Health Check
UK Report
Autumn 2016
Family Health: Habits across the Generations
Introduction

Few would disagree that good health starts at home. The family unit plays an integral role in shaping our eating, drinking and exercise habits with family members often influenced by the generations before them.

This third edition of the Aviva Health Check UK report investigates health habits among UK families - snacking, dinner table trends, family activities and wider attitudes to health. We analyse how health choices across three generations - grandparents, parents and children – affect family health.

Improving our understanding of family habits is essential if we are to plan for the future. With more than half of UK adults currently classed as overweight, the habits formed within the family environment can have a significant impact on the long term health of the UK.

We also seek to better understand the health aims that families have for the future, the barriers they face in achieving these and the extent to which our perceptions of health differ to reality.

Wider health trends highlight how sleep patterns, avoidable illness and their cost to the NHS, and our propensity to visit our GP is becoming a growing concern.

As well as exploring family wellbeing, Aviva’s research also tracks how use of digital technology impacts our health. Adults and children alike are now increasingly immersed in their phones or tablets, and while many parents enforce limits on screen use, others also use screen time as a reward for their children.

As the health of the nation dominates conversations among policymakers and families alike, this report ultimately aims to raise awareness of the key health issues facing families today with a view to creating debate on the steps that can be taken to address these.

Mark Noble
CEO, Global Health, Aviva
Sugar buzz, snacking and screen time

Key findings

- More than a third of children (37%) eat at least one portion of chocolate or crisps daily, while 31% have at least one portion of biscuits or cake every day.
- Parents use TV or screen time (54%) or unhealthy snacks (49%) to reward or motivate their children.
- When taking steps to ensure their children are healthy, only 35% of parents limit their children’s use of TV, computers or mobile devices.
- A quarter of families (24%) eat dinner on the sofa in front of the TV while a further 16% eat around the dinner table but with the TV on or checking phones.
- Watching TV is the most common way families spend time together (42%).
- 9% of children are considered overweight by their parents, compared to official NHS figures indicating 31% of children are overweight – highlighting an obesity awareness gap.
Dietary habits across the generations

We all know having a nutritious, balanced diet is key to keeping ourselves and our families healthy: but in real life, good intentions can slip and it is easy for unhealthy eating habits to creep in. In recent times, sugar has become a much derided ingredient and is increasingly viewed as a contributor towards obesity, with a tax levy on high-sugar drinks set to come into force in 2018.1 Within families, sugary snacks are nevertheless being consumed on a regular basis, across the generations.

Almost two in five parents (37%) eat at least one portion of chocolate or crisps every day, with the same proportion saying their children also do this. Grandparents however are less prone to this type of snacking (25%). Meanwhile, 31% of children and 28% of parents snack on at least one portion of biscuits or cake daily. Again, grandparents consume less of this type of snack on a daily basis (26%).

Official NHS guidelines have suggested for some time that we should be eating five portions of fruit and vegetables a day.2 However, in practice Aviva’s data highlights that only 18% of both parents and children meet this target, although this is more common among grandparents (27%). However, most people are eating between two and four portions a day (36% of parents and children and 40% of grandparents), suggesting this target is achievable.

While not all fizzy drinks contain sugar, it is generally recognised that even diet versions do not have much nutritional value. On average, parents drink six fizzy drinks a week, falling just short of having one every day. According to parents, the average for children is slightly lower (five per week), but more than a quarter (27%) of parents say their children have at least one fizzy drink every day.

Parents award unhealthy treats and screen time for good behaviour

Parents could be unwittingly tipping the calorie and sugar consumption of their children over recommended levels by using unhealthy treats as reward or motivation for good behaviour.

Half (49%) admit to sometimes using sweets or other unhealthy snacks as a reward or motivation to get their children to do something. This is higher among parents who work full-time (52%) than those who do not work at all (43%), suggesting time pressures make it easy to fall into this habit.

Aside from edible rewards, parents also use TV or screen time as motivation to get their children to do something, with more than half (54%) admitting to doing this.

