countries, with different laws and educational regulations across them. For instance, two hours per week of PE are ex-

**Table 4** – Association between age group and participation in Physical Education in South America (n = 173,288).

Countries		0 day	s/week	1 day	1 day/week		s/week	≥3 days/week		
Countries		% (95% CI)	PR (95% CI)							
	12-13y	10.4 (9.2; 11.8)	Ref	15.8 (14.6; 17.0)	Ref	36.5 (34.7; 38.3)	Ref	37.4 (35.6; 39.2)	Ref	
Argentina	14-15y	11.6 (10.8; 12.5)	1.11 (0.96; 1.29)	16.2 (15.3; 17.1)	1.03 (0.93; 1.13)	34.1 (32.9; 35.2)	0.93 (0.88; 0.99)*	38.2 (37.0; 39.4)	1.02 (0.96; 1.08)	
	≥16y	13.8 (12.7; 14.9)	1.32 (1.14; 1.53)*	16.7 (15.8; 17.8)	1.06 (0.96; 1.17)	32.9 (31.6; 34.2)	0.90 (0.85; 0.96)*	36.6 (35.2; 38.0)	0.98 (0.92; 1.04)	
	12-13y	13.4 (11.1; 16.0)	Ref	37.2 (33.9; 40.7)	Ref	7.6 (5.9; 9.9)	Ref	41.7 (38.3; 45.3)	Ref	
Bolivia	14-15y	10.7 (9.6; 12.0)	0.80 (0.65; 0.99)*	42.1 (40.1; 44.0)	1.13 (1.02; 1.25)*	6.3 (5.3; 7.3)	0.82 (0.60; 1.11)	41.0 (39.1; 42.9)	0.98 (0.89; 1.08)	
	≥16y	10.9 (9.9; 12.1)	0.82 (0.66; 1.00)	44.7 (43.0; 46.4)	1.20 (1.09; 1.33)*	4.9 (4.2; 5.7)	0.64 (0.47; 0.86)*	39.5 (37.9; 41.2)	0.95 (0.86; 1.04)	
	12-13y	12.0 (10.9; 13.3)	Ref	37.3 (35.5; 39.0)	Ref	35.3 (33.6; 36.9)	Ref	15.4 (14.2; 16.7)	Ref	
Brazil	14-15y	22.1 (20.5; 23.8)	1.84 (1.62; 2.08)*	41.0 (39.0; 43.0)	1.10 (1.03; 1.18)*	27.6 (25.8; 29.4)	0.78 (0.72; 0.85)*	9.3 (8.3; 10.5)	0.60 (0.52; 0.70)*	
	≥16y	33.2 (31.4; 35.1)	2.76 (2.46; 3.09)*	41.5 (39.6; 43.4)	1.11 (1.04; 1.19)*	19.4 (17.9; 20.9)	0.55 (0.50; 0.60)*	5.9 (5.0; 6.9)	0.38 (0.32; 0.46)*	
	12-13y	6.4 (4.7; 8.8)	Ref	35.0 (31.3; 38.9)	Ref	28.0 (24.4; 31.9)	Ref	30.5 (26.9; 34.5)	Ref	
Chile	14-15y	6.4 (4.6; 8.7)	0.99 (0.63; 1.55)	43.7 (39.4; 48.0)	1.25 (1.08; 1.45)*	15.9 (13.1; 19.2)	0.57 (0.45; 0.72)*	34.1 (30.0; 38.4)	1.12 (0.94; 1.33)	
	≥16y	9.3 (6.1; 14.0)	1.84 (1.25; 2.73)*	47.3 (40.7; 53.9)	1.35 (1.17; 1.56)*	10.3 (6.8; 15.2)	0.28 (0.21; 0.38)*	33.2 (27.2; 39.7)	1.08 (0.91; 1.29)	
