

# Behavior change and physical activity maintenance in children – Fun or what?

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# WHO GUIDELINES ON PHYSICAL ACTIVITY AND SEDENTARY BEHAVIOUR



At least  
**60**  
minutes a day

**moderate- to vigorous-intensity physical activity** across the week; most of this physical activity should be aerobic.



## LIMIT

**the amount of time spent being sedentary,** particularly recreational screen time.



On at least  
**3**  
days a week


**vigorous-intensity aerobic activities,** as well as those that **strengthen muscle and bone** should be incorporated.



# Children have not gotten the memo yet...

Indicator	All countries (N = 57)	Very high HDI (n = 42)	High HDI (n = 11)	Medium/low HDI (n = 4)
Overall Physical Activity	D	D+	D	D+
Organized Sport and Physical activity	C-	C	D	C
Active Play	C-	C-	D-	C+
Active Transportation	C-	C-	C-	C+
Sedentary Behavior	D+	D	D+	C-
Physical Fitness	C-	C	D+	INC

*Journal of Physical Activity and Health*, 2022, 19, 700-728  
<https://doi.org/10.1123/jpah.2022-0456>  
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Human Kinetics   
ORIGINAL RESEARCH

**Global Matrix 4.0 Physical Activity Report Card Grades for Children  
and Adolescents: Results and Analyses From 57 Countries**

# What about Finnish children?

**Table 1** Grades and ratings for Finland's 2018 Report Card

Indicator	Grade	2022	Description
Overall Physical Activity (PA)	D	A-	Proportion of children and adolescent who meet the minimum recommendation of engaging in at least 60 min of PA a day. 34% of 9-15 y (LIITU objective measurements, 2016), 31% of 9-15 y (LIITU survey 2016), 34% of 10-11 y and 19% of 14-15 y (School Health Promotion (SHP) Study 2017). <sup>2</sup>
Organized Sport Participation	C+	C+	Proportion of children and youth who participate in sports club activities or other organized physical activities. 53% of 9-15 y participate in sports club activities (LIITU survey 2016). 53% of 9-15 y participate in sports club at least once per week (LIITU survey 2016). <sup>1</sup> 48% of 14-15 y participate in organized physical activities (School Health Promotion (SHP) Study 2017). <sup>2</sup>
Active Play	C	C-	Proportion of children and youth who engage in unorganized active play at least 4 times per week. 51% of 9-15 y participate in unorganized PA at least 4 times per week (LIITU survey 2016). <sup>1</sup> 41% of 14-15 y participate in unorganized physical activity or sports almost daily (School Health Promotion (SHP) Study 2017). <sup>2</sup>
Active Transportation	B+	B+	Proportion of children and adolescent who actively commute to school, on foot or by bike (among those who live more than 5 km away from school). Total 77% of 9-15 y (80% of 9 y, 83% of 11 y, 79% of 13 y, 61% of 15 y, 2016). <sup>1</sup>
Sedentary Behaviours	D-	INC	Proportion of children and adolescent who meet recommendations related to screen time (maximum of two hours per day at least 5 days per week 25% of 9-15 y (LIITU survey 2016). <sup>1</sup>
Physical Fitness	C	C-	Percentile achieved: BOYS C- (44% of 11 and 14 y, 46% of 11 y, 41% of 14 y), GIRLS C+ (59% of 11 and 14 y, 69% of 14 y) reached by using VO2peak (Median values used instead of mean values). (National Monitoring system for physical functioning capacity 2017). <sup>3</sup>
Family and Peers	B-	B-	Proportion of children and adolescents with family members or peers who encourage and support them to be active or are physically active with them. The percentage of 9-15 y report that at least one parent: encourages them to be physically active (80%), contributes financially to their children's physical activities (79%), takes them to venues of physical activities (64%), is physically active with their children (38%). (LIITU survey 2016). <sup>1</sup> 43% of 9-15 y note that their friends are physically active with them (LIITU survey 2016). <sup>1</sup>



This looks bad.

Kids will probably grow out of it though, right?



# Children seem to grow **into** inactive lifestyles

- Annual declines in MVPA:
  - 3.4% in boys
  - 5.3% in girls
- Largest reduction in MVPA at age 9

Received: 7 July 2019 | Revised: 8 September 2019 | Accepted: 8 September 2019

DOI: 10.1111/obr.12953

**PEDIATRIC OBESITY/BEHAVIOR**

**OBESITY**  
Reviews WILEY


**Longitudinal changes in moderate-to-vigorous-intensity physical activity in children and adolescents: A systematic review and meta-analysis**

Abdulaziz Farooq<sup>1,3</sup>  | Anne Martin<sup>2</sup>  | Xanne Janssen<sup>3</sup> | Mathew G. Wilson<sup>1,4</sup> | Ann-Marie Gibson<sup>3</sup> | Adrienne Hughes<sup>3</sup> | John J. Reilly<sup>3</sup> 

# And tend to stay there

- Inactivity among young people seems to persist quite strongly into later ages

## Distinct trajectories of physical activity and related factors during the life course in the general population: a systematic review

[Irinja Lounassalo](#) , [Kasper Salin](#), [Anna Kankaanpää](#), [Mirja Hirvensalo](#), [Sanna Palomäki](#), [Asko Tolvanen](#), [Xiaolin Yang](#) & [Tuija H. Tammelin](#)

[BMC Public Health](#) **19**, Article number: 271 (2019) | [Cite this article](#)



Right...  
We need an  
intervention  
for our kids!




# Many PA interventions, but not effective

- $k=30$
- Total PA: *small to negligible effects* (SMD: 0.12)
- Moderate or vigorous PA: *small effects* (SMD 0.16)
- Equates to <4 minutes difference per day.

BMJ

BMJ 2012;345:e5888 doi: 10.1136/bmj.e5888 (Published 27 September 2012)

## **Effectiveness of intervention on physical activity of children: systematic review and meta-analysis of controlled trials with objectively measured outcomes (EarlyBird 54)**

 OPEN ACCESS

Brad Metcalf *research fellow and statistician*<sup>1</sup>, William Henley *professor of medical statistics*<sup>2</sup>,  
Terence Wilkin *professor of endocrinology and metabolism*<sup>1</sup>

<sup>1</sup>Department of Endocrinology and Metabolism, Peninsula College of Medicine and Dentistry, Plymouth University Campus, Plymouth, UK; <sup>2</sup>Institute of Health Services Research, Peninsula College of Medicine and Dentistry, University of Exeter Campus, Exeter, UK

# What about school-based PA interventions?

- Null effects on objective PA.



Received: 22 August 2018 | Revised: 26 October 2018 | Accepted: 21 November 2018  
DOI: 10.1111/obr.12823

PEDIATRIC OBESITY/OBESITY PREVENTION

WILEY **obesity**reviews

**Are school-based physical activity interventions effective and equitable? A meta-analysis of cluster randomized controlled trials with accelerometer-assessed activity**

Rebecca Love  | Jean Adams | Esther M. F. van Sluijs

A top-down view of several children sitting around a large white sheet of paper on the floor, drawing with colored pencils. The paper is covered with various hand-drawn illustrations. In the center is a large, multi-story school building with a clock tower. To the left of the building is a microscope, a lightbulb, a ruler, and a girl sitting at a desk. To the right is a pair of scissors, a kite, a girl standing, and a stack of books. Above the building is a globe and a compass. Below the building is a backpack, a computer monitor, and a calculator. On the far right, there is a vertical number line from 1 to 9 and a small grid with the numbers 2 and 2. The children's hands and heads are visible around the edges of the paper, actively engaged in drawing.

# Bottom line:

It's hard to meaningfully increase physical activity in children.

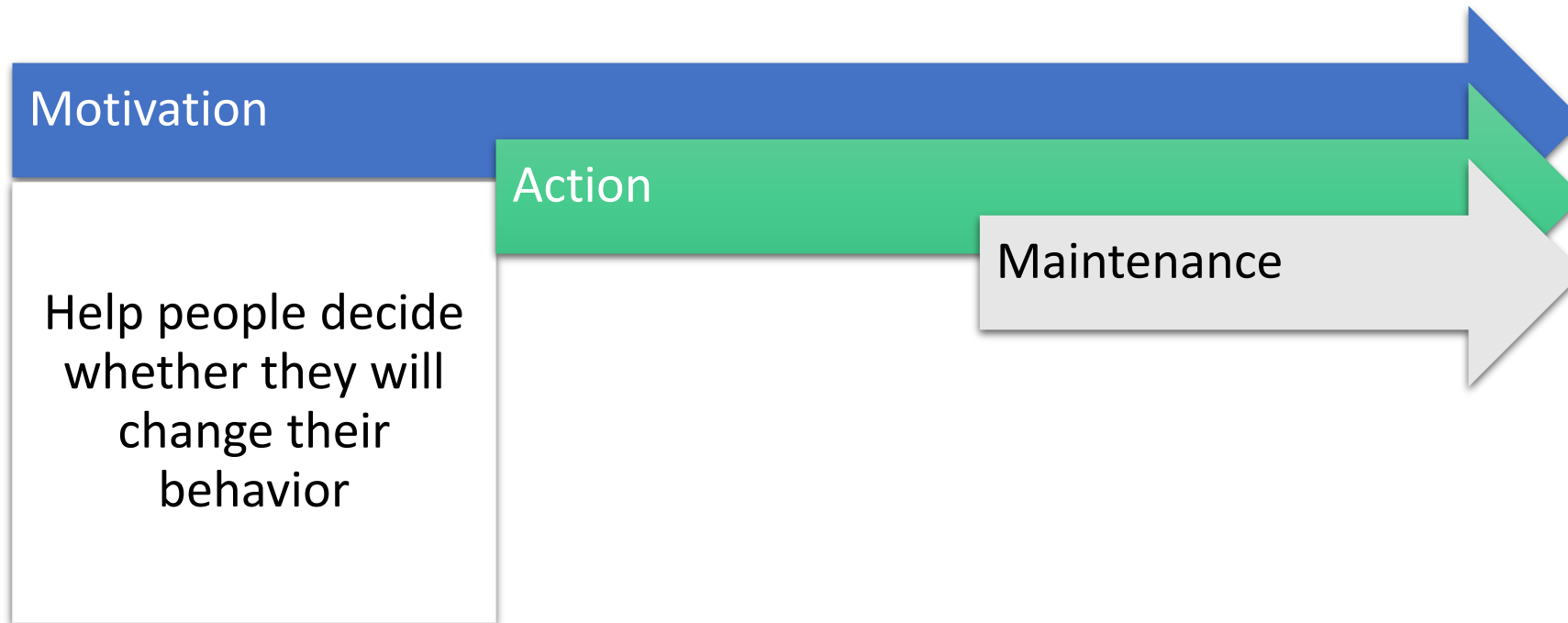
But it is super important, so we've got to try! 😊





So, what can  
we do?

# Behavior change is a process





# COM-B Model



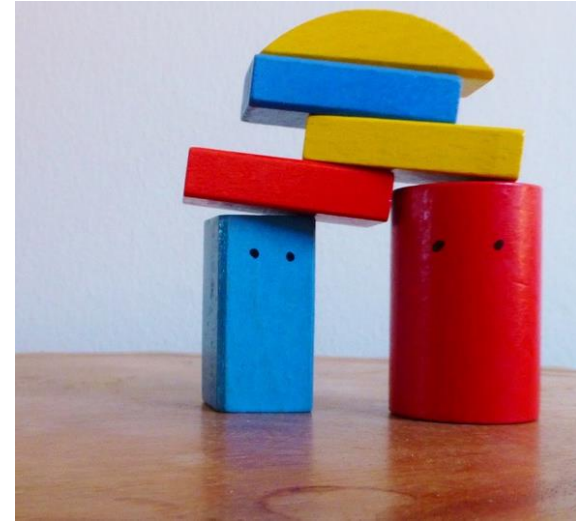
# Psychological Capability

- Self-efficacy
  - Belief in own ability to undertake a behavior
- Perceived control
  - Belief in own control over whether behavior takes place



# Building self-efficacy

- Positive (past) experiences
  - Small, achievable tasks with feedback
- Observing positive experiences of similar others
  - Identifying role models
- Persuasion
  - Or self-persuasion?



# Physical Capability

- People have limitations and preferences
- The key is to find matches between preferences, ability and desired outcomes
- This requires clinical knowledge, creativity, effort and an open mind!
  - Guess and test



# COM-B Model





# Physical/Environmental Opportunity

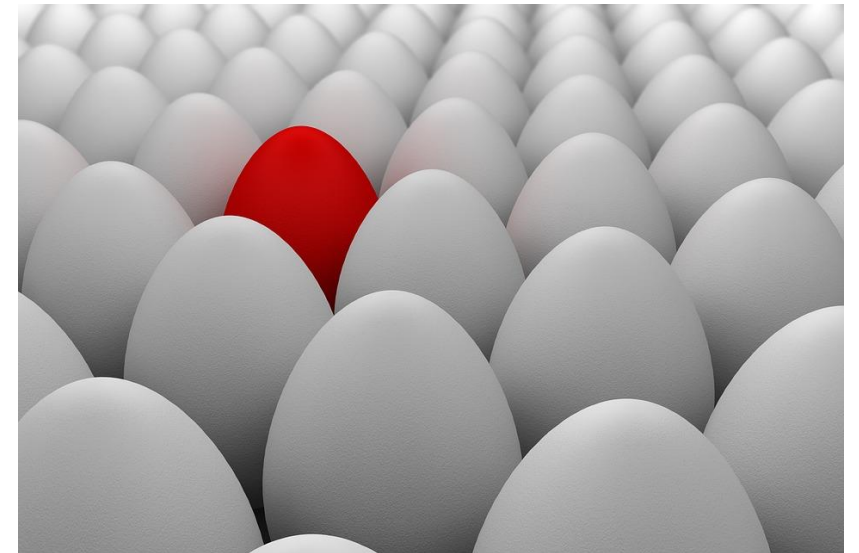
## **Inequality in the Built Environment Underlies Key Health Disparities in Physical Activity and Obesity**

Penny Gordon-Larsen, PhD<sup>a</sup>, Melissa C. Nelson, PhD, RD<sup>b</sup>, Phil Page, MA<sup>c</sup>, Barry M. Popkin, PhD<sup>a</sup>