<table>
<thead>
<tr>
<th>Dietary habits across the generations</th>
</tr>
</thead>
<tbody>
<tr>
<td>%</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>Eats 5 portions of fruit or veg a day</td>
</tr>
<tr>
<td>Eats at least one portion of chocolate or crisps per day</td>
</tr>
<tr>
<td>Eats at least one portion of biscuits or cakes per day</td>
</tr>
<tr>
<td>Drinks at least one fizzy drink per day</td>
</tr>
</tbody>
</table>

1 https://www.gov.uk/government/news/soft-drinks-industry-levy-12-things-you-should-know
2 http://www.nhs.uk/livewell/5aday/Pages/SADAtHome.aspx
The digital approach to rewards and incentives is more common with younger parents, which may be influenced by the fact that many are active users of digital technology themselves. For example, 14% of parents aged 18-34 always use TV or screen time as a motivation for good behaviour, compared to 9% of all parents.

Using technology as a reward is also more common among time-poor parents: parents are more likely to do this if they work full-time (57%) or part-time (51%), compared to 47% of non-working parents.

Parents who use TV or screen time as reward or motivation

<table>
<thead>
<tr>
<th>%</th>
<th>Age of parent</th>
<th>Parents’ employment status</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>All 18-24</td>
<td>25-34 35-44 45-54 55+</td>
</tr>
</tbody>
</table>
| Always | 9 14 14 9 4 2 10 10 5
| Sometimes | 45 47 48 53 34 36 47 41 42
| Rarely | 20 23 19 18 23 19 20 20 19
| Never | 26 16 19 21 39 43 23 30 34

Recent medical research, shared by the NHS, found that children watching TV for more than two hours a day are at higher risk of raised blood pressure, with more than one in ten children developing cardiovascular diseases later in life.3 Regardless of this, and perhaps due to a lack of public awareness on the dangers associated with extended screen use, 65% of parents confess that they do not impose limits on their children’s use of mobiles, TV or computers. Parents who work full-time are more likely to say they eat around the dinner table but with the TV on in the background or checking phones (17% vs. 13% of parents who don’t work). They are also more likely to eat at different times but in the same room (11% vs. 6% of parents who don’t work). Just over a third (37%) of parents say they spend the majority of their evening meals together as a family around the dinner table with no distractions.

However, this is much more likely among older parents (39% of parents aged 45-54 agree, compared to 30% of parents aged 18-24), suggesting this trend may be on the decline for younger generations.

Parents who work full-time are also less likely to do this (35% vs. 41% of part-time workers and 39% of parents who don’t work), indicating the potential impact of work schedules upon family time.

The death of the dinner table?

A quarter (24%) of parents say they most regularly have family dinners on the sofa in front of the TV, and a further 16% eat at the table, but with the TV on or while checking phones. This habit could be bad for family health, as it’s suggested that eating while distracted by the TV means you’re less likely to recognise when you’re full, and overeat as a result.4

Parents who work full-time are also less likely to do this (35% vs. 41% of part-time workers and 39% of parents who don’t work), indicating the potential impact of work schedules upon family time.

The lure of the television extends into family’s free time as well as around the dinner table. Watching TV is the most common way families spend time together (42%), ranking higher than visiting places of interest (36%) or playing together (28%).

Exercising outside as a family, for example through walks or bike rides, may only be the fifth most popular pastime (25%) but ranks higher than shopping (23%) or playing computer or board games (16%).

3 http://www.nhs.uk/News/2015/02February/Pages/Over-two-hours-screen-time-a-day-may-raise-a-childs-blood-pressure.aspx
4 http://steptohealth.com/danger-eating-front-tv/
**Obesity awareness gap**

More than two fifths (44%) of UK parents have a BMI that is overweight, with 27% classed as overweight and 17% as obese. Broken down by family members, 44% of parents and 62% of grandparents have a BMI that is overweight or obese.

Only 9% of children aged 2-15 are considered overweight or obese by their parents. However, official figures from the NHS⁵ paint a very different picture, with these indicating that in reality 31% of children are overweight or obese. This ‘obesity awareness gap’ suggests some parents are unaware or in denial of the true health of their children.

This lack of awareness could be partly due to family attitudes surrounding health. Less than half of adults within families say that keeping the family healthy is a priority for them (41%), while even fewer (34%) believe being healthy through diet and fitness will help prevent disease and illness in their family.

There is however a clear gender divide, with mothers more likely to believe keeping the family healthy is a priority (46% vs. 36% of fathers) and keeping healthy can help prevent illness (37% vs. 31%).

