A 3 year follow-up study of health care students' sense of coherence and related smoking, drinking and physical exercise factors.

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Alcohol Drinking - psychology

Attitude of Health Personnel

Attitude to Health

Educational Status

Exercise - psychology

Female

Finland

Follow-Up Studies

Health Behavior

Health Knowledge, Attitudes, Practice

Humans

Internal-External Control

Male

Pilot Projects

Questionnaires

Self Efficacy

Smoking - psychology

Students, Health Occupations - psychology
Abstract: The purpose of the study was to describe the sense of coherence (SOC) of three groups of Finnish polytechnic students (n=287) at the beginning of their studies and to follow it during a period of 3 year amongst the health care students (n=63) of this group. The associations between SOC and smoking, drinking and physical exercise were also studied. The data were collected with a questionnaire which included Antonovsky's (Adv. Nurs. Sci. 1(1983)37) SOC scale. Data analysis was with SPSS statistical software. The students showed a strong sense of coherence at the beginning of their studies. Physical activity was related to the strength of SOC, but no association was found with smoking and drinking. Health care students showed a stronger SOC at the beginning of their studies than the two other groups. During the follow-up focused on the health care students, SOC weakened in 6%, remained unchanged in 65% and strengthened in 32% of the participants. Smoking, drinking and physical exercise showed no association with these changes. Future research should be focused on identifying factors that are related to SOC during education.

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Active living in communities: understanding the intention to take up physical activity as an everyday way of life.

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Attitude to Health
Exercise - psychology
Female
Humans
Life Style
Male
Middle Aged
New Brunswick
Questionnaires
Regression Analysis

Abstract: The purpose of this study was to identify psychosocial factors influencing the intention to incorporate physical activity into daily routine. The subjects were 353 residents from New Brunswick aged 15 to 80 years. The intention to be active was explained by current physical activity habit (beta = 0.563, p

PubMed ID: 7895218 View in PubMed
Active Smarter Kids (ASK): Rationale and design of a cluster-randomized controlled trial investigating the effects of daily physical activity on children’s academic performance and risk factors for non-communicable diseases.

https://arctichealth.org/en/permalink/ahliterature269990

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Humans
Male
Norway
Obesity - prevention & control
Physical Education and Training
Primary Prevention
Quality of Life
Risk factors
School Health Services - statistics & numerical data
Abstract: Evidence is emerging from school-based studies that physical activity might favorably affect children’s academic performance. However, there is a need for high-quality studies to support this. Therefore, the main objective of the Active Smarter Kids (ASK) study is to investigate the effect of daily physical activity on children’s academic performance. Because of the complexity of the relation between physical activity and academic performance it is important to identify mediating and moderating variables such as cognitive function, fitness, adiposity, motor skills and quality of life (QoL). Further, there are global concerns regarding the high prevalence of lifestyle-related non-communicable diseases (NCDs). The best means to address this challenge could be through primary prevention. Physical activity is known to play a key role in preventing a host of NCDs. Therefore, we investigated as a secondary objective the effect of the intervention on risk factors related to NCDs. The purpose of this paper is to describe the design of the ASK study, the ASK intervention as well as the scope and details of the methods we adopted to evaluate the effect of the ASK intervention on 5th grade children.

The ASK study is a cluster randomized controlled trial that includes 1145 fifth graders (aged 10 years) from 57 schools (28 intervention schools; 29 control schools) in Sogn and Fjordane County, Norway. This represents 95.3% of total possible recruitment. Children in all 57 participating schools took part in a curriculum-prescribed physical activity intervention (90 min/week of physical education (PE) and 45 min/week physical activity, in total; 135 min/week). In addition, children from intervention schools also participated in the ASK intervention model (165 min/week), i.e. a total of 300 min/week of physical activity/PE. The ASK study was implemented over 7 months, from November 2014 to June 2015. We assessed academic performance in reading, numeracy and English using Norwegian National tests delivered by The Norwegian Directorate for Education and Training. We assessed physical activity objectively at baseline, midpoint and at the end of the intervention. All other variables were measured at baseline and post-intervention. In addition, we used qualitative methodologies to obtain an in-depth understanding of children’s embodied experiences and pedagogical processes taking place during the intervention.

If successful, ASK could provide strong evidence of a relation between physical activity and academic performance that could potentially inform the process of learning in elementary schools. Schools might also be identified as effective settings for large scale public health initiatives for the prevention of NCDs.