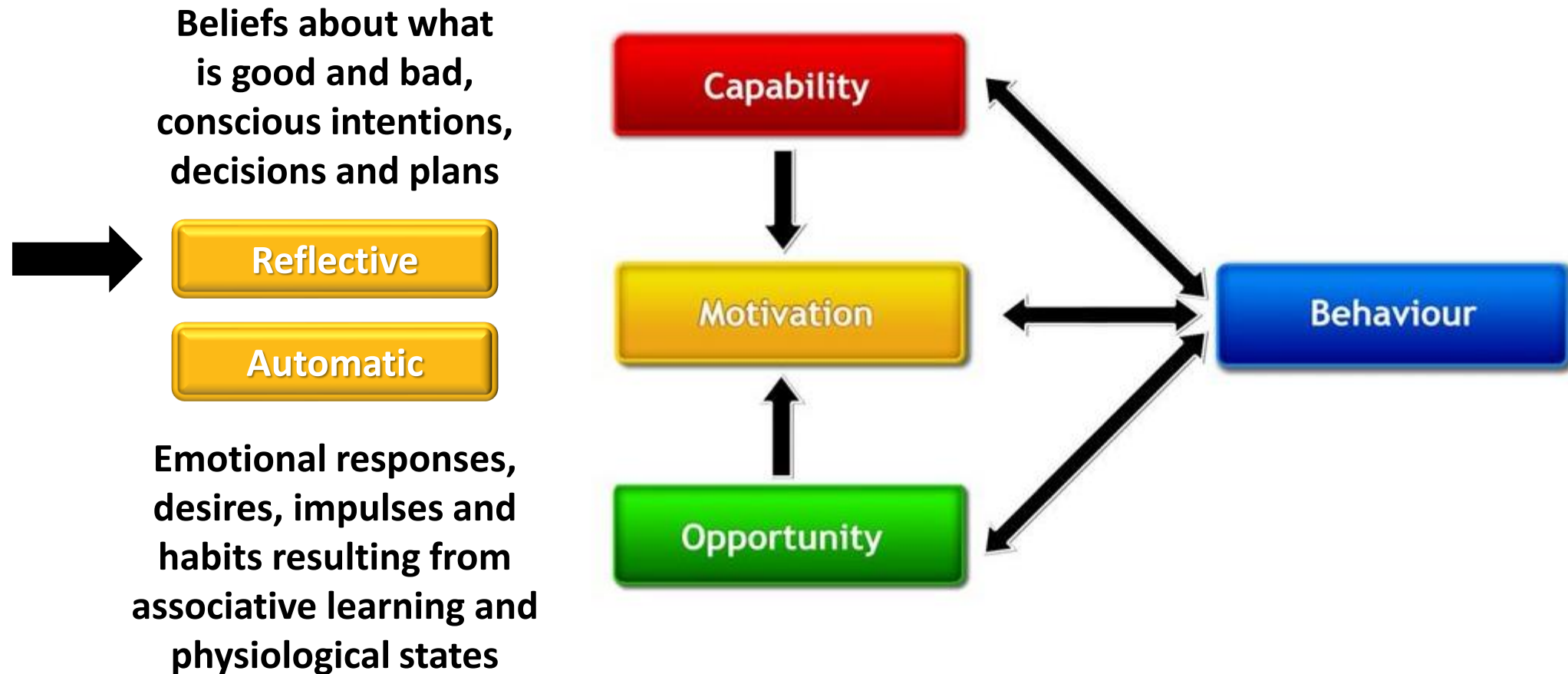
- Parks, sports clubs, nature areas, exercise equipment, etc.
- Helping people to locate opportunities and obtain access is important.

# Social Opportunity

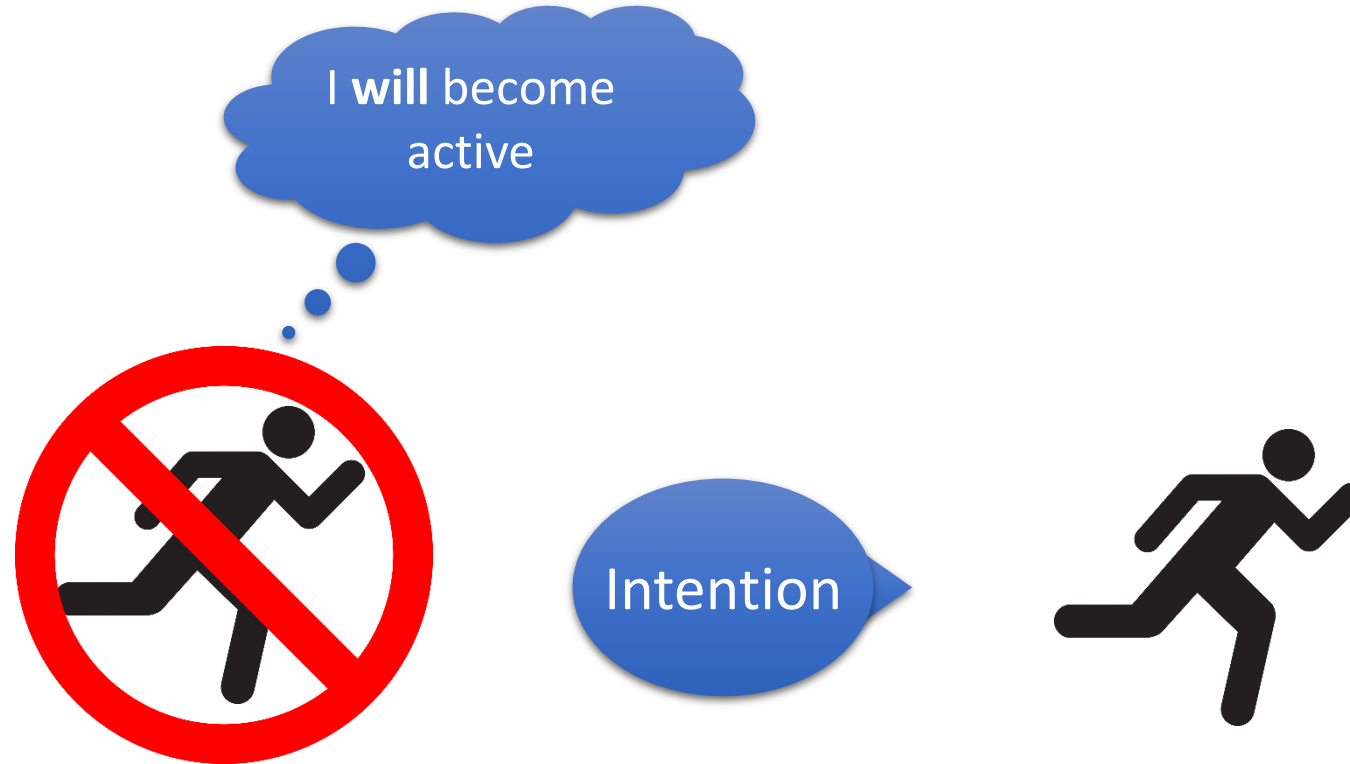
- New behavior has to be seen as 'normal'
- Social (un)acceptance very important determinant of behavior



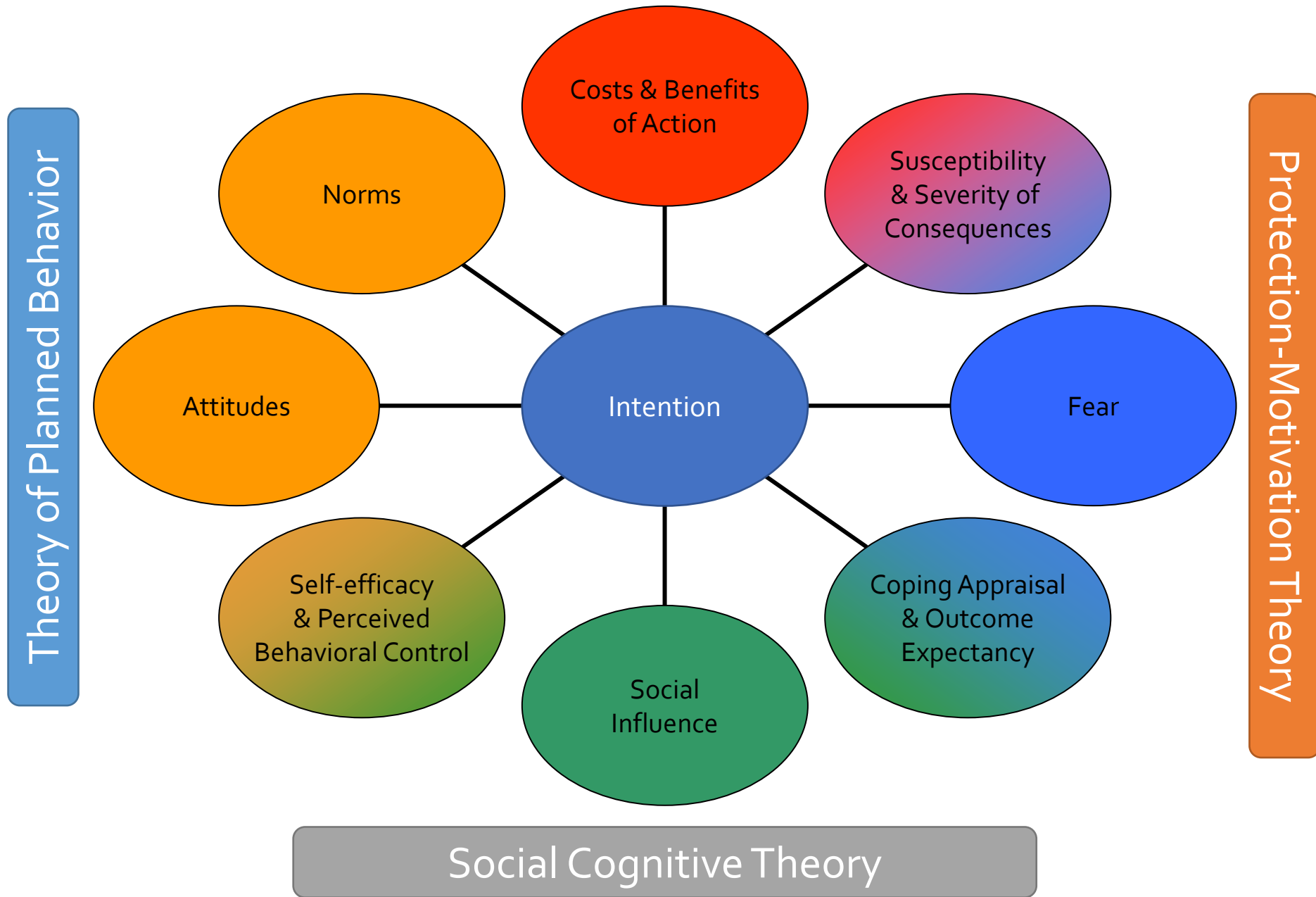
# COM-B Model



# Motivation - From A to B...

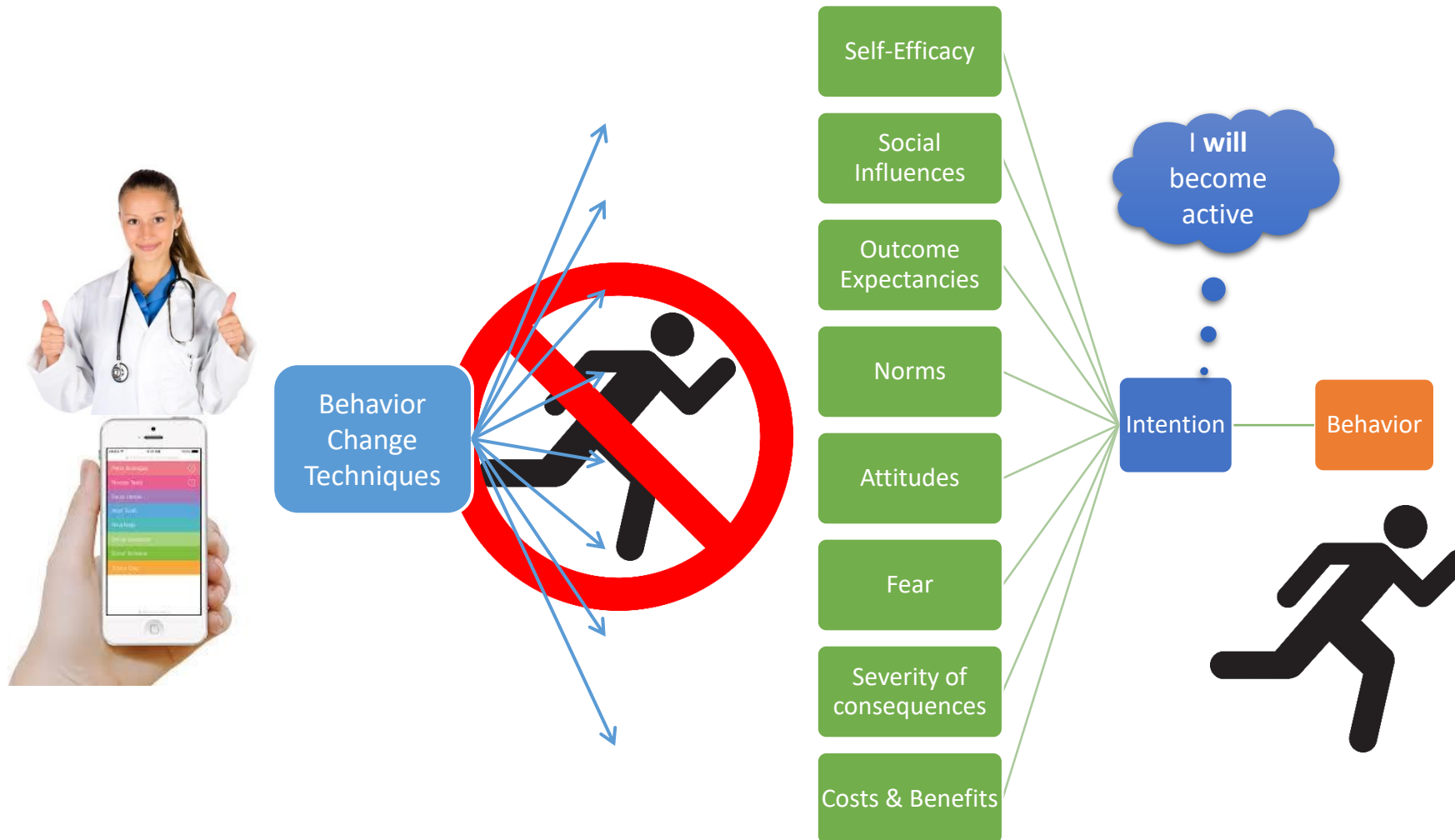


# Health Belief Model

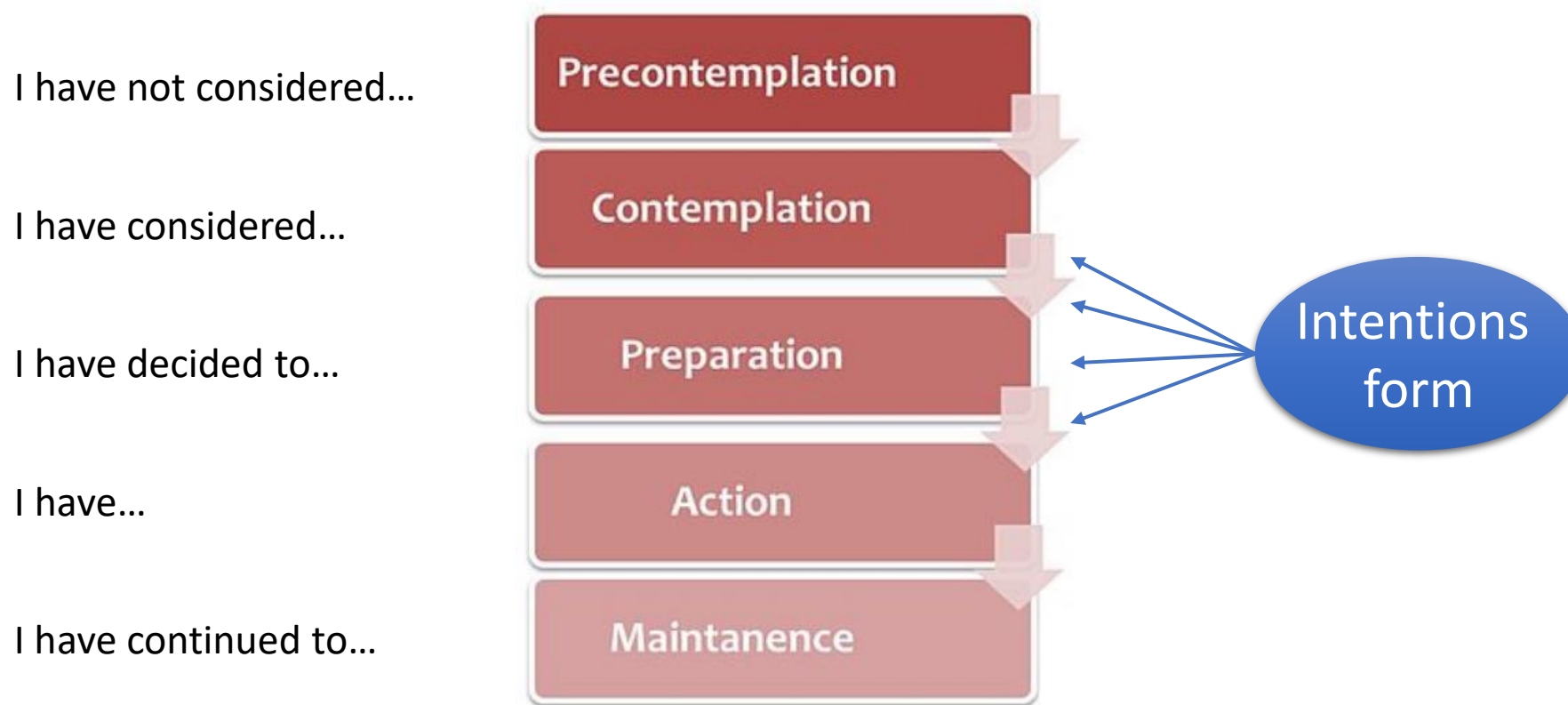




# Behavior change interventions



# Stages of change



# Meta-analysis




- Which Behavior Change Techniques are associated with changes in
  - Intention?
  - Stage of change?
  - Autonomous motivation?