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Happiness with family health, goals and barriers

Key findings

- Nearly a third (31%) of parents think they could do more to keep the family healthy.
- Mothers feel more in control over their children’s health than fathers (86% vs. 79%).
- Doing more exercise is number one priority for families in the year ahead (35%), followed by losing weight (32%).
- Time (24%) and money (21%) are biggest barriers to improving family health.
With health habits varying across different generations, how conscious are families of the need to improve their health, what goals are they trying to achieve and who takes responsibility for keeping the family healthy?

There is a sense that more could be done to improve family health standards: on average, almost a third (31%) of parents think they could do more to keep the family healthy. This rises to 33% amongst parents aged 45-54, perhaps indicating the added pressures of maintaining healthy lifestyles at the same time as long working hours and school commitments. With a 15% rise in the number of adults working more than 48 hours a week reported by the TUC last year, such time away from home could be impacting upon good intentions.6

**In control of children’s health?**

Overall 83% of parents stated that they feel in control of their children’s health. Mothers (86%) are more likely to feel in control of their children’s health than fathers (79%), likely reflecting the more prominent role they play in managing their children’s diet and exercise.

A clear majority of parents also feel confident that the habits they instil in their children can have a lasting positive impact, with close to two thirds (63%) indicating they feel they can have a significant influence on the long-term health of their children. This dropped to 50% however amongst parents who said they were unhappy overall with the state of health within the family.

**Happiness levels amongst families**

On the whole, families have a considerable sense of satisfaction when it comes to the overall health of the family unit. Nearly four fifths (78%) are happy with their family’s overall health and fitness levels. However almost one in five (18%) indicated a sense of indifference, stating they were neither happy nor unhappy, though only 4% of families said they were unhappy.

Parents who work part-time are the happiest with their family’s health (80% vs. 79% among parents who work full-time and 72% who are not working), possibly because they feel they have a good balance of the time and money needed to keep a family healthy.

**Actions taken and goals for the future**

A significant number of parents say their families have taken steps in the past year to improve their diet and overall health.

The most common action is healthier eating, taken by 28% of families, while a similar proportion (27%) have reduced their sugar intake. Almost a fifth (18%) have dedicated time to learning more about what is healthy.

Families have identified doing more exercise as their number one priority in the year ahead. More than a third of families (35%) highlighted that they intended to get more active, closely followed by losing weight (32%). Better sleep (29%) and more relaxation or free time (28%) were also popular when it comes to positive changes families want to implement for the coming year.

In a sign that the recent ongoing negativity surrounding the potential impact of sugar is influencing families, more than two fifths (22%) highlighted that they intend to reduce sugar intake over the year ahead. The aim of reducing sugar intake is in line with the fact that just over a quarter of families (26%) also plan to improve their diet over the next 12 months.

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Healthy actions taken by families in the last year and main priorities for the year ahead

<table>
<thead>
<tr>
<th>%</th>
<th>Done this in the past year</th>
<th>Plan to do this in the year ahead</th>
</tr>
</thead>
<tbody>
<tr>
<td>Doing more exercise / getting more active</td>
<td>27</td>
<td>35</td>
</tr>
<tr>
<td>Losing weight</td>
<td>24</td>
<td>32</td>
</tr>
<tr>
<td>Better sleep</td>
<td>20</td>
<td>29</td>
</tr>
<tr>
<td>More relaxation / free time</td>
<td>22</td>
<td>28</td>
</tr>
<tr>
<td>Healthier eating and improved diet</td>
<td>28</td>
<td>26</td>
</tr>
<tr>
<td>Reduced sugar intake</td>
<td>27</td>
<td>22</td>
</tr>
<tr>
<td>Learning more about what is healthy</td>
<td>18</td>
<td>16</td>
</tr>
<tr>
<td>Reduced or stopped smoking</td>
<td>12</td>
<td>13</td>
</tr>
<tr>
<td>Overcome an existing health condition / illness</td>
<td>11</td>
<td>12</td>
</tr>
<tr>
<td>Reduced or stopped drinking alcohol</td>
<td>15</td>
<td>12</td>
</tr>
<tr>
<td>None – we’re already healthy</td>
<td>10</td>
<td>10</td>
</tr>
<tr>
<td>None – we would like to but we don’t have the time.</td>
<td>10</td>
<td>7</td>
</tr>
</tbody>
</table>

Barriers to improving health

The most significant obstacle flagged by parents when trying to improve the health of their family was that of having enough time. Such pressure was highlighted by almost a quarter of parents (24%), rising to 27% amongst parents who work full-time. Unsurprisingly, only 14% of parents who did not work indicated such challenges. More specifically, having to work was also seen as a barrier by one in ten parents.