	12-13y	8.5 (7.7; 9.3)	Ref	37.8 (36.4; 39.1)	Ref	16.5 (15.5; 17.5)	Ref	37.3 (35.9; 38.6)	Ref	
Colombia	14-15y	7.6 (7.1; 8.1)	0.90 (0.80; 1.01)	39.6 (38.7; 40.5)	1.05 (1.01; 1.09)*	15.3 (14.6; 16.0)	0.93 (0.86; 1.00)	37.5 (36.6; 38.4)	1.01 (0.96; 1.05)	
	≥16y	7.4 (7.0; 8.0)	0.88 (0.78; 0.99)*	42.9 (42.0; 43.8)	1.14 (1.09; 1.18)*	12.2 (11.6; 12.8)	0.74 (0.68; 0.80)*	37.5 (36.6; 38.4)	1.01 (0.95; 1.05)	
	12-13y	1.6 (1.0; 2.4)	Ref	11.5 (9.7; 13.5)	Ref	43.7 (40.9; 46.7)	Ref	43.2 (40.3; 46.2)	Ref	
Ecuador	14-15y	1.7 (1.2; 2.3)	1.06 (0.61; 1.83)	26.0 (23.5; 28.7)	2.27 (1.87; 2.74)*	45.9 (42.9; 49.0)	1.05 (0.96; 1.15)	26.4 (23.7; 29.3)	0.61 (0.54; 0.69)*	
	≥16y	7.0 (5.6; 8.8)	4.47 (2.76; 7.23)*	35.6 (32.6; 38.8)	3.10 (2.58; 3.73)*	48.5 (45.3; 51.8)	1.11 (1.01; 1.22)*	8.9 (7.1; 11.0)	0.20 (0.16; 0.26)*	
	12-13y	37.6 (33.3; 42.1)	Ref	26.4 (22.5; 30.6)	Ref	13.6 (10.9; 16.9)	Ref	22.4 (18.8; 26.5)	Ref	
Guyana	14-15y	51.6 (48.8; 54.4)	1.37 (1.21; 1.56)*	22.4 (20.2; 24.8)	0.85 (0.71; 1.02)	8.2 (6.8; 10.0)	0.60 (0.45; 0.81)*	17.7 (15.7; 20.0)	0.79 (0.64; 0.97)*	
	≥16y	60.8 (55.3; 66.0)	1.62 (1.40; 1.87)*	15.3 (11.7; 19.7)	0.58 (0.43; 0.78)*	5.4 (3.5; 8.3)	0.40 (0.25; 0.65)*	18.5 (14.5; 23.3)	0.82 (0.62; 1.10)	
	12-13y	13.5 (10.9; 16.6)	Ref	55.3 (51.2; 59.3)	Ref	6.0 (4.3; 8.2)	Ref	25.2 (21.8; 29.0)	Ref	
Paraguay	14-15y	15.8 (13.8; 17.9)	1.17 (0.91; 1.50)	58.1 (55.3; 60.9)	1.05 (0.96; 1.15)	5.9 (4.7; 7.3)	0.98 (0.66; 1.45)	20.3 (18.1; 22.7)	0.80 (0.67; 0.96)*	
	≥16y	15.6 (13.5; 18.0)	1.16 (0.90; 1.50)	60.2 (57.1; 63.3)	1.09 (1.00; 1.19)	6.2 (4.8; 7.9)	1.03 (0.69; 1.54)	18.0 (15.7; 20.6)	0.71 (0.59; 0.87)*	
	12-13y	9.2 (7.0; 11.9)	Ref	83.1 (79.7; 86.1)	Ref	6.0 (4.2; 8.4)	Ref	1.7 (1.0; 3.3)	Ref	
Peru	14-15y	7.1 (6.0; 8.4)	0.77 (0.56; 1.06)	87.0 (85.3; 88.5)	1.05 (1.00; 1.09)	3.4 (2.7; 4.3)	0.57 (0.37; 0.86)*	2.5 (1.9; 3.4)	1.51 (0.72; 3.16)	
	≥16y	8.2 (6.1; 11.0)	0.89 (0.60; 1.33)	86.1 (82.6; 88.9)	1.04 (0.98; 1.09)	4.1 (2.6; 6.4)	0.68 (0.39; 1.20)	1.6 (0.8; 3.3)	0.97 (0.37; 2.55)	