HEALTH PSYCHOLOGY REVIEW, 2018  
<https://doi.org/10.1080/17437199.2018.1435299>

 **Routledge**  
Taylor & Francis Group



## How can interventions increase motivation for physical activity? A systematic review and meta-analysis

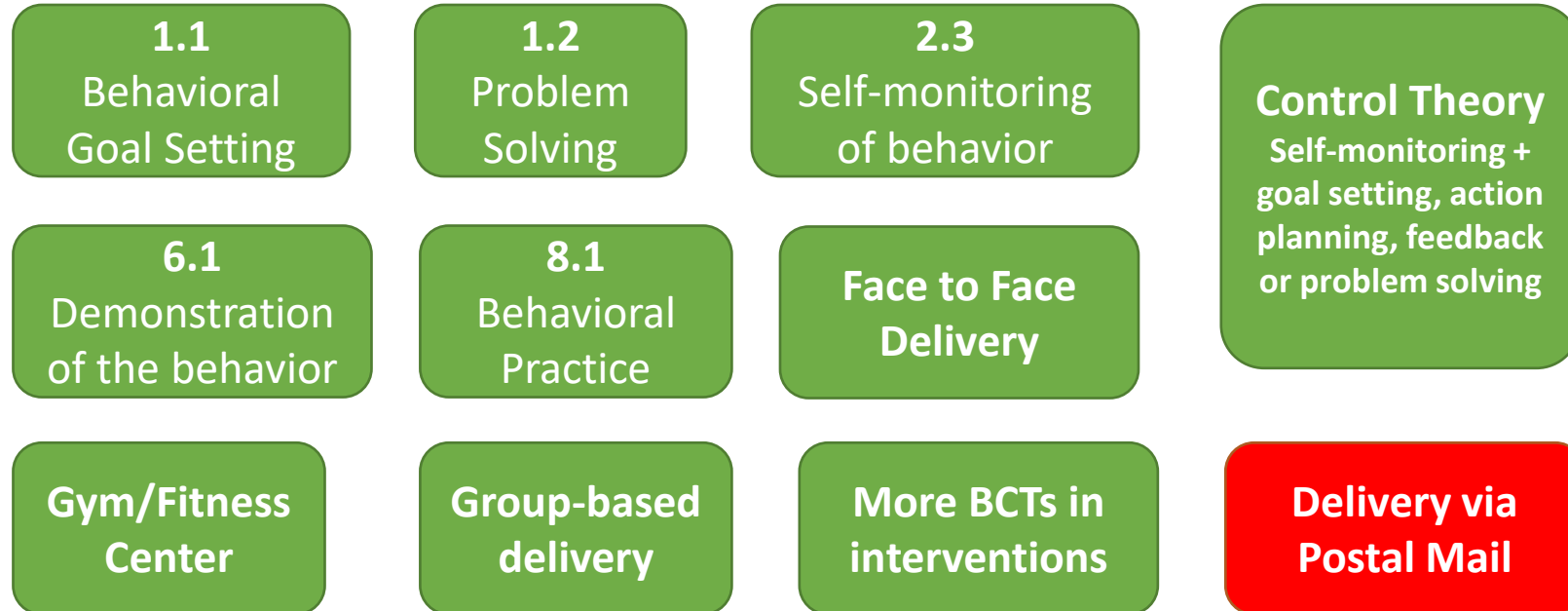
Keegan Knittle <sup>a</sup>, Johanna Nurmi<sup>a,b</sup>, Rik Crutzen <sup>c</sup>, Nelli Hankonen <sup>a,d</sup>,  
Marguerite Beattie<sup>a</sup> and Stephan U Dombrowski<sup>e</sup>

<sup>a</sup>Department of Social Research – Social Psychology, University of Helsinki, Helsinki, Finland; <sup>b</sup>Behavioural Science Group, Institute of Public Health, University of Cambridge, Cambridge, UK; <sup>c</sup>Department of Health Promotion, Maastricht University/CAPHRI, Maastricht, Netherlands; <sup>d</sup>Faculty of Social Sciences, University of Tampere/Linna, Tampere, Finland; <sup>e</sup>Faculty of Natural Sciences, Division of Psychology, University of Stirling, Stirling, UK



Netherlands Organisation for Scientific Research

# Intervention features associated with increases in motivation for PA across 89 studies:



# COM-B Model



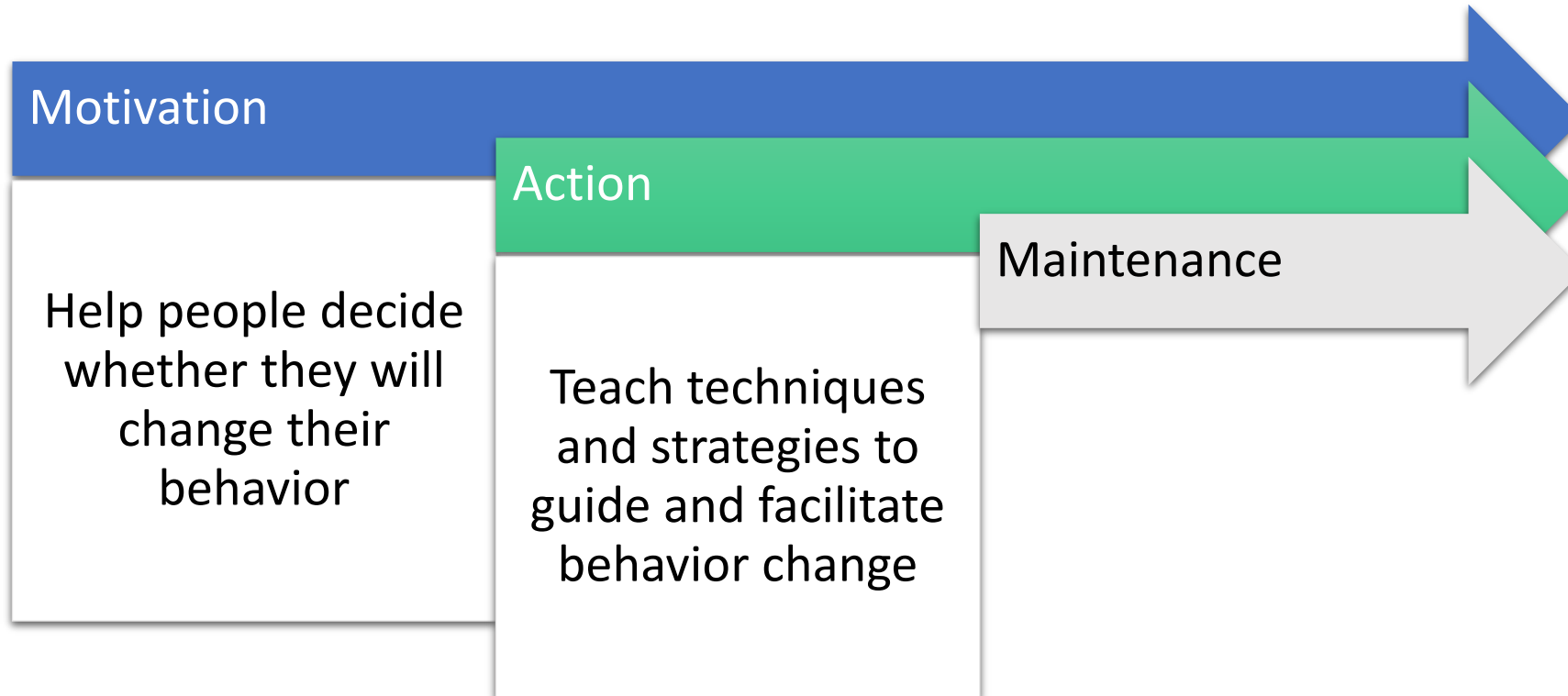


# Intention/Motivation $\neq$ Behavior

- Intention explains only about 40% of behavior
- Bridging this intention-behavior gap requires self-regulatory effort

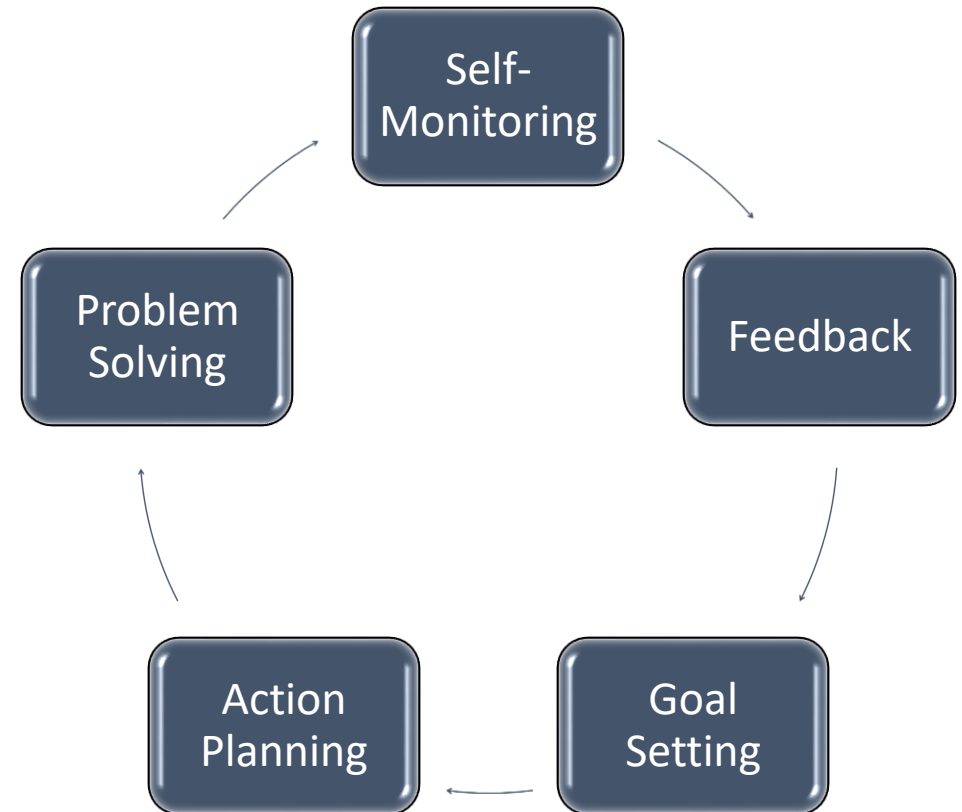


# Behavior change is a process



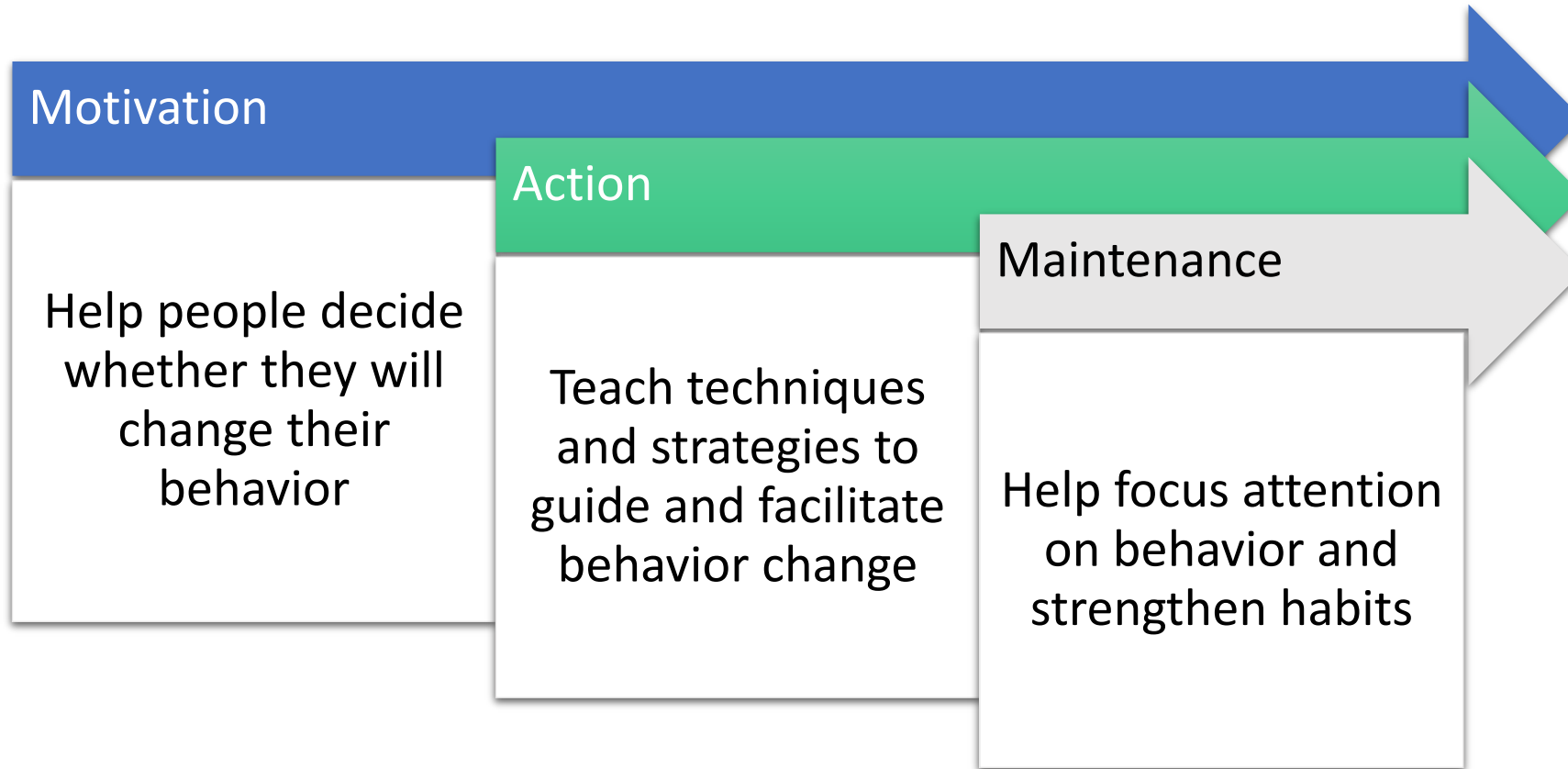
# Self-Regulation Techniques

- Strong evidence for effectiveness
  - Improving PA and other health behaviors
  - Reducing depressive symptoms
- Takes cognitive resources
  - Too demanding to do continuously