Financial challenges were also highlighted by just over one in five (21%) parents as a major barrier when trying to effectively manage family health. However this was significantly lower (16%) for parents working full-time compared to almost a third (31%) of parents not working. It is clear from Aviva’s findings that parents face a difficult trade-off of being able to financially afford a healthy lifestyle for their family, versus having enough time to do this.

Another leading barrier cited by parents was low motivation (20%), rising to a quarter (25%) amongst parents who do not work. A lack of energy was also highlighted by 9% of parents, rising to 15% amongst parents aged 18-24 – perhaps indicating a greater potential for burnout amongst parents with younger children.

Top barriers to improving family health

| % of parents |
|---|---|---|---|---|
| Time | 24% |
| Money | 21% |
| Motivation | 20% |
| Work | 10% |
| Energy | 9% |
| School / homework | 3% |
| Other | 1% |
| I don’t think my family needs to improve their health | 12% |

“Families are actively looking to improve their diet and exercise habits over the next year, but time and money are the biggest barriers to putting these changes into action. Finding the right balance of both can be tough: however, making gradual rather than drastic lifestyle changes is the easiest way of introducing healthier eating or exercise habits that families can stick to. For example, going for a family walk every weekend is free and gets everyone out of the house for some fresh air. You could even go one step further and sign the whole family up to a charity walk or run – you might even inspire a bit of healthy competition!”

Dr Doug Wright
Medical Director, UK Health, Aviva
Sleep patterns

Key findings

- Sleeping better is a growing concern and the main health ambition for UK adults beyond losing weight
- Early adoption of sleep monitoring technology grows as almost three in five users report an improvement to their health
- Taking action to sleep better is seen as more important to improving family health than reducing sugar or healthier eating
Sleeping better features prominently among UK adults’ health ambitions, with one in four (25%) UK adults citing this among their main objectives: second only to losing weight or improving their BMI, mentioned by 34%. While tackling the latter has become less of an ambition over the last two years (39% were motivated to do so in 2014), sleep has in contrast become a wider concern: just 22% wanted to sleep better when asked about their health ambitions in 2014.

### Top three health ambitions for UK adults

<table>
<thead>
<tr>
<th>2014</th>
<th>2016</th>
</tr>
</thead>
<tbody>
<tr>
<td>To lose weight / improve my BMI (39%)</td>
<td>To lose weight / improve my BMI (34%)</td>
</tr>
<tr>
<td>To feel less stressed / anxious / depressed (25%)</td>
<td>To sleep better (25%)</td>
</tr>
<tr>
<td>To sleep better (22%)</td>
<td>To feel less stressed / anxious / depressed (23%)</td>
</tr>
</tbody>
</table>

Interestingly, while sleeping problems might be assumed to be linked to work stress, 27% of adults who are not working cited sleeping better as a health ambition: higher than the 24% of full-time and part-time workers who said the same. It is noticeable that women are slightly more likely (27%) than men (24%) to make sleeping better a health ambition.

Despite the widespread desire for a better night’s sleep, fewer adults have so far harnessed technology to help them in this area of wellbeing. Aviva’s data suggests 7% of adults currently use a sleep pattern monitor, almost double the 4% who did so in 2015. Those who do use this technology are positive about the experience, with four in five finding it easy to integrate into their daily life (80%) and almost three in five (58%) reporting the use of this device has improved their health.

Aviva’s research indicates that adults are not only concerned about the quality of their own sleep. Only half (51%) of parents say they ensure their children get the right amount of sleep, and 29% plan to prioritise better sleep for their family in the year ahead.

Almost one in five (18%) parents feel their children do not get as much sleep as they should. According to the National Sleep Foundation, school-aged children should be getting between 9 and 11 hours of sleep each night (compared to 7 – 9 hours for adults).

The findings also highlight that children’s sleep patterns are a key factor that shapes parents’ happiness with their family’s overall health. Fewer than one in six (15%) parents who are happy with their family’s overall health have concerns over the amount of sleep their children get. This more than doubles to 34% of parents – more than one in three – who are unhappy with their family’s health.

In line with sleep becoming a growing concern for UK adults, more parents appear to be focused on taking steps to tackle this over the next 12 months as a means to improve the health of their family. Asked which healthy actions they have taken over the last year, just one in five (20%) parents have prioritised better sleep, but 29% say they will do so over the year ahead.