Continue...

Continuation of Table 4 – Association between age group and participation in Physical Education in South America (n = 173,288).

Countries		0 days/week		1 day/week		2 days/week		≥3 days/week	
		% (95% CI)	PR (95% CI)						
	12-13y	19.1 (15.8; 23.0)	Ref	42.5 (38.0; 47.0)	Ref	6.8 (4.8; 9.6)	Ref	31.6 (27.5; 36.0)	Ref
Suriname	14-15y	17.6 (15.2; 20.2)	0.92 (0.73; 1.16)	43.7 (40.4; 47.1)	1.03 (0.90; 1.17)	5.2 (3.9; 7.0)	0.76 (0.48; 1.21)	33.6 (30.5; 36.8)	1.06 (0.90; 1.25)
	≥16y	26.2 (22.6; 30.2)	1.37 (1.08; 1.74)*	34.9 (31.1; 38.9)	0.82 (0.70; 0.96)*	5.6 (3.8; 8.2)	0.83 (0.49; 1.39)	33.3 (29.5; 37.3)	1.05 (0.88; 1.26)
	12-13y	10.7 (8.5; 13.3)	Ref	5.6 (4.1; 7.6)	Ref	43.0 (39.2; 46.7)	Ref	40.8 (37.1; 44.6)	Ref
Uruguay	14-15y	11.5 (10.1; 13.0)	1.08 (0.83; 1.39)	8.2 (7.0; 9.5)	1.47 (1.04; 2.08)*	46.0 (43.7; 48.3)	1.07 (0.97; 1.18)	34.3 (32.2; 36.5)	0.84 (0.75; 0.94)*
	≥16y	19.3 (16.1; 22.9)	1.80 (1.36; 2.39)	11.2 (8.7; 14.2)	2.00 (1.35; 2.97)*	39.9 (35.8; 44.2)	0.93 (0.81; 1.07)	29.7 (25.8; 33.8)	0.73 (0.62; 0.86)*
	12-13y	13.0 (9.0; 16.0)	Ref	35.0 (23.0; 47.0)	Ref	22.0 (13.0; 31.0)	Ref	30.0 (21.0; 38.0)	Ref
South America	14-15y	15.0 (9.0; 20.0)	1.04 (0.86; 1.25)I <sup>2</sup> (%) = 89.7	39.0 (25.0; 53.0)	1.13 (1.05; 1.21)*I <sup>2</sup> (%) = 87.2	19.0 (11.0; 28.0)	$0.85$ $(0.76; 0.94)^*$ $I^2$ $(\%) = 84.1$	27.0 (19.0; 35.0)	0.88 (0.78; 0.99)* I <sup>2</sup> (%) = 91.5
	≥16y	19.0 (11.0; 28.0)	1.50 (1.11; 2.02)* I <sup>2</sup> (%) = 94.4	40.0 (30.0; 49.0)	1.18 (1.05; 1.33)* I <sup>2</sup> (%) = 94.4	17.0 (11.0; 24.0)	0.70 (0.58; 0.85)* I <sup>2</sup> (%) = 94.8	24.0 (16.0; 32.0)	0.73 (0.60; 0.89)* I <sup>2</sup> (%) = 96.4

Note: PR = prevalence ratio; 95% CI = 95% confidence interval; \*There is no overlap of 95% confidence intervals; Ref = reference category. Days per week are not the same as hours or classes per week.

Table 5 – Association between status of food security and participation in Physical Education classes in South America (n = 173,288).

Countries		0 days/week		1 day	/week	2 day/week		≥3 day/week	
Countries		% (95% CI)	PR (95% CI)						
Amazantina	Food security	11.7 (11.1; 12.3)	Ref	16.3 (15.7; 16.9)	Ref	34.6 (33.8; 35.5)	Ref	37.4 (36.6; 38.3)	Ref
Argentina	Food insecurity	15.0 (13.2; 17.0)	1.28 (1.12; 1.47)*	16.2 (14.4; 18.2)	1.00 (0.88; 1.13)	30.8 (28.4; 33.2)	0.89 (0.82; 0.96)*	38.0 (35.5; 40.6)	1.02 (0.95; 1.09)
Bolivia	Food security	10.8 (10.0; 11.7)	Ref	43.6 (42.2; 44.9)	Ref	5.5 (4.9; 6.1)	Ref	40.1 (38.8; 41.5)	Ref
Donvia	Food insecurity	12.2 (10.6; 14.1)	1.13 (0.96; 1.33)	39.8 (37.2; 42.5)	0.91 (0.85; 0.98)*	6.7 (5.5; 8.2)	1.23 (0.97; 1.56)	41.2 (38.6; 43.9)	1.03 (0.96; 1.10)
Brazil	Food security	23.8 (22.8; 24.9)	Ref	40.3 (39.2; 41.5)	Ref	26.6 (25.6; 27.7)	Ref	9.2 (8.6; 9.9)	Ref
Diazii	Food insecurity	24.8 (21.7; 28.2)	1.04 (0.91; 1.20)	39.1 (35.7; 42.6)	0.97 (0.88; 1.06)	23.8 (21.2; 26.6)	0.89 (0.79; 1.01)	12.3 (10.3; 14.6)	1.33 (1.11; 1.61)*
Chile	Food security	8.1 (6.7; 9.6)	Ref	44.0 (41.4; 46.7)	Ref	15.2 (13.5; 17.0)	Ref	32.7 (30.2; 35.3)	Ref
Cinie	Food insecurity	16.6 (11.1; 24.2)	2.06 (1.34; 3.17)*	34.8 (26.6; 44.0)	0.79 (0.61; 1.02)	14.7 (10.0; 21.0)	0.97 (0.66; 1.42)	33.9 (25.5; 43.5)	1.04 (0.79; 1.37)
Colombia	Food security	7.5 (7.2; 7.9)	Ref	40.7 (40.1; 41.3)	Ref	14.5 (14.1; 14.9)	Ref	37.2 (36.7; 37.8)	Ref
Colombia	Food insecurity	10.2 (9.0; 11.7)	1.36 (1.18; 1.56)*	36.5 (34.3; 38.6)	0.90 (0.84; 0.95)*	13.6 (12.1; 15.2)	0.94 (0.83; 1.06)	39.7 (37.5; 42.0)	1.07 (1.01; 1.13)*
Ecuador	Food security	-		-		-		-	
Ecuador	Food insecurity	-		-		-		-	

