Patterns of Physical Activity in Arabic males: Barriers and Motivations to Adopting Healthy Lifestyles

By

Khaled Al-Hadi Refaie

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Dedication

To my father, to my mother, to my wife Nouria, to all my brothers and sisters.

To all my children Barah, Mohamed and Joud.

To all my Friends.

To all my colleagues in the Faculty of Physical Education and Sports Science in Libya.
بسم الله الرحمن الرحيم

يرب أؤزعني أن أشكر بعضتك التي أنعمت علي وعلى والدي وأن أعمل صالحاً ترضاه وأدخلني برحمتك في عبادك الصالحين (النمل: 19).
Abstract

The worldwide prevalence of obesity is reaching epidemic proportions in both adults and children and leading to increased risk of non-communicable diseases (WHO, 2004), including coronary heart disease, circulatory disease, cancer and type 2 diabetes. In the UK, increasing levels of obesity may relate to a decrease in sport and physical activity participation as only 39% of males and 32% of females are sufficiently active to meet stated targets for physical activity (Townsend et al., 2012). In Britain, approximately 8% of the population originate from ethnic minorities that includes a high proportion of individuals from Arabic countries, with a significantly greater odds ratio for a sedentary leisure-time physical activity pattern than people from other countries. The thesis contains three studies which identify the patterns of physical activity in Arabic males (men and boys) in Liverpool, and explores the barriers and motivations to adopting physically active lifestyles, before addressing the feasibility of an intervention to enhance levels of physical activity.

Study 1 examined the patterns of physical activity in 62 Arabic men and 65 boys during 7 consecutive days of continuous accelerometry recording. Men and boys were more active during weekdays than weekend days. Although boys were more active than men, they did not perform sufficient minutes of moderate to vigorous activity (60 min per day) to reach recommendations of MVPA. The men, however completed 190 mins per week of activity in the moderate intensity category and therefore satisfied Government guidelines. Study 2 investigated the barriers and motivators in becoming physically active by using focus group semi-structured interview techniques, followed by transcription and content analysis. The findings of the study indicated that physical activity plays a significant role in the individual’s health and that Arabic males perceive several benefits of physical activity for the individual, such as self-confidence, mental health and improved physical condition. There was a mixed interpretation and understanding of physical activity in these groups, with barriers to becoming more active cited as lack of time and socio-cultural barriers of not being accustomed to being physically activity. Facilitators, that encouraged participants to become physically active, included religion and enjoyment. Study 3 used a mixed methods approach to investigate the feasibility of an awareness raising intervention to increasing the levels of physical activity in Arabic males who owned exergames at home. An intervention group of men and boys were provided with physical activity guidelines. Changes in their physical
activity levels were measured (using accelerometry) 4 weeks after receiving the guidelines and compared with a control group. The intervention provoked more light activity, moderate and MVPA activity in the men but no reduction in their sedentary behaviour. In boys, light and moderate activity increased, sedentary behavior decreased, but there was no significant difference in MVPA levels. Semi-structured interviews showed that the men found physical activity guidelines alone were not sufficient to motivate them to change their physical activity levels, but the boys found the provision of these useful. **Conclusion.** This study demonstrated that Arabic men met recommendations for physical activity, whereas boys did not. Barriers to the adoption of physical activity revolved mainly around a lack of understanding of physical activity and guidelines. The intervention strategy was regarded as family-focused and entertaining but not useful in promoting sustainable change in physical activity levels.
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Chapter 1

Introduction
The WHO states that the worldwide prevalence of obesity is reaching epidemic proportions in both adults and children (Fogelholm et al., 1999) and leading to increased risk of non-communicable diseases (WHO, 2004), including coronary heart disease, circulatory disease, cancer and type 2 diabetes. For example in England, the proportion of the population that are overweight (including the obese) has increased from 58% to 65% in men and from 49% to 58% in women between 1993 and 2011. In terms of clinical obesity, there was a marked increase in the proportion of adults that were obese from 13% in 1993 to 24% in 2011 for men and from 16% to 26% for women (The Information Centre for Health and Social Care, 2013).

In parallel with these changes in the western world, the levels of obesity have increased by three fold during last 20 years in developing countries including a number of Arabic countries that have adopted a Western lifestyle based on decreased levels of physical activity and increased consumption of convenience foods (Musaiger et al., 2011b). Obesity is also a serious concern in children and young people, and there is a pressing need to reduce and treat obesity levels in this vulnerable population, since obesity in young people is predicted to increase the risk of obesity in later life and possibly increase the risk of obesity-related disease (Dugdill et al., 2007).

These trends emerge at the same time as a decrease in sport and physical activity participation in the UK, suggesting a need to increase physical activity with a view to improve health and reduce the incidence of chronic diseases (Dugdill et al., 2007), with similar patterns of change of physical activity in Arabic countries (Musaiger 2007; Zaghlool et al., 2011). In England only 39% of males and 32% of females are sufficiently active to meet stated recommendation targets for physical activity (Townsend et al., 2012a).
In Britain, 92% of the population are white British and approximately 8% originate from ethnic minority groups that are principally divided into two main groups, Black (Black Africans and Black Asians) and South Asian (Szczepura et al., 2004). Obesity prevalence is highest among Black African (38%), Pakistani (28%) and Black Caribbean (32%) groups, and it is also known that men born in Arabic-speaking countries have a significantly greater odds ratio for a sedentary leisure-time physical activity pattern than in all other countries. Moreover the odds ratio of completely sedentary leisure–time physical activity status in men born in Arabic-speaking countries is significantly higher compared to men born in Northern Europe (Lindstro et al., 2001).

Szczepura (2004) suggests that these differences in activity levels relate to a greater number of cultural and social barriers that impede minority groups to access public health and activity services. The higher prevalence of physical activity in some segments of ethnic minority groups may relate to lower-income households low levels of education (Hillsdon et al., 2005), and coupled with gender, ethnicity, religious and social factors (Allender et al., 2006), these issues present a complex problem for health policy and decision makers in promoting active lifestyles to these sections of society.

Therefore the work contained in this thesis is an attempt to investigate physical activity patterns of Arabic men and their sons siblings living in the UK, as well as their views, beliefs and understanding of the concepts relating to physical activity. This body of work focused on small sections of the Arabic community living in Liverpool that had previously originated from North Africa and Western Asia. Liverpool is considered the home to Britain's oldest Black community and oldest Chinese community in Europe, (Ray, 2001). Although 90% of the citizens in Liverpool are white, the city is one of the most important multicultural cities in the history of the UK.
The thesis contains three studies which identify the patterns of physical activity in Arabic males in Liverpool and explores the barriers and motivations to adopting physically active lifestyles, before addressing the feasibility of an intervention to enhance levels of physical activity. The thesis progresses through three consecutive phases in order to collect quantitative and qualitative data deductively and inductively in the first and second phase and utilises a mixed-methodology in the third and final phase.

This thesis aimed to explore the physical activity behavior in three generations of Arabic males with a view to developing a feasible physical activity intervention for this population, and sought to achieve this goal through the completion of three main studies:

- **Study 1**: quantitative study - this study examined the patterns of physical activity in Arabic men and boys during 7 consecutive days and also examined individuals’ physical self-perception profile.

- **Study 2**: qualitative study - based on the findings of study 1, this phase investigated the barriers and motivators in becoming physically active by using focus group interview techniques.

- **Study 3**: intervention study, mixed methodology - based on the findings of study 2, this phase investigated the feasibility of an exergaming and awareness raising intervention in increasing the levels of physical activity in this sample.
Chapter 2

Literature Review
2.1 Health Benefits of Physical Activity

Physical activity is defined as any bodily movement produced by skeletal muscle that results in energy expenditure above basal levels. This definition was established by *Caspersen et al.* (1985), and then considered as a standard definition that was broadly accepted by researchers internationally (Caspersen *et al.*, 1985; WHO, 2002a; Moy., 2005; WHO, 2011a). Physical activity is associated with many physical and psychological health benefits, both in the prevention of ill health and the management of existing health conditions (Johnson *et al.*, 2009) and a strong relationship between being physically active and good health (Haskell *et al.*, 2007) now exists, with physical activity considered as an essential and important component of lifestyle for individuals within the age groups of 18 to 65 years (Haskell *et al.*, 2007). It also appears that this relationship is somewhat dose-dependent, since high intensity physical activity is more important for lowering the risk of cardiovascular disease (Geffken *et al.*, 2001) and for the treatment of various other diseases, such as osteoporosis (Warburton *et al.*, 2006).

A direct correlation has been proven between the volume of physical activity and health wherein the greater the fitness gain the more improvement in indices of health (Warburton *et al.*, 2006). The opposite is that a lack of physical activity is also thought to be a contributor to increasing obesity levels in the UK (The Information Centre For Health and Social Care, 2008). Hence, it is important for the UK government to take more dynamic action to minimize the rate of development of overweight and obesity in the population and the subsequent impact on health (WHO, 2000b; Macdonald *et al.*, 2003; Wenche *et al.*, 2004; Swinburn *et al.*, 2004; Henry F.J., 2004; Wareham *et al.*, 2005; Jones *et al.*, 2007; The Information Centre For Health and Social Care, 2008, 2010).
As a result of physical inactivity it is estimated globally that there are in the region of 3.2 million people that will die each year from lifestyle related diseases. In addition to this, the health burden of inactivity will increase the risk of all-cause mortality by approximately 20% to 30% in those people that fail to meet published requirements for physical activity levels (WHO, 2011b). The WHO considered physical inactivity as the fourth most important cause of global mortality (WHO, 2010a) and there is a worldwide consensus that physical inactivity leads to ill health and the prevalence of many diseases such coronary heart disease (6%), colon cancer (10%), breast cancer (10%), and type 2 diabetes (7%). In addition, it has been calculated that 5.3 million of the 57 million deaths that occurred worldwide in 2008, had a direct association with levels of (in)activity (Lee et al., 2012). Furthermore, it is evident that the rates of certain non-communicable diseases are increasing in the UK, with currently coronary heart disease (11%), colon cancer (18%), breast cancer (17%), and type 2 diabetes (13%) contributing to of premature all-cause mortality (Lee et al., 2012). In Eastern Arabic countries (Iraq, Kuwait, Lebanon, Libya, Saudi Arabia, Tunisia and United Arab Emirates) these diseases present a similar pattern of effect [coronary heart disease (8%), type 2 diabetes (9%), breast cancer( 13%) and colon cancer (14%)] for all-cause mortality (WHO, 2013).

Despite advances in treatment and health care globally, it is known that there are high death rates in children from non-communicable diseases such as rheumatic heart disease, type 1 diabetes, asthma, and leukemia, if comprehensive health care is not provided (WHO, 2013).

However, it is increasingly clear that physical inactivity is now being classified as one of the leading causes of non-communicable diseases among children (Lee et al., 2012; WHO, 2010b), and therefore it is very important that childhood physical activity whether for prevention or for treatment of these diseases is promoted (Swaminathan & Vaz, 2013).
Consequently, policy and decision makers must urgently develop comprehensive strategies to encourage the culture of performing physical activity in order to contribute to the prevention of the non-communicable diseases (Global Advocacy for Physical Activity (GAPA), 2011).

The cost of physical inactivity in England is estimated by The Chief Medical Officer as £8.2 billion per year including direct costs of treatment, and indirect costs caused through sickness absence (Scarborough et al., 2011). This has lead to financial initiatives by governments and economists to impose fat taxes to prevent people eating calorie-laden foods and to promote healthy manufacturing processes from food companies in order to generate a better health climate (Chouinard et al., 2006; Leicester & Windmeijer., 2004). Concurrently there are now many physical activity related initiatives to attack the obesity crisis and increase physical activity through walking schemes etc, in an attempt to promote better health.

Physical activity has a positive effect for improving mental health and enhancing quality of life (Whitelaw et al., 2008). Physical activity also plays an important role in reducing psychological problems for individuals suffering from depression or mental stress as it can help reduce anxiety and promote self-esteem and concept of self (Calfas and Taylor., 2010).

2.2 Health Consequences of Sedentary Behaviour

Research has shown that increased sedentary behavior, rather than reduced physical activity is associated with a variety of health risks, and as such there has recently been an increased focus on research on sedentary behaviour as an independent construct (Tremblay et al. 2010).
To study the health consequences of sedentary behaviour there needs to be clarification of the terminology and associated concepts (Owen et al., 2010). Some debate surrounds the concept of sedentary behaviour and whether it is simply a lack of physical activity or whether it is a set of behaviours that are independent of physical activity (Tremblay, 2012).

From the first viewpoint, researchers have defined sedentary behaviour as low energy expenditure (Pate et al., 2008; Owen et al., 2010; Tremblay et al., 2010) or as physical activities that do not reach moderate to vigorous physical activity (MVPA), and defined as between 3-6 METs or greater than 6 METs respectively (Mullen et al., 2011; Sims et al., 2012; Biddle., et al., 2012). From the second viewpoint, however, sedentary behaviour has been defined as individual behaviours where sitting or lying is the dominant mode of posture and energy expenditure is very low (Biddle., et al., 2012) such as sitting to read, screen-time (computer use, TV viewing, video game playing, mobile phone) or driving.

One reason for the confusion surrounding the term may be that some people are sitting for long periods and classified as sedentary, yet they also meet recommended physical activity guidelines in other parts of their lifestyle (Owen et al., 2010). As such, researchers have become interested in the independent role that sedentary behaviour plays in health and wellness (Owen et al., 2010; Department of Health, 2011b). Evidence shows sedentary behaviour is inversely associated not only with all-cause mortality (Chau et al., 2013) but also psychological wellbeing and mental health (Hamer et al., 2010; Tremblay et al., 2010; Chinapaw et al., 2011).

### 2.3 Health Inequalities

Health inequalities were defended by the Royal College of Nursing (2012) that the “differences in health status or in the distribution of health determinants between different population groups”, while Peter et al (2007) were more specific in their definition by
including differences in socioeconomic, demographic and geographic factors that lead to inequalities. A further definition is provided by Šućur & Zrinščak (2007) as “differences in health and health care among different social groups as a result of their different social positions” (p.654). Factors leading to health inequality includes employment, education and housing, access to healthcare, individuals’ circumstances and behaviours, such as their diet and how much they drink, smoke or exercise and the income levels. (Wilkinson & Pickett., 2009).

Health inequalities exist within countries and between countries and across a ring of health problems (Marmot., 2007). Several studies carried out during the past decade demonstrated that disparities in premature mortality exist between a number of countries such as a number of European nations (Shaw et al., 2000), New Zealand and Australia (Hayes et al., 2002; Pearce and Dorling., 2006), the US (CDC., 2011) and the UK (Shaw et al., 2000; Shaw et al., 2004). To this end the world health Assembly issued resolution 65.8, (WHO., 2012) endorsing the Rio Political Declaration on Social Determinants of Health (WHO., 2011) put emphasis on the need for “delivering equitable economic growth through resolute action on social determinants of health across all sectors and at all levels” (p.2).

A survey conducted in 2003 covering 28 EU countries to investigate the differences health status and access to health care according to income groups found significant differences between EU country groups in all indicators: having long-standing illness or disability, self-perceived health status, satisfaction with health, access to health care according to four indicators (delay in getting an appointment, waiting time to see the doctor on the day of the appointment, distance to the nearest medical facility and the cost of seeing the doctor).

In many ways the health of population in industrialised countries has never been better (World Health Organization., 2008). However, health advantages are not shared equally
by all members of society. Higher income people are likely to live longer and lead healthier lives than those whom were in lower social classes with low-income the gap in life expectancy between low and high income reported as six years (Marmot., 2010). Increasing health equality is not a responsibility of the department of Health only; it is a multifaceted issue that requires coordination and action between all the governments departments to take actions toward it (Department of Health., 2010).

2.4 Recommended Levels of Physical Activity

There is a pattern of increased rates of physical inactivity in many countries along with the attendant risk of increasing the prevalence of non-communicable diseases (WHO, 2010b) consequently, Governments in various countries have taken the initiative to establish public health guidelines among the population in order to promote the importance of physical activity for health (Marcus et al., 2006) and limit the time spent by the individual in sedentary behaviours (Biddle., et al., 2012).

In 2008 the European Union Physical Activity Guidelines were published which suggested a wide variety of actions for Member States to follow with the purpose of promoting higher rates of physical activity. These guidelines recommended the European Union and its Member States to promote a minimum of 60 minutes of daily moderate-intensity physical activity for children and young people and a minimum of 30 minutes of daily moderate-intensity physical activity for adults including seniors (The EU Working Group "Sport & Health", 2008).

Previously, there were physical activity guidelines for each member country of the UK (Department of Health, 2011b). However, during the last decade the British Government has set a variety actions and procedures for raising the levels of physical activity among
the population by creating new guidelines (Higgins & Dale., 2009) that have been comprehensive designed by considering the previous guidelines of each country with further additions (Department of Health, 2011b). These efforts have resulted in the latest issue of physical activity recommendations (Department of Health, 2011a). The previous UK recommendation encouraged people to perform a type of physical activity for two times per week to improve health (Department of Health, 2004). However, in recent years, this package has been extended to advise greater doses of physical activity than earlier recommendations (Department of Health and Human Services, 2008; Kesaniemi et al., 2010; Department of Health, 2011b). The UK government has now issued a sophisticated guideline for physical activity that stipulates that adults should involve themselves in at least 150 minutes (2½ hours) of moderate intensity activity in cumulative bouts of 10 minutes or more on at least 5 days a week or 75 minutes of vigorous intensity activity spread across the week (Department of Health, 2011a). Furthermore, the guidelines were revised for children aged between (5-18 years), with recommendation to perform moderate to vigorous intensity physical activity for at least 60 minutes per day, every day of the week, with the direction that this should include vigorous intensity activities, including those that strengthen muscle and bone, at least three days a week (Department of Health, 2011a). These physical activity guidelines are recommended in order to minimise the amount of time spent being sedentary (sitting) for extended periods whether for adults or children (Department of Health, 2011a).