**Control Theory**  
Self-monitoring, goal setting,  
action planning, feedback and  
problem solving

# Behavior change is a process



# Theories of Maintenance

HEALTH PSYCHOLOGY REVIEW, 2016  
VOL. 10, NO. 3, 277–296  
<http://dx.doi.org/10.1080/17437199.2016.1151372>

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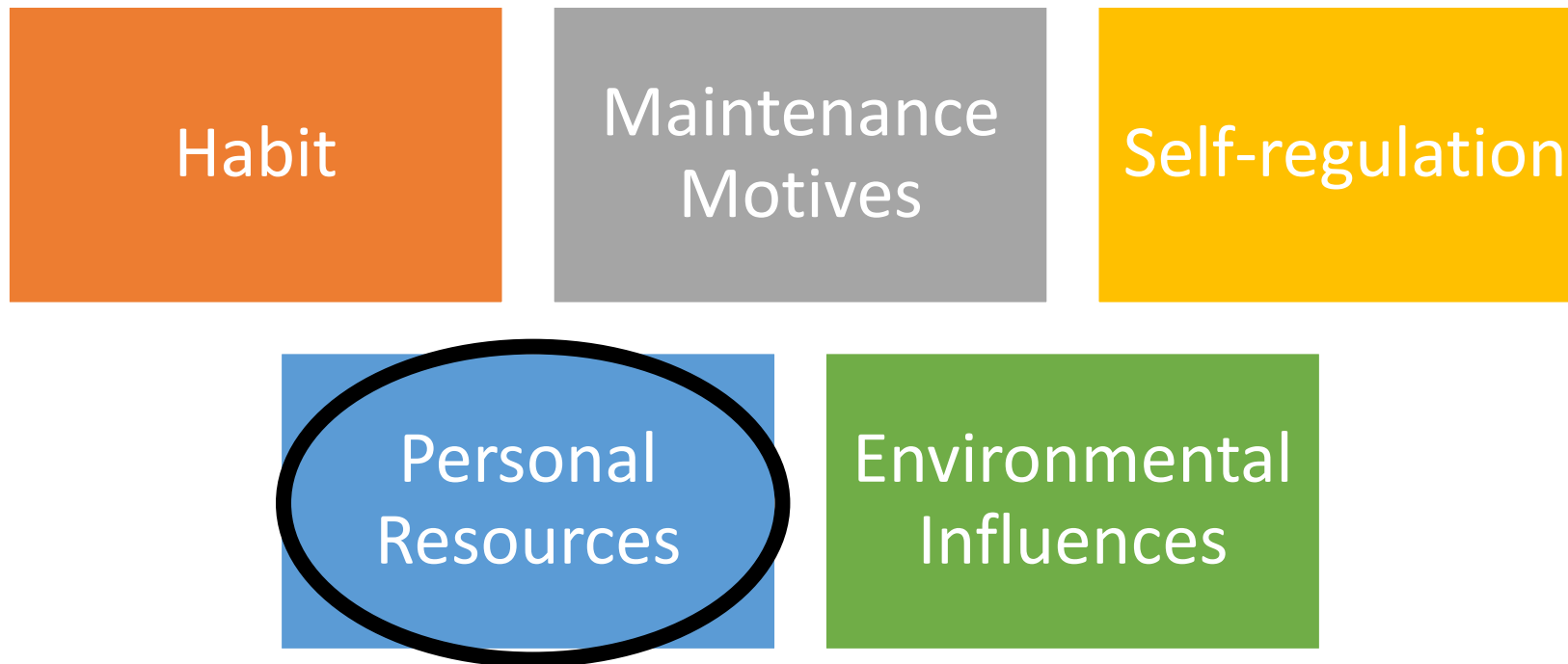
REVIEW

 OPEN ACCESS

**Theoretical explanations for maintenance of behaviour change: a systematic review of behaviour theories**

Dominika Kwasnicka<sup>a,b</sup>, Stephan U Dombrowski<sup>c</sup>, Martin White<sup>d</sup> and Falko Sniehotta<sup>a,b</sup>

- Key theoretical domains of behavioral maintenance:



# Personal Resources

- Pain, fatigue, mood and lack of time are all common barriers to PA
- Barriers slow down habit formation
- Some people need help in
  - Identifying their own barriers
  - Having clear plans of how to cope with these





# Theories of Maintenance

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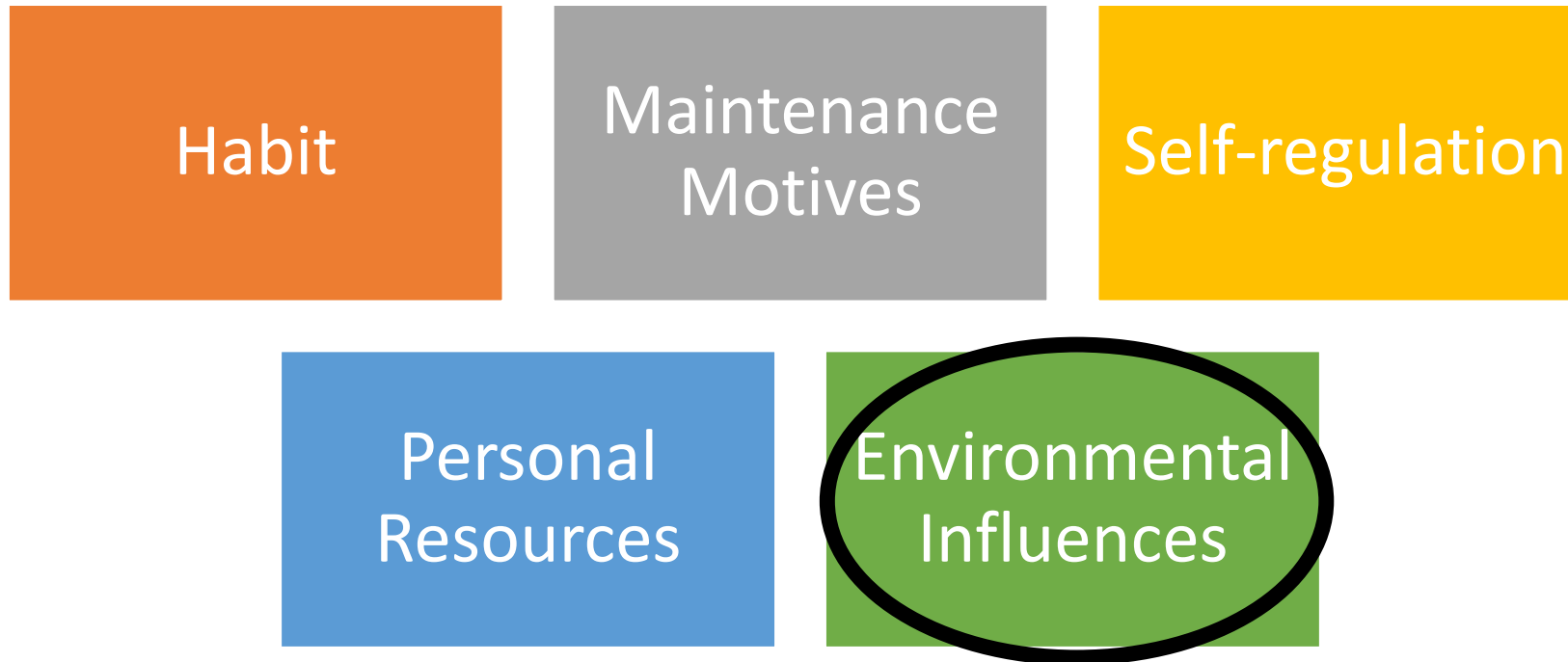
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# Environments

- Physical environments: parks, sports clubs, nature areas, gyms, exercise equipment, supervised exercise

## Inequality in the Built Environment Underlies Key Health Disparities in Physical Activity and Obesity

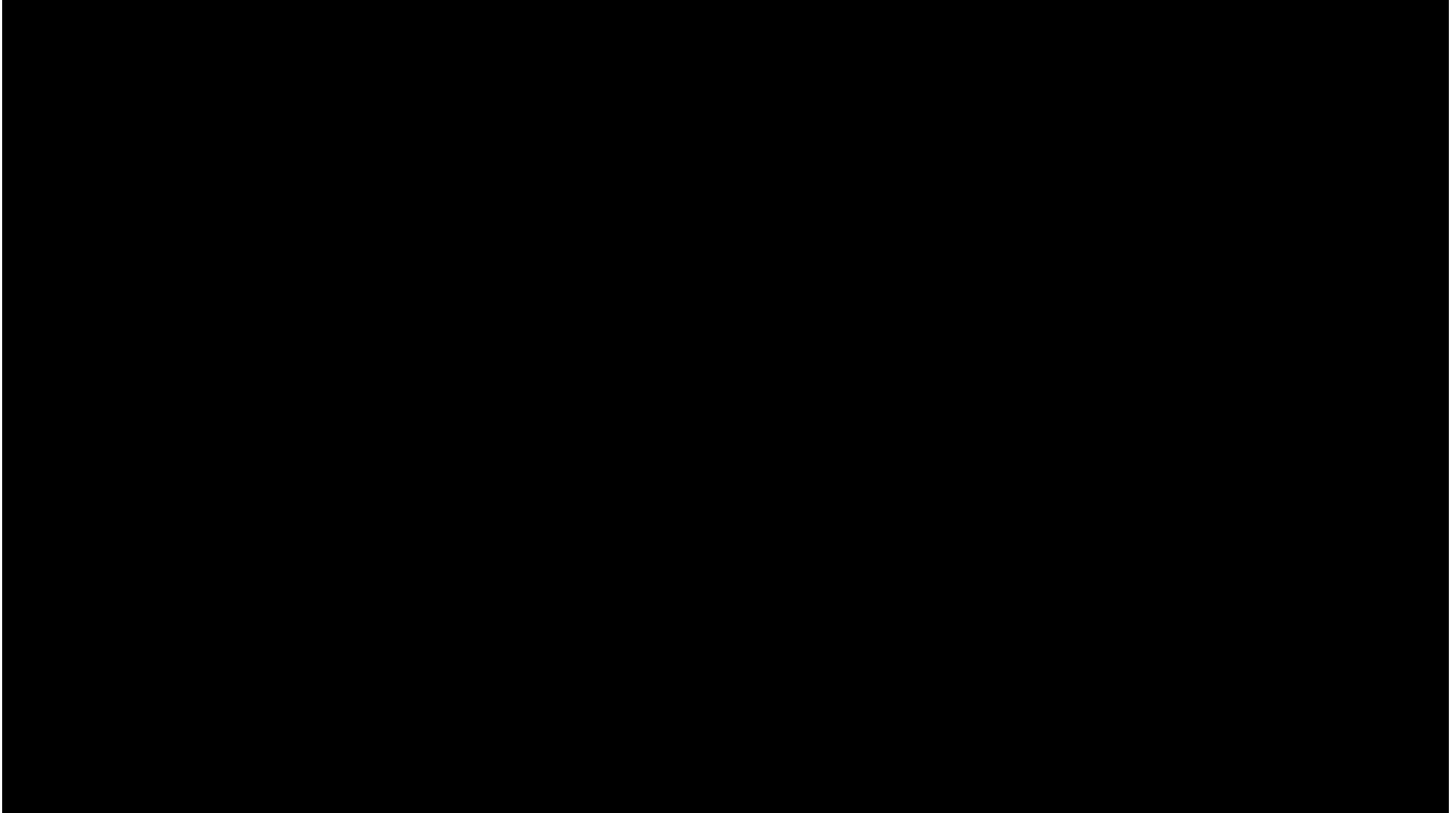
Penny Gordon-Larsen, PhD<sup>a</sup>, Melissa C. Nelson, PhD, RD<sup>b</sup>, Phil Page, MA<sup>c</sup>, Barry M. Popkin, PhD<sup>a</sup>



- Social environments:
  - Social support
  - PA opportunities that foster a sense of belonging



# Nudging



# Theories of Maintenance

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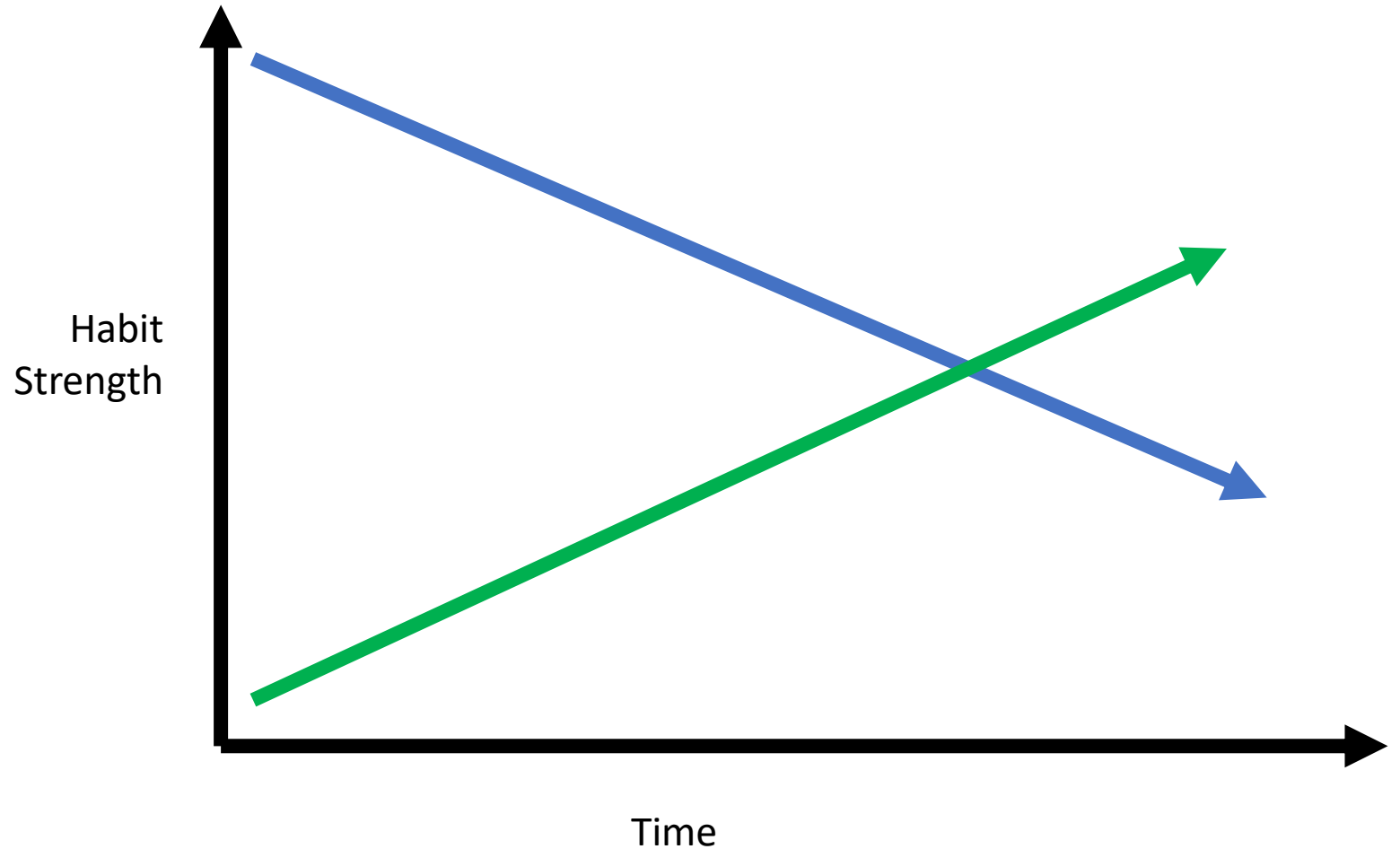
# Habit