Continue...

Continuation of Table 5 - Association between status of food security and participation in Physical Education classes in South America (n = 173,288).

Countries		0 day	s/week	1 day	1 day/week		2 day/week		≥3 day/week	
		% (95% CI)	PR (95% CI)	% (95% CI)	PR (95% CI)	% (95% CI)	PR (95% CI)	% (95% CI)	PR (95% CI)	
Current	Food security	51.4 (48.7; 54.1)	Ref	22.0 (19.9; 24.3)	Ref	8.9 (7.5; 10.6)	Ref	17.7 (15.7; 19.8)	Ref	
Guyana	Food insecurity	46.2 (42.4; 50.0)	0.90 (0.81; 0.99)*	22.8 (19.8; 26.2)	1.04 (0.87; 1.23)	9.4 (7.4; 12.0)	1.06 (0.79; 1.42)	21.6 (18.6; 24.9)	1.22 (1.01; 1.47)*	
D	Food security	14.5 (13.2; 16.0)	Ref	59.3 (57.4; 61.3)	Ref	5.9 (5.0; 6.9)	Ref	20.2 (18.7; 21.9)	Ref	
Paraguay	Food insecurity	20.9 (16.6; 25.9)	1.44 (1.13; 1.83)*	50.3 (44.7; 56.0)	0.85 (0.75; 0.95)*	6.7 (4.3; 10.3)	1.13 (0.71; 1.81)	22.1 (17.8; 27.1)	1.09 (0.87; 1.37)	
Peru	Food security	7.1 (6.1; 8.3)	Ref	86.7 (85.3; 88.1)	Ref	3.8 (3.0; 4.7)	Ref	2.3 (1.8; 3.1)	Ref	
Peru	Food insecurity	10.1 (7.8; 13.0)	1.41 (1.05; 1.90)*	82.9 (79.4; 85.9)	0.96 (0.92; 1.00)	5.3 (3.7; 7.6)	1.41 (0.93; 2.13)	1.7 (0.9; 3.3)	0.74 (0.36; 1.50)	
c ·	Food security	20.3 (18.2; 22.7)	Ref	41.2 (38.5; 43.9)	Ref	5.3 (4.1; 6.8)	Ref	33.2 (30.7; 35.8)	Ref	
Suriname	Food insecurity	21.3 (18.1; 24.9)	1.05 (0.86; 1.27)	39.5 (35.6; 43.6)	0.96 (0.85; 1.08)	6.6 (4.9; 9.0)	1.25 (0.84; 1.87)	32.5 (28.8; 36.5)	0.98 (0.85; 1.13)	
T T	Food security	12.5 (11.4; 13.8)	Ref	8.3 (7.3; 9.3)	Ref	44.7 (42.9; 46.5)	Ref	34.5 (32.8; 36.3)	Ref	
Uruguay	Food insecurity	13.8 (9.9; 18.9)	1.10 (0.78; 1.54)	6.2 (3.8; 10.0)	0.75 (0.45; 1.23)	38.9 (32.8; 45.3)	0.87 (0.74; 1.03)	41.2 (34.9; 47.8)	1.19 (1.01; 1.41)*	
	Food security	17.0 (11.0; 22.0)	Ref	40.0 (27.0; 53.0)	Ref	16.0 (9.0; 24.0)	Ref	26.0 (18.0; 35.0)	Ref	
South America	Food insecurity	19.0 (14.0; 24.0)	1.20 (1.06; 1.36)*	37.0 (23.0; 50.0)	0.93 (0.90; 0.97)*	16.0 (9.0; 22.0)	0.97 (0.89; 1.05)	28.0 (20.0; 37.0)	1.07 (1.02; 1.12)*	
			I <sup>2</sup> (%) = 80.1		I <sup>2</sup> (%) = 23.6		I <sup>2</sup> (%) = 40.4		I <sup>2</sup> (%) = 35.4	