2.5 How Active is the Population Currently

There is an increase in physical inactivity levels among the population of many countries around the world (WHO, 2010a) combined with prevalence of non-communicable diseases (NCDs) and a decline in the general health of the global population (Lee et al., 2012). Furthermore, the WHO reports that physical inactivity is the fourth leading risk factor in
global mortality (WHO, 2010a). In the European Union the majority of the population perform informal physical activity rather than participate in organised sport. Data suggests that 27% of Europeans were engage in physical activity regularly for about 5 times a week while the great majority of the population (65%) are undertaking some type of physical activity once a week. However, the most worrying statistic is that 14% of European citizens are completely physically inactive and they never do any type of physical activity (TNS Opinion & Social., 2010).

In the United Kingdom the picture is slightly better with 37% of adults engaging in physical activity regularly, but this is still lower than Latvia which has the highest prevalence of adults engaging in physical activity with 44% (Townsend et al., 2012a). In Scotland, 45% of men managed to reach the recommended levels of physical activity (Bromley et al., 2011), compared with 39% of men in England (The Information Centre for Health and Social Care, 2011), and 37% in Wales (Welsh Assembly Government., 2011), while just 33% of men in Northern Ireland reported meeting the threshold (Townsend et al., 2012a). These reductions in physical activity are exemplified by the observation that there was a decrease in the average of distance travelled on foot or by bike from 306 miles in 1975/1976 to just 221 miles in 2010 (Department for Transport, 2001, 2011). Adults and children in England are predominantly more active during weekdays than weekend days at the level of moderate to vigorous intensity required (Townsend et al., 2012a) with walking being the most popular type of physical activity in England in 2008 (Communities and Local Government, 2009).

2.6 Physical activity and obesity patterns in the Arabic world

Obesity is increasing at an alarming rate in the Eastern Mediterranean region including the Arabic countries, as is the incidence of related diseases. The degree of overweight and
obesity ranges from 25% to 82% in the Eastern Mediterranean region. Eating behaviour plus physical inactivity were mostly responsible for such high rates of obesity (Musaiger, 2004), and there is an urgent need to review the cultural, social, environmental and educational issues relating to this (Mokhtar et al., 2001).

There is a paucity of research on the levels of physical activity among the Arabs (Al-Hazzaa et al., 2011a) with the large majority of research conducted in females of this population (Musaiger et al., 2011b). During the last two decades, the level of obesity has increased threefold in those developing Arabic countries that have adopted a western lifestyle that has seen decreased levels of physical activity and eating patterns change (Musaiger et al., 2011a). Additionally, the lack of physical activity in Arabic countries led to an increase in the prevalence of overweight and obesity (Musaiger, 2007; Ng et al., 2011). Al-Hazzaa et al. (2011b) found that the rates of sedentary behaviour is high, and that this is associated with low physical activity levels among adolescents aged 14-19 years in Saudi Arabia. It is also worth mentioning that physical activity levels among females are very low regardless of the country of the Arabic world under consideration (Henry et al., 2004; Al-Sabbah et al., 2007; Collison et al., 2010; Al-Hazzaa et al., 2011b). According to the STEPwise survey performed by WHO 2003–2007, daily physical activity in different Arabic countries amounted to just 10 minutes or less of meaningful exercise (STEPwise, 2007).

The pattern of lifestyle has changed in Arabic countries as a result of alterations in socio-economic status, availability of electric home appliances, cars and also the technical sophistication which has meant that levels of physical activity have diminished sharply (Musaiger, 2007; Youssef et al., 2010; Musaiger et al., 2011a; Di-Capua et al., 2005; Al-Sabbah et al., 2007; Shuval et al., 2008). In addition, it has been reported that the level of
maternal education and monthly income of the house impacts the degree of physical activity (Centers for Disease Control and Prevention., 2006; Obeisat 2012). WHO statistics (Regional Office in Cairo) indicated that there is a deficiency of physical activity amongst the adults in 7 Arabic countries (Egypt, Iraq, Jordan, Kuwait, Saudi Arabia, Sudan and Syria).

These changing levels of physical activity among Arabic populations (Musaiger, 2004; Badran & Laher, 2011) are having very important consequences for increasing the prevalence of non-communicable diseases such as cardiovascular disease, type 2 diabetes and certain types of cancers (Khatib, 2004; Al-Nuaim et al., 2012), as well as being associated with an increase in obesity levels of these populations. A high priority for Arabic nations has become the implementation of policies and national programs for promotion of physical activity in an attempt to reduce the levels of obesity (Musaiger, 2004). A study carried out to examine the reasons behind such obesity indicated that the pattern of lifestyle among the Arabic gives the opportunity to be more physically inactive and also suggests greater access to a westernized diet. Moreover these populations have easy access to transport which results in less or no physical activity and there has been a shift in the workplace, where the majority of manual work is performed with the help and of availability of cheap labor which reduces the quantity of workplace physical activity performed (Badran & Laher, 2011). The table below shows a comparison of overweight in males between several Arabic and non-Arabic countries:
Table 2.1. The prevalence of obesity in Arabic and non-Arabic countries

The data are separated for males aged between 15 and 100 years, using WHO estimates for 2010 (Badran & Laher, 2011)

<table>
<thead>
<tr>
<th>Country</th>
<th>Male %</th>
</tr>
</thead>
<tbody>
<tr>
<td>USA</td>
<td>44%</td>
</tr>
<tr>
<td>Greece</td>
<td>30%</td>
</tr>
<tr>
<td>Mexico</td>
<td>30%</td>
</tr>
<tr>
<td>Kuwait</td>
<td>30%</td>
</tr>
<tr>
<td>UK</td>
<td>24%</td>
</tr>
<tr>
<td>Saudi</td>
<td>23%</td>
</tr>
<tr>
<td>Egypt</td>
<td>22%</td>
</tr>
<tr>
<td>Bahrain</td>
<td>21%</td>
</tr>
<tr>
<td>Spain</td>
<td>17%</td>
</tr>
<tr>
<td>Lebanon</td>
<td>15%</td>
</tr>
<tr>
<td>Belgium</td>
<td>15%</td>
</tr>
<tr>
<td>Italy</td>
<td>14%</td>
</tr>
<tr>
<td>Libya</td>
<td>12%</td>
</tr>
<tr>
<td>Syria</td>
<td>12%</td>
</tr>
<tr>
<td>Iraq</td>
<td>8%</td>
</tr>
<tr>
<td>Tunisia</td>
<td>8%</td>
</tr>
<tr>
<td>Oman</td>
<td>8%</td>
</tr>
<tr>
<td>Algeria</td>
<td>6%</td>
</tr>
<tr>
<td>Mauritania</td>
<td>5%</td>
</tr>
<tr>
<td>Morocco</td>
<td>4%</td>
</tr>
<tr>
<td>Yemen</td>
<td>2%</td>
</tr>
<tr>
<td>Sudan</td>
<td>2%</td>
</tr>
<tr>
<td>Somalia</td>
<td>1%</td>
</tr>
</tbody>
</table>
2.7 Physical Activity and Ethnic Minority in UK

There is an increase in the number of the resident population of England and Wales of 7% which is equivalent to an increase of 3.7 million from 2001 to 2011 with 55 per cent (2.1 million) of this increase due to immigration. Most of the residents of England and Wales belong to the White ethnic group, however there were 5 % decrease in the number of this category since 2001 which it was represented 91% and became 86% in 2011.

Table 2.2. Distribution of ethnic groups in England and Wales, 2011

<table>
<thead>
<tr>
<th>Ethnic group</th>
<th>Number</th>
<th>Per cent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Other ethnic group</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Any other ethnic group</td>
<td>333</td>
<td>0.6</td>
</tr>
<tr>
<td>White and Black African</td>
<td>166</td>
<td>0.3</td>
</tr>
<tr>
<td>Other Mixed</td>
<td>290</td>
<td>0.5</td>
</tr>
<tr>
<td>White and Asian</td>
<td>342</td>
<td>0.6</td>
</tr>
<tr>
<td>White and Black Caribbean</td>
<td>427</td>
<td>0.8</td>
</tr>
<tr>
<td>Other Black</td>
<td>280</td>
<td>0.5</td>
</tr>
<tr>
<td>Caribbean</td>
<td>595</td>
<td>1.1</td>
</tr>
<tr>
<td>African</td>
<td>990</td>
<td>1.8</td>
</tr>
<tr>
<td>Chinese</td>
<td>393</td>
<td>0.7</td>
</tr>
<tr>
<td>Bangladeshi</td>
<td>447</td>
<td>0.8</td>
</tr>
<tr>
<td>Other Asian</td>
<td>836</td>
<td>1.5</td>
</tr>
<tr>
<td>Pakistani</td>
<td>1,125</td>
<td>2.0</td>
</tr>
<tr>
<td>Indian</td>
<td>1,413</td>
<td>2.5</td>
</tr>
<tr>
<td>All white ethnic groups</td>
<td>48,209</td>
<td>86.0</td>
</tr>
<tr>
<td>White</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Gypsy or Irish Traveller</td>
<td>58</td>
<td>0.1</td>
</tr>
<tr>
<td>Irish</td>
<td>531</td>
<td>0.9</td>
</tr>
<tr>
<td>Other White</td>
<td>2,486</td>
<td>4.4</td>
</tr>
<tr>
<td>English/Welsh/Scottish/Northern Irish/British</td>
<td>45,135</td>
<td>80.5</td>
</tr>
</tbody>
</table>


South Asians, African Caribbean and Chinese comprise the major part of ethnic minority groups in the UK, and they account for 7.9 % of the UK population. The dietary habits of the ethnic minority result in high incidence rates of cardiovascular diseases and this could
be the reason behind the ethnic groups experiencing worse health conditions than the UK whites (Stanner, 2011).

Between 2001 and 2011 there were increases in the majority of the religion groups in England and Wales except the Christian based on the data demonstrated in the table below.

Table 2.3. Distribution of religious groups in England and Wales

<table>
<thead>
<tr>
<th>Religion</th>
<th>2001</th>
<th>2011</th>
<th>Change</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Number</td>
<td>Per cent</td>
<td>Number</td>
</tr>
<tr>
<td>Christian</td>
<td>37,338</td>
<td>71.7</td>
<td>33,243</td>
</tr>
<tr>
<td>No religion</td>
<td>7,709</td>
<td>14.8</td>
<td>14,097</td>
</tr>
<tr>
<td>Muslim</td>
<td>1,547</td>
<td>3.0</td>
<td>2,706</td>
</tr>
<tr>
<td>Hindu</td>
<td>552</td>
<td>1.1</td>
<td>817</td>
</tr>
<tr>
<td>Sikh</td>
<td>329</td>
<td>0.6</td>
<td>423</td>
</tr>
<tr>
<td>Jewish</td>
<td>260</td>
<td>0.5</td>
<td>263</td>
</tr>
<tr>
<td>Buddhist</td>
<td>144</td>
<td>0.3</td>
<td>248</td>
</tr>
<tr>
<td>Other religion</td>
<td>151</td>
<td>0.3</td>
<td>241</td>
</tr>
<tr>
<td>Religion not stated</td>
<td>4,011</td>
<td>7.7</td>
<td>4,038</td>
</tr>
</tbody>
</table>


Several studies have demonstrated that ethnic minority groups have low physical activity levels compared with white British population. For example, Pomerleau et al. (1999) examined physical activity levels and obesity in 291 South Asian, 303 Afro-Caribbean, and 559 European women in West London. Results indicated that South Asian women exhibited the lowest leisure-time physical activity, with the highest prevalence rate of obesity being among the Afro-Caribbean women. Other research conducted to investigate the relationships between physical activity types and level and cardiovascular disease and diabetes risk factors among several ethnic minority groups (men and women, aged 25-75) reported that Europeans were more physically active than Indian, Pakistani and
Bangladeshi (Hayes et al., 2002). Physical activity levels were also reported to be lower for Indian Asians than Northern Europeans (Chambers et al., 2006). A review of existing behaviours and ethnic differences in diet, physical activity and obesity in adults based on data in Health Survey for England (HSE) reported that all minority groups are less likely to meet the physical activity guidelines than the white in men (Higgins & Dale, 2009). In addition, in England many ethnic groups were unable to meet physical activity recommendations whether among men or women (Saxena et al., 2004). However, certain ethnic groups, for example the Irish and Black Caribbean men were closer to reaching the recommended levels of physical activity (Department of Health, 2004).

An overview of the current evidence on the relationships between obesity and ethnicity for adults and children in the UK demonstrated that physical activities differ among the population with respect to ethnicity and socioeconomic status differences. Systematic literature reviews have been conducted to assess the impact of ethnicity on physical activities in various minority groups in the UK (Hayes et al., 2002). It reported that south Asian groups were performing 45% less physical activity than the UK whites and therefore had lower probability of reaching the Government recommended physical activity levels (Fischbacher et al., 2004). The data revealed that ethnic groups’ exposure to risk of diabetes and cardiovascular diseases is greater, since up to 88% of the South Asian population did not meet physical activity recommendations, compared with 52% of Europeans (Hayes et al., 2002).

Another systematic review of 18 papers that examined low rates of physical activities in minority populations and the existing barriers to physical activity demonstrated that socio-economic and cultural barriers exist for performing physical activity in UK among this population. However, to overcome these barriers to physical activity the UK government has to implement for intervening in their cultures (Teijlingen et al., 2009).
This corresponds to findings of a systematic review carried out by Babakus and Thompson (2012) who in examining physical activity and sedentary time in South Asian women found that physical activity levels among South Asian women were low compared with South Asian men. In comparison with white Europeans, south Asian women were found not to reach physical activity thresholds. This compares with data for American, Canadian and Australian women 33% of whom were reported as active (McLeod & Ruseski., 2013; Australian Bureau of Statistics., 2012).

2.8 Barriers to Physical Activity

Regardless of the benefits of being physically active, there are still a large proportion of adults living a sedentary lifestyle (Chen, 2010). Regrettably, published studies on the barriers associated with the adoption of a more physically active life among Arabic people are limited and therefore work addressing this area is urgently needed. This is particularly important as a good level of understanding of such barriers will help drive the design of appropriate interventions to improve participation in physical activity in such populations (Chen, 2010). This work could also inform best practice amongst health professionals who need to have a good understanding of principal barriers in order to be able to promote physical activity levels and thereby improve public health (Chinn et al., 1999). Thomas et al. (2005) suggested that qualitative methodologies are appropriate in giving in depth information about the real barriers to the engagement in physical activity, since these approaches can delve deeper into individuals’ experiences and the obstacles that present to participation in physical activity (Thomas et al., 2005).

Diverse research has focused attention on barriers to physical activity amongst members of the general population, especially individuals those are physically inactive (Brawley et al.,
2003; Grossman & Stewart, 2003). There are a range of factors identified as barriers to physical activity such as socio-economic status, sex, age and variety of other components (Robbins et al., 2003). Tandon et al. (2012) reported that socioeconomic status plays a major role in the adoption of a physically active life, as existing on the lower scales of socioeconomic status leads to increase sedentary behavior and a consequent decrease in physical activity.

Chen (2010) divides the barriers to physical activity into two types; personal and environmental factors, and these barriers includes several factors; physical health problems, past sedentary lifestyle, fear of resultant injury or falling and insufficient understanding about physical activity. The environmental factors reported as barriers centered around a lack of resources including the lack of accessible and convenient space as well as equipment for physical activity in institutions that were accessible. Furthermore, Allender et al. (2006) summarized the barriers to participation in physical activity as poor access to facilities, unsafe environments and high costs, and another qualitative study about participation in physical activity found the same barriers coupled with time constraints and negative pressure from peers, for instance harassment of some children during physical education class (O’Dea, 2003). Content analysis of tape recordings of a study carried out by Rimmer et al. (2004) reported barriers to physical activity such as; 1) barriers and facilitators related to the built and natural environment, 2) economic issues, 3) emotional and psychological barriers, 4) equipment barriers, 5) barriers related to the use and interpretation of guidelines, codes, regulations, and laws; 6) information-related barriers; 7) professional knowledge, education, and training issues; 8) perceptions and attitudes of persons who are not disabled, (when being with non-able individuals) including professionals; 9) policies and procedures both at the facility and community level; and 10) availability of resources.
National Institute for Health and Clinical Excellence (NICE) produced public health guidance on physical activity for The Department of Health (DH) and reviewed a set of studies to identify the barriers to physical activity wherein it was concluded that a combination of factors prevent participation in various types of physical activity. NICE found evidence from 3 qualitative studies carried out in the UK that indicated that the main barriers to participation in physical activity among children were; parental fear relating to danger of traffic, limited places to play locally, and parents’ disapproval of children playing outside from a security perspective. There was also a reported lack of places to store bikes in schools (National Institute for Health and Clinical Excellence (NICE), 2009). Trost et al., (2002) reported a range of barriers to physical activity such as marital status, level of obesity, smoking habit, lack of time, and past exercise behavior. Other researchers mentioned similar factors such as lack of time and marital status (Sherwood & Jeffery, 2000; Speck & Harrell., 2003) fear of falling particularly in elderly populations, the preference to exercise with a partner, lack of energy, self consciousness, injury risk, lack of knowledge and information about how to exercise, weather conditions, lack of facilities and fear of joint pain (White et al., 2005; Trost et al., 2002; Bauman & Bull, 2007).