- An established ongoing behavioral pattern
  - Cue/situation → Response
- Example: To snooze? Or not to snooze?
- Habit strength = a measure of how deeply embedded a behavioral pattern is
- Lack of PA is a strong habit for many



# Habit Growth & Extinction

- To strengthen new habits, old ones need to fade away
- PA takes time to embed itself, as new habit strengthens

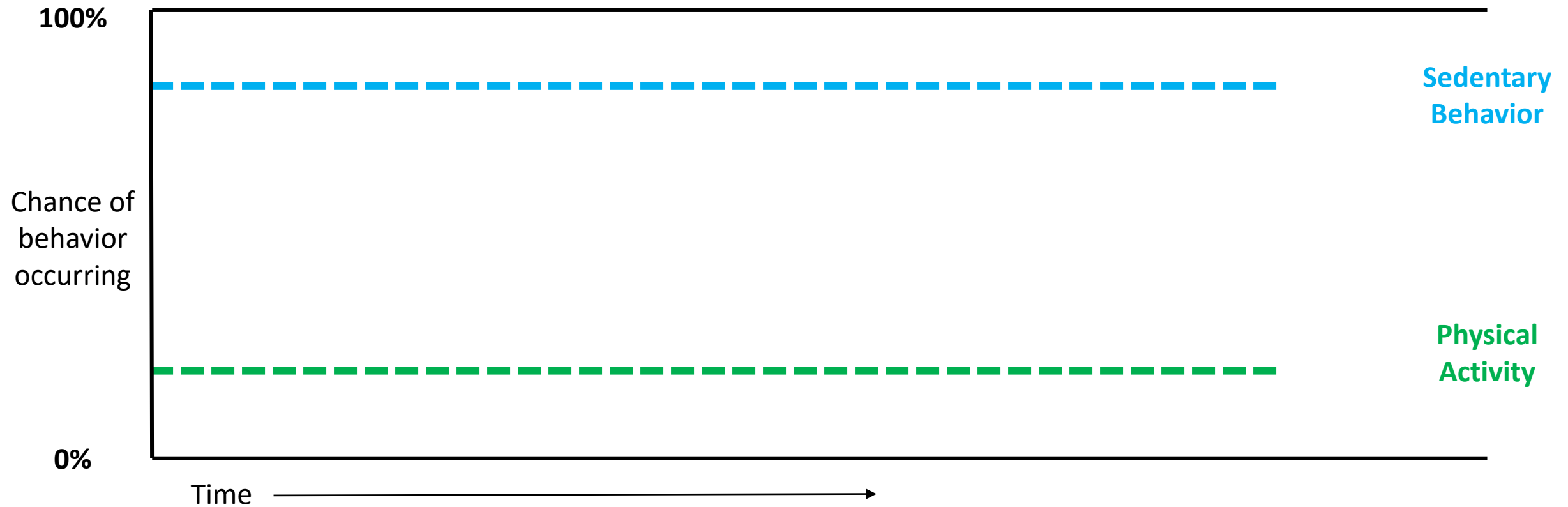




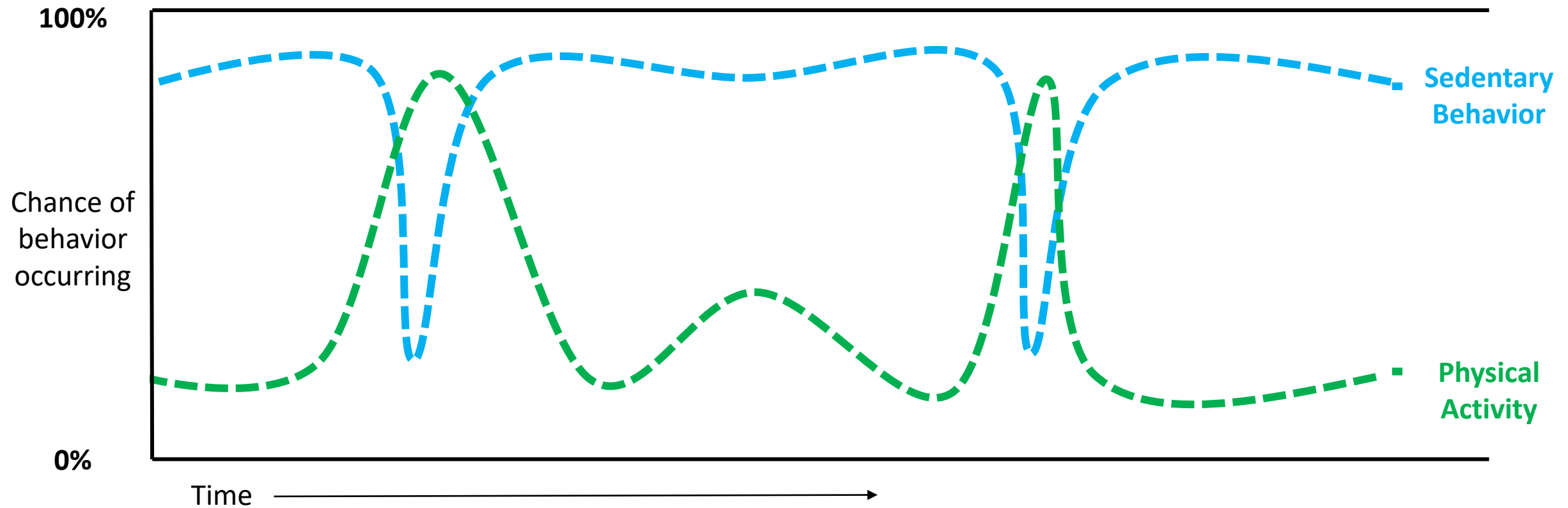
# What does PA maintenance look like?



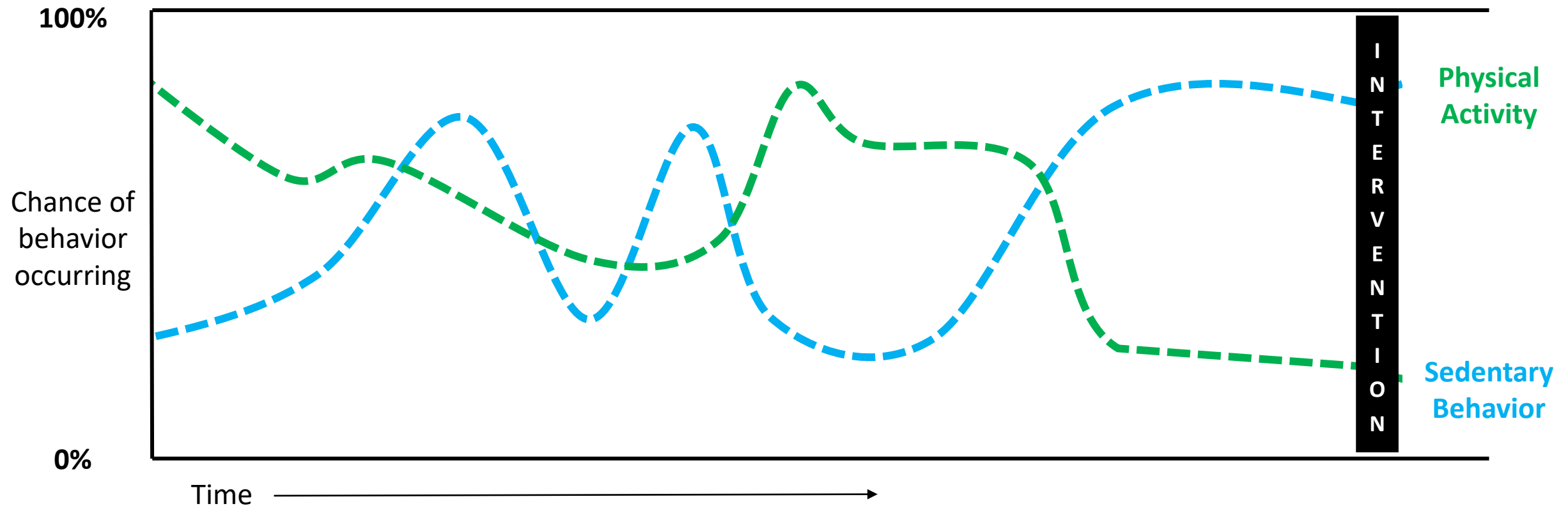
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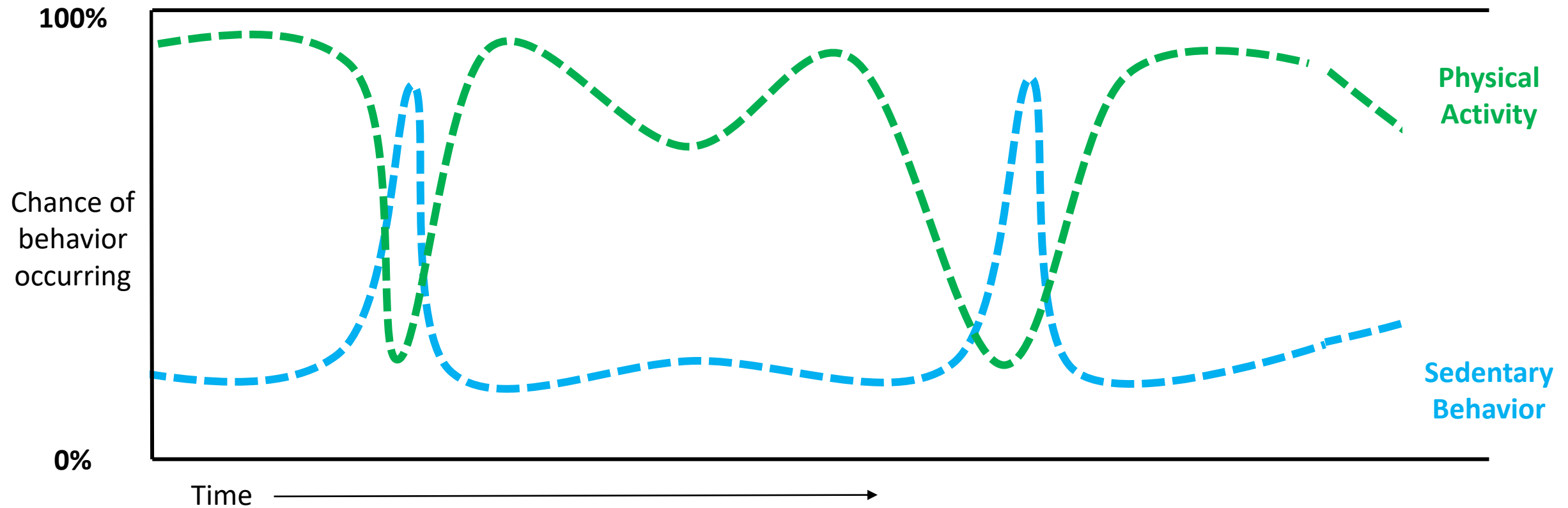
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# Theories of Maintenance