It means that getting better sleep has seen the biggest shift in priorities across any of the actions suggested by Aviva’s research.

> “Sleep plays an important role in mental and physical health, with your body using this time to renew and repair. Not getting enough sleep can therefore be more damaging than just feeling tired during the day. There are lots of steps you can take to get a better night’s sleep, including saying no to late night television and avoiding big meals at night. Wider availability of affordable sleep technology – such as monitoring devices – means it’s easier than ever before to track the amount and quality of sleep you’re getting.”

Dr Doug Wright  
Medical Director, UK Health, Aviva

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1. http://www.sleephealthjournal.org/article/S2352-7218%2815%2900015-7/fulltext
Illness, GP visits and health perceptions

Key findings

• More UK adults are visiting a GP at least once a year, with a third of those experiencing difficulties with getting symptoms checked quickly

• Mental health conditions overtake high blood pressure to become the most common reason for booking a GP appointment, other than a routine health check

• Confidence grows as two in three adults say their health is ‘very good’ or ‘excellent’, despite no discernible improvement in BMI profiles
For a second successive year, more than three in four (77%) UK adults feel avoidable illnesses caused by poor lifestyle choices, are putting more pressure on the NHS – little changed from 2015 when 78% agreed with this view.

At the same time, Aviva’s research points to a longer term trend of increasingly frequent GP visits by UK adults. Back in 2014, three in five (60%) said they visited their doctor at least once a year, including 39% who saw their GP a minimum of once every six months. These measures have now edged up to 62% and 42% respectively, suggesting a growing demand for doctors’ time.

How often UK adults visit their GP

<table>
<thead>
<tr>
<th></th>
<th>2014</th>
<th>2015</th>
<th>2016</th>
</tr>
</thead>
<tbody>
<tr>
<td>Once a month or more</td>
<td>9</td>
<td>5</td>
<td>6</td>
</tr>
<tr>
<td>At least every six months</td>
<td>39</td>
<td>39</td>
<td>42</td>
</tr>
<tr>
<td>At least once a year</td>
<td>60</td>
<td>61</td>
<td>62</td>
</tr>
<tr>
<td>At least once every two years</td>
<td>76</td>
<td>74</td>
<td>74</td>
</tr>
<tr>
<td>Less than once every two years</td>
<td>20</td>
<td>23</td>
<td>22</td>
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</table>

Of those who have seen a GP in the last year, 32% experienced difficulties with getting an appointment for a symptom they wanted checking quickly, the same percentage as in 2015.

Online appointments

Online care could be a viable option alongside face-to-face consultations. Among those who have visited their GP in the past year, two in five (43%) would be happy to have a virtual appointment with a qualified GP within 24 hours rather than having to wait for a face-to-face appointment. Although only 6% of UK adults have used the internet for a video consultation or appointment with a GP in the past, this rises to 12% of 25-34s.

Reasons for visiting a GP

With more adults seeing their GP more often, the reasons for doing so have also evolved. Mental health conditions – including depression, stress and anxiety – have seen the biggest increase in the percentage of adults bringing these to a GP’s attention. One in six (16%) have done so in the last year, up from 13% in 2014.

Mental health has overtaken high blood pressure as the most common reason for visiting a GP other than a routine health check or vaccination. This may be down to two factors: a growing frequency of such conditions and a growing willingness to seek help rather than suffer in silence.

As might be expected, Aviva’s data shows adults who are underweight, overweight or obese tend to visit their GP more often than those whose BMI is in the ‘healthy’ range. Obese people are almost twice as likely to visit their doctor every month as people with a healthy BMI. Obese people visit the doctor for different reasons too – with mental health conditions and high blood pressure the most frequent reasons (both 23%) for a visit to the doctor, while people with a healthy BMI are most likely to visit for routine health checks (20%).
### Top three reasons for visiting a GP in the last 12 months

<table>
<thead>
<tr>
<th>Healthy</th>
<th>Overweight</th>
<th>Obese</th>
</tr>
</thead>
<tbody>
<tr>
<td>Routine health check (20%)</td>
<td>Routine health check (19%)</td>
<td>Mental health condition / high blood pressure (both 23%)</td>
</tr>
<tr>
<td>Mental health condition (15%)</td>
<td>High blood pressure (15%)</td>
<td>Routine health check / diabetes or thyroid (both 18%)</td>
</tr>
<tr>
<td>Skin condition / Minor ailments / Minor infections (all 10%)</td>
<td>Mental health condition (12%) / diabetes or thyroid (12%)</td>
<td>Arthritis / Musculoskeletal conditions / asthma (all 14%)</td>
</tr>
</tbody>
</table>

### Reality versus perceptions

Despite the increasing frequency of GP visits, Aviva’s data suggests UK adults have become more confident about the state of their health in 2016, with two in three (65%) rating their current health as either very good or excellent. This is notably higher than in either 2014 (52%) or 2015 (54%).