Cultural values and beliefs play an important role for encouraging adults to engage in a type of physical activity with young children (Lindsay et al., 2009; Emma, & Jarrett, 2010). There are a large number of cultural and social barriers that prevent ethnic minority groups accessing public health and activity services (Szczepura., 2004). Emma, & Jarrett, 2010 also indicated that socio-cultural factors during both home and school time could influence the physical activity behaviours among young children. For example, Arabic parents focus more on academic study than giving their children the opportunities to be physically active with the burden of homework additional classes further limiting the availability of the time to engage in a type of physical activity (Garrett, 2006).
Although, there are many health benefits of being physically active (Perspectives in Public Health, 2013) and also Shuval et al. (2008) noted that culture can play an important positive role for promoting physical activity, the perception of not being able to fit physical activity into their lives suggests Arabic males do not put physical activity among the priorities of their life (Perspectives in Public Health, 2013). Furthermore, Caperchione et al. (2011) suggested that unadapting physical activity as a part of the lifestyle could be due to the factors associated with the Arabic culture.

Several parental factors contribute to childhood overweight, such as parental BMI, parental education and income level (Reilly et al., 2005). Parenting style is also considered an important factor over time and leads to an increase in the level of childhood overweight. This factor particularly constitutes the environmental and emotional variables for the socialization and the upbringing of children (Rhee et al., 2006). Parenting style is considered as a complicated and multifaceted activity including various behaviors that impact individually and together to influence child outcomes (Darling., 1999). The most commonly used definition of parenting style is “a constellation of attitudes toward the child that are communicated to the child and create an emotional climate in which parent’s behaviours are expressed” (Darling & Steinberg., 1993).

A study conducted by Rhee et al (2006) aimed to determine the relationship between the 4 parenting styles (authoritative, authoritarian, permissive, and neglectful) and overweight status in first grade. The study found that children who have authoritarian mothers had an increased risk of being overweight, compared with children of authoritative mothers. Children of permissive and neglectful mothers were twofold as likely to be overweight, compared with children of authoritative mothers.
It is commonly reported that active parents will have active children and also a number of studies support this trend (Biddle et al., 2011). However several studies highlighted some contrast and a negative correlation between parental PA levels and their children’s PA levels (Biddle et al., 2011) such as, Gustafson and Rhodes who reviewed 24 studies and found that there is ‘much uncertainty’ (p. 88) about the relationship between parental physical activity and child activity levels.

2.9 Interventions to promote Physical activity

Governments around the world face a huge problem in attempting to combat high rates of sedentary lifestyle and consequences of the lifestyle diseases associated with physical inactivity (Edwards et al., 2006). These rates of physical activity (two thirds of population in European Union at ages of 15 years and older are physically inactive (Cavill et al., 2006); only 37% of UK adults engage in physical activity regularly), lead to an important question; who should take action to implement strategies to improve PA? NICE Public Health Guidance (2009) referred to various organizations and groups responsible for ensuring that recommendations are placed into practice, and these agencies include Government Departments, Local Authorities, local strategic partnerships, parents, families and carers, private sector providers, schools and colleges (NICE, 2009). All organizations, whether small or large should take action to promote physical activity among their employees and manage a strategy that empowers the workplace as a vehicle to promote activity even without a gym (Public Health Agency, 2010). Furthermore, increases in physical activity levels among children and adolescents were identified as a very important factor to promote health (Lobstein et al., 2004; Van Sluijs et al., 2007) particularly during the school day, as schools played a very important role to contribute in physical activity promotion (Pate et al., 2006). However, a number of researchers adopt the view that family- and community-based interventions provide a better opportunity to improve
physical activity levels than relying solely on school-based promotion (Biddle
et al., 2004; Marcus et al., 2006). It is also important that a package of components such as family-
based interventions, organization-based policy interventions (such as school-based skills-
oriented interventions, classroom curricula, physical education curricula), community-wide
policy interventions for example policies or legislation establishing financial incentives for
organizations and communities to provide access to physical activity opportunities, Health
education classes to change knowledge and attitudes about benefits of exercise, are
provided as ways to increase access to exercise and physical activity. Such initiatives
should be aligned with special support mechanisms such as telephone support, counselling,
physical activity and exercise clubs, family-based programs and school-based social
support (Kahn et al., 2002).

Although the family-based approaches to promote physical activity are underutilized at
present, they are considered a good opportunity for helping to counteract barriers to
promote physical activity (Brustad et al., 2010). The family unit is considered one of the
most important source to understand the individual’s physical activity behaviours (Centers
for Disease Control and Prevention., 2011) and it is plays a considerable role in promoting
physical activity among its members (Brustad et al., 2010). This is particularly important
in the context of childhood obesity (Perryman, 2011), as several studies have pointed out
that individuals tend to be extremely similar to the other family members in their regular
physical activity levels (Davison & Birch, 2001; Salmon et al., 2005; Brustad et al., 2010),
and that family members like parents, brothers and sisters provide a model that children
follow and copy their behavior from (Salmon et al., 2005; Marcus et al., 2006). This
further enhances the findings of Sears et al., (2006) who found that the child has a 40%
chance of becoming overweight if there is one member of his/her family is overweight and
this chance will increase to 80% if there are two members of his/her family were
overweight (Sears et al., 2006).
The family-based intervention provides an opportunity to understand children physical activity patterns based on habits, beliefs and values expressed in the family environment (O’Connor et al., 2009). There is strong evidence that interventions involving family members are more likely to lead to positive changes in physical activity levels in both boys and girls (Van Sluijs et al., 2007; NICE, 2008). However, there is still a challenge to embed all family members including fathers to engage in a regular physical activity (Marcus et al., 2006).

2.10 Physical Activity measurement

Although physical activity is a very important factor for maintaining public health among whole world's population, there is no consistent standard for monitoring and determining its rates (Bauman et al., 2009). Warren et al. (2010) divided physical activity assessment into two types of methodologies; the first category of instruments are usually named self-reports and consist of questionnaires, diaries, logs and recalls, with the second category consisting of more objective measures e.g., heart rate monitors, accelerometers, pedometers, motion sensors, direct observation and doubly labelled water. Using all these different methods it is important to note that there can be a large variation between data of prevalence of individuals reaching recommended levels of physical activity when it is measured by accelerometry compared with self-report in England (Townsend et al., 2012b).

The key variables monitored in assessing physical activity are volume, intensity and type of activity being measured; monitoring is also complicated or contaminated by functional activities of day to day lifestyle, such as stair climbing, use of escalators or lifts. In relation to physical activity measurement in children, the appropriate physical activity
measurement needs to identify the type and intensity of physical activity, in order to accurately quantify against published recommendation thresholds (Timmons et al., 2007). Researchers have shown that although questionnaires are a valid measure for measuring habits of physical activity among individuals, the current measurements for physical activity also need to include the ongoing changes in the activities of the population.

The measurements also need to highlight the biological implication and meaning of the intensity of exercise such light, heavy and moderate (Shepherd, 2003). Objective methods are more in use for measuring sedentary behavior and physical activity intensity compared to self-reports, and provide a more accurate and reliable assessment than subjective methods (Reilly et al., 2008).

Self-report measures are commonly used to assess physical activity (Warren., et al 2010) as they allow a large amount of data to be collected at low cost (British Heart Foundation Report., 2012), the information they provided is limited however and there are difficulties in assessing the frequency, duration and intensity of physical activity (Warren., et al 2010). Furthermore, participants may have a different understanding of what ‘moderate intensity’ or ‘exercise’ actually means (British Heart Foundation Report., 2012). Moreover, the data obtained by self-report has been shown to be over-reported compared to objective data such as assessment of physical activity by accelerometry (Kowalski et al., 2012).

2.11 Accelerometer

Electronic devices such as accelerometers have become the most commonly used tool to monitor health-related physical activity and the body movement. Several surveys and research studies have conducted for testing its validity and report that these new technologies invented have been accepted as a reliable measure (Kuffel et al., 2011).
Accelerometers calculate the increase of rate of movement and also can calculate movement intensity, duration and frequency (Esliger & Tremblay, 2006; Hale et al., 2008). The validity of accelerometry for measuring moderate physical activity during the performance of several activities such as playing golf, over ground walk at specified speeds and household tasks have been compared with the telemetry assessment of energy expenditure. Walking activities provide good correlations between metabolic costs and accelerometry outcomes rather than golf game and household chores (Hendelman et al., 2000). Robertson et al., (2010) conducted a study to measure effectiveness of accelerometry in monitoring physical activity changes, and included 28 children who wore the accelerometer for a week. Accelerometry was accepted as a suitable tool to measure the intensity of different physical activities, but, the study also indicated that wearing it at schools was difficult.

2.12 PSPP questionnaire

There has been an increasing interest in psychology of physical activity research during the past two decades and a focus on individual differences (Fox, 1990; Harter, 1989; Marsh., 1993). The physical self-perception profile (PSPP) questionnaire can be used to measure the physical self-concept of individuals. It helps in providing more clarity in understanding the dynamics of the physical self-concept and the impact of individuals’ physical activity on this construct. It helps in the study of the multi-dimensional model of physical self-concept. The model has self-esteem at the top, physical self-worth in the middle and several other dimensions in the bottom level (Fox, 1990; Fox & Corbin, 1989; Fox, 1997; Sonstroem et al., 1992; Lindwall, 2004; Ninot et al., 2006). The PSPP questionnaire was designed for use with the physical self-perception profile to identify cognitive aspect of the proficiency perceived by an individual in various physical sub-domains.
The general form of the questionnaire deals with four subscales (sport competence, physical condition, attractive body, and physical strength) and one general scale (physical self-worth PSW) which is one domain that affects the Global Self-esteem GSE of an individual and each subscale composed 6 items (equivalent to 30 items) presented in a four-point structured-alternative format (Figure 2.2) (Tenenbaum et al., 2011). based on two contrasting descriptions for example (*those with unattractive bodies and those with attractive bodies*) and the participants asked which description is most like themselves and whether the description they select is "sort of true" or "really true" for them. (Fox, 1990; Fox & Corbin, 1989).

![Figure 2.1. Hierarchical model of physical self-perceptions](image)

The results are calculated by scores which ranged from 1 to 4 for each item; in view of the fact that each scale is composed of 6 items, subscale scores could range from 6 to 24 (Fox, 1990). The internal consistency reliability coefficients of the five subscales ranged from .81 to .92 and the test-retest reliability coefficients ranged from .74 to .92 for a 16-day-period of time and from .81 to .88 over a 23-day period of time (Karteroliotis, 2008). The
validity of the PSPP questionnaire has been demonstrated with a range of populations including athletes or non-athletes (Asçi, 2003), males and females (Hayes et al., 1999), adolescent girls (Kowalski et al., 2003) and different cultures (Malete et al., 2008; Moreno et al., 2007). However, no known research has explored the physical self-perceptions or the physical activity levels of Arabic males living in the UK.

2.13 CY-PSPP questionnaire

CY-PSPP is a modified version of PSPP questionnaire that gives better results with respect to competence in sports and self-perceptions with children. This scale was validated by a research study on children by Welk and Eklund (2005). The study included 570 boys and revealed that those who practice sports even outside of the school hours had higher self perceptions and competence in sports (Murcia et al., 2007). A further research study included 48 children in measuring the validity and ability of CY-PSPP questionnaire to discover the relationships between self perception and BMI within school children and pointed out that the CY-PSPP questionnaire was able to differentiate children with regard to high and low amounts of physical activity. It was also able to provide the necessary information for implementing physical activity programs (Raustorp et al., 2004).

2.14 Mixed-Method Approach

This thesis employs a mixed methods approach (as advocated for research with families (Andrew & Halcomb, 2006)) to evaluate the perceptions, beliefs and values relating to the adoption and promotion of physical activity within the family. In addition a mixed methodological approach of quantitative and qualitative investigation was used to explore the psychosocial factors relating to adoption of more active lifestyle. A range of quantitative and qualitative methods are used both concurrently and sequentially, allowing
the research questions, design and methods of study 3 to be informed by the findings from studies 1 and 2.

There are many reasons for combining quantitative and qualitative data in health research (O’Cathain et al., 2007) which in the context of this thesis include:

- using quantitative methods to investigate outcomes and qualitative methods to explore processes contributing to outcomes (e.g. how the intervention works, who it works for etc.);

- using quantitative methods to investigate relationships between variables, and qualitative methods to explore the mechanisms underlying these relationships; and

- triangulating objective outcomes with participant perspectives to inform the development of interventions to promote physical activity to Arabic males.

2.15 Summary

From the discussion in the preceding pages it is apparent that the incidence of obesity is increasing around the world at an alarming rate. This worrying trend appears independent of geography and culture. There is now compelling evidence that such a change in prevalence of obesity relates to altered activity and nutritional patterns and that these changes are also increasing the incidence of lifestyle-related illness and increasing the risk of all-cause mortality. In the UK, the large majority of individuals (adults and children) do not perform enough meaningful physical activity to reach the thresholds outlined in Government recommendations. The UK population is comprised of 8% ethnic minorities that reside in the country (short and long-term). Whilst data is available to suggest that the health status of these populations differs from the indigenous White population, relatively little is known about physical activity levels and barriers or facilitators to activity in these
groups. In addition, little is known about the adoption of an active lifestyle of such groups in regional areas of the UK.
Chapter 3

Study 1

Estimates of Physical Activity and Physical Self-Perception Amongst Arabic Men and Boys


3.1 Introduction

Over the last few decades there has been an increasing prevalence of obesity in most Western countries in both children and adolescents (Fogelholm et al., 1999). The National study of Health and Growth (NSHG) reported that the rate of obesity has increased from 1.2% in boys in 1984 to 3.4% in 1996-97 and then reached 6.0% in 2002-03, and 1.8% in girls in 1984 and then increased to 4.5% in 1996-97 to reached 6.6% in 2002-03 (Stamatakis et al., 2005), with men less likely than women to have a raised waist circumference (32% and 41% respectively) (The Information Centre, England Statistics, 2008). Obesity is therefore a serious concern in children and young people, and there is a pressing need to reduce and treat obesity levels in this vulnerable population, since obesity in young people is predicted to increase the risk of obesity in later life and possibly increase the risk of obesity-related disease (Dugdill et al., 2007).

This trend emerges at the same time as a decrease in sport and physical activity participation in the UK, suggesting a need to increase physical activity with a view to improve health and reduce the incidence of chronic diseases (Dugdill et al., 2007). However, there is controversy about whether there is any relationship between physical activity levels and body weight and body fat. While some studies indicate that normal weight adolescents are more active than those who are overweight, other studies have indicated that no relationship between physical activity and body composition exists (e.g. Jakicic, 2005; Peterson and Tucker, 2008). However it is possible the degree of association is diminished by a lack of accurate measurement of PA and body composition (Peterson and Tucker, 2008).

The risk of major non-communicable diseases such as, stroke, coronary heart disease and type 2 diabetes, will reduce by up to 70% to 80 in people who have physically active
lifestyles the WHO (2011). The definition of physical activity is any bodily movement produced by skeletal muscles producing an increase in energy expenditure above resting metabolic rate (Koosam, 2013).

The active people survey was conducted by Sport England and provided the largest sample size ever established for a sport and recreation survey in the UK. It was first carried out between October 2005 and October 2006, and data was obtained through telephone surveys with 363,724 adults in England (aged 16 plus). The survey reported that 21% of the adult population aged 16 include sport as a part of their lifestyle, and that 11.5 million people (28.4% of the population) perform some exercise in their lifestyle. However, 51% of adults (20.6 million people) reported not being meaningfully active (30 mins moderate intensity) more than 3 times per week, which falls someway sort of current recommendations. These data suggest that only 27% of women and 38% of men in England, Wales, Northern Ireland and Scotland adhere to the physical activity guidelines as suggested by the Government. There is therefore a need to enhance physical activity levels and promote healthier lifestyles in the UK (British Heart Foundation, 2009). To achieve health benefits, the amount of physical activity need not be strenuous since moderate intensities of physical activity translate to health benefit for men and women of all ages (U.S. Department of Health and Human Services, 2008). In addition, physical activity is a modifiable risk factor for lifestyle – related diseases in children with the optimum recommended amount of moderate to vigorous physical activity being 60 min a day, with physical education lessons and playtime during the school day representing an excellent opportunity to engage in this type of activity (Stratton, 2000). Increasing rates of physical inactivity have become one of the most important health problems in many countries (Blair, 2009) along with increasing prevalence of non-communicable diseases risk factors (WHO., 2010). This led the UK governments to update guidelines to promote physical activity and reduce sedentary time (Biddle., et al., 2012) according to the Global
Recommendations on Physical Activity for Health of the World Health Organization (WHO, 2010a). The UK government developed guidelines for physical activity including an advanced recommendation for adults to perform at least 150 minutes (2½ hours) of moderate intensity activity in bouts of 10 minutes or more – one way to approach this is to do 30 minutes on at least 5 days a week. Alternatively, the same benefits could be achieved through 75 minutes of vigorous intensity activity spread across the week (Department of Health., 2011b). Additionally, the guidelines for children aged between 5 and 18 years recommended to perform moderate to vigorous intensity physical activity for at least 60 minutes and up to several hours every day and to incorporate vigorous intensity activities, including those that strengthen muscle and bone, on at least three days a week (Department of Health., 2011a).

A major priority in public health is increasing physical activity levels in children and adolescents (Trost et al., 2003), since physical activity is considered as very important for keeping children in good health, as well as reducing children’s levels of adiposity and future disease (Dugdill et al., 2007). It is also evident that the role of parents is an important factor in improving physical activity and reducing obesity in their children (Lindsay et al., 2006), since parents playing with their children encourages them to become more physically active (Strauss et al., 2001). In addition, most of the studies pertaining to physical activity in children found a positive correlation between the levels of physical activity in children and in their parents (Trost et al., 2003). Moreover, research has reported that children whose parents have high physical activity levels are more active than children whose parents are less active (Xu, et al., 2010).

British society is 92% white British (English 83.6% Scottish 8.6% Welsh 4.9% Northern Irish 2.9%). Therefore, approximately 8% of the UK population are from ethnic minority groups and these groups are principally divided into two main groups, Black (Black
Africans and Black Asians) and South Asian (Szczepura et al., 2004). These populations can be further categorised as 2% Black, 1.8% Indian, 1.3% Pakistani, 1.2% mixed race and 1.6% other (The Information Centre, England Statistics, 2008).