Note: PR = prevalence ratio; 95% CI = 95% confidence interval; \*There is no overlap of 95% confidence intervals; Ref = reference category. Days per week are not the same as hours or classes per week.

pected in Chile<sup>21</sup>, while in Brazil, there is no minimum requirement per week, although PE is a mandatory subject<sup>22</sup>. Thus, given that our study assessed only the number of days of PE per week, it is not possible to identify whether the countries are in line with their expectations/obligations. However, the frequency of zero PE days/week indicates a large inconsistency between the national recommendations and real life. For instance, approximately one-fourth of Brazilian adolescents reported not participating in PE classes, which can be related to a lack of adequate structure for physical activity practices at schools (e.g., lack of built environment, lack PE teacher, and lack of adequate material for the classes), especially among those who live in less developed regions<sup>10</sup>.

The pooled analysis revealed that although there was no difference between the proportions of boys and girls who did not participate in PE, the proportion of boys with ≥3 days/week of PE classes was 10% higher than that of girls. Gender inequality is a global challenge in physical activity promotion<sup>23,24</sup>, with possible explanations related to higher support for physical ac-

tivity practice from family and school for boys than for girls<sup>25</sup>.In addition, a previous paper by Jesus et al.<sup>26</sup> identified that while boys were more engaged in active play than girls, girls reported were more involved in household chores than boys, showing an important cultural aspect behind the inequalities. Thus, identifying how these inequalities occur in the different physical activity domains can support more specific interventions. Our results from SA suggest that the difference between boys and girls occurs with increases in the PE categories, especially considering ≥3 days per week. Thus, SA countries need to think about ways to overcome gender inequality in PE classes. The recently launched toolkit developed by the World Health Organization<sup>27</sup> called "Promoting physical activity through schools" should be an excellent starting point for many countries. In this toolkit, some recommendations regarding the implementation of quality PE are given, such as consultations with students and parents on the preferred PE options and ensuring the girls' participation during the classes. In addition, other domains (i.e., active travel, physical activity opportunities

before and after school, recess, and lunch, active classrooms, and physical activity for those with additional needs) are also covered for promoting physical activity in the school context.

Older adolescents participated less in PE classes than younger adolescents, with differences between the proportions of ≥16y and 12-13y starting in zero days of PE class per week. A reduced in participation in PE classes throughout adolescence has been observed, which may be related to the replacement of PE classes by other subjects due to university exam preparation, as well as having a job and a family<sup>28,29</sup>. In addition, our results are in line with previous findings from Northern Ireland <sup>30</sup>, which revealed that PE classes for adolescents ≥16 are a matter of concern, and highlights that beyond the general PE promotion (for all age groups), the countries should seek to make PE accessible to the oldest adolescents, especially in unequal countries. For instance, in Guyana, while 38.0% of the adolescents aged 12-13y reported not participating in PE classes, the prevalence for their older counterparts was 61.0%. Further studies might also investigate other factors that may determine the lack of participation in PE classes among the oldest adolescents, such as the motivation of adolescents to participate in PE classes and whether there is a reduction in the weekly frequency of classes per week after a certain age<sup>28</sup>. This information could be useful to formulate actions to promote PE among older adolescents.

Interestingly, the pooled analyses revealed a U-shaped association of food security status with the frequencies of PE classes, whereby adolescents with food insecurity related a higher proportion of 0 days/ week and ≥3 days/week of PE than their peers with food security. These findings extend those presented by Araujo et al.<sup>13</sup>, which sought to identify the association between food security status and participation in PE classes using only a cut-off of ≥3 days/week of PE classes. The explanations for the higher proportion of 0 days/week of PE classes among those with food insecurity may be related to school conditions, such as a lower probability of having a PE teacher or adequate structure among schools with lower socioeconomic status<sup>31</sup>, as well as lack of energy and lack of disposition for physical activity practice. In addition, most SA countries present meal programs, which might promote higher school attendance among adolescents with food insecurity enrolled in schools that offer meals and consequently increase participation in PE classes<sup>32</sup>.

The present study has strengths, such as the use of

11 nationally representative surveys to estimate the pooled prevalence of PE classes in adolescents from SA. However, limitations need to be pointed out. Although we have used the most recent nationally representative survey available from each country, the surveys ranged from 2010 to 2018, which may introduce bias in the estimates. Information on validity/reprodutibility were not available for countries analysed. The PeNSE, ENSE, and ENSANUT adopted slight differences in the questions used to assess participation in PE classes. Participation in PE classes was assessed by the number of days with PE per week, rather than classes per week, which may induce bias in the case of more than one class on the same day. The study was based on self-report data, and participants may have misreported owing to failure to recall, or they may have misreported intentionally.