However, their greater level of confidence does not appear linked to an improvement in health when measured in terms of BMI. In fact, fewer adults (40%) fall into the ‘healthy’ range in 2016 than in previous years, and this represents a second year where this measure has declined. Almost one in five (19%) are obese and 3% are underweight – both consistent with previous years – and while fewer are classed as overweight, this may be driven more by the fact that fewer adults were prepared to share their height and weight as part of this research than in 2014 or 2015, rather than a discernible improvement.

### How UK adults rate their health

<table>
<thead>
<tr>
<th>%</th>
<th>2014</th>
<th>2015</th>
<th>2016</th>
</tr>
</thead>
<tbody>
<tr>
<td>Very good or excellent</td>
<td>52</td>
<td>54</td>
<td>65</td>
</tr>
<tr>
<td>Neither good nor bad</td>
<td>36</td>
<td>34</td>
<td>22</td>
</tr>
<tr>
<td>Poor or very poor</td>
<td>12</td>
<td>12</td>
<td>13</td>
</tr>
</tbody>
</table>

### What BMI categories UK adults fall into

<table>
<thead>
<tr>
<th></th>
<th>2014</th>
<th>2015</th>
<th>2016</th>
</tr>
</thead>
<tbody>
<tr>
<td>Underweight</td>
<td>3</td>
<td>3</td>
<td>3</td>
</tr>
<tr>
<td>Healthy</td>
<td>44</td>
<td>43</td>
<td>40</td>
</tr>
<tr>
<td>Overweight</td>
<td>31</td>
<td>31</td>
<td>29</td>
</tr>
<tr>
<td>Obese</td>
<td>19</td>
<td>19</td>
<td>19</td>
</tr>
<tr>
<td>Not answered</td>
<td>4</td>
<td>5</td>
<td>9</td>
</tr>
</tbody>
</table>

“Although people are visiting their GP more frequently compared to two years ago, the reasons for doing so are encouraging, as more people are seeking help for mental health conditions. For too long mental illness has been swept under the rug and treated as less important than physical problems, so it’s great to see more people asking for the help they need.”

Dr Doug Wright  
Medical Director, UK Health, Aviva
Key findings

- Less than half of parents (41%) and grandparents (33%) are meeting recommended exercise levels.
- Children are even less likely to meet exercise guidelines, with only 26% of parents saying their children exercise the recommended amount.
- Grandparents are least likely to have a healthy BMI (32%).
Exercise

Keeping active is a key part of staying healthy, and two thirds (67%) of parents exercise more than once a week (although fathers are more likely to do this than mothers: 71% vs. 63%). For grandparents this proportion is slightly lower (58%).

To achieve recommended NHS exercise guidelines\(^8\) of 150 minutes a week moderate exercise, it is likely adults will need to exercise four to six times a week or more. The proportion of parents achieving this is 41%, with 33% of grandparents doing the same.

Among parents who exercise, walking (68%) is the most regular form, followed by running or jogging (26%) and swimming (25%). However, 21% note strenuous household tasks as a regular form of exercise (with this particularly common among grandparents at 35%). This may only count as moderate activity, so people could be overestimating how much true exercise they do.

Going to the gym (25% vs. 19% average) and cycling (24% vs. 20% average) are more popular among 25-34s.

Children less likely to meet exercise guidelines

Children have slightly higher exercise guidelines, with at least 60 minutes of exercise every day recommended.\(^9\) According to parents, just over a quarter (26%) of their children exercise this much, although this proportion is higher among younger children (33%). Younger parents are more likely to be meeting exercise guidelines themselves (58% of 18-24s exercise four to six times a week or more compared to 38% of over 55s). According to parents one in ten (11%) children exercise once a week or less, while 6% never exercise.

| Proportion of children, parents and grandparents meeting exercise guidelines |
|-----------------------------|---|
| Children                   | 26 |
| Parents                    | 41 |
| Grandparents               | 33 |

The appeal of playing with technology instead of exercising could be part of the reason that children’s exercise levels are failing to meet guidelines. A quarter (26%) of parents say their children are more likely to be looking at a screen than taking part in active games or sports, rising to 29% of 45-54s (who are likely to be parents to teenagers). An additional one in five (18%) say their children would rather be indoors than playing outside, while 15% say their children show little interest in exercise.