Obesity prevalence is highest among women in Black African (38%), Pakistani (28%) and Black Caribbean (32%) groups, with the lowest prevalence of obesity found in Chinese women (8%) (The Information Centre, England Statistics, 2008). Weight management problems may be caused by certain lifestyle factors; for example it is known that during adolescence there is a decline in physical activity levels in black girls, where the proportion of physical inactivity in leisure time reached 56% versus 31% in white girls (Kimm et al., 2002). Furthermore in Arabic communities there is a high prevalence of physical inactivity among Saudi males, with 81% of adult males not engaging in any type of physical activity (Al-Refaee et al., 2001), and 20% of males walking for less than 10 minutes a day (Al-Hazzaa., 2006). In addition, men born in Arabic-speaking countries have a significantly greater odds ratio for a sedentary leisure-time physical activity pattern than in all other countries. Moreover the odds ratio of completely sedentary leisure–time physical activity status in men born in Arabic-speaking countries is significantly higher compared to men born in Northern Europe (Lindstro et al., 2001).

Szczepura (2004) suggests that these differences in activity levels relate to a greater number of barriers that impede minority groups to access public health services. These may include cultural and social differences and consequently these factors provide complex problems for policy decision makers. Several population surveys indicate that there are some factors which play an important role in influencing physical activity behaviours such as socioeconomic status, gender, and ethnicity as well as, personality and social factors (Allender et al., 2006). Furthermore, studies indicated that there is higher prevalence of physical activity in some segments of ethnic minority groups such as in
people from low-income households and in people with low levels of education (Hillsdon et al., 2005).

Rai et al. (1997) reported that there are two kinds of barriers to becoming more physically active; firstly practical barriers which involved lack of time, work-related issues, socioeconomic factors and barriers related to access to facilities. Other barriers to the adoption of a more physically active lifestyle relate to attitudes and beliefs surrounding the perceived importance (or lack) of physical activity, particularly in older individuals.

During the past two decades there has been an interest in psychological research, particularly in self-perceptions (Eklund et al. 2013). The relationship between physical self-perceptions and physical activity is well established, with several studies showing those who have the most positive physical self-perceptions are the most physically active (e.g. Fox, 1990; Fox and Corbin, 1989; Fox, 1997; Eklund, 2013; Fairclough, and Ridgers, 2010). Crocker et al. (2003) and Evdoxia et al. (2013) demonstrated that there is a relationship between physical activity and physical self-worth, and Findlay and Bowker (2009) showed the levels of sport participation among adolescents is positively linked with physical self-esteem. Similarly, it has been shown that adolescent students with high skills and motivation levels have higher self-esteem and engaged in more physical activity than students with low skills and motivation levels (Kalaja et al., 2010), and athletic girls have more positive self-esteem development than other girls (Richman and Shaffer, 2000). Moreno and Cervelló (2005) found individuals who participate in physical activity less than once a week had lower scores in Sport Competence, Physical Condition and Physical Strength than those individuals who participate in physical activity three or more times a week.
The Physical Self-Perception Profile (PSPP) questionnaire was designed by Fox and Corbin (1989) to identify cognitive aspects of the proficiency perceived by an individual in various physical sub-domains. The validity of the PSPP questionnaire has been demonstrated with a range of populations including athletes or non-athletes (Asçi, 2003), males and females (Hayes et al., 1999), adolescent girls (Kowalski et al., 2003) and different cultures (Malete et al., 2008; Moreno et al., 2007). However, no known research has explored the physical self-perceptions or the physical activity levels of Arabic males living in the UK.

3.2 Aim of Study

The aim of this study was to examine the patterns of physical activity and physical self-perceptions among males of Arabic origin that now live in Liverpool. A secondary aim was to investigate any differences in Arabic males from different generations of the same family (sons, fathers).

3.3 Methods and Procedures

3.3.1 Participants

The participants in the study were from an Arabic community in Liverpool. One hundred and twenty-seven community-dwelling people, including sixty two men and sixty five boys (see Table 3.1) volunteered to participate in this study. The procedures undertaken in the study were approved by the local institution Ethics committee and informed consent was obtained from each participant or their guardian.

Participants in the study originated from several Arab countries as follows: - 17 Libyan men and 15 Libyan boys, 12 Yemeni men and 17 Yemeni boys, 11 Saudi men and 7 Saudi
boys, 10 Iraqi men and 13 Iraqi boys, 7 Egyptian men and 10 Egyptian boys, 2 Algerian men 2 Syrian men 2 Syrian boy 1 Sudanese man and 1 Sudanese boys.

**Table 3.1. Senior family member characteristics**

<table>
<thead>
<tr>
<th>The country of origin</th>
<th>Sample (n)</th>
<th>Full time student</th>
<th>Employed</th>
<th>Unemployed</th>
<th>Less than 5 years in the UK</th>
<th>Less than 10 years in the UK</th>
<th>More than 10 years in the UK</th>
<th>Born in the UK</th>
</tr>
</thead>
<tbody>
<tr>
<td>Libyan</td>
<td>17</td>
<td>58.8%</td>
<td>29.4%</td>
<td>11.7%</td>
<td>17.6%</td>
<td>64.7%</td>
<td>17.6%</td>
<td>-</td>
</tr>
<tr>
<td>Yemeni</td>
<td>12</td>
<td>16.6%</td>
<td>66.6%</td>
<td>16.6%</td>
<td>8.3%</td>
<td>25%</td>
<td>25%</td>
<td>41.6%</td>
</tr>
<tr>
<td>Saudi</td>
<td>11</td>
<td>72.72%</td>
<td>-</td>
<td>27.27%</td>
<td>18.18%</td>
<td>81.81%</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Iraqi</td>
<td>10</td>
<td>20%</td>
<td>60%</td>
<td>20%</td>
<td>-</td>
<td>30%</td>
<td>70%</td>
<td>-</td>
</tr>
<tr>
<td>Egyptian</td>
<td>7</td>
<td>-</td>
<td>71.4%</td>
<td>28.5%</td>
<td>-</td>
<td>71.4%</td>
<td>28.5%</td>
<td>-</td>
</tr>
<tr>
<td>Algerian</td>
<td>2</td>
<td>-</td>
<td>100%</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>100%</td>
<td>-</td>
</tr>
<tr>
<td>Syrian</td>
<td>2</td>
<td>50%</td>
<td>50%</td>
<td>-</td>
<td>100%</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Sudanese</td>
<td>1</td>
<td>-</td>
<td>100%</td>
<td>-</td>
<td>100%</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
</tbody>
</table>

**Table 3.2. Baseline characteristics**

<table>
<thead>
<tr>
<th></th>
<th>Men (n = 62)</th>
<th>Boys (n = 65)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age (years)</td>
<td>33.4 ± 9.6</td>
<td>12.4 ± 1.9</td>
</tr>
<tr>
<td>Height (M)</td>
<td>175.7 ± 6.5</td>
<td>138.3 ± 6.1</td>
</tr>
<tr>
<td>Body Mass (Kg)</td>
<td>79.8 ± 12.1</td>
<td>40.4 ± 4.9</td>
</tr>
<tr>
<td>Body mass index</td>
<td>25.8 ± 3.4</td>
<td>20.8 ± 1.3</td>
</tr>
</tbody>
</table>

**3.3.2 Experimental design**

The present study was designed to provide an estimate of the patterns of physical activity of Arabic males using accelerometry data that was collected between November 2009 to January 2010, and required participants to wear an ActiGraph accelerometer on the right hip during waking hours for a period of seven consecutive days. This included five
weekdays and two weekend days. In addition, men completed the Physical Self-Perception Profile questionnaire (PSPP) (Fox and Corbin, 1989) and boys completed the Children and Youth Physical Self-Perception Profile (CY-PSPP) (Eklund et al., 1997).

### 3.3.3 Measurement

**Physical activity levels**

This measurement method provides information on the frequency, amount, and duration of activities performed. Accelerometry used widely to assess physical activity in adults and children for males and females and also it considered an objective measure to assess physical activity (Robertson et al., 2010). Physical activity levels were measured using accelerometry. Accelerometer data were obtained and downloaded using the Actigraph Monitoring System (Model GT1M), a widely used objective measure of physical activity in adults and children. Participants wore an ActiGraph Accelerometer for seven consecutive days which included five weekdays and two weekend days (Barwais et al., 2013).

Data files were converted into Excel by (MAHUffe) software ([www.mrc-epid.cam.ac.uk](http://www.mrc-epid.cam.ac.uk)). The device was programmed to record data with an epoch of 60 seconds. Data was also categorised for daytime and night-time activity patterns as well as activity intensity. Accelerometers were programmed before placement on a standard belt worn around each participant’s hip. All participants were familiarised with the use of the monitors and instructed how to proceed around bathing or shower times.

Full data were obtained for one hundred and twenty-seven participants including sixty-two men and sixty-five boys. A minimum of 8 hours per day (i.e. 24 hours over the 7 days) of activity monitoring between the hours of 8:00 am and 10:00 pm was the prerequisite for
inclusion in the analysis as a valid measurement day. A mean duration of monitoring >9 hours per day was achieved.

The time spent being sedentary or performing physical activity was determined based on Freedson et al. (1989) cut points for men and the Ekelund et al. (2004) cut points for children and the performing physical activity was categorised into light, moderate and moderate-to-vigorous physical activity (MVPA).

**Physical self-perceptions**

Before commencing the accelerometer measurement, physical self-perceptions were measured using the PSPP for adults, and the CY-PSPP for children. The PSPP (Fox and Corbin, 1989) is a self-report questionnaire measuring how individuals evaluate themselves physically. The content and factor structure and internal reliability of the PSPP were originally validated and are well supported in the literature (Fox, 1990; Fox & Corbin, 1989; Sonstroem, Speliotis, & Fava, 1992). Cross-cultural validity has also been supported among a wide range of samples in other countries such as in Turkey (Zorba et al., 1999), Sweden (Hagger and Lindwall, 2004), Portugal and Spain (Hagger et al., 2009), Estonia (Haggeret al., 2011), Canada (Crocker, et al., 2000) and in the UK (Hagger et al., 2005; Page et al., 1993).

The PSPP includes 30 forced-choice items in which participants are asked which of two agreements they agree with most. The PSPP contains five subscales, evaluating sports competence (SC), physical condition (PC), body attractiveness (BA), physical strength (PS) and physical self-worth (PSW).

The CY-PSPP is a modified version of the PSPP for children and youths (CY-PSPP), measuring the same five subscales. The CY-PSPP has been validated with children at age
of 9 years or younger (Welk et al., 1997), and also Welk and Eklund (2005) and Whitehead (1995) found it an appropriate tool for the adolescent population aged 12 and above, and the factorial validity and internal reliability of the CY-PSPP scales were well supported with the original version of the PSPP (Gregory et al., 1997).

Both the PSPP and the CY-PSPP questionnaires were translated into Arabic by the researcher and then the Arabic version was checked by a legal translator in Libya. A back translation was undertaken by a Libyan Doctor living in the UK who speaks English natively.

### 3.3.4 Data Analysis

Accelerometry data were converted into categories of physical activity for both week and weekend days. The categories reported were time spent performing sedentary, light, and moderate to vigorous physical activity (MVPA), and these were determined using Freedson et al. (1989) cut points for men and Ekelund et al. (2004) cut points for children. The total number of steps taken each day were also recorded and averaged for week vs. weekend days.

### 3.3.5 Statistical analysis

Accelerometry data were downloaded and subsequently analysed using the statistical package for the social sciences (SPSS) version 17. Differences in physical activity categories between week vs weekend and between men vs. boys were compared using independent t tests. Descriptive statistics (mean and standard deviation) were calculated for each scale of the PSPP and CY-PSPP questionnaires.
3.4 Results

3.4.1 Accelerometry Data

Figure 3.1 presents the time spent by men in performing the three intensities of physical activity (light, moderate and MVPA). The number of minutes spent for light physical activity during the week days (37.92±21.43 mins) was significantly higher than the time spent during the weekend days (25.75±19.69 mins) ($P < 0.001$).

![Figure 3.1. Time spent in different physical activity intensities on week and weekend days by adult men](image)

***$P < 0.001$; significant difference between categories

There was no significant difference between week and weekend days for time spent in moderate physical activity (28.83±10.74 for week days vs. 25.04±8.35 for weekend days, $P= 0.27$) or for time spent in MVPA physical activity (32.83 ±12.64 for week days vs. 29.05±9.95 for weekend days, $P= 0.24$).
Figure 3.2. Steps per day for week and weekend days by adult men

***P<0.001; significant difference between levels

Figure 3.2 presents the number of steps taken by men during the week and weekend days. It is evident that the steps per day during the week (7673±3045) was significantly greater than the steps per day during the weekend (6233±3174) (P=0.001).

Figure 3.3. The time spent in different physical activity intensities on week and weekend days by boys

***P<0.001; significant difference between categories
Figure 3.3 shows that boys spent significantly more time performing light physical activity during week days (144.06±51.75) than during weekend days (125.90±62.51) \( (P=0.002) \). Similarly, boys performed significantly higher levels of moderate activity on week days than weekend days (43.87±18.05 vs. 33.08±22.79, \( p<0.001 \)), and again, more time in MVPA on week days than on week end days (50.27±19.07 vs. 38.38±25.77, \( p<0.001 \)).

![Figure 3.3. Steps per day on weekdays and weekend days by boys](image)

**Figure 3.4. Steps per day on weekdays and weekend days by boys**

***\( p<0.001 \); significant difference between levels

From figure 3.4 it is also evident that when physical activity is quantified as step count, the boys recorded 24% less steps on the weekend than in the week (7151±3362 vs 9360±2743 steps per day, \( p<0.001 \)).

### 3.4.2 PSPP data

**Table 3.3. Men PSPP scores**

<table>
<thead>
<tr>
<th>PSPP Subscales</th>
<th>Sports Competence</th>
<th>Physical Condition</th>
<th>Body Attractiveness</th>
<th>Physical Strength</th>
<th>Physical Self-worth</th>
</tr>
</thead>
<tbody>
<tr>
<td>Men</td>
<td>SC</td>
<td>PC</td>
<td>BA</td>
<td>PS</td>
<td>PSW</td>
</tr>
<tr>
<td>Mean, SD</td>
<td>16.17±2.98</td>
<td>15.23±3.47</td>
<td>17.65±2.84</td>
<td>16.14±3.38</td>
<td>17.66±2.99</td>
</tr>
</tbody>
</table>
Table 3.2 shows the mean scores on each of the five PSPP subscales for the men. Whilst all scores were higher than the median of possible scores (median=15) the highest scores were in body attractiveness (17.65±2.84) and physical self-worth (17.66±2.99). Lowest scores were recorded for perception of individuals’ physical condition (15.23±3.47).

Table 3.4. Boys PSPP scores

<table>
<thead>
<tr>
<th>Subscales</th>
<th>Boys</th>
<th>Sports Competence SC</th>
<th>Physical Condition PC</th>
<th>Body Attractiveness BA</th>
<th>Physical Strength PS</th>
<th>Physical Self-worth PSW</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mean.SD</td>
<td>16.34±3.16</td>
<td>14.92±3.63</td>
<td>17.71±2.93</td>
<td>16.00±3.37</td>
<td>17.81±2.94</td>
<td></td>
</tr>
</tbody>
</table>

Table 3.3 presents the mean scores on each of the five PSPP subscales for the boys. All scores were higher than the median of possible scores (median = 15) except the physical condition subscale (14.92±3.63). As with the men, the highest scores were in body attractiveness (17.71±2.93) and physical self-worth (17.81±2.94).

3.5 Discussion

The aim of this study was to examine patterns of physical activity and physical self-perceptions among Arabic males (fathers, sons and grandfathers) living in Liverpool. The findings indicated that both men and boys were more active during weekdays than weekend days, and that boys were more active than men when performing light, moderate and MVPA intensity patterns of activity. This finding is similar to that of other studies (Bundred et a., 2001; Reilly et al., 1999; Dorosty et al., 1999; Young et al. 2009) that are reflective of the more sedentary lifestyle that is attained after adolescence. Overall, activity performed in the light intensity category was the most prevalent compared with moderate and MVPA intensity. In association with this data, participants also completed the greatest number of steps on days during the week.
The major new finding of this study was that Arabic males were performing a cumulative total of approximately 190 (29 min x 5 + 25 min x 2) minutes per week in moderately intense physical activity, which is in excess of the recommended weekly guideline of 150 min per week. By comparison, their sons were performing, on average 47 (50 min x 5 + 38 x 2) minutes of MVPA on a daily basis. Taken together these data indicate that Arabic men in this sample exceeded the current UK guidelines for recommended physical activity, whereas the boys did not reach the levels of MVPA required, despite being more active than their fathers overall. These data were averaged from the total sample of 62 men and 65 boys and indicate that, at least for the Arabic men, a high proportion of this population meet UK physical activity guidelines. This compares with the recent physical activity assessment of total UK population by Townsend et al., (2012a) which reported that in 2008 only 39% of males in England met current guidelines, with these percentages being 45% in Scotland, 37% in Wales and 33% in Northern Ireland. In the context of physical activity levels in the population under investigation here, this is encouraging, particularly since the data of Townsend was collected by self-report, which has historically been shown to overestimate activity levels. Furthermore, although the boys failed to meet recommendations for MVPA, the data presented is an average of 65 individuals and therefore compares favourably with the 32% of UK male children that meet current recommendations (Townsend et al., 2012a), albeit perhaps somewhat behind that report for Scottish Boys at 75%.

From a psychological perspective, the results indicate that the level of body attractiveness and physical self-worth as assessed by the PSPP questionnaire were higher than the other subscales in both men and boys, and that values generated across all subscales were similar between the age-groups. This is the first known study to use the PSPP with an Arabic male population. The fact that the PSPP and CY-PSPP scores were higher than the median of
possible scores (except the physical condition in the boys) indicated Arabic males have a
generally positive physical self worth. The same pattern of results was observed for men
and boys, with the most positive scores on the body attractiveness and physical self-worth
scales, and the lowest scores on the physical condition scale.

