Physical Activity Assessment in Children and Adolescents

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Objectives

- Review methodological concepts for assessing accuracy.
- Review techniques used to assess physical activity.
- Provide suggestions for research and future directions.



- Repeatability test/retest inter-rater
- Validity
- Sensitivity
- Appropriate validation (gold) standard



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- Validation standard
- A predetermined criterion against which the accuracy of the test instrument is measured. The standard is presumably less variable than the test method.
- Variety of validation standards in physical activity.



Physical Activity

- Any bodily movement that results in energy expenditure
- Measured in distance, time or some arbitrary unit



Energy Expenditure

- Resting metabolism
- Energy expenditure from physical activity
- Thermic effect of food



- Validation standards in physical activity assessment (indirect and direct)
- Energy expenditure
- Physical fitness
- Body composition
- Physical activity

Variety of methods of each standard



- Practicality
- Non-reactivity





Physical activity assessment cascade

Calorimetry

Doubly-Labeled Water

Direct Observation

Electronic Monitoring

Self-Report



- Calorimetry
- Direct or indirect.
- Based on measurement of energy expenditure through heat or C0₂ production.
- Highly accurate.
- Impractical for large studies.



- Doubly-labeled water
- Based on ingestion of water with radioisotopic labeled hydrogen and oxygen atoms.
- Energy expenditure measured by measuring unmetabolized portion of water over period of time.
- Highly accurate.
- Impractical for large studies.



- Doubly-labeled water
- Impossible to detect patterns of physical activity (ie moderate-to-vigorous) or timing (10-minute bouts).
- When combined with assessment of resting metabolic rate, can estimate PA-related energy expenditure.



- Direct Observation
- Individual observer monitoring a consenting individual for a set period of time.
- Videos and still photos are unlikely alternatives.
- Summary index of energy expenditure.
- Can assess patterns and timing.
- Impractical for large population studies.
- Potentially reactive.



- Direct Observation reliability
- Inter-observer reliability appears quite high (> 90%) with appropriate training.
- Time-dependent test-retest appears higher with shorter intervals.
- May be due to study design and lack of stability of PA behavior in children.



- Direct Observation validity
- Mostly studied in younger children and in smaller studies.
- Different validation standards monitors or indirect calorimety.
- Generally high to very high validity (correlations between 0.65 and 0.95)



Monitoring

- Heart rate monitors, motion sensors, pedometers, accelerometers.
- Assume mathematical relation between measurements and physical activity.
- Many can can measure quantity and intensity of physical activity.
- Recent advances make devices more practical.



- Monitoring reliability
- Mostly done in test-retest design.
- Modest to high correlations (0.38-0.91) and seems to be dependent on time period between observations.
- Inter-instrument reliability very high (r = 0.80-0.95).



- Monitoring validity
- Most validity work done with accelerometers.
- Low to modest correlations (0.25-0.50), particularly in uncontrolled settings.
- Heart rate monitors more variable study designs but overall, not much better



- Self-report
- Diaries, interviews and self-administered surveys.
- Most often used in population-based research.
- Varying lengths of recall, all assumed to be indicators of "usual" physical activity
- Varying quality of summary indices
- May not be transferrable among populations



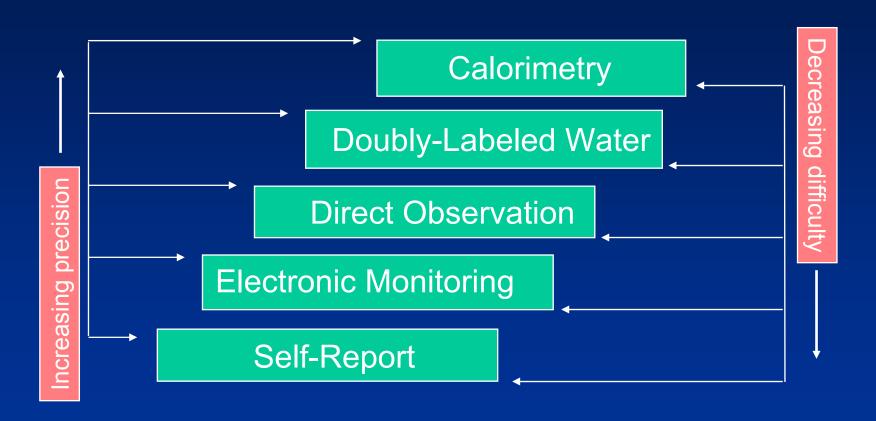
- Self-report reliability
- Mostly focused on test-retest reliability (self-report).
- Coefficients range from 0.20 0.99 with a strong suggestion of age and genderdependency as well as time-dependency (between observations).
- Diary in older adolescents may be promising but parental report less impressive.