Although PE is a proposed subject in most SA countries, almost a fifth of SA adolescents do not participate in PE classes. Girls and older adolescents are at a disadvantage in participating in PE classes. Food insecurity may expose students to school attendance and PE as a consequence. Lastly, continuous surveillance on frequency and inequalities in the participation in PE classes are needed, as well as actions promoting PE classes for the students less favored.

#### Conflict of interest

The authors declare no conflict of interest.

#### **Funding**

Raphael HO Araujo is supported by the Coordination for the Improvement of Higher Education Personnel (CAPES) with a PhD scholarship (CAPES process: 88887.605034/2021-00) as well as a Research Internship Abroad scholarship (CAPES process: 88881.846428/2023-01). André O Werneck is supported by the São Paulo Research Foundation (FAPESP) with a PhD scholarship (process: 2019/24124-7) as well as a Research Internship Abroad scholarship (process: 2023/00790-3). This paper presents independent research. The views expressed in this publication are those of the authors and not necessarily those of the acknowledged institution.

#### Author's contributions

Araujo RHO: Conceptualization; Methodology; Formal analysis; Data curation; Visualization; Writing – original draft; Approval of the final version. Werneck AO: Conceptualization; Methodology; Formal analysis; Data curation; Visualization; Writing – review & editing; Approval of the final version. Matias TS: Validation; Vi-

sualization; Writing - review & editing; Approval of the final version. Tassitano RM: Validation; Visualization; Writing - review & editing; Approval of the final version. Martins CML: Validation; Writing - review & editing; Approval of the final version. Aguilar-Farias N: Validation; Writing - review & editing; Approval of the final version. Jesus GM: Validation; Writing – review & editing; Approval of the final version. Ramírez-Vélez R: Validation; Data curation; Writing - review & editing; Approval of the final version. Baldew SS: Validation; Writing - review & editing; Approval of the final version. Anza-Ramirez C: Validation; Writing - review & editing; Approval of the final version. Álvarez-Álvarez MG: Validation; Writing – review & editing; Approval of the final version. Brazo-Sayavera J: Validation; Writing - review & editing; Approval of the final version. Silva DRP: Conceptualization; Methodology; Formal analysis; Supervision; Project administration; Visualization; Writing – review & editing; Approval of the final version.

## Declaration regarding the use of artificial intelligence tools in the article writing process

The manuscript did not use artificial intelligence tools for its preparation.

## Availability of research data and other materials The contents are already available.

#### References

- Santos AE, Araujo RH O, Nascimento VMS, Couto JO, Silva RJS. Associations between specific physical activity domains and social isolation in 102,072 Brazilian adolescents: Data from the 2015 National School–Based Health Survey. J Health Psychol. 2021;26(13):2626-35. doi: https://doi. org/10.1177/1359105320922298.
- Ramires VV, Santos PC, Barbosa Filho VC, Bandeira AS, Tenorio MCM, Camargo EM, et al. Physical Education for Health Among School-Aged Children and Adolescents: A Scoping Review of Reviews. J Phys Act Health. 2023;20(7):586-99. doi: https://doi.org/10.1123/jpah.2022-0395.
- 3. Werneck AO, Schuch FB, Ferrari G, Silva DR. Association between different contexts of physical activity and anxiety-induced sleep disturbance among 100,648 Brazilian adolescents: Brazilian school-based health survey. Psychiatry Res. 2020; 293:113367. doi: https://doi.org/10.1016/j. psychres.2020.113367.
- Uddin R, Salmon J, Islam SMS, Khan A. Physical education class participation is associated with physical activity among adolescents in 65 countries. Sci Rep. 2020;10:22128. doi: https://doi.org/10.1038/s41598-020-79100-9.
- Zhan X, Clark CCT, Bao R, Duncan M, Hong J-T, Chen S-T. Association between physical education classes and physical activity among 187,386 adolescents aged 13–17 years from 50 low- and middle-income countries. J Pediatr. 2021;97(5):571– 8. doi: https://doi.org/10.1016/j.jped.2020.11.009.
- 6. García-Hermoso A, Alonso-Martínez AM, Ramírez-Vélez R, Pérez-Sousa MA, Ramírez-Campillo R, Izquierdo M. Association of Physical Education With Improvement of Health-Related Physical Fitness Outcomes and Fundamental Motor Skills Among Youths. JAMA Pediatr. 2020;174(6):e200223. doi: https://doi.org/10.1001/jamapediatrics.2020.0223.