3.5.1 Accelerometry

![Bar chart with data]

Figure 3.5 Number of Minutes Spent per Day in each activity category during
Weekdays

Figure 3.5 highlights the observation that the most prevalent activity pattern for boys was
light activity which presented as 144.06 minutes per day. Time spent in moderate and
MVPA was 43.87 minutes and 50.27 respectively. The pattern of physical activity for
men was similar to that of boys with the greatest number of minutes spent in light (134.36
min) compared with moderate (28.83min) and MPVA (32.83min) but values were lower
when comparing these divergent patterns. These differences between men and boys likely
reflect the sedentary nature of adult males occupations as compared with the more active
lifestyle that attendance at school determines for children. For example, school life is
punctuated with periods of intense activity at playtimes and when playing games etc. Although it is evident that children are more active than their fathers, these data indicate that these numbers of minutes do not meet the minimum required minutes for the MVPA level daily of 60 minutes (Department of Health, 2011a; Riddoch et al., 2009; Strong et al., 2005; Jago et al., 2005; Department of Health., 2004; Jago et al., 2004; Biddle et al., 1998), and somewhat less than the average amount of moderate to vigorous physical activity (MVPA) of 85 minutes per day for white British boys reported in the Joint Health Surveys Unit (2010).

The differences in men vs boy activity levels in this study suggests that age determines the degree of variance in the different categories of activities (Bundred et a., 2001; Reilly et al., 1999; Dorosty et al., 1999; Young et al., 2009). Perhaps this is due to the cycle of weekly commitments and obligations of parents versus children. The children spend the most of their time at school which includes an hour during the recess doing different types of physical activities. In addition, boys attend physical education classes as part of the curriculum which leads to a promotion of physical activities. This is the opposite of parents, who are engaged in sedentary occupations or full time students at university. From these activity profiles it is evident that adults spent much time in the sitting position, particularly given that they recorded less than 8000 steps per day on average.
Figure 3.6 Number of Minutes Spent per Day in each physical activity category during Weekend days for adult men and boys

The pattern of activity found during the week and the differences presented between men and boys are replicated at the weekend, with the exception that values in all categories and for both groups are lower. These findings are in agreement with those of Riddoch et al. (2009) who found that younger people are more active than those older ones, especially males (Bundred et al., 2001; Reilly et al., 1999; Dorosty et al., 1999 Bagos, 2005). Again, it is important to mention that the required/recommended number of minutes of 60 minutes for the MVPA level was not reached on weekend days for boys. Although the Arabic men in this study failed to reach 30 minutes of moderate activity every day of the week, the cumulative total (accelerometry was collected every day for 7 consecutive days) of 190 minutes was in excess of current guidelines for moderate activity.
Figure 3.7 Number of Steps

It is evident for Figure 3.7 that boys take significantly ($P<0.05$) more steps per day during the weekdays than in the weekend days. Similarly, men tend to have the same pattern where they make more steps in the weekdays. In comparison as indicated by steps per day, boys are much more active on a daily basis than men, independent of day of the week. These findings are consistent with previous study of Young *et al.* (2009) which reported that participants were more active during the weekdays than on weekends. These differences obviously relate to activity focused around occupation or school-based activity (Bagos, 2005; Bundred *et al.*, 2001; Reilly *et al.*, 1999).
3.5.2 PSPP data

Table 3.5. Mean PSPP score

<table>
<thead>
<tr>
<th>PSPP Subscale</th>
<th>Sports Competence SC</th>
<th>Physical Condition PC</th>
<th>Body Attractiveness BA</th>
<th>Physical Strength PS</th>
<th>Physical Self-worth PSW</th>
</tr>
</thead>
<tbody>
<tr>
<td>Men</td>
<td>Mean.SD</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>16.17±2.98</td>
<td>15.23±3.47</td>
<td>17.65±2.84</td>
<td>16.14±3.38</td>
<td>17.66±2.99</td>
</tr>
<tr>
<td>Fox (1990)</td>
<td>Mean.SD</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>17.06±3.93</td>
<td>16.63±3.93</td>
<td>15.23±3.56</td>
<td>15.66±3.50</td>
<td>17.05±3.55</td>
</tr>
<tr>
<td>Robert et al.</td>
<td>Mean.SD</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2005)</td>
<td>15.60±4.28</td>
<td>16.36±4.06</td>
<td>15.86±3.86</td>
<td>16.15±3.77</td>
<td>16.89±3.66</td>
</tr>
</tbody>
</table>

Whilst the PSPP scores give us some indication of the areas Arabic males feel most positive about themselves, the lack of a control group does not allow us to compare the scores with other ethnic groups. We can however gain some indication by comparing our results with other published studies. Table 3.5 shows the men’s PSPP scores from our sample compared to two studies from Fox (1990) and Robert et al. (2005). It can be seen that the body attractiveness and physical self-worth scores for the Arabic males are higher than Fox and Robert’s samples, and the physical condition score is lower. The reason for this difference is not clear, but it is possibly related to cultural differences. In this context, Heine et al., (2002) emphasised that people from different cultures use different standards when evaluating themselves. Research has also indicated that body image in PSPP have been associated with different cultural expectations of males and with respect to body ideals (Schwalbe & Staples, 1991; Lindwall, 2004).

Table 3.6. Boys PSPP score

<table>
<thead>
<tr>
<th>CY-PSPP Subscale</th>
<th>Sports Competence SC</th>
<th>Physical Condition PC</th>
<th>Body Attractiveness BA</th>
<th>Physical Strength PS</th>
<th>Physical Self-worth PSW</th>
</tr>
</thead>
<tbody>
<tr>
<td>Boys</td>
<td>Mean.SD</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>16.34±3.16</td>
<td>14.92±3.63</td>
<td>17.71±2.93</td>
<td>16.00±3.37</td>
<td>17.81±2.94</td>
</tr>
<tr>
<td>White-British sample</td>
<td>18.7±4.1</td>
<td>18.7±3.7</td>
<td>17.4±4.5</td>
<td>17.4±4.2</td>
<td>18.3±3.9</td>
</tr>
<tr>
<td>Foweather (2010)</td>
<td>Mean.SD</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>18.7±3.7</td>
<td>17.4±4.5</td>
<td>17.4±4.2</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

53
The same pattern of scores was observed for the boys, with the most positive scores on the body attractiveness and physical self-worth subscales. When compared with a sample of White-British (Foweather, 2010) boys, the differences in body attractiveness and physical self-worth were not as pronounced as for the men, but the physical condition and sports competence scores were considerably lower than those of the White-British boys (Foweather, 2010).

Although the study examined the patterns of physical activity among Arabic males, the study is limited, since it did not make a comparison between this sample and other White-British sample and other ethnic minority groups in physical activity levels. In addition, the study was completed during the school term only and also during the winter months which may have caused a lower pattern of activity to be reported compared with the summer. Moreover, this study used the Freedson (1989) cut points that were formulated on a different population sample from the Arabic culture. In the future, it would be interesting to understand the reasons why people have low physical activity levels and therefore it is suggested that such a group be interviewed regarding their issues which impeded adopting healthy lifestyles.

3.6 Conclusion

The present study contributed to the dearth of physical activity studies for Arabic people whether residing in the UK or even in the Arabic world. Results indicated that Arabic men resident in the UK met the physical activity guidelines whereas their offspring did not. Results also highlighted that both men and boys were more active during weekdays than at the weekend, and moreover boys have higher physical activity levels than men. In addition time spent performing light level of physical activity was greater than the Moderate and MVPA intensities in men and in boys. Furthermore, the results revealed that the level of
Body attractiveness and physical self-worth in PSPP questionnaire were higher than the other subscales in men and similarly in YC-PSPP questionnaire which showed greater level of body attractiveness and physical self-worth in the boys in this sample compared with previous studies. The low levels of physical activity of Arabic male boys suggest that strategic interventions are needed with a view to provide opportunities to become more physically active in their daily routines and lifestyles.
Chapter 4

Study 2

Barriers and motivations to adoption of physical activity in Arabic males
4.1 Introduction

The level of physical activity of UK citizens is considered to be very low. In Scotland government statistics indicate that around 68% of females and 57% of males are considered inactive in terms of meeting the national physical activity recommendations (NHS, 2011). By comparison, in Wales 36% of males and about 23% of females are physically active (NHS, 2011). In the UK the most active population are those people living in England, where approximately 39% of males and 29% of females are regularly active enough to meet government recommendations of 150 minutes of moderate physical activity per week (Department of Health, 2011b). This compares to 32% of men and 21% of women in 1997. When these figures are translated into younger populations (NHS, 2008) only 32% of boys and 24% of girls (aged from 2 to 15 years) in England meet the guidelines of 60 minutes or more of physical activity on each day of the week (Department of Health, 2011b).

According to the Health Survey for England (Health Survey for England, 2012) levels of physical activity differ between different ethnic groups:

- With the exception of Irish and Caribbean populations, physical activity levels of ethnic minority groups are lower than white British UK residents.
- There was an increase in physical activity from 1999 to 2004 in Bangladeshi and Chinese populations but a reduction in Pakistani males’ physical activity levels.
- Apart from the Irish population, ethnic minority groups show less interest in walking 30 minutes every day than the UK white British population.
- Asian populations were observed not to be following the daily physical activity recommendations (NHS, 2004).
Furthermore, from a population perspective, the levels of physical activity in the Arabic countries are considered very low. In Eastern Mediterranean regions and the Arabic world more than half of adults aged 40-69 are overweight or obese (WHO, 2003; Maddah et al., 2009; Sadeghipour et al., 2010; Maddah et al., 2010; Esteghamati et al., 2010; Naghmeh-Zahra et al., 2011). While obesity is more prevalent among women, overweight is more common among men (Department of Health, 2011b). According to the available data in the Arab world, the prevalence of obesity in Arabic countries is about 50-70% in women and 40-60% in men (Musaiger et al., 2011). For the years 2003-2007, The WHO reported a particularly high prevalence of both obesity and inactivity in gulf state nations. Table 4.1 presents this data as a percentage of the population, with these examples being particularly high.

Table 4.1. Percentage of Overweight/Obesity and Physical inactivity in several Arab countries.

<table>
<thead>
<tr>
<th>Country</th>
<th>Overweight/Obesity (%)</th>
<th>Physical inactivity (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Egypt</td>
<td>66.0</td>
<td>70.4</td>
</tr>
<tr>
<td>Iraq</td>
<td>66.9</td>
<td>56.7</td>
</tr>
<tr>
<td>Jordan</td>
<td>57.0</td>
<td>51.0</td>
</tr>
<tr>
<td>Kuwait</td>
<td>75.4</td>
<td>64.7</td>
</tr>
<tr>
<td>Lebanon</td>
<td>60.5</td>
<td>68.7</td>
</tr>
<tr>
<td>Oman</td>
<td>62.6</td>
<td>69.9</td>
</tr>
<tr>
<td>Saudi Arabia</td>
<td>68.8</td>
<td>67.7</td>
</tr>
<tr>
<td>Sudan</td>
<td>53.9</td>
<td>86.8</td>
</tr>
<tr>
<td>Syria</td>
<td>56.3</td>
<td>31.2</td>
</tr>
</tbody>
</table>

(WHO EMRO, 2007).
Childhood obesity in the Arabian Gulf States is an increasing health problem and it is related positively to adult obesity (Mouss, 1994). For example, around 21% of young people in Egypt are at risk of becoming overweight, and about 42% of school students in the United Arab Emirates spend more than 3 hours playing video games and watching television every day (WHO, 2010b).

There are a number of social and cultural barriers to adopting and maintaining a physically active lifestyle in the UK (Department of Health, 2005). The most commonly cited barriers are a lack of time (Brophy et al., 2011), not having the necessary equipment and facilities, not having the requisite skills, and a lack of interest and motivation for physical activity (National Obesity Forum, 2006). In ethnic minorities in the UK these barriers are compounded by a lack of awareness of physical activity programs. There are also feelings of being overly exposed in the environment which may lead people from ethnic minorities to feel as if they do not fit in and therefore worry about their security. Furthermore there are cultural issues relating to dress codes in females and privacy issues for both males and females (Balarajan and Soni, 1995; Sharif., 2011). Brophy et al. (2011) indicated that boys also experienced barriers to physical activity such as limited opportunities to participate in physical activity as a result of the requirement of supervision by their parents and teachers and also poorness of access to facilities. To date no known studies have investigated the barriers to physical activity experienced specifically by Arabic males.

This study builds on the results of study one that highlighted that Arabic men are sufficiently active whereas their sons’ do not meet the recommendations for MVPA. Here focus group interviews are used to explore both the barriers and facilitators to physical activity among Arabic males living in the UK. The findings from study one pointed out that both men and boys were more active during weekdays than weekend days, and boys
took part in more light, moderate and moderate-to-vigorous physical activity than men. This reflects the more sedentary lifestyle that is attained after adolescence. Generally, activity performed in the light intensity category was the most prevalent compared with moderate and MVPA intensity. From a psychological perspective, the results indicated that perceived Body Attractiveness and Physical Self-worth were higher than perceived Sports Competence, Physical Condition and Physical Strength in both men and boys. Whilst these results provide information about physical activity levels and physical self-perceptions of Arabic males, quantitative methodology provides no insight into the mechanisms underpinning these observations. For example, what factors facilitate physical activity participation, what barriers to participation exist, and what role physical factors play in the self-perceptions of Arabic males. Therefore, this second study uses qualitative methodology to obtain in-depth information about the physical activity experiences of Arabic males, and to provide context to the study one results (Bernard et al., 2010). Focus groups are used as they allow data to be collected from a large number of participants in a short space of time, and allow for debate between individuals to promote the introduction of new ideas and create relationships between the information provided by each participant (Liamputtong, 2011).

4.2 Aim of study

The aim of this study was therefore to examine barriers and motivations to physical activity in Arabic males (fathers, sons) living in a large metropolitan, multicultural city in the North West of England.
4.3 Method

4.3.1 Participants

As is common in qualitative studies contributors were selected purposively instead of at random (Miles and Huberman, 1994; Patton, 2002). Purposive sampling was used to recruit men and boys of Arabic origin living in Liverpool. All study one participants were contacted via phone or face to face to invite them to take part in the focus groups. Prior to participation, written consent and assent was obtained from both men and boys. The study was approved by Liverpool John Moores University Research Ethics Committee. 16 Arabic men (aged 27 to 52 years, BIM 28.4) and 12 Arabic boys (aged 7-16 years, BMI 18.4) agreed to take part (see Tables 4.2 and 4.3).

<table>
<thead>
<tr>
<th>The country of origin</th>
<th>BMI</th>
<th>Postcode</th>
<th>Employment Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Libyan</td>
<td>29.7</td>
<td>L7</td>
<td>Full time student</td>
</tr>
<tr>
<td>Yamani</td>
<td>24.7</td>
<td>L7</td>
<td>Full time employee</td>
</tr>
<tr>
<td>Yamani</td>
<td>30</td>
<td>L7</td>
<td>Full time employee</td>
</tr>
<tr>
<td>Iraqi</td>
<td>26.6</td>
<td>L6</td>
<td>Full time student</td>
</tr>
<tr>
<td>Libyan</td>
<td>24.1</td>
<td>L7</td>
<td>Full time student</td>
</tr>
<tr>
<td>Saudi</td>
<td>38.2</td>
<td>L7</td>
<td>Full time student</td>
</tr>
<tr>
<td>Libyan</td>
<td>26.2</td>
<td>L6</td>
<td>Unemployed</td>
</tr>
<tr>
<td>Yamani</td>
<td>22.8</td>
<td>L8</td>
<td>Full time employee</td>
</tr>
<tr>
<td>Egyptian</td>
<td>31.1</td>
<td>L8</td>
<td>Full time employee</td>
</tr>
<tr>
<td>Saudi</td>
<td>27</td>
<td>L6</td>
<td>Unemployed</td>
</tr>
<tr>
<td>Iraqi</td>
<td>27.7</td>
<td>L7</td>
<td>Full time employee</td>
</tr>
<tr>
<td>Yamani</td>
<td>31.9</td>
<td>L7</td>
<td>Full time employee</td>
</tr>
<tr>
<td>Libyan</td>
<td>29.3</td>
<td>L8</td>
<td>Unemployed</td>
</tr>
<tr>
<td>Saudi</td>
<td>28</td>
<td>L8</td>
<td>Full time student</td>
</tr>
<tr>
<td>Yamani</td>
<td>26.7</td>
<td>L7</td>
<td>Full time student</td>
</tr>
<tr>
<td>Yamani</td>
<td>29.7</td>
<td>L7</td>
<td>Full time employee</td>
</tr>
</tbody>
</table>
### Table 4.3. Participants’ characteristics (Boys)

<table>
<thead>
<tr>
<th></th>
<th>The country of origin</th>
<th>BMI</th>
<th>Postcode</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Libyan</td>
<td>21.8</td>
<td>L7</td>
</tr>
<tr>
<td>2</td>
<td>Libyan</td>
<td>15.3</td>
<td>L7</td>
</tr>
<tr>
<td>3</td>
<td>Yamani</td>
<td>16.9</td>
<td>L7</td>
</tr>
<tr>
<td>4</td>
<td>Saudi</td>
<td>17.3</td>
<td>L8</td>
</tr>
<tr>
<td>5</td>
<td>Libyan</td>
<td>18.1</td>
<td>L6</td>
</tr>
<tr>
<td>6</td>
<td>Yamani</td>
<td>18.8</td>
<td>L7</td>
</tr>
<tr>
<td>7</td>
<td>Libyan</td>
<td>17.3</td>
<td>L8</td>
</tr>
<tr>
<td>8</td>
<td>Saudi</td>
<td>13.6</td>
<td>L6</td>
</tr>
<tr>
<td>9</td>
<td>Iraqi</td>
<td>16.9</td>
<td>L6</td>
</tr>
<tr>
<td>10</td>
<td>Yamani</td>
<td>21.4</td>
<td>L7</td>
</tr>
<tr>
<td>11</td>
<td>Saudi</td>
<td>21.8</td>
<td>L7</td>
</tr>
<tr>
<td>12</td>
<td>Yamani</td>
<td>21.2</td>
<td>L7</td>
</tr>
</tbody>
</table>

#### 4.3.2 Procedures

The study followed an interpretative approach whereby the aim was to elicit and represent the realities of the participant experience of physical activity. This approach acknowledges the existence and importance of multiple realities and also allows for an understanding of the role of the researcher in the research process. The study findings and their interpretation are reflected through the life experience of the researcher who is an Arabic male (Libyan) of age 40 years, married with 2 young children, studying in full-time tertiary education and having lived in the North West of England for 3 years. The researcher lived and socialised in the same community from which the sample was recruited. Such immersion in the culture of interest enhances the trustworthiness of the findings (Miles & Huberman, 1994).
Seven focus groups were conducted (4 men’s groups, 3 boys’ groups). Focus groups took place either in the Tom Reilly Building or the Aldham Robarts Library at Liverpool John Moores University, or at the Libyan School, Liverpool. Men’s focus groups lasted between 75 and 90 minutes and boy’s focus groups lasted between 40 and 60 minutes.