Smoking and alcohol consumption

Smoking rates in the UK have more than halved since the 1970s and national statistics estimate that just under one in five adults within families now smoke.\(^10\) However, Aviva’s data highlights that within families, just under a third (30%) of parents smoke, with the rate highest amongst parents aged 18-24 (42%). Parents are also more likely to smoke if they drink more than the recommended 14 units of alcohol a week, rising to (46%) among this group.

As for drinking habits in general, almost four in five parents (79%) say they drink alcohol, falling to 76% amongst grandparents. A higher proportion of parents who are overweight (84%) said they drink alcohol: many types of alcohol are known to have a high calorie content.

When it comes to the habits of children, parents overwhelmingly believe that their children do not smoke or drink to the best of their knowledge. 86% of children aged 12 or older are considered not to smoke by their parents, while 75% are considered not to drink.

Generational differences in health

An initial glance across the various components of family health – from BMI scores to exercise, diet and alcohol / cigarette consumption – reveals some key differences across the generations.

The vast majority of parents rate their children’s health as very good, and their BMI as healthy. However, parents also say that only 26% of children meet recommended exercise guidelines, and a significant number of children regularly eat unhealthy food, so it may be that parents see their children’s health in an optimistic light. Official figures back this up, with Public Health England figures showing one in three children in year 6 (10-11 year olds) is overweight or obese.\(^11\)
Although grandparents are more likely to suffer from health complaints – and therefore have a lower self-rated level of health – they have notably healthier diets than younger generations, and are less likely to drink and smoke than parents are. However, they are the least likely to have a healthy BMI, and only a third (33%) meet exercise guidelines. Maintaining good health is key to preventing more serious illnesses or conditions in later life.

Family health

<table>
<thead>
<tr>
<th></th>
<th>Children aged 0-18 (as rated by parents)</th>
<th>Parents</th>
<th>Grandparents</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rate health as good</td>
<td>95</td>
<td>72</td>
<td>56</td>
</tr>
<tr>
<td>BMI – healthy</td>
<td>87</td>
<td>44</td>
<td>32</td>
</tr>
<tr>
<td>Meet exercise guidelines*</td>
<td>26</td>
<td>41</td>
<td>33</td>
</tr>
<tr>
<td>Diet – five or more fruit &amp; veg a day</td>
<td>18</td>
<td>18</td>
<td>27</td>
</tr>
<tr>
<td>Alcohol – no, never drink</td>
<td>75</td>
<td>21</td>
<td>24</td>
</tr>
<tr>
<td>Smoking – no, never smoke</td>
<td>86</td>
<td>70</td>
<td>81</td>
</tr>
</tbody>
</table>

* Children are recommended to exercise for at least an hour every day. A ‘healthy’ level for parents and grandparents is at least four to six times a week.

“As different generations form health habits in different eras, it’s not surprising that varying trends emerge among family members. There is clearly some work to be done in improving overall health levels, but the good news is all generations can take advantage of the wealth of resources available that provide advice on healthy eating and exercise.”

Dr Doug Wright
Medical Director, UK Health, Aviva
While a nation in perfect health may be an unattainable goal, it is clear there is room for improvement when it comes to family health and wellbeing. Generational differences mean some family members have healthier habits than others, and it is the older generations who are least likely to have a healthy BMI.

Our population is ageing, with nearly one in seven people projected to be aged over 75 by 2040.12 With older people naturally more prone to poor health, it's vital that older generations make conscious efforts to ensure their lifestyle is as fit and active as possible.

Doing so will not only help make later life healthier and more enjoyable, but go some way in alleviating the pressure on stretched healthcare services struggling to cope with the needs of an ageing population.

From parents' point of view, their children are in relatively good health, with a high proportion indicating their children have a healthy BMI. Yet there is a clear mismatch between parents' evaluation of their children's health and the frequency of poor eating habits, use of unhealthy food as reward and motivation and the majority of children failing to meet exercise guidelines.