- García-Hermoso A, Ramírez-Vélez R, Lubans DR, Izquierdo M. Effects of physical education interventions on cognition and academic performance outcomes in children and adolescents: a systematic review and meta-analysis. Br J Sports Med. 2021;55(21):1224-32. doi: https://doi. org/10.1136/bjsports-2021-1041128.
- 8. UNESCO-North Western Counties Physical Education Association (UK). World-wide survey of school Physical Education. París: UNESCO, 2014. 128 p. Available in: <a href="https://unesdoc.unesco.org/ark:/48223/pf0000229335">https://unesdoc.unesco.org/ark:/48223/pf0000229335</a> [2024 may].
- Werneck AO, Oyeyemi AL, Fernandes RA, Raomanzini M, Ronque ERV, Cyrino ES, et al. Regional Socioeconomic Inequalities in Physical Activity and Sedentary Behavior Among Brazilian Adolescents. J Phys Act Health. 2018;15(5):338-44. doi: https://doi.org/10.1123/jpah.2017-0338.
- 10. Silva DAS, Chaput J-P, Tremblay MS. Participation frequency in physical education classes and physical activity and sitting time in Brazilian adolescents. PLoS One. 2019;14(3):e0213785. doi: https://doi.org/10.1371/journal. pone.0213785.
- 11. Aguilar-Farias N, Martino-Fuentealba P, Carcamo-Oyarzun J, Cortinez-O'Ryan A, Cristi-Montero C, Oetinger AV, et al. A regional vision of physical activity, sedentary behaviour and physical education in adolescents from Latin America and the Caribbean: results from 26 countries. Int J Epidemiol. 2018;47(3):976-86. doi: https://doi.org/10.1093/ije/dyy033.
- 12. Martins J, Marques A, Peralta M, Henriques-Neto D, Costa J, Onofre M, et al. A Comparative Study of Participation in Physical Education Classes among 170,347 Adolescents from 54 Low-, Middle-, and High-Income Countries. Int J Environ Res Public Health. 2020;17(15):5579. doi: https://doi.org/10.3390/ijerph17155579.
- 13. Araujo RHO, Werneck AO, Barboza LL, et al. Prevalence and sociodemographic correlates of physical activity and sitting time among South American adolescents: a harmonized analysis of nationally representative cross-sectional surveys. Int J Behav Nutr Phys Act. 2022;19(1):52. doi: https://doi.org/10.1186/s12966-022-01291-3.
- 14. Werneck AO, Baldew S-S, Miranda JJ, Óscar Incarbone Ó, Silva DR, South American Physical Activity and Sedentary Behavior Network Collaborators. The South American Physical Activity and Sedentary Behavior Network (SAPASEN). Glob Health Promot. 2020;27(3):171-6. doi: https://doi.org/10.1177/1757975919859577.
- 15. World Health Organization. Global School-Based Student Health Survey. Available in: <a href="https://www.who.int/teams/noncommunicable-diseases/surveillance/systems-tools/global-school-based-student-health-survey">https://www.who.int/teams/noncommunicable-diseases/surveillance/systems-tools/global-school-based-student-health-survey</a> [2021 June].
- 16. Instituto Brasileiro de Geografia e Estatística (IBGE). Pesquisa Nacional de Saúde do Escolar, (PeNSE), 2015. Rio de Janeiro: IBGE, 2016.
- **17.** Ministerio de Salud y Protección Social. Encuesta Nacional de Salud en Escolares (ENSE). 2020.
- **18.** Instituto Nacional de Estadítica y Censos. Encuesta Nacional de Salud y Nutrición. Quito, 2019.
- 19. Vancampfort D, Van Damme T, Firth J, Hallgren M, Smith L, Stubbs B, et al. Correlates of leisure-time sedentary behavior among 181,793 adolescents aged 12-15 years from 66 low- and middle-income countries. PLoS One. 2019;14(11):e0224339. doi: https://doi.org/10.1371/journal.pone.0224339.