The focus groups followed a semi-structured format, using open-ended questions. Questions covered seven main topics: Terminology & Knowledge of Physical activity (TKPA), Physical Activity and Sedentary Behaviour (PASB), Positives of Physical Activity (PPA), Barriers to Physical Activity (BPA), Motivations for Sedentary Behaviour (MSB), Importance of PSPP Components (IPSPPC) and Family Factors (FF) for both men and boys. A series of questions were prepared in advance to cover these topics. Example questions included: “What do you understand by the terms physical activity, exercise and sport?” (TKPA theme); “What types of physical activity do you engage in?” (PASB theme); “What benefits of physical activity are you aware of?” (PPA); “What prevents you from being physically active?” (BPA theme) “What sedentary pastimes do you engage in?” (MPI) “How important are the dimensions of physical conditioning, sports competence, body attractiveness and strength to you?” (IPSPPC); “Do you engage in physical activity as a family?” (FF). A full interview schedule is provided in appendix 1.

All focus group sessions were conducted in Arabic and recorded using a digital recorder. The interviews were then transcribed verbatim, and subsequently translated into English. At the end of each conversation participants were asked whether there were any other issues they would like to add.

4.3.3 Data analysis and presentation

Qualitative research methods were used in order to interrogate participants’ personal experiences (Kesby, 2007; Twum-Danso, 2009). This approach allows for an
understanding of participants’ views relating to the reality of their lifestyle (Twum-Danso, 2009). A content analysis approach was used to analyse the data. Content analysis has been defined as a systematic, replicable technique that can compress many words of text into a small amount of content categories based on explicit rules of coding (Weber, 1990). The analysis contained deductive and inductive components to identify the barriers and motivations of physical activity. Transcriptions of the interviews were reviewed several times and line by line in an effort to identify the themes that unfolded from the data. In the initial deductive analysis, words or sentences that related to each focus group topic were coded into themes, then subthemes created based on the emerging data. Coding decisions were informed by the frequency of responses and relevance to the aim of the study. Themes were then transferred to a visual representation using a pen profile technique (Knowles et al., 2009; Ridgers et al., 2012).

The pen profile is a way of providing a composite of main themes of the interviews and displays the data using verbatim quotes and frequency counts (Ridgers et al., 2012). Pen profiles are considered a suitable method for representing findings from large qualitative datasets through a visual representation of composite themes (Mackintosh et al., 2011).

4.3.4 Establishing Trustworthiness

This study used a framework proposed and developed by Lincoln and Guba (1985) as well as cited in Parahoo (2006) which seeks to evaluate the trustworthiness of research work conducted within an interpretive paradigm in qualitative research. This includes credibility, transferability, dependability, conformability.

In order to assist trustworthiness of the findings several precautions were taken:

a) Participants were given full information about the study and the aim of the interview in order to help them focus on the themes of interest;
b) All participants were guaranteed full anonymity and informed that all information obtained through the interview would be treated with confidentiality with the purpose of encouraging them to provide related information comfortably and confidently;

c) The interview schedule was designed as far as possible to ensure questions were clear to participants. Where participants did not understand a question they were encouraged to ask for clarification. It was made clear that if participants did not wish to answer a question they were not required to do so.

To improve the credibility of the research results triangulation was employed for the content analysis, which involved discussion of the results with an expert in pen profiles and with the second supervisor to reach agreement on theme categorisation. Rich description of the data and clear reporting of the research procedures has been employed to enhance the transferability of the study.

4.4 Results and Discussion

The aim of this study was to examine barriers and motivations to physical activity in Arabic males (fathers and sons) living in Liverpool. Data from the mens’ and boys’ focus groups will be presented for each of the seven general dimension themes and discussed in the context of previous literature. The seven general dimension themes are Terminology and Knowledge of Physical activity (TKPA), Physical Activity and Sedentary Behaviour (PASB), Positives of Physical Activity (PPA), Barriers to Physical Activity (BPA), Motivations for Physical Inactivity (MPI), Importance of PSPP Components (IPSPPC) and Family Factors (FF). All themes are presented for both men and boys, with the exception of the PPA theme which is presented for men only. This is due to the fact boys’ responses to the PPA questions overlapped considerably with other general or sub dimension themes.
and there was insufficient data to constitute a unique PPA theme for the boys. Boys’
responses were therefore distributed amongst other relevant themes.

The pen profile technique is used to present the data from the focus groups. Each diagram
shows a hierarchical thematic structure. The general dimension theme is coloured in blue
and refers to the main interview topic under investigation. Branched off this theme are the
higher order themes. The higher order themes are in green and illustrate the main ideas
that emerged for each of the general dimension themes. Branched off the higher order
themes are the raw data themes, and branched off these are the sub-raw data themes.
Each pen profile provides verbatim quotes as examples of participant responses (shown in
brackets) and a frequency count that refers to the number of participants who commented
on each theme (shown as “n= “).
Pen profile (men, boys).

4.4.1 Terminology and Knowledge of Physical activity (TKPA)

Figure 4.1 The general dimension theme of Terminology and Knowledge (TK) for men.

- A general dimension theme.
- A higher order theme.
- A row data theme.
- A sub row data them.

n= digit number of participants agree with this idea.
Figure 4.2 The general dimension theme of Terminology and Knowledge (TK) for boys.

Figure 4.1 (men) and Figure 4.2 (boys) show the themes that emerged relating to knowledge and terminology of physical activity. It was apparent that the concept of physical activity is interpreted in many different ways. Both men and boys were most likely to view physical activity as a type of sport, although others gave a broader interpretation focused on lifestyle activities. The differences in the participants’ responses can be explained by Rimmer (2006) who indicated that physical activity is something that is unique to each individual, and which is influenced by several environmental factors. Therefore suggesting individual responses varied according to personal interests and capabilities.

The fact that most respondents believed physical activity involves various sports is in agreement with Eiosdottir et al. (2008) who found in their study that trends in physical activity have been constantly moving towards a greater emphasis on sports. However, a
broader definition of physical activity is used in the Department of Health (2011a) guidelines, which state that physical activity is “any bodily movement produced by skeletal muscles that requires energy expenditure” (p.54). Some of the men and boys demonstrated an understanding in line with this broader view. For example, by suggesting physical activity is “Anything that I do during the day” (2 men) and “the sport and movement and walking I mean that when the person is moving and walking” (3 boys). This description of physical activity is supported by that of Reilly et al. (1997), who mentioned that physical activities include those actions and movements a person performs in between the intervals of rest and/or sleep.

A couple of participants focussed on the functionality of physical activity. For example, one man commented “physical activity contributes to fat burning” and one boy related physical activity to its role as part of a general healthy lifestyle (“how do you eat healthy food”). Physical activity and healthy eating have a combined role to play in balancing energy expenditure with energy intake (Hardman & Stensel, 2009), and failure to perform enough physical activity could lead to diseases such as obesity, cancer and cardiovascular disease. Consequently, being active is very important (Hardman & Stensel, 2009).

Some of the men felt physical activity is something that differs between men and women e.g. “Sports for men are different from women”. Despite gender differences being mentioned by only two participants, this is not a new viewpoint. Research suggests there are major differences between men and women in terms of physical activity (Chipperfield et al., 2008). For instance, Azevedo et al. (2007) found that men and women have different levels of physical activity, wherein males were more physically active than females. Physiological differences that affect physical activity have also been observed, where it has been found that women have a higher degree of fat in their body, but studies
suggest that metabolism of fat may be faster among males (Blaak, 2001). Boys made no comments about gender differences in physical activity.
Overeating after doing physical activity n=2 {I am doing a good physical activity, but I compensate that by overeating}

Working in a restaurant and doing a hard work n=3 {I carry boxes inside the shop and move around}

Satisfied with my physical activity level n=5

Unsatisfied with my physical activity level n=11

Walking rather than public transportation n=3 {although I have a bus ticket, I prefer walking}

Sitting for a long time at the computer n=9 {because I am too busy for my study most of my time on the computer}

Play football in weekends n=5 {I play football every Sunday}

Doing a type of sport n=5

Helping my wife to do her work at home n=2 {I like to help my wife in the kitchen and the work of house}

Physical activity & Sedentary Behaviour (PASB)

Sit for a long time watching TV n=9 {I like watching TV programs or movies and that’s leads me to eat more}

Physical activity level in the UK and your country

Use PlayStation n=3 {I enjoy a lot playing playstation with my children and my wife and we spend a long time in that}

Going to the Gym n=1 {I like to go to the Gym because the availability of facilities}

I was more active in my country n=9 {I had a lot of free time that I used to go to the gym and play football}

I was less active in my country n=7 {I had many social engagements and I did not have a free time but here I am able to manage my}

Helping my wife to do her work at home n=2 {I like to help my wife in the kitchen and the work of house}

Physical activity level in the UK and your country

Figure 4.3 The general dimension theme of Physical Activity and Sedentary Behaviour (PASB) for men.
Figure 4.4 The general dimension theme of Physical Activity and Sedentary Behaviour
4.4.2 Physical Activity and Sedentary Behaviour (PASB)

In addition to the general dimension of terminology and knowledge of physical activity, another significant general dimension shown was the relationship between physical activity and sedentary behaviour. Under this general dimension theme, three higher order themes were figured out from the responses of the participants (three for men and three for boys). These higher order themes in men and boys were satisfied with physical activity, unsatisfied with activity level and physical activity level in the UK and country of origin.

The majority of men expressed that they found their physical activity levels insufficient. This was seen as a result of the fact they were sitting for long periods of time watching TV ($n=9$), using computers ($n=9$) and using the PlayStation ($n=3$). Manson et al. (2004) also found the most common reasons why men tend to be physically inactive are the over-use of computers and television. Furthermore, Hu et al. (2001) found that television viewing, as a sedentary behaviour, is among the greatest risk factors for the development of obesity and cardiovascular diseases. In this context there is an overlap between sedentary behaviour and physical inactivity. Although “sedentary behaviour” and “physical inactivity” are often used interchangeably in the literature, it is important to note the difference between these two concepts (DOH, 2010). Physical inactivity indicates an insufficient level of physical activity (which might, for example, be defined as not meeting recommended guidelines). Sedentary behaviour on the other hand “is not simply a lack of physical activity but is a cluster of individual behaviours where sitting or lying is the dominant mode of posture and energy expenditure is very low.” (DOH, 2011, p.10). Therefore, it is possible for people to engage in excessive sedentary behaviour but also be physically active (e.g. the office worker who sits at their desk all day then goes to the gym every evening). In the current study however, participants who were dissatisfied with their physical activity levels related this to the fact they engaged in many sedentary behaviours.
This could be explained by the fact television viewing promotes and actually encourages inactivity and sitting for long periods of time, reducing the person’s physical activity, and thus depriving the person of a good opportunity to engage with physical activities that will be beneficial for their health.

While most boys were satisfied with their physical activity levels, some reported doing less than they would like due to spending a lot of time playing video games ($n=3$) focusing on study ($n=2$) or being injured ($n=1$). Video games are attractive to children, who have been found to concentrate on these games to the extent that they forget to perform physical activity (Smith & Biddle, 2008).

In the Arabic culture there is a large focus on academic study, with parents putting pressures on their children to complete homework and attend additional classes (Garrett, 2006). For some children this includes going to the Arabic school over the weekends; thus again limiting the available time for physical activity.

There was some consensus in views between parents and their sons who were not satisfied with their physical activity levels and the reasons behind it, for example, sitting for long periods in front of the TV, and this may be caused by the reflection of the fathers’ behaviour on their sons. The participants who were satisfied with their physical activity levels took part in a variety of activities. For the men these included active transport ($n=3$), active jobs ($n=3$), housework ($n=2$) and going to the gym ($n=1$). These responses coincided with the findings of Lakka et al. (1992) as the activities that people most often perform to keep themselves physically active.

However, although five respondents expressed that they had enough physical activity, two of them felt the positive effects of physical activity may be negated by an increase in
energy consumption after doing physical activity “I am doing a good physical activity, but I compensate that by over-eating”. Consequently, this brings to light the fact that physical activity in itself could not guarantee that health and lifestyle-related disease prevention. Care and attention must also be given to the person’s diet and habits. Nevertheless, physical activity does have numerous benefits, especially in maintaining health (Peterson et al. 2006). Most of the boys in the study were satisfied with their levels of physical activity, citing active transport ($n=1$) and sport ($n=7$) as their main means of being active.

Another theme that arose during the focus groups concerned how participants perceived their physical activity levels when in the UK compared with their physical activity levels when in their country of origin. While the majority of boys reported being more physically active in the UK, men’s responses were mixed. A slightly greater number of men articulated that they were more physically active in their countries ($n=9$), as compared to those who said that they were less active in their countries ($n=7$). It is possible this reflects a difference in the way Arabic males living in the UK deal with the British lifestyle. For example, some participants were able to take advantage of the facilities available in the UK to be more physically active such as going to the gyms available in many areas of Liverpool. Additionally the green areas such as public parks provide a good opportunity to walk around or engage in physical activity, as well as large shopping centres that promote walking. Some participants described being unable to manage their time when they were in their Arabic countries due to social commitments (which would be less while living in the UK). Furthermore, the cost of owning a car in the UK and the difficulty of getting a full UK driving license led most Arabic males to use public transport, which in turn encouraged them to walk to bus stops and to reach their destinations. Even those who had a car preferring to walk to the city centre rather than drive, due to the lack of free car parks.
Many participants who were more physically active in their countries put this down to lack of time during their life in the UK (particularly for the full time students) while several participants expressed their resentment with the weather, which they saw as a barrier to physical activity.

Although the difference between the participants whom were more physically active in their countries and the other participants was not considerable numerically, it reflects a difference in the way Arabic males living in the UK deal with the British lifestyle. This could be due to the diversity of Arabic countries from which the participants had moved, where cultural, environmental and other factors might affect the way men adapt to the British culture.

Most of the boys in the study expressed that the environment in the UK enabled them to be more physically active compared to living in their countries of origin. For example, they reported having a good opportunity to perform diverse types of physical activity during sport education lessons *(In my country I don’t do too much physical activity during sport education lesson like what I do here)* (n=9). Conversely, the boys who said that they were more active in their countries gave reasons that they could not go out to play with the English boys because their parents were afraid problems might occur with them (e.g. “Because my parents are afraid of problems with other English boys and youths; they are prevent me from going out and playing with them”). These types of parental perceptions can prevent children from taking part in physical activity (Carver et al. 2010).
Figure 4.5 The general dimension theme of Positives of Physical Activity (PPA) for men.
4.4.3 Positives of Physical Activity (PPA, men only)

The positives of physical activity theme revealed two higher order themes: benefits of participating in physical activity, and facilitators for participating in physical activity. These two main positives of physical activity were discussed by Van et al. (2005) as significant aspects of physical activity, who mentioned that when used properly physical activity brings with it a lot of benefits and is facilitated by numerous purposes and values.

Participants described five benefits of physical activity, the most common of which was a feeling of greater health (n=10). One participant said that when he performs a physical activity, he “felt that he was in a good health”. This feeling of health and wellness is indeed one of the benefits most associated with physical activity. Numerous studies, including those of Warburton et al. (2006) and Yang et al. (2010) have found that physical activity significantly benefits health, particularly in terms of musculoskeletal strengthening and prevention of illnesses.

In addition to physical health, the respondents reported a greater sense of energy or vitality, as reflected by the response that “they felt that they were more active and able to do anything”. This greater sense of vitality was also observed by Myers et al. (1999) when they examined individuals engaging in physical activity.

A few participants linked their physical activity to mental health (n=3). Studies have shown that physical activity can be beneficial for mental health through several proposed mechanisms, such as the release of hormones and other chemicals in the brain (Hamer et al., 2009).
When asked their reasons for participating in physical activity, participants described religion and enjoyment to be important factors and of these two, the respondents most commonly cited religion as their main facilitator for physical activity ($n=16$). This finding is comparable to that of Shuval et al. (2008), who found that religion was one of the greatest facilitators for physical activity among Arabic populations, for the reason that the scriptures and teachings of Islam encourage physical activity as part of the Muslim male lifestyle. Moreover, eight of the participants articulated that they were enjoying walking and going out with their families. This enjoyment aspect of physical activity was explored by Trost et al. (2011) wherein they found that the physical activity of adults greatly influences the activity of their children, and exercises can provide a way for social interaction.
Figure 4.6 The general dimension theme of the Barriers to PA (BPA) for men.
Figure 4.7 The general dimension theme of the Barriers to PA (BPA) for boys.
4.4.4 Barriers to Physical Activity (BPA)

The respondents revealed that there were several barriers to physical activity. For the men these included lack of time, health condition, psychological state, socio-economic situation, and inappropriate weather conditions. From the responses, it was seen that the most common barrier for physical activity was the respondents’ lack of time \((n=13)\). Perceived reasons for lacking time included caring for children or family \((n=4)\), studying \((n=9)\), working \((n=4)\) and lack of transport meaning it took too much time to reach gym facilities \((n=12)\).