- Self-report validity
- Mostly frequent type of study, but also the most variable number of validation standards used.
- In general low to modest correlations are the norm across a range of study types.
- No expected gradient with better validity standards.
- Consistently nil to low associations in younger (<10 years) children.



Physical activity assessment cascade





Physical Activity Assessment in Youth: Future Directions

- Emphasis must be on measuring more than just total "dose": understanding intensity, frequency, and patterns is critical – particularly for overweight.
- Self-report information processing.
- Electronic monitoring (accelerometers) are likely the most productive future trend in physical activity assessment for children and adolescents. More work on electronics is needed.

Physical Activity Assessment in Youth: Future Directions

- Little work has been done on combinatorial strategies (eg. monitoring + self-report).
- Physical inactivity
- Energy costs of various activities in children and adolescents.
- Little work done in categorical analyses of "meeting recommendations" (60 mins/day) and relation to obesity/overweight – surveillance implications. Dose-response

Physical Activity Assessment in Youth: Future Directions

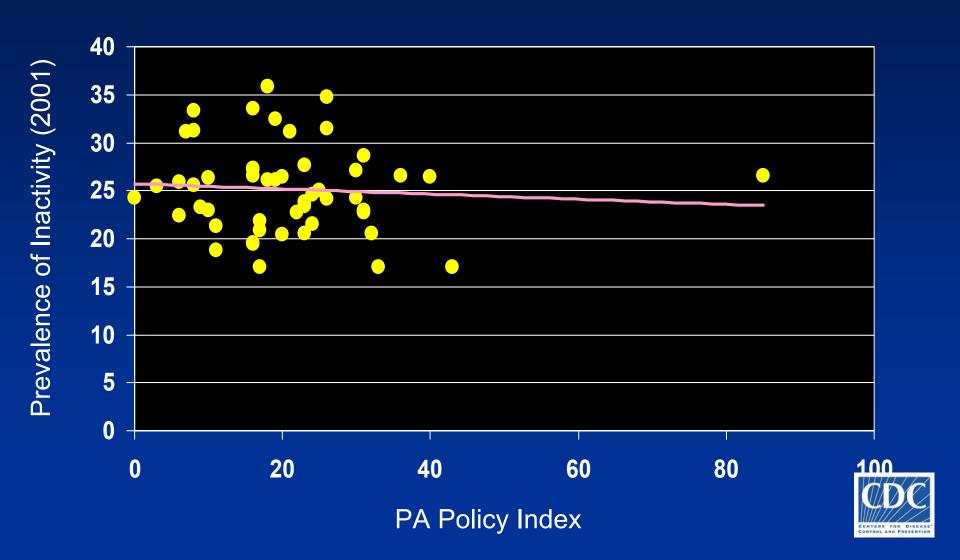
- Intra-individual variation in physical activity assessment: How many days are enough?
- Methods for assessing non-aerobic activities
- How can existing physical activity assessment instruments/methods be adapted/adopted into different populations and subgroups?

Physical Activity Assessment in Youth: Future Directions

- Familial and health care provider assessment.
- "Upstream" assessment of determinants of physical activity – environmental as well as policy influences. Surveillance and research needs.



Relation between state PA policy index and prevalence of physical inactivity



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