- 20. McLaughlin KA, Green JG, Alegría M, Costello E J, Gruber MJ, Sampson NA, et al. Food Insecurity and Mental Disorders in a National Sample of U.S. Adolescents. J Am Acad Child Adolesc Psychiatry.2012;51(12):1293-303. doi: https://doi.org/10.1016/j.jaac.2012.09.009.
- 21. Ministerio de Educación. Orientaciones para la Actividad Física Escolar. Santiago de Chile, 2020.
- 22. Brasil. Lei No 9394, de 20 de dezembro de 1996. 1996.
- 23. Guthold R, Stevens GA, Riley LM, Bull FC. Global trends in insufficient physical activity among adolescents: a pooled analysis of 298 population-based surveys with 1.6 million participants. Lancet Child Adolesc Health. 2020;4(1):23-35. doi: https://doi.org/10.1016/S2352-4642(19)30323-2.
- 24. Bann D, Scholes S, Fluharty M, Shure N. Adolescents' physical activity: cross-national comparisons of levels, distributions and disparities across 52 countries. Int J Behav Nutr Phys Act. 2019;16(1):141. doi: https://doi.org/10.1186/s12966-019-0897-z.
- 25. Telford RM, Telford RD, Olive LS, Cochrane T, Davey R. Why Are Girls Less Physically Active than Boys? Findings from the LOOK Longitudinal Study. PLoS One. 2016;11(3):e0150041. doi: https://doi.org/10.1371/journal.pone.0150041.
- 26. Jesus GM, Dias LA, Barros AKC, Araujo LDM S, Schrann MMF. Do girls wash dishes and boys play sports? Gender inequalities in physical activity and in the use of screen-based devices among schoolchildren from urban and rural areas in Brazil. BMC Public Health. 2024;24(1):196. doi: https://doi.org/10.1186/s12889-024-17672-1.
- 27. World Health Organization. Promoting physical activity through schools: a toolkit. 2021. Available in: <a href="https://apps.who.int/iris/handle/10665/350836">https://apps.who.int/iris/handle/10665/350836</a>> [2024 May].

- 28. Prazeres Filho A, Mendonça G, Souza Neto JM, Tassitano RM, Silva ABP, Farias Júnior JC. Attendance in Physical Education classes and associated factors among high school students. Rev Bras Ativ Fís Saúde 2019;17;24:1-0. doi: https://doi.org/10.12820/rbafs.24e0083.
- 29. Feitosa WMDN, Tassitano RM, Tenório MCM, Albuquerque A, Guimarães FJPS, Neto AJDL. Aulas de Educação Física no ensino médio da rede pública estadual de Caruaru: componente curricular obrigatório ou facultativo? Rev Ed Fisica. 2011;22(1):97-109. doi: https://doi.org/10.4025/reveducfis.v22i1.9580.
- 30. Connolly S, Carlin A, Johnston A, Woods C, Powell C, Belton S, et al. Physical Activity, Sport and Physical Education in Northern Ireland School Children: A Cross-Sectional Study Int J Environ Res Public Health. 2020;17(18):6849. doi: https://doi.org/10.3390/ijerph17186849.
- 31. Carlson JA, Mignano AM, Norman GJ, McKenzie TL, Kerr J, Arredondo EM, et al. Socioeconomic Disparities in Elementary School Practices and Children's Physical Activity during School. Am J Health Promot. 2014;28(3\_suppl):S47-53. doi: https://doi.org/10.4278/ajhp.130430-QUAN-206.
- **32.** Belik W, Souza LR. Algumas reflexões sobre os programas de alimentação escolar na América Latina. Planejamento e políticas públicas 2010.

Received: 06/28/2024 Accepted: 08/20/2024

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Associate editor Valter Cordeiro Barbosa Filho Di Instituto Federal do Ceará, Fortaleza, Ceará, Brasil.

#### Cite this article as:

Araujo RHO, Werneck AO, Matias TS, Tassitano RM, Martins CML, Aguilar-Farias N, Jesus GM, Ramírez-Vélez R, Baldew SS, Anza-Ramirez C, Álvarez-Álvarez MG, Brazo-Sayavera J, Silva DRP. Inequalities related to participation in Physical Education classes among South American adolescents: a pooled analysis with 173,288 participants. Rev. Bras. Ativ. Fis. Saúde. 2024;29:e0357. doi: 10.12820/rbafs.29e0357

### Supplementary Chart

**Chart S1** – Surveys characteristics.

Country	Survey year	Sample size	Sample (≥ 12 years old)	Missing*	Final sample
Argentina	2018	56933	56933	3618	53,315
Bolivia	2018	7945	7865	813	7,052
Brazil	2015	16556	14484	116	14,368
Chile	2013	2049	2045	119	1,926
Colombia	2017	79640	79640	5321	74,319
Ecuador	2018	23621	9891	891	9,000
Guyana	2010	2392	2373	129	2,244
Paraguay	2017	3149	3126	232	2,894
Peru	2010	2882	2868	41	2,827
Suriname	2016	2126	2116	85	2,031
Uruguay	2012	3534	3510	198	3,312

Note: \*considering the sample with participants aged  $\geq 12$  years.