Clinicaltrials.gov ID nr: NCT02132494 . Date of registration, 6th of May, 2014.
Active traveling and its associations with self-rated health, BMI and physical activity: A comparative study in the adult Swedish population.

https://arctichealth.org/en/permalink/ahliterature283804
Active traveling to a daily occupation means that an individual uses an active way of traveling between two destinations. Active travel to work or other daily occupations offers a convenient way to increase physical activity levels which is known to have positive effects on several health outcomes. Frequent used concepts in city planning and regional planning today are to create environments for active commuting and active living. Even then, little research has focused on traveling modes and subjective health outcomes such as self-rated health (SRH). This study aimed to explore and investigate associations between travel mode and health-related outcomes, such as self-rated health (SRH), body mass index (BMI) and overall physical activity, in an adult population in Sweden. A cross-sectional study was conducted in a randomly selected population-based sample (n = 1786, age 45-75 years); the respondents completed a questionnaire about their regular travel mode, demographics, lifestyle, BMI and SRH. Chi-square tests and logistic regressions found that inactive traveling was associated with poor SRH, a greater risk of obesity or being overweight and overall physical inactivity. In addition, lifestyle factors, such as choice of food and smoking habits, were associated with SRH, BMI and overall physical activity.
Activity and obesity of Colombian immigrants in Canada who use a food bank.

https://arctichealth.org/en/permalink/ahliterature159910

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          Adult
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          Colombia - ethnology
          Emigrants and Immigrants - psychology - statistics & numerical data
          Ethnic Groups - psychology
          Exercise - psychology
          Female
          Food Services - utilization
          Humans
          Male
          Middle Aged
          Obesity - epidemiology - ethnology - psychology
          Ontario
          Overweight - epidemiology - ethnology - psychology
          Questionnaires
          Sex Factors
          Social Support
          Socioeconomic Factors
          Utilization Review - statistics & numerical data

Abstract: The purpose of this study was to provide some preliminary description of the Latin-Canadian community by reporting the socioeconomic status, physical activity, and weight status (i.e., healthy weight, overweight, or obese status) of Colombians newly immigrated to London, Ontario Canada. Face-to-face interviews were conducted on a convenience sample of 77 adult Colombian immigrant food bank users (46.8% men; mean age 39.9 yr., SD=11.8). Physical activity was gauged using the International Physical Activity Questionnaire and self-report Body Mass Index, and sociodemographic data were collected. Of respondents, 47% had a university education, and 97% received social support. 61% met recommended levels of physical activity. Men were more active, being involved in about 130 min. more of exercise per week, and more men were overweight than women (63.9% versus 39.0%, respectively). Of respondents, 73% reported being less active than before coming to Canada. This pilot study indicates that Latin-Canadian immigrants are a vulnerable group in need of acculturational support. Further study is warranted.

PubMed ID: 18065093 View in PubMed
Adherence to physical exercise recommendations in people over 65--the SNAC-Kungsholmen study.

https://arctichealth.org/en/permalink/ahliterature258217

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Patient Compliance - psychology - statistics & numerical data
Physical Fitness - physiology
Sweden - epidemiology

Abstract: There is limited knowledge regarding to what extent the older population meet the recommendations of physical exercise, especially fitness-enhancing exercise. This study assessed participation in health- and fitness-enhancing exercises in people aged >65, and explored to what extent the possible differences in meeting current recommendations differs by age, gender and education.

The study population was derived from the Swedish National study on Aging and Care, and consisted of a random sample of 2593 subjects, aged 65+ years. Participation in health- and fitness-enhancing exercise according to the WHO and the American College of Sports Medicine’s recommendations in relation to age, gender and education was evaluated using multinomial logistic regression adjusted for health indicators and physical performance.

According to the recommendations, 46% of the participants fulfilled the criteria for health-enhancing and 16% for fitness-enhancing exercises. Independent of health indicators and physical performance, women

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Aerobic capacity, orthostatic tolerance, and exercise perceptions at discharge from inpatient spinal cord injury rehabilitation.

https://arctichealth.org/en/permalink/ahliterature113262
Abstract:
To describe physical capacity, autonomic function, and perceptions of exercise among adults with subacute spinal cord injury (SCI).
Cross-sectional.
Two inpatient SCI rehabilitation programs in Canada.
Participants (N=41; mean age ± SD, 38.9 ± 13.7y) with tetraplegia (TP; n=19), high paraplegia (HP; n=8), or low paraplegia (LP; n=14) completing inpatient SCI rehabilitation (mean ± SD, 112.9 ± 52.5d postinjury).
Not applicable.
Peak exercise capacity was determined by an arm ergometry test. As a measure of autonomic function, orthostatic tolerance was assessed by a passive sit-up test. Self-efficacy for exercise postdischarge was evaluated by a questionnaire.
There was a significant difference in peak oxygen consumption and heart rate between participants with TP (11.2 ± 3.4;mL·kg(-1)·min(-1) 113.9 ± 19.7 beats/min) and LP (17.1 ± 7.5 mL·kg(-1)·min(-1); 142.8 ± 22.7 beats/min). Peak power output was also significantly lower in the TP group (30.0 ± 6.9W) compared with the HP (55.5 ± 7.56W) and LP groups (62.5 ± 12.2W). Systolic blood pressure responses to the postural challenge varied significantly between groups (-3.0 ± 33.5 mmHg in TP, 17.8 ± 14.7 mmHg in HP, 21.6 ± 18.7 mmHg in LP). Orthostatic hypotension was most prevalent among participants with motor complete TP (73%). Results from the questionnaire revealed that although participants value exercise and see benefits to regular participation, they have low confidence in their abilities to perform the task of either aerobic or strengthening exercise.
Exercise is well tolerated in adults with subacute SCI. Exercise interventions at this stage should focus on improving task-specific self-efficacy, and attention should be made to blood pressure regulation, particularly in individuals with motor complete TP.