Lack of time is the most common reported barrier to physical activity (Ayotte et al., 2010; Moore et al., 2010). According to Moore et al. (2010), lack of time is the most common factor among students (due to studying pressures) and married individuals (due to caring for their family). This is because studying may need much of the student’s time, and caring for a family could also be demanding, especially when study or work is coupled with the need to care for a family. This is consistent with Ayotte et al. (2010) who explored the different barriers to physical activity among adults and found that adults’ busy lifestyle is one of the major causes for decreased physical activities, wherein some adults perceive that they do not have enough time to exercise or to perform a type of physical activity.

The weather was considered a key barrier to physical activity for both men \((n=5)\) and boys\((n=4)\) “When the weather is bad I cannot get out doing any type of physical activity or playing football particularly in weekends” This is probably caused by the heavy rainfall in most days of the year in addition to low temperatures in winter. The shortness of the daytime over the period of the year also minimises the amount of available time to play
outside the home. Therefore this combination of environmental factors constitutes a strong barrier to physical activity outside the home. This notion is supported by Chan and Ryan (2009) who found that rain, wind, low temperature and snow could affect individuals and decrease their opportunity to perform outdoor activities.

Participants also articulated that health conditions or injury prevented them from being physically active. For example, one man said that his health prevents him doing physical activity, while another participant said “because I have chronic injury for years I cannot engage in sporting activity”. One of the boys described how having an injury in his leg was preventing him from doing any type of physical activity. These problems in health conditions, especially injuries, were among the findings of the study conducted by Reichert et al. (2007) which highlighted health as a common barrier to physical activity.

Another barrier to physical activity reported by men was socio-cultural factors. Twelve respondents expressed that their social status among their families motivates them to be physically inactive: “because I am always busy (study / work) I prefer to spend the rest of the day with the family”. Additionally, data from the men’s focus groups suggested cultural perceptions of what constitutes relaxation may act as a barrier to physical activity. Nine respondents noted how their free time is for relaxing rather than undertaking physical activity: “because it is my leisure time I do not want to do any type of work”. Where individuals of British origin might view physical activities as a means of relaxing (Gies, 2006), the Arabic male participants in this study perceived activities requiring physical exertion as “work”. It was clear that most respondents chose to be inactive during their leisure time because of the idea that leisure time should be used for leisure not for doing any physical activity, Cho (2004) noted similar themes in a study on the relationship between motivation and physical inactivity level conducted in South Korea.
A couple of men commented how their socio-economic status affects their physical activity wherein it limits their resources for paying for a membership in a gym, or for buying sport equipment. Lack of money was also observed as a barrier to physical activity in Reichert et al.’s (2007) study.

Several men described how their psychological state affects their physical activity. For example, one participant stated “I do not feel any desire to engage in any physical activity when my mood is bad”. Psychological state usually involves the individual’s mood and thinking, and such a negative style of thinking may be one of the most influential factors that could prevent him to carry out a physical activity consequently, low mood might prevent people from being physically active, but if they are physically active this can improve their mood. Reichert et al. (2007) also observed that “dislike of exercising” could serve as a barrier to physical activity.

Further barriers reported by the boys related to competitiveness e.g. “jealousy” and “showing off”. Boys expressed that when playing out with white British boys they felt jealous of the white boys’ sports performance and described how white British boys liked showing off. Due to the chaos that resulted, the boys felt their parents were reluctant to let them play outside and participate in physical activities shared with white British boys.

These “showing off” behaviours may be linked to the nature of this age particularly in boys, where they were on the threshold of adolescence. This is consistent with the findings of Christopher et al. (2003) who pointed out that children like to show off the things that they are able to do well. Other studies have also reported parents as a barrier to children’s physical activity (e.g. Cincinnati Children's Hospital Medical Centre., 2012).
Boys also felt the amount of time they spent in sedentary pastimes (e.g. video games) prevented them from being physically active, wherein the respondents mostly just watched TV, or played videogames or any other sedentary behaviour. This finding that engagement in sedentary behaviours prevents children from being physically active has been noted in several other studies (Robinson and Kestnbaum, 1999; Rae, 2007). Research by the Centres for Disease Control CDC (2005) discovered several factors such as weather, injury, video games, peer influence acted as motivators for physical inactivity and suggested some recommendations; for example, during bad weather, the children can engage in going upstairs, including indoor activities such as fixed cycling among others (Rae, 2007).
Figure 4.8 The General dimension theme of the Motivations for Sedentary Behaviour (MSB) for men.
Figure 4.9 The General dimension theme of the Motivations for Sedentary Behaviour (MSB) for boys.
4.4.5 Motivations for Sedentary Behaviour (MSB)

As well as barriers to physical activity, participants in this study reported many factors that motivate them to engage in sedentary behaviours, in turn taking time away from being physically active. Under this general dimension theme, four higher order themes were found in men ("I like this type of activity, distraction, easy option and It’s who I am") and five higher order themes in boys (Peers, easy option, I like this type of activity, The weather, and (Social networking)).

There was a link between culture and technology reflected in the boys’ theme of social networking (n=4), in that their culture motivates them to create a strong social relationships and social networking provides them an opportunity through which to do this, leading to boys spending excessive hours sitting at the computer. “Communicate via Facebook and Twitter easier than get out and meet friends and allows to meet a lot of friends at the same time, that’s makes me stay for a long time on the computer without doing any physical activity” This is supported by data from the Media and Communication in Australian Families Series (2008) which pointed out that 64% of young people’s total internet use was in social networking and other related online communication.

Both men and boys reported engaging in sedentary behaviours because they were viewed as the easy option ("It’s very easy to do any type of activity does not need any physical effort and does not makes me tired"), perhaps reflecting the men’s cultural perceptions that physical exertion equates to “work” (see BPA theme, section 4.4.4). Boys noted how this impacted on their physical activity levels “I like to use the computer (videogame, iPhone) which leads me stay on it for too long time”. Similarly, men reported enjoyment of sedentary behaviours leading them to choose these over physical activities (n=11) “I like to do this type of activity since I was young”. 
Additionally, several men preferred engaging in sedentary behaviours such as watching the TV or sitting in front of the computer or use playstation and they viewed that physical inactivity serves as a distraction for them, such as when they want to get away from their daily routine (n=7) “When I watch a movie that helps me to change my mood and stay away from the monotony” or when they want to get away from the pressure of studying (n=3) “to stay away from the pressure of the study I prefer to play any videogame like play station”.

For the boys, their peers acted as motivators to sedentary behaviour as they wanted to take part in whatever their friends were doing: (n=3) “When my friends go to play X-Box or something like that cannot be stay by alone, so, I go to play any video games”. Boys also described being addicted to electronic games and/or TV (n=9), and enjoying spending time on the internet as they found it useful (n=7). As noted in the previous section, boys felt spending too long in these sedentary behaviours also prevented them engaging in physical activity, as generally time will be spent on video games or watching TV at the expense of physical activity (as observed elsewhere by Yeora Kim (2003)). Boys who spent more time on the Internet also spent more time with other existing media, which included television and video games. However, although Yeora Kim (2003) emphasized that boys spent a significant time in front of the computer’s screen using the internet, the findings also indicated that the amount of internet use was not related to the time spent with organised physical activities that involving competitiveness like physical education classes or belonging to sports clubs, whilst it was positively associated with performing their own free physical activity.
Figure 4.10 The general dimension theme of Importance of PSPP Components (IPSPPC) for men.
Figure 4.11 The general dimension theme of Importance of PSPP Components (IPSPPC) for boys.
4.4.6 Importance of PSPP Components (IPSPPC)

Another aspect investigated in this study was the importance of the components of the Physical Self-Perception Profile or PSPP in men and boys. Under this general dimension theme, four higher order themes were shown (physical conditioning, sport competence, bodily attractiveness and strength). Of the PSPP components, the men were most likely to perceive sport competence to be important \((n = 16)\) whilst the boys were most likely to report strength as an important factor \((n = 12)\). Strength was the second most common factor reported as important in men \((n = 13)\), followed by bodily attractiveness \((n = 9)\). Interestingly, however, bodily attractiveness was not perceived to be important by boys.

**Sport Competence**

According to the men respondents, sport competence involved the person’s incentive to continue doing physical activity, and they also agreed that physical activity shows individual differences among people in terms of sports or athletic competence. This response is one that coincides with the findings of Hagger et al. (2005) that physical activity is important in maintaining individual skills and competence especially in sports. Some boys believed that sport competence was not useful, as they preferred to engage in a variety of activities to gain a variety of skills. Beaulieu (2008) however noted that physical activity enhances sport competence among children.

**Strength**

It is not surprising that participants described strength as an important factor, since one of the main reasons that the participants pursued physical activity is its health benefit, wherein in the earlier responses in the PPA general dimension theme (section 4.4.3) the participants said that one of the benefits they get from physical activity is that they feel healthier. Boys considered strength a very important issue \((n = 12)\) and they attributed that
to the needs during their daily life \( n=8 \) “we need it in our life for example if we need to move anything from a room to another room”, and to its importance in sport where they believed that the strength is very important in ball games and other sports \( n=4 \) “the strength is very important in all of sports for example we need it in basketball and football and all of other games”. Perhaps boys of this age have the impulse to use strength in all spheres of their life, and also this was reflected directly in their point of view about the practice of sport, where the use of strength is more visible as strength increases more dramatically in boys than girls (Purcell, 2005).

**Bodily Attractiveness**

In terms of bodily attractiveness, it has been noted that most individuals perform physical activity for bodily attractiveness reasons, along with physical health reasons (Wyse et al. 1995). Whilst bodily attractiveness was important to the men in this study, a number of participants also expressed a level of body dissatisfaction, with comments such as “the biggest problem in the shape of my body is the abdominal area” or “there is a correlation between bodily attractiveness and clothes; I have a problem in my body when buying clothes”. Such negative physical self-perceptions for something that is deemed important could have a knock-on effect for self-esteem and confidence (Thøgersen et al., 2007).

Half of boys however \( n=6 \) perceived bodily attractiveness as not important: “It is not important that to get an attractive body to be attractive person because you can be a unique person by your intelligence and way of thinking”. Other boys believed this component related to girls not to boys “It is important for girls not for boy”. This could be a reflection of the boys’ age in wishing to distinguish themselves from the female sex as they begin growing into men (Blakemore and Choudhury, 2006).
**Physical conditioning**

With regard to the physical conditioning aspect of the PSPP, the men revealed that physical activity helps them to be in good physical condition. Whereas this conditioning then allows them to perform needed responsibilities of life \((n=6)\), as well as to do things at a faster rate \((n=5)\). In addition, the participants also revealed that being in high level physical condition helps them to be more confident in themselves (Thøgersen *et al.* 2007). A number of boys linked the physical conditioning with doing sports, while just two participants associated that with the ideal weight.

Some of the boys struggled to understand the questions related to the PSPP components, possibly because of the young age of some participants. It has been noted elsewhere that further research is needed on the lack of understanding of physical activity among young ages (Genevieve *et al.* 2008; Emma *et al.* 2010).

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**Figure 4.12** The general dimension theme of the Family Factors (FF) for men.
Figure 4.13 The general dimension theme of the Family Factors (FF) for boys.
4.4.7 Family Factors (FF)

The final general dimension theme explored in this study involved the family factors that affected the individual’s physical activity level. Under this theme, three higher order themes emerged for the men (working at home, walking, culture) and two for the boys (not active as a family, positive parents’ role model/active family).

The men revealed that the most important family factor that affects physical activity was walking. Under this higher order theme, there were eight participants expressed that they enjoyed walking and going out with their family, especially in going to shopping centres and parks “I enjoy a lot going out with my family to the city centre and shopping, walking because I don’t have a car”. These findings were consistent with the previous study of Xu et al. (2010) which found that social activities help individuals to remain physically active.

Trainers and nutritionists recommend that social support from partners or family members can help individuals lead an active lifestyle (Jackson, 2004). Similarly, the examples set by parents in their physical activity behaviour could influence children in their later years in life (Dagkas et al., 2007). Boys also presented the same idea as a positive side of the family factor when they expressed that “Sometimes we get out walking as a family for shopping or to the city centre even if the bus is available”.

Another family component raised by the men surrounded cultural issues, whereby six participants responded that they do not have a culture of doing physical activities with their family as a social activity “I do not have this culture”. Yet at the same time, participants provided examples of how culture can positively influence physical activity levels. For example, participants expressed that the family promotes physical activity especially when the males work at home to help their wives in their house chores “I like to help my wife to
do her work at home and I think I’m physically activate through that”. This observation is supported by Shuval et al. (2008), who noted culture can play an important positive role for promoting physical activity.

Although in some respects boys considered their parents as a barrier to physical activity (see section 4.4.4), boys also felt their parents played a positive role in encouraging them to be more physically active. The most frequently reported example of this positive influence was through the Nintendo Wii, whereby 3 boys expressed that the Nintendo Wii allows family members to be physically active together “if you buy Nintendo wii you can play with all the family members”. Boys perceived many benefits of this activity, including the opportunity to exert physical effort, a lower risk of injury and less likelihood of leading to embarrassment.

Boys considered the Nintendo Wii as an opportunity to perform physical activity as a family at home for those unable to get outdoors for any reason (Hansen and Sanders 2010). Furthermore, boys felt the Nintendo Wii encouraged players to be physically active and they emphasised that it is not just a regular computer game. However, even though the participants had a positive view of the Nintendo Wii as an active video game, they did not consider it required the same physical effort as real physical activity or sport, as has been noted elsewhere (Milenkovic and Timmons, 2013). Importantly, as long as the participant was able to do some physical activity at his house with his family at least he would reduce his sedentary behaviour even if he did not increase his physical activity. Therefore, these types of exergaming consoles can be considered an active game and an opportunity for families to have fun and be physically active together. Furthermore, this family atmosphere of playing together may encourage the family members to play a long time without feeling bored or tired. When using the Nintendo Wii at home with the family,
boys indicated that they did not feel shy. There was no embarrassment by playing with their family members even if they did not win the game or made a mistake, as family members did not mock them. These findings highlight the family contribution to children’s physical activity and reinforce the responsibility of parents to create an enabling environment to allow children to be physically active (Beaulieu, 2008).

4.5 Limitations

The current study has a number of limitations. Firstly, some men feel embarrassed when they speak with other people about some sensitive issues related to their family. Some participants had moved to the UK as students and others had moved with their wives who came to study, therefore the participants views may have been influenced by their different levels of education, social situations, duty and responsibilities.

Similarly, this study included some participants who came to the UK for a few years to get a scientific degree, and other participants who were already residents and were accustomed to the British way of life. Thirdly, the young age of some of the boys made it difficult for them to understand some questions and some boys were shy to express their ideas in the presence other boys.

4.6 Conclusion

This research aimed to examine barriers and motivations to adoption of physical activity in Arabic males (fathers, sons) living in the Liverpool. While the study’s sample was not large enough to represent all of the Arabic communities in the UK, it did reflect the cultural and social factors behind the low levels of physical activity that were found in study one. The findings of the study indicated that physical activity plays a significant role
in the individual’s health and that Arabic males perceive several benefits of physical activity for the individual, such as self-confidence, mental health and improved physical condition. However, the responses given by participants showed that the understanding of physical activity varied from one individual to another. For example, some respondents viewed physical activity as a type of sport, while others believed it is a factor that leads to energy expenditure and burning of fats or calories. Additionally, the results revealed that respondents also differed in their satisfaction with their physical activity levels, wherein some were satisfied, while others were unsatisfied.

Participants cited several barriers to physical activity. The first resulted from the diversity of understanding of the physical activity concept, which demonstrated the lack of knowledge of physical activity guidelines. Although participants had highlighted some information related to physical activity, most of this information represented their perceptions and bore little resemblance to the information in the current UK physical activity guidelines (Department of Health, 2011a). Lack of time was an important factor that prevented participants engaging in physical activity as a result of their academic or occupational or family commitments. Furthermore, socio-cultural barriers were evident, such as a lack of culture for being physically active as a family (males and females), particularly in public places. There were also factors that motivated Arabic males to engage in sedentary behaviours, such as opting for activities perceived to be easy, seeking distraction by watching a movie or by using the playstation.

In contrast, this study noted several facilitators that encouraged participants to be physically active. These included religion and enjoyment. Boys expressed that Nintendo Wii allows the family members to be physically active together, particularly for those unable to get outdoors or at times when the weather is bad or there are a lack of opportunities for outdoor physical activity. Boys perceived family participation to be a key
factor, highlighting the role the family can play in promoting child physical activity. This is achievable by creating a suitable surrounding for the child to take part in physical activity that is decidedly crucial to the health of the child (Rae, 2007). To improve children’s understanding of physical activity as a lifestyle concept, it is recommended physical activity is incorporated into the school curriculum. This way, children’s knowledge of physical activity will grow as they develop (Claude and Peter, 2007).

The study explains the relationship between physical activity and sedentary behaviours. The research noted that modern lifestyles have made life easier, but have made it more challenging to be physically active. The inventions and innovations have produced items in the world market that makes life more comfortable by presenting the tools that save energy. Such gadgets (such as remote controls even) allow children to watch TV without moving. Sedentary lifestyles coupled with a lack of physical activity is a common cause of preventable deaths resulting from diseases such as diabetes (Beaglehole et al. 2011).