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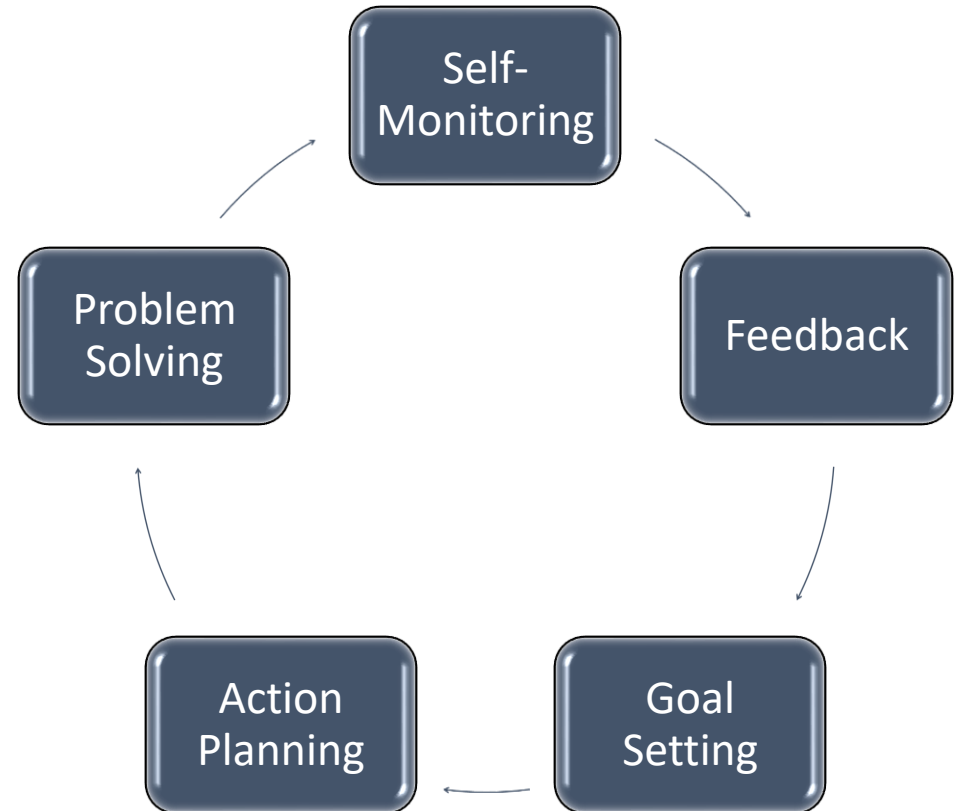
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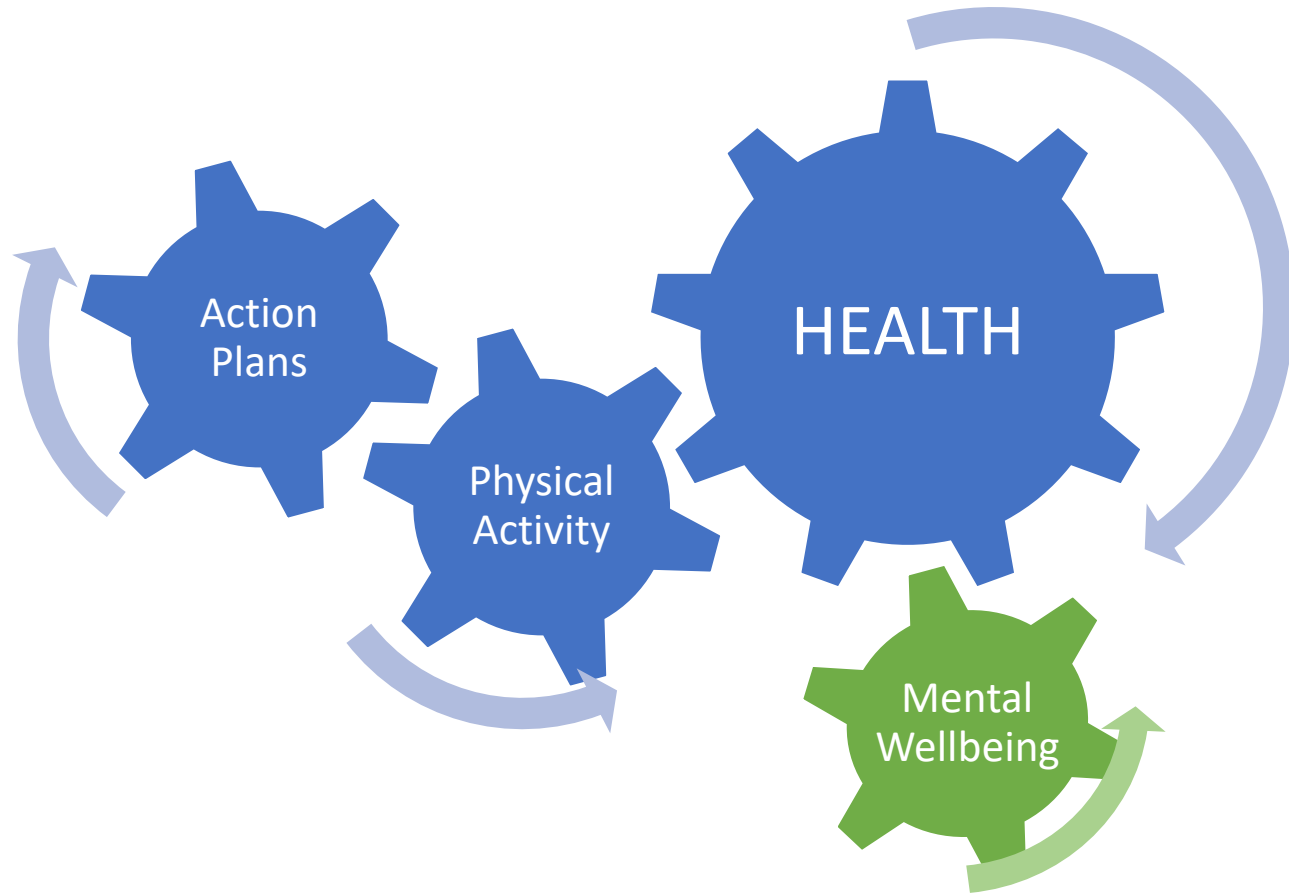


# Self-Regulation Techniques

- Strong evidence for effectiveness
  - Improving PA and other health behaviors
  - **Increasing motivation for PA**
- Takes cognitive resources
  - Too demanding to do continuously



# Self-regulation = goal pursuit



- Peoples' behaviors are in service of higher order goals
- These higher order goals operate even when people are not consciously aware of them
- Deficits in higher order goals can motivate behavior change

# Theories of Maintenance

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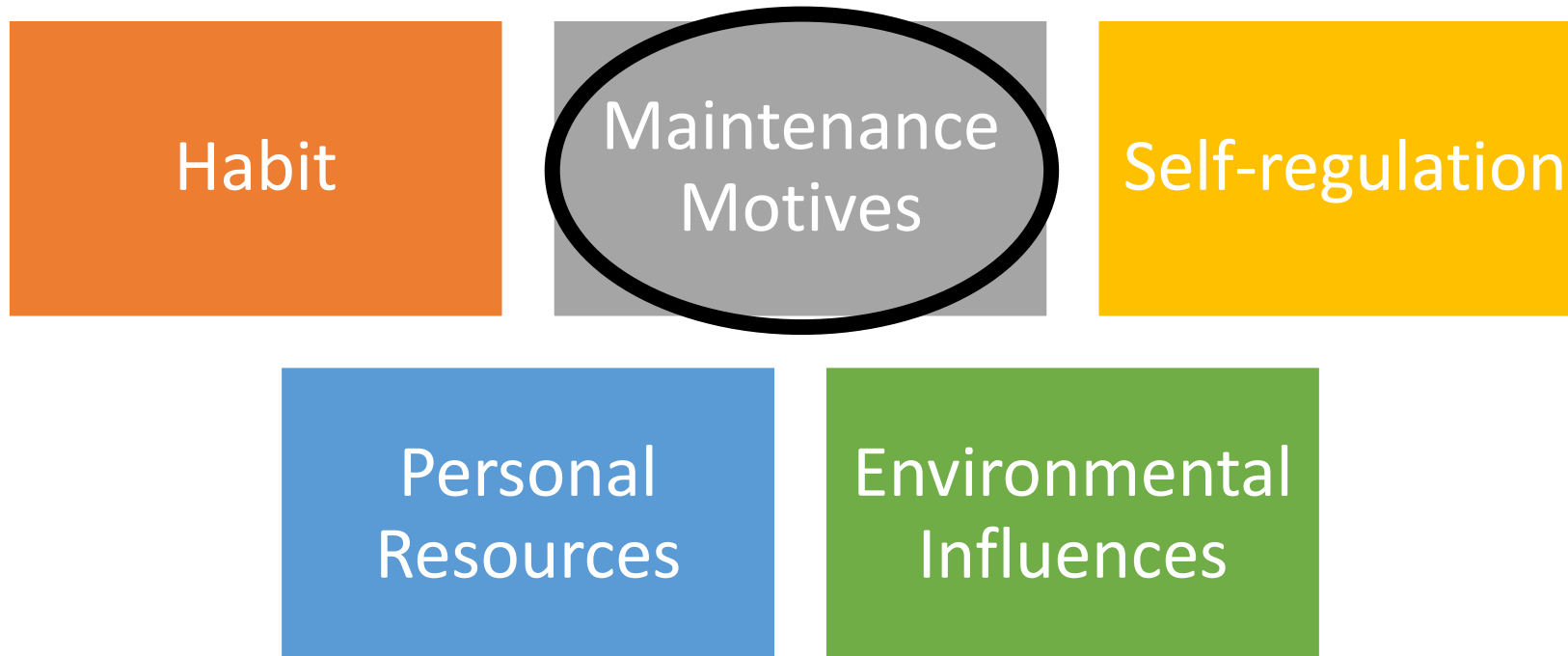
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- Key theoretical domains of behavioral maintenance:



# Maintenance Motives

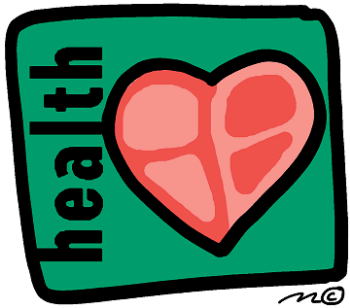
- People **start** new behaviors based on what they **think** will happen.
- People **maintain** behaviors based on what **actually** happens.
  - –Rothman, Sheeran & Wood, 2009
- To maintain a behavior, people must feel that it is worth it (i.e., rewarding)



# What motivates your PA?



Learning



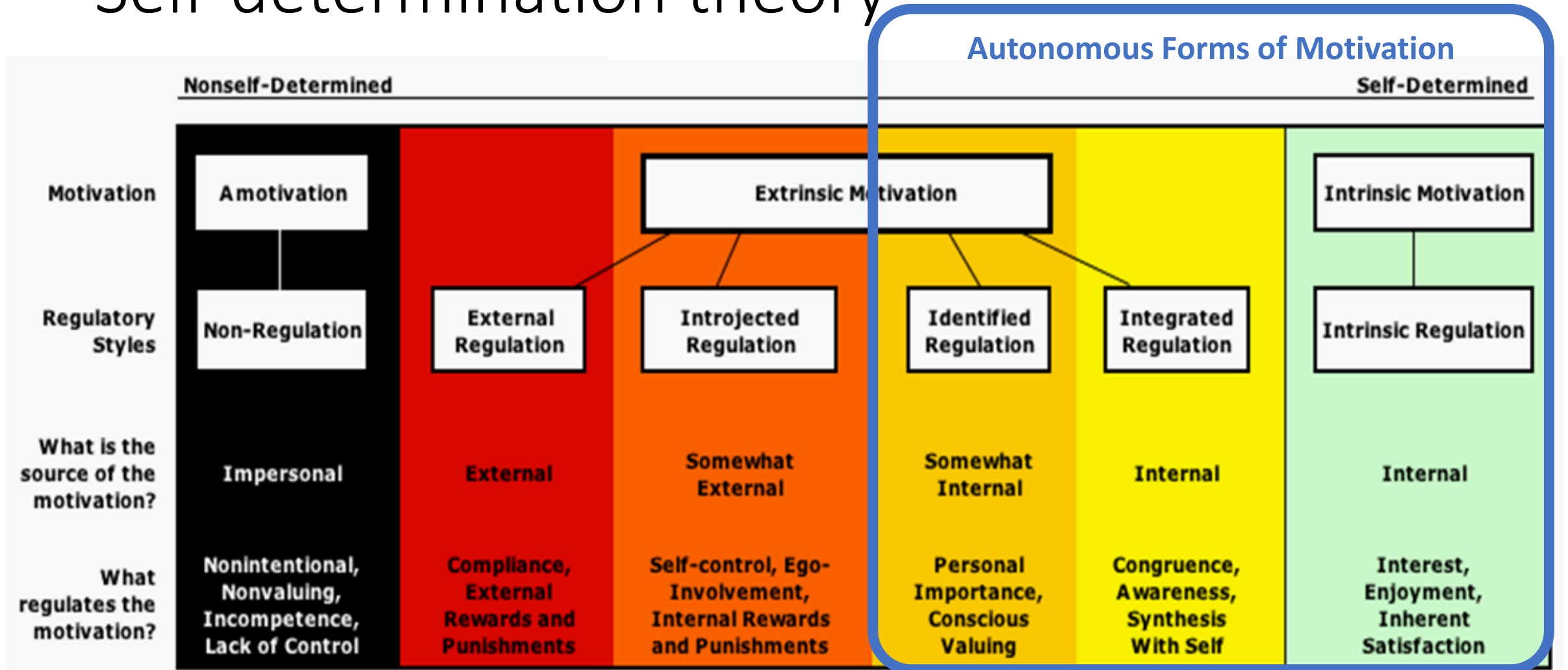
Family



Explore

Exhilaration

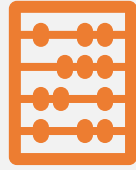
# Self-determination theory



(Based on Ryan, R.M. & Deci, E.L. (2000). *Self-Determination Theory and the Facilitation of Intrinsic Motivation, Social Development, and Well-Being*. *American Psychologist*. 55(1), 68-78.)



Autonomous  
Motivation =  
Good!