Official statistics are also far less complimentary, with nearly a third of children classed as overweight according to the NHS. This ‘obesity awareness gap’ could prove to be cause for concern as parents unaware of the true health of their children are unlikely to be taking the appropriate steps to improve their health.

No parent likes to think of their children being unhealthy, in part because they may feel this reflects badly on themselves: the majority of parents say they are in control of their children's health and their guidance has a long-term impact, suggesting responsibility for children's health falls squarely in the parent's court.

Although in reality this influence may wane as their children age, parental control over health is positive as it provides an excellent opportunity for parents to instil habits to support a healthy and active life.

The good news is many families are already setting goals to improve their wellbeing, from exercising more and reducing sugar intake to getting a better night’s sleep. Advances in digital technology means tracking personal health is easier than ever before. Although the number of GP visits has risen rather than fallen over the past year, the growing acceptance of healthcare technology could reduce the need for one-to-one appointments in the long-term.

Technology is just one of many ways families can take control of their own health and wellbeing. Even small changes – like walking to work or school or swapping sugary snacks for healthier alternatives – can make all the difference and help to create a healthier and happier future.

Dr Doug Wright
Medical Director, UK Health, Aviva


“The ‘obesity awareness gap’ could prove to be cause for concern as parents unaware of the true health of their children are unlikely to be taking the appropriate steps to improve their health.”
Healthy actions to take today

Start your journey to better health today with Aviva's top tips:

1. Get educated
   Having a good understanding of what constitutes a healthy, balanced diet is the best way of ensuring your family develops better eating habits. Carbohydrates, fats, protein, vitamins, minerals, fibre and water all play crucial roles in our diet but it can be difficult to know exactly how much of each we should be eating. Online research will help you to understand what should be consumed on a regular basis and what should be reserved for an occasional treat. Aviva’s nutrition centre has lots of information on nutrition, reducing cholesterol and weight management.

2. Make smart swaps
   Completely cutting out food you’re used to eating regularly is unlikely to be an effective method of eating healthier. The trick is making gradual changes that can easily be incorporated into your daily life. Smart swaps – replacing certain foods with healthier, but just as tasty, options – are a great way of doing this. It could be as simple as buying low or reduced fat options, using herbs and spices instead of salt or replacing chocolate and crisps with veggie sticks and low-fat dips. Get the whole family involved when making meals so everyone can learn more about what they’re eating, and head online or to your local bookstore for healthy recipe ideas.

3. Get active
   Whether you already exercise and want to up your game, or you can’t remember the last time you went for a run, there’s lots of advice available to take your fitness to the next level. Exercise doesn’t have to be limited to going to the gym: swimming, dancing, cycling and even bowling are all ways of getting active. Understand your fitness levels, find a routine you can stick to and add or switch exercises to keep your body challenged. If you have kids, get them involved in after-school sports clubs to up their exercise levels. Visit Aviva’s fitness centre for more advice on getting moving.

4. Sleep soundly
   Getting a good night’s sleep is vital for your health and wellbeing. Try to go to sleep and get up at the same time every day, even on weekends, to avoid jet-lag symptoms. Make sure your room is dark when it’s time to sleep and avoid bright screens before bedtime. Limit caffeine, nicotine and alcohol before bedtimes, and try not to eat heavy meals too late at night. Being able to wind down and relax is also key: visit Aviva’s health page to find out how to cope with stress.

5. Be health tech savvy
   Support your fitness journey with healthcare apps and wearable technology. Tracker devices can monitor your activity, food, exercise and sleep, and arm you with the information you need to make positive changes. Mobile phone apps are also an inexpensive way of keeping on top of your fitness goals. You can also use technology to seek professional advice: Aviva has partnered with virtual health service Babylon to offer some of its customers video or phone consultations with GPs and clinicians. Find out more here.

“Tracker devices can monitor your activity, food, exercise and sleep, and arm you with the information you need to make positive changes.”
Methodology

All percentages and figures shown in this report (unless otherwise cited) come from an online survey conducted by ICM research for Aviva UK Health. The survey was carried out in August 2016.

Respondents were invited from ICM’s online panel and 1,996 interviews were conducted amongst a nationally representative sample of the UK adult population. Additional interviews were conducted to achieve a robust sample of 1,500 parents with children up to 18.

UK adults surveyed, excluding Northern Ireland.

For further information on the report please contact Jess Geoghegan or Monique Crockett at the Aviva Press Office on:

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