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Analyzing theoretical mechanisms of physical activity behavior change in breast cancer survivors: results from the activity promotion (ACTION) trial.
https://arctichealth.org/en/permalink/ahliterature158234

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Publication Type:
Article
Abstract:
We previously reported that a physical activity (PA) behavior change intervention based on the theory of planned behavior (TPB) increased PA and quality of life in breast cancer survivors. To examine the effects of our interventions on TPB variables and to determine if PA at 12 weeks follow-up was mediated by TPB variables at 4 weeks.

Breast cancer survivors (N = 377) were randomly assigned to receive either a standard public health recommendation for PA (SR group), a step pedometer alone, or one of two TPB-based behavior change interventions consisting of print materials (alone or combined with a step pedometer). For the purpose of this study, we compared the two TPB-based intervention groups (INT group) to the SR group.

Compared to the SR group, the INT group reported more favorable changes in instrumental attitude (mean difference = 0.13; 95% CI = -0.01 to 0.23; d = 0.19; p = 0.077), intention (mean difference = 0.33; 95% CI = 0.10 to 0.56; d = 0.33; p = 0.006), and planning (mean difference = 0.39; 95% CI = 0.04 to 0.73; d = 0.26; p = 0.027). Mediation analyses indicated that both planning and intention partially mediated the effects of the intervention on PA at 12 weeks.

Our TPB-based behavior change intervention resulted in small improvements in the TPB constructs that partially mediated the effects of our intervention on PA behavior. Additional research with the TPB is warranted.

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Abstract: Anticipation before the start of exercise may influence the cardiopulmonary responses during exercise. If anticipation influences the responses differently with maximal and submaximal exercises, normative values for submaximal responses will not be comparable unless exercise has been continued to the same end point. Twelve healthy subjects (five men) aged 18-27 years had a maximal exercise test and a submaximal exercise test on a cycle ergometer on different days and in random order. They were not aware of the specific purpose of the study and were informed 15 min before the tests whether it should be maximal or submaximal. Workload increased with 15 W min\(^{-1}\) until exhaustion or to 80% of predicted maximal heart rate (HR). HR, oxygen uptake (VO\(_2\)), carbon dioxide production (VCO\(_2\)), minute ventilation (V(E)) and tidal volume (V(T)) were averaged over 20 s intervals. Linear regression of the HR-VO\(_2\) relationship and quadratic regression of the V(T)-V(E) relationship were performed for each individual, and the regression coefficients for maximal and submaximal tests were compared.

The regression models described the V(T)-V(E) responses with a R\(^2\) > 0.85 in 23 of 24 tests, and the HR-VO\(_2\) responses with a R\(^2\) > 0.90 in all tests. The regression coefficients of the relationships were not significantly different with maximal and submaximal exercises.

Anticipation appears not to influence the responses to progressive maximal and submaximal exercise tests with the same rate of increase in load. Normative values at submaximal exercise levels are not influenced by the targeted end point of exercise.
Aspects of reliability and validity of the Swedish version of the Self-Efficacy for Exercise Scale for older people.

https://arctichealth.org/en/permalink/ahliterature106941

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Health Knowledge, Attitudes, Practice
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Motivation
Pain - psychology
Pain Measurement
Questionnaires
Reproducibility of Results
Self Efficacy
Sweden

Abstract: The aim was to test aspects of reliability and validity of a Swedish version of the Self-Efficacy for Exercise Scale (SEE-SV) for older people. Floor and ceiling effects, item-total correlation, internal consistency, test-retest reliability, content and construct validity were tested on 39 older people, mean age 72 years (SD 3.3). Content validity was also tested on five physical therapists. The results showed no floor and ceiling effects. The ICC for the total score was 0.79 (95% CI 0.61-0.89). The median weighted kappa coefficients square for the individual items was 0.63. Item-to-total correlation varied between 0.64 and 0.86 and Cronbach's Alpha for all items was >0.92. The correlations between SEE-SV and the SF-36 Mental Health and Bodily Pain subscales were r(s)=-0.50 and r(s)=0.30 (ns), respectively. The correlation between SEE-SV and self-assessed physical activity was r(s)=0.13 (ns).

Eighty-nine percent responded that the items were relevant and 92% that no item should be excluded. All physical therapists considered the items relevant, but the written instructions could be improved. In conclusion, SEE-SV has good item-to-total correlation, satisfactory internal consistence and substantial test-retest reliability. Our results show satisfactory content validity; however, studies are needed to further evaluate construct validity and to evaluate other aspects such as predictive validity and responsiveness.

PubMed ID: 24083621 View in PubMed