Predicts behavioral maintenance, task persistence

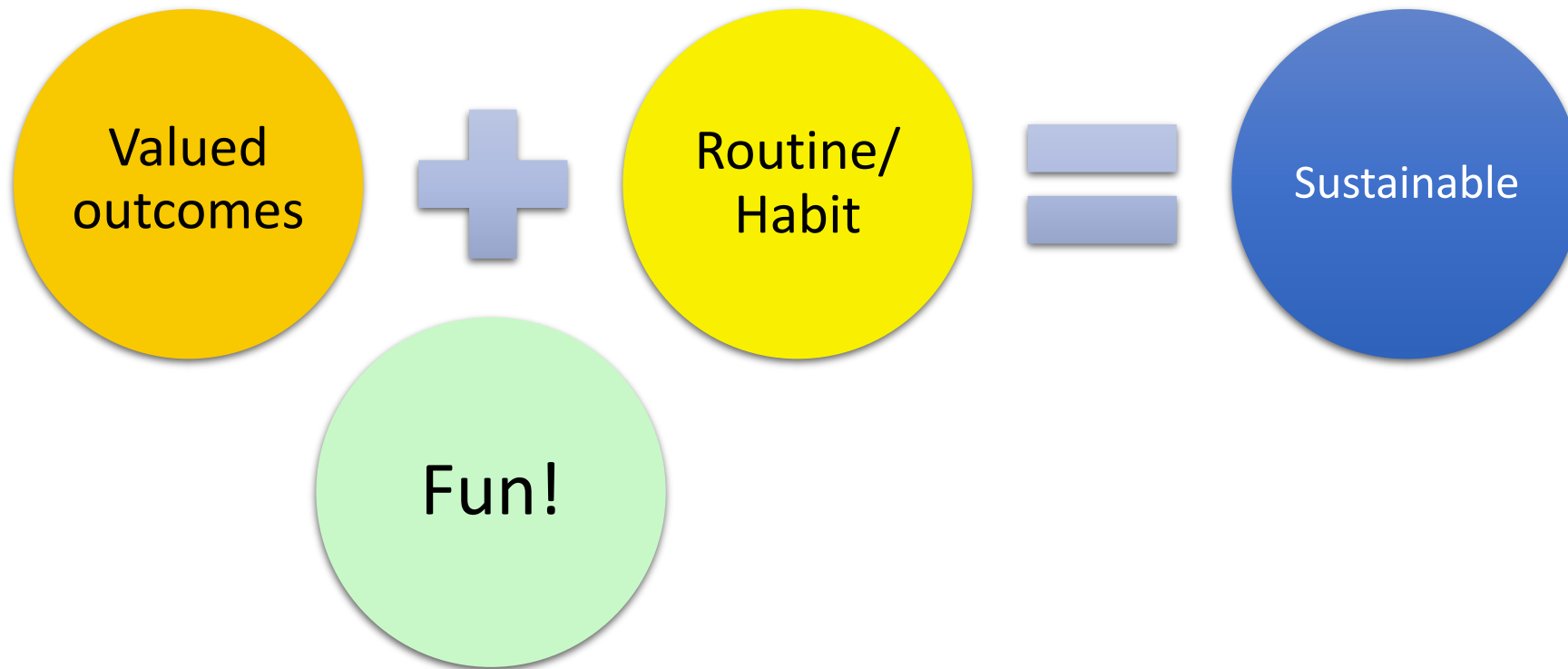


Predicts performance



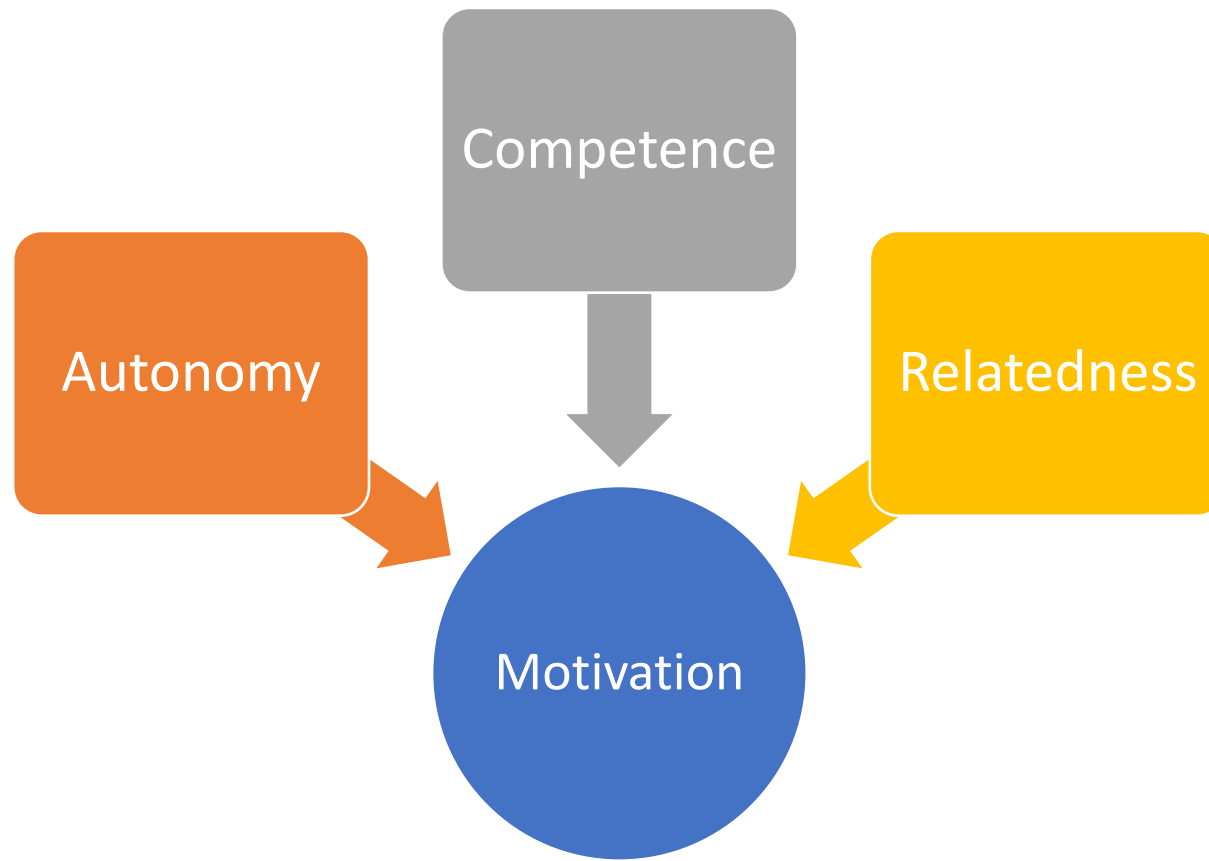
Predicts well-being

# Keeping behavior going



# Self-determination theory

- Behaviors that satisfy peoples' basic psychological needs will be autonomously motivated, and therefore better maintained





# What *should* interventions do?



Be less directive when giving information



Automate self-regulation to reduce cognitive burden



**Use fun to guide behavior**



The title of this  
talk said “Fun”,  
when will we get  
to that part?

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Pokémon Go







## Citation

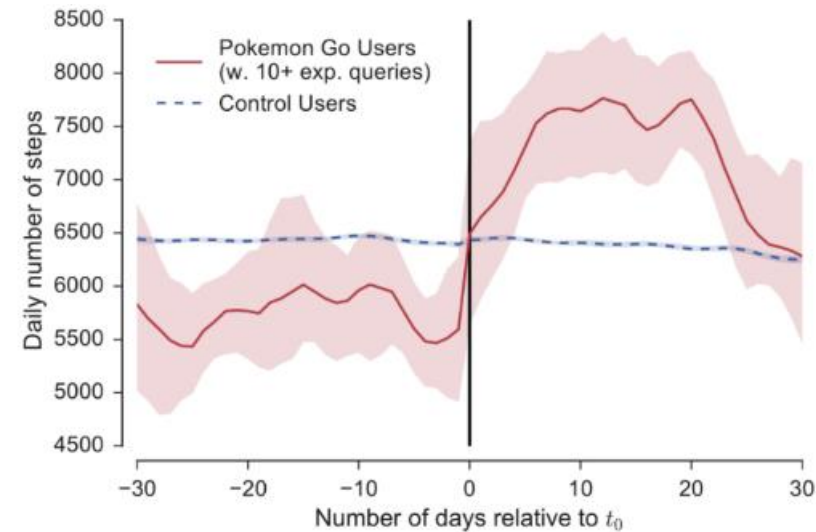
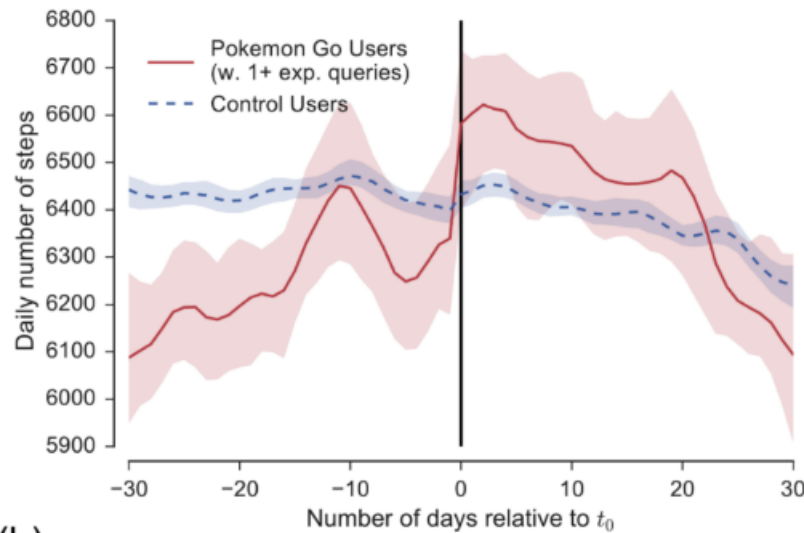
Please cite as:

Althoff T, White RW, Horvitz E  
Influence of Pokémon Go on Physical Activity: Study and Implications  
J Med Internet Res 2016;18(12):e315  
doi: [10.2196/jmir.6759](https://doi.org/10.2196/jmir.6759)

Published on 6.12.2016 in Vol 18, No 12 (2016): December

# Influence of Pokémon Go on Physical Activity: Study and Implications

Tim Althoff <sup>1</sup> ; Ryen W White <sup>2</sup> ; Eric Horvitz <sup>2</sup> 



# Robust effect across observational studies

- Across 17 studies (n=33,108): difference of 1446 steps per day between players and non-players



American Journal of Preventive Medicine



Volume 58, Issue 2, February 2020, Pages 270-282



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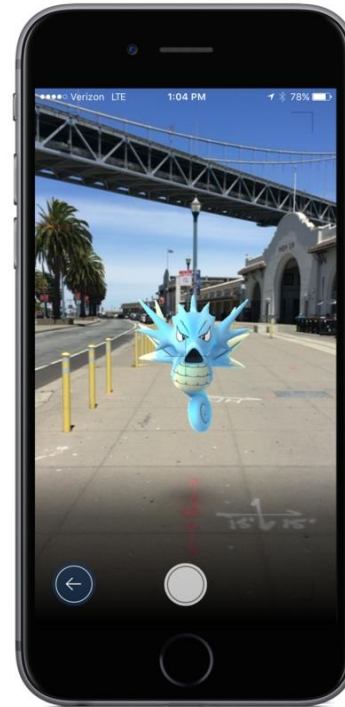
Review Article

## Impact of Pokémon Go on Physical Activity: A Systematic Review and Meta-Analysis

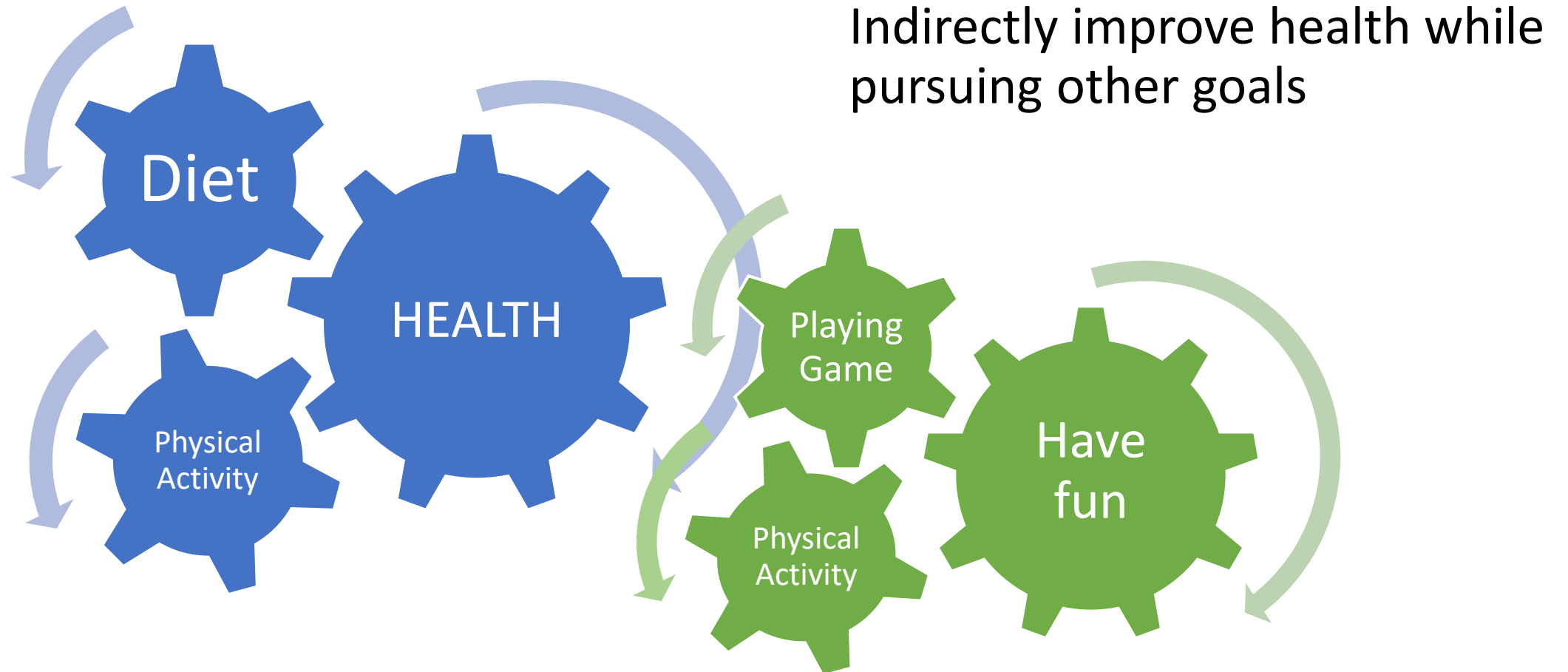
Madina Khamzina MPH<sup>1</sup>  , Kaustubh V. Parab MPH, MBBS<sup>1</sup>, Ruopeng An PhD<sup>1, 2</sup>, Tiffany Bullard PhD<sup>1</sup>, Diana S. Grigsby-Toussaint PhD<sup>3</sup>



# POKÉMON GO



# Games can bypass self-regulation



# SDT in video games?

- Video games are addictive
  - *Internet Gaming Disorder* in DSM V
  - Prevalence ~4.5% (Fam, 2018)
- SDT might explain why

Motiv Emot  
DOI 10.1007/s11031-006-9051-8

ORIGINAL PAPER

## The Motivational Pull of Video Games: A Self-Determination Theory Approach

Richard M. Ryan · C. Scott Rigby · Andrew Przybylski

### Competence

- Problem solving
- Progress toward mastery
- Frequent and direct feedback

### Autonomy

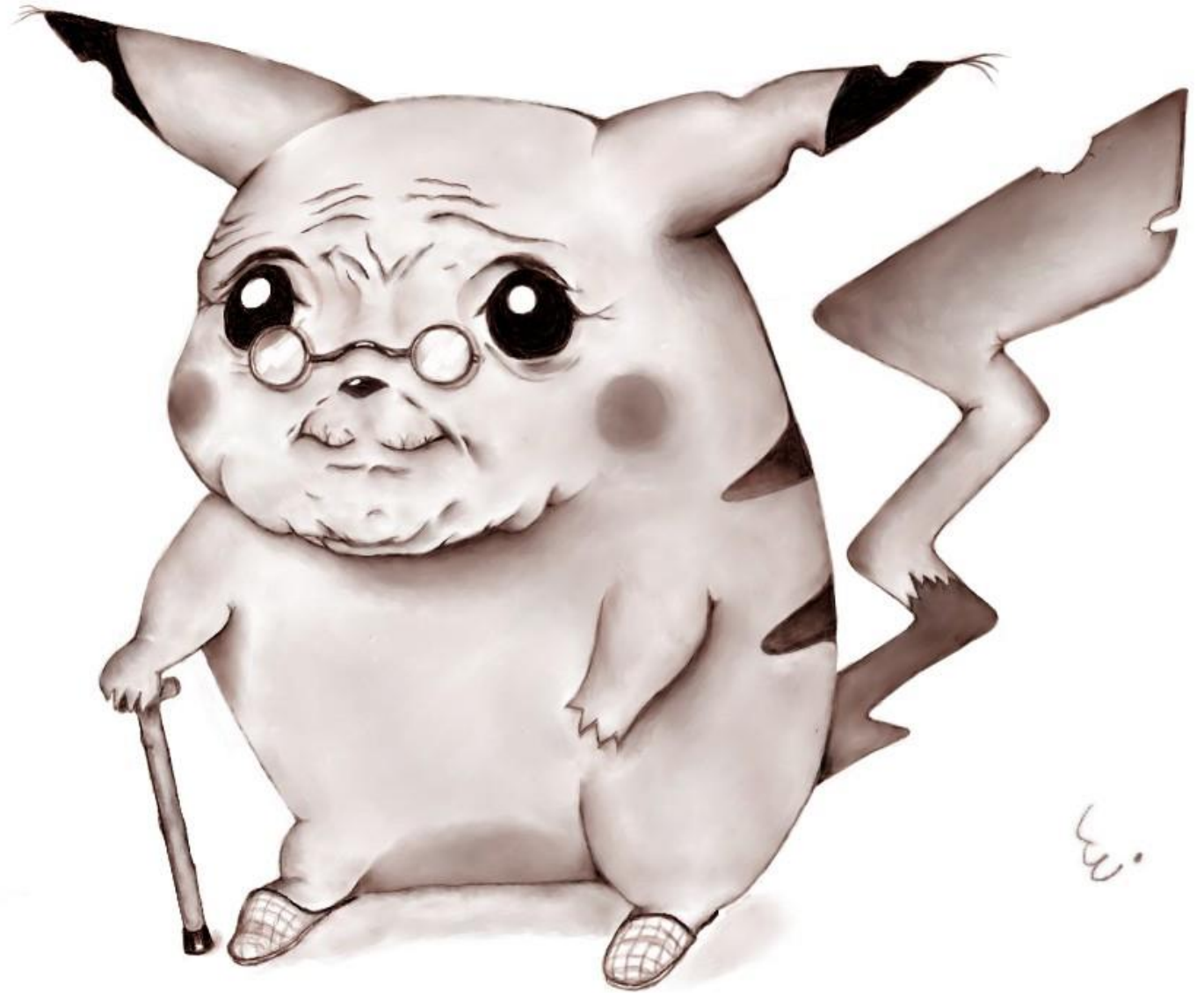
- Player-centered
- Experimentation (less fear of failure)
- Customization

### Relatedness

- Sense of purpose or goals
- Creation of meaning
- Social interactions



What happens  
when Pokémon  
Go gets old?



Drawing by Eponymous (2011) via DeviantArt

# Dance Dance Revolution

- Kick it old school...
- Also similar console-based options:
  - Nintendo Wii
  - Xbox Kinect

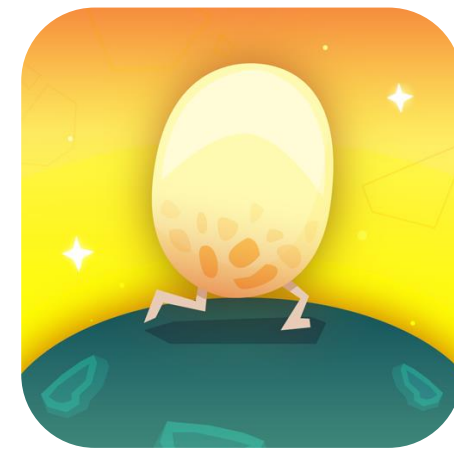


# Zombies, Run!





# Wokamon





- EU-funded project with a wide range of stakeholders:
  - Health Psychologists, Doctors, Dieticians, Graphic Designers, Engineers, Smart Technology Researchers, Device Manufacturers
- Built PA promotion app leveraging gamification principles

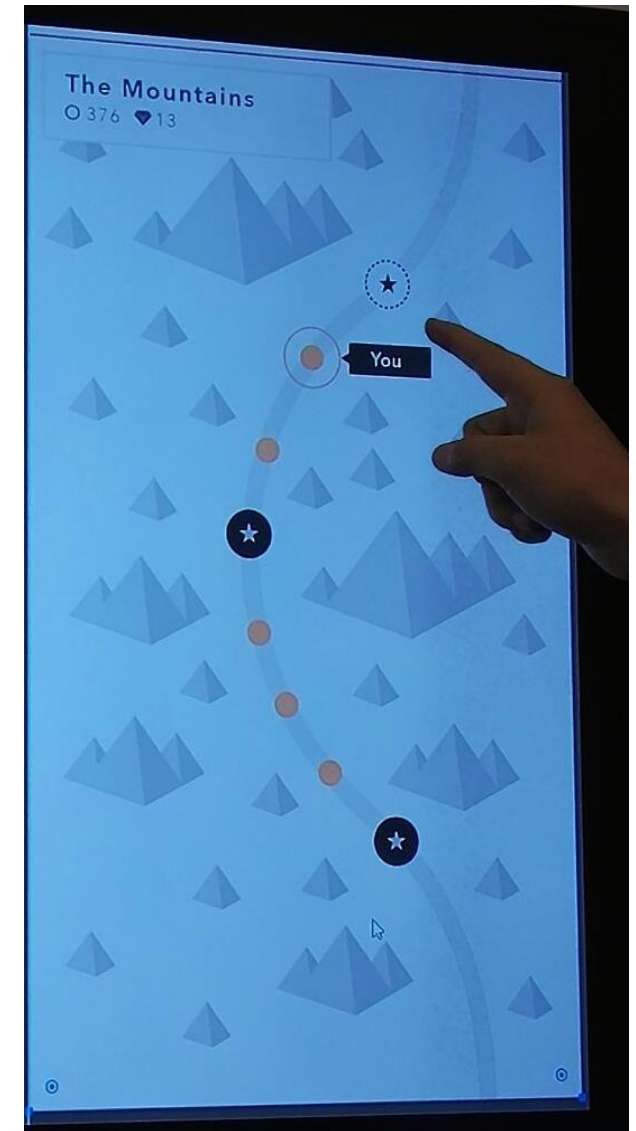


One key aim:  
Foster FUN!



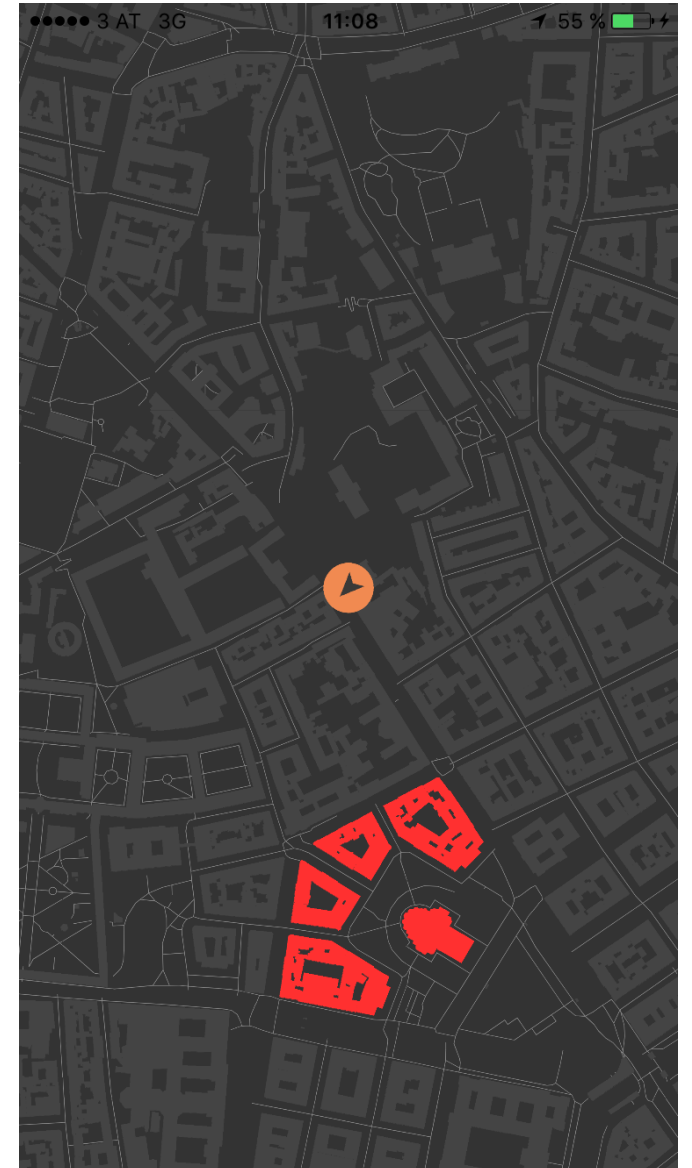
# Fostering FUN!

- Healthagotchi
- Journey view
- Virtual currency
- Competitions
- Badges and rewards



# Conquer the City

- Based on Open Street Maps and basic GPS functions
- Take control of building or block by walking around it
- See how much of the city you can bring under your control
- Compete against others and bots



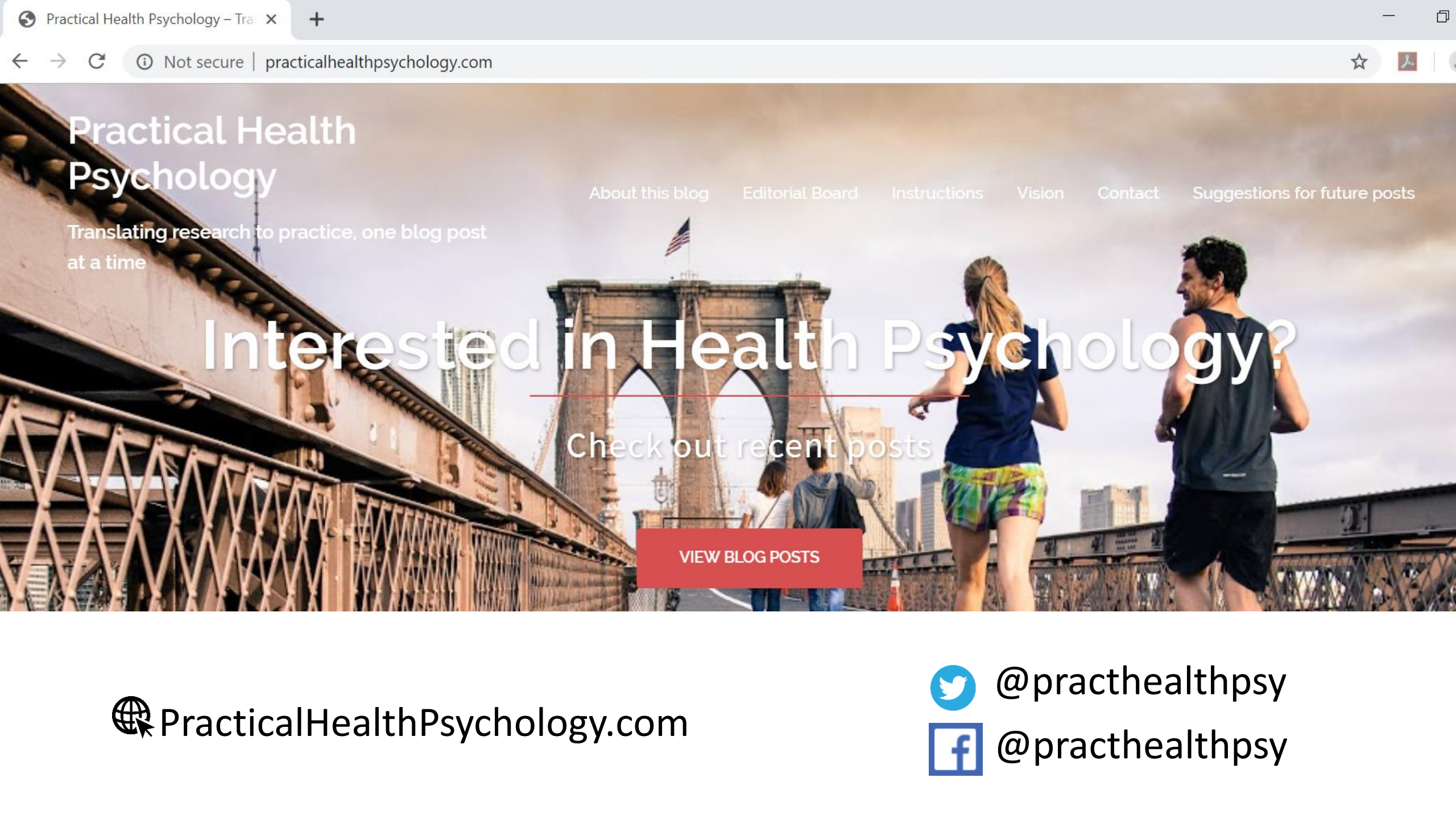


# Dilemmas and Controversies

- If an exergame is addicting, could it lead to compulsive or maladaptive training/PA patterns?
- Is it ethical to provide people ways to have fun (even though are really trying to get them to be more physically active)?
- What happens when people stop playing exergames?

# Conclusions

- Gamification is in line with the best-known psychological theories of behavioral maintenance (especially SDT)
- Gamification is a **promising** and **underexplored** avenue for PA promotion in all populations, but especially children/adolescents.
- As with all interventions: One size will not fit all!
- Issues of addiction and misuse require adverse events monitoring



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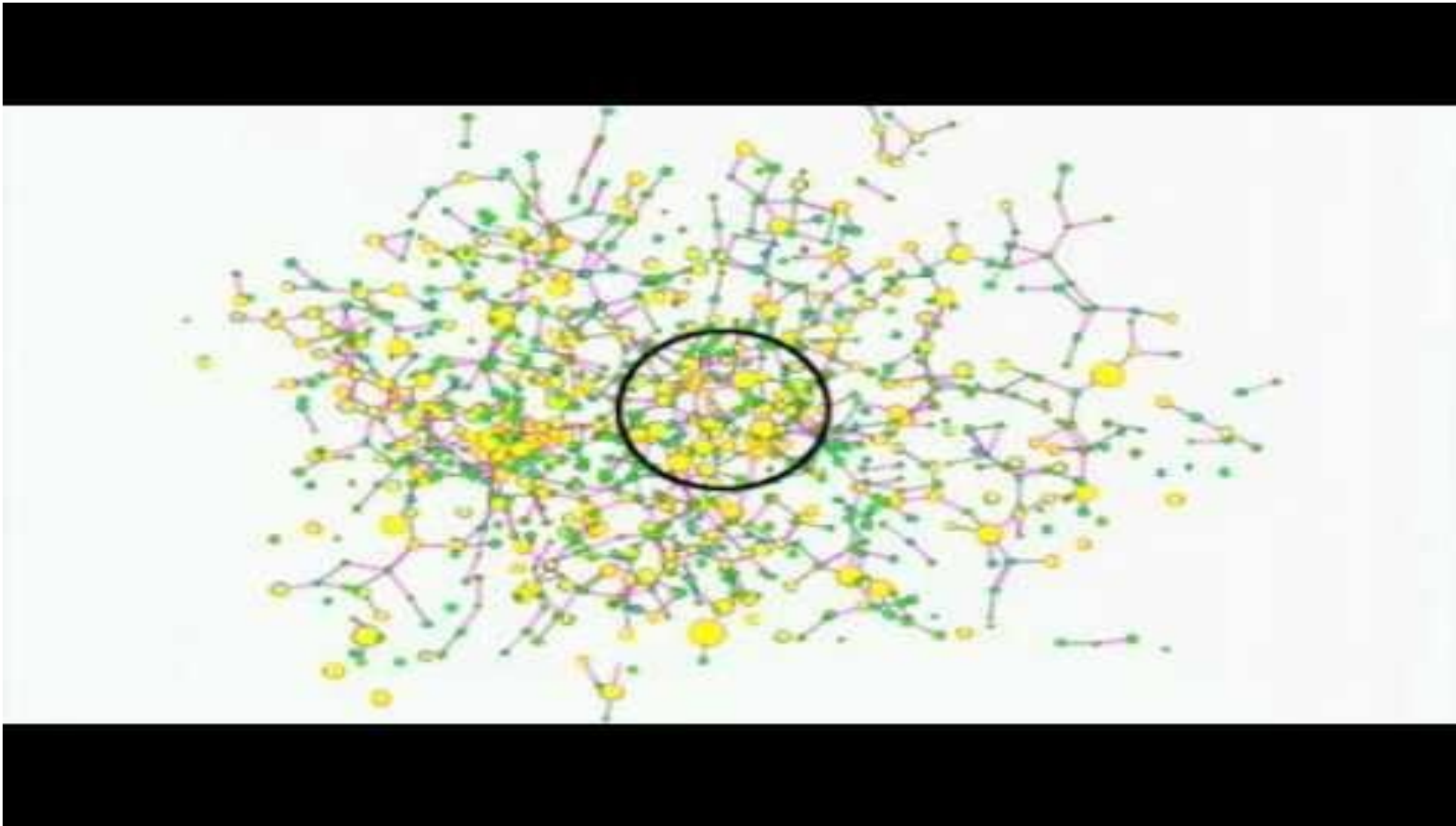
 @practhealthpsy







# Social opportunity



- Christakis & Fowler, 2007