In summary, Arabic males’ low physical activity levels need strategic interventions in an effort to provide opportunities to be physically active during their lifestyle through taking into account the barriers and facilitators for being physically active.
Chapter 5

Study 3

Intervention study
5.1 Introduction

In the present age, sedentary behaviour is increasing among people of all ages and genders in the UK and in the ethnic minorities in the UK in particular (Gorely et al., 2009). In study 1 of this thesis, time spent in sedentary activities were high in Arabic males, but overall they amassed enough time in moderate intensity physical activity to reach the threshold of current recommendations (i.e. greater than 150 minutes moderate physical activity per week). In contrast, the child participants engaged in MVPA on average for only 50 minutes per weekday and 38 minutes per weekend day, thus not meeting the recommended 60 minutes of MVPA per day (Department of Health, 2011b).

Study 2 went on to explore the barriers that Arabic males perceived to be the cause of these low levels of physical activity, and the motivators that would help them become more physically active. Findings showed that Arabic males have a diverse understanding of the physical activity concept and the majority of respondents were unsatisfied with their physical activity levels. It was apparent that participants had little understanding of what constitutes physical activity, and how much physical activity they should do. In addition, the findings pointed out that religion is perceived to be an important component that could encourage Arabic males to take care of their bodies and build physical strength through being physically active. As God said in the holy book to the Muslims (the Koran) “eat and drink, but be not prodigal. Allah loveth not the prodigals (verse 31) "كُلُوا وَاشْرَبُوا وَلاَ تُسْرِفُوا “Additionally the Prophet Muhammad said: “The strong believer is better and more beloved to Allah than the weak believer’” (Sura Al-A’raf, verse 19). The qualitative research in study 2 suggested that the most common barrier to physical activity was lack of time as most participants were full-time students/employees and preferred to stay home with their
other family members in their free time. The UK weather and the amount of time spent in sedentary behaviours were further perceived barriers to physical activity.

The Chief Medical Officers in the UK released a set of new physical activity guidelines in July 2011 (Department of Health, 2011b). For children aged 5-18 years, the guidelines recommended involvement in physical activity with moderate to vigorous intensity for at least an hour a day, involvement in activities of vigorous intensity for at least three days a week, and minimization of sedentary time in general (Griffiths et al., 2012). Nevertheless, “there are no guidelines as to what might be considered ‘acceptable’ or ‘excessive’ sedentary behaviour when assessed by accelerometers across the day” (Biddle et al., 2010, p. 22).

Through the family, children receive a good opportunity to perform several different types of physical activity (Brustad, 2010). Parents play an important role for establishing a family climate to allow the children to do a type/level of physical activity (Welk et al., 2004). More recently, in a review of the correlates of physical activity in youth, Biddle et al. (2011) concluded that parents impact significantly on physical activity levels in children however, it is not necessarily that active parents have active children. Seabra et al. (2008) also found the family to be a strong influential factor in determining physical activity levels i.e. individuals tend to be affected by the other family members in terms of physical activity levels and lifestyle.

A number of research papers have suggested family-based interventions are successful for changing health behaviour (Kahn et al., 2002). For example, O’Dwyer et al. (2012) found a family-focused intervention was effective in increasing physical activity and reducing sedentary time in pre-school children. Similarly Todd et al. (2008) found family-based
intervention successfully contributed to reducing electronic media use among boys aged 8–11 and decreasing body fat gain.

Despite increasing evidence that physical activity levels are low among Arabic males, there are no reported intervention studies targeting this population specifically. Therefore this study will draw on the reported barriers and motivators from study 2 to design and pilot a physical activity intervention for the Arabic male population. One potential mechanism of interest is exer-gaming technology (e.g. Nintendo Wii / X-box connect) which many of the participants reported to have in their homes. There has been increasing interest in using exer-gaming technology (e.g. Nintendo Wii / X-box connect) to improve physical activity. “The Wii remote uses a three-axis accelerometer to translate body movement into onscreen movement” (Matthew et al., 2011). These systems provide the users with entertaining and distracting games that make them focus on playing the game rather than focusing on any other effects, thus making the exercises more enjoyable and effective (Lange et al., 2009). Furthermore, exer-games are capable of providing light-to-moderate physical activity (Peng et al., 2012) and have potential to overcome the obstacles that prevent individuals to be physically active (Graf, 2009; Kirkwood, 2011) such as lack of time, bad weather and unsafe neighbourhood surroundings. However, simply acquiring or owning an exer-game does not automatically lead to an increase in physical activity (Baranowski et al., 2012). Therefore whilst exer-games have potential to overcome many of the barriers identified in study 2, additional intervention strategies may be required to promote an accompanying increase in physical activity behaviour.

Based on the results of studies one and two Arabic men living in the UK have physical activity levels that are acceptable, but their children do not reach recommended levels of physical activity, and experience many barriers to being active. The main factor was the lack of time because both men and boys wanted to stay home with their family members
after a busy day. Additionally, cultural factors encouraged them to stay home and be physically inactive. For example, Arabic males considered activities requiring any physical effort (e.g. gardening, walking) as “work” and therefore something that should not be done during leisure hours. Furthermore, study two demonstrated that Arabic males have a poor understanding of physical activity and how much they should do. It is important that any intervention for the Arabic male population takes into account their barriers and focuses on feasible physical activities that can be done at home with their families, such as exer-gaming.

This study will therefore pilot a brief intervention aimed at educating Arabic fathers and sons about PA, to investigate whether an increased understanding of PA motivates them to be more physically active, potentially through increasing use of their exer-gaming console at home.

5.2 Aim of Study

This study will investigate whether a brief intervention designed to increase knowledge of physical activity guidelines impacts on the physical activity levels of Arabic males who have exer-gaming consoles available at home. A secondary aim was to explore positives and negatives of exer-game usage. It was hypothesized that educating participants about physical activity guidelines would encourage them to improve their physical activity levels.
5.3 Methods and Procedures

5.3.1 Participants

The participants were 20 father and son dyads (20 men and 20 boys) from Arabic families who owned an exer-gaming console (Nintendo Wii or Xbox) in their home. Boys were aged between 8 years and 18 years. All participants lived in Liverpool and provided signed written consent prior to participation (consent for children under 16 was provided by their parents).

Families who had participated in studies one or two were asked if they owned an exer-gaming console and – if so – were invited to take part. Those who did not own an exer-gaming console were asked to recommend other Arabic families, who were subsequently invited to take part. If families were interested the researcher organised a meeting with each participant individually to describe the research and to explain the study requirements. The meetings were conducted either at Liverpool John Moores University or at the Al-Rahma Mosque, whichever was most convenient for the participant. Participants received a written information sheet outlining the aims of the study and were asked to sign written consent (adults) and assent (children) for their participation.

Of the dyads who took part, four had already participated in studies 1 and 2, and three had participated in study 2 only. The remaining 13 dyads had participated in neither study 1 nor 2, but were families known to the researcher and who owned an exer-gaming console at home.

All participants were asked to complete a screening questionnaire to collect demographic information, current exer-game usage and knowledge of physical activity guidelines.
5.3.2 Study design

Each father and son dyad was assigned into one of two groups a) Control group (n=10 father-son dyads (10 men, 10 boys) or b) intervention group (n=10 father-son dyads (10 men, 10 boys)).

Figure 5.1 gives a conceptual representation of the data collection process. The intervention group received a brief intervention designed to increase their knowledge of the physical activity guidelines, the control group received no intervention. The physical activity levels of both groups were measured at baseline and then again four weeks later (post-intervention). To explore the impact of the intervention and the positives and negatives of exer-game usage, participants from the intervention group were interviewed during the post-intervention measurement session.
Figure 5.1 Study 3 data collection process
5.4 Intervention

Participants in the intervention group received the physical activity guidelines (PAG, Department of Health, 2011a; see appendices 2 & 3) in order to improve their knowledge of how much PA is recommended for different age groups. The PAG was translated into Arabic and participants received both the translated and the original English versions as well. Each father received factsheet 4 for adults (19-64) and each son received factsheet 3 for children and young people (5-18). Four fathers received the PAG for them and their sons at LJMU, four fathers received it at the Al-Raham mosque, and two fathers at the Saudi school. All fathers and sons received the PAG from the researcher directly, with the exception of three participants who were studying at Liverpool John Moores University and were asked to pass the information onto their sons. All participants were informed about the results of studies 1 and 2 and about the aims of this study. All participants were given a chance to ask questions regarding the whole study or in connection with the intervention, additionally all fathers were given the researcher’s contact details in case of any queries. Participants were not given any other instructions to improve their physical activity except the PAG.

5.4.1 Measures

The physical activity levels of both groups were measured using accelerometry at baseline then again four weeks later. The intervention group also took part in a semi-structured interview at the four-week point.
5.4.2 Physical activity levels (Accelerometry)

Physical activity was measured using accelerometry. Participants wore an ActiGraph Accelerometer (Kuffel et al., 2011) for three consecutive days which included two weekdays and one weekend. Three days was deemed an appropriate period as it was long enough to capture both weekend and weekdays, yet it was not considered too burdensome on participants and was a realistic time to monitor activity levels (Jackson, 2003). Three days has proved an appropriate measurement period elsewhere (Jackson, 2003; JS et al., 2011; O’Dwyer et al., 2012). The monitor was attached securely to the right hip, as previously described in study 1 (see section 3.3.3) and it was set to record in 1 minute epochs. Accelerometry is considered an objective measure and it used widely to assess physical activity in adults and children (Robertson et al., 2010). This measurement method provides information on the amount, frequency and duration of activities performed and also data can be achieved about day-time and night-time activity patterns and activity intensity.

5.4.3 Semi-structured interviews

Participants from the intervention group were invited to attend a semi-structured interview after the four week intervention period. The aim of the interview was to assess whether the PAG intervention encouraged the intervention group to be more physically active, and to explore their views about the intervention. In addition, the interviews explored the positives and negatives of exer-game console usage as a means of being physically active at home. Full interview schedules are provided in appendices 4 (men) and 5 (boys).

Interviews took place at either Liverpool John Moores University or the Saudi School in Liverpool. Interviews were conducted with men and boys separately and lasted
approximately 45 minutes and 30 minutes respectively. Interviews with men were carried out individually, and interviews with boys were carried out in the presence of their fathers. However it was ensured fathers were not seated facing their sons to minimise the effect they might have on the boys’ opinions or point of view, and fathers were asked not to answer questions on their sons’ behalf. To enhance trustworthiness of the findings, participants were given comprehensive information about the study and the purpose of the interview and were assured that both positive and negative views were important. They were guaranteed full anonymity and told they did not have to answer any questions they did not wish to. Boys did not attend the interview with their fathers so as not to be affected by their views.

The interviews were conducted in Arabic and recorded using a digital recorder. They were transcribed verbatim then translated into English. At the end of each conversation participants were asked if there was anything further they would like to comment on. Ethical approval was granted by the Liverpool John Moores University research ethics committee.

5.4.4 Data Analysis

Full data were obtained for 20 father-son dyads (10 control group and 10 intervention group). A minimum of 8 hours per day (i.e. 24 hours over the 3 days) of activity monitoring between the hours of 8:00 am and 10:00 pm was the prerequisite for inclusion in the analysis as a valid measurement day. A mean duration of monitoring >9 hours per day was achieved. The accelerometry data was analysed and converted into categories of physical activity using the ActiLife 5 analysis software package. The Freedson et al. (1989) cut points were used for men and the Ekelund et al. (2004) cut points for children to determine time spent being sedentary or performing physical activity in light, moderate
and moderate-to-vigorous physical activity (MVPA). This data was analysed using ANCOVA and presented in a tabular form.

Differences in PA for each category of activity intensity from baseline to post intervention were analysed using ANCOVA. ANCOVA was used in order to normalise the data for different individual levels of PA at baseline.

The interview discussions were digitally recorded, transcribed, and translated into English. Content analysis was used to identify themes in the data. A full description of this process is provided in section 4.3.3 in relation to the study 2 analysis. Although the data collection techniques differed for studies 2 (focus groups) and 3 (individual interviews), the content analysis approach used was the same. Pen profiles were used as a method to present the interview data (as used by Knowles et al., 2009; Ridgers et al., 2012). This data presentation technique provides a reliable representation of the interviews’ themes via indicating the main theme and its subthemes, an example of a participants’ response and the frequency with which the response was mentioned (Ridgers et al., 2012). Further details about the pen profile method are provided in section 4.3.3. The credibility of the findings was enhanced by employing triangulation for the content analysis, through discussing the results with the second supervisor and with an expert in pen profiles to agree theme classification.

5.5 Results

This study aimed to investigate whether a brief intervention designed to increase knowledge of physical activity guidelines affected the physical activity levels of Arabic males who have exer-gaming consoles at home. A secondary aim was to explore the positives and negatives of exer-game usage.
Table 5.1 Baseline characteristics.

<table>
<thead>
<tr>
<th></th>
<th>Total father-son</th>
<th>Mean age (years)</th>
<th>Mean BMI</th>
<th>Type of exer-gaming console</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>20</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Families have</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Nintendo Wii Or</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Xbox connect</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Control group fathers</td>
<td>10 fathers</td>
<td>38.2</td>
<td>27.15</td>
<td>(2) X Box, (8) Nintendo wii</td>
</tr>
<tr>
<td>Control group sons</td>
<td>10 sons</td>
<td>10.6</td>
<td>18.57</td>
<td></td>
</tr>
<tr>
<td>Intervention group fathers</td>
<td>10 fathers</td>
<td>39.8</td>
<td>29.04</td>
<td>(3) X Box, (7) Nintendo wii</td>
</tr>
<tr>
<td>Intervention group sons</td>
<td>10 sons</td>
<td>11</td>
<td>19.02</td>
<td></td>
</tr>
</tbody>
</table>

Table 5.1 shows the mean baseline characteristics of the sample. Mean BMI and age in the intervention group for both men and boys was slightly higher than mean BMI and age in the control group, however these differences were not significant (P > 0.05).

Table 5.2 Mean baseline physical activity levels by category and group.

<table>
<thead>
<tr>
<th></th>
<th>Mean baseline of PA (minutes per day)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Sedentary</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>Control group fathers</td>
<td>465.6</td>
</tr>
<tr>
<td>Control group sons</td>
<td>393.9</td>
</tr>
<tr>
<td>Intervention group fathers</td>
<td>581.5</td>
</tr>
<tr>
<td>Intervention group sons</td>
<td>488.6</td>
</tr>
</tbody>
</table>

Table 5.2 shows the mean baseline of PA among the sample. It is clear that fathers were more sedentary than their sons for both control and intervention groups while boys had higher PA levels in both groups. There were no significant differences between the control and intervention groups on either sedentary time or any of the PA variables (P > 0.05).
5.5.1 Physical activity levels

**Men**

Table 5.3 ANCOVA mean changes in PA intensity from baseline to post-test, adjusting for baseline scores for men.

<table>
<thead>
<tr>
<th>PA intensity</th>
<th>CON Adjusted Mean (minutes per day)</th>
<th>INT Adjusted Mean (minutes per day)</th>
<th>Difference (CON vs. INT) (minutes per day)</th>
<th>95% CI (minutes per day)</th>
<th>P</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sedentary</td>
<td>-84.45</td>
<td>-116.97</td>
<td>31.64</td>
<td>(-71.42 to 134.71)</td>
<td>0.526</td>
</tr>
<tr>
<td>Light</td>
<td>-6.47</td>
<td>58.79</td>
<td>-64.55</td>
<td>(-100.38 to -28.73)</td>
<td>0.001**</td>
</tr>
<tr>
<td>Moderate</td>
<td>-9.43</td>
<td>18.27</td>
<td>-27.46</td>
<td>(-45.90 to -9.16)</td>
<td>0.006**</td>
</tr>
<tr>
<td>MVPA</td>
<td>-10.64</td>
<td>21.34</td>
<td>-31.98</td>
<td>(-52.49 to -11.47)</td>
<td>0.004**</td>
</tr>
</tbody>
</table>

95% CI = Confidence intervals for adjusted mean difference between groups.

**P <0.01:** significant difference between groups.

CON = Control Group.

INT = Intervention Group.

Table 5.3 demonstrates the mean change for sedentary behaviour and each of the physical activity intensities from pre- to post-intervention for men within the control and the intervention groups. Mean change scores are shown for the control and intervention groups and for the difference between the two groups. Light, moderate and MVPA physical activity increased by significantly more in the intervention group than in the control group, where physical activity of all intensities decreased slightly (P < 0.05). However, there was no significant difference in the change in sedentary behaviour between the intervention group and the control group, both groups reducing their sedentary behaviour from pre- to post-intervention (P > 0.05).
Boys

Table 5.4 ANCOVA mean changes in PA intensity from baseline to post-test, adjusting for baseline scores in boys.

<table>
<thead>
<tr>
<th>PA intensity (Boys)</th>
<th>CON Adjusted Mean (minutes per day)</th>
<th>Exp Adjusted Mean (minutes per day)</th>
<th>Difference (CON vs. EXP) (minutes per day)</th>
<th>95% CI (minutes per day)</th>
<th>P</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sedentary</td>
<td>45.60</td>
<td>-99.71</td>
<td>145.32</td>
<td>(47.96 to 243.54)</td>
<td>0.006**</td>
</tr>
<tr>
<td>Light</td>
<td>5.90</td>
<td>65.93</td>
<td>-60.27</td>
<td>(-102.20 to -17.85)</td>
<td>0.008**</td>
</tr>
<tr>
<td>Moderate</td>
<td>0.63</td>
<td>40.84</td>
<td>-40.21</td>
<td>(-71.32 to -9.10)</td>
<td>0.014*</td>
</tr>
<tr>
<td>MVPA</td>
<td>-6.12</td>
<td>21.81</td>
<td>-27.82</td>
<td>(-64.16 to 8.51)</td>
<td>0.125</td>
</tr>
</tbody>
</table>

95% CI = Confidence intervals for adjusted mean difference between groups.
*P <0.05; significant difference between groups
**p<0.01; significant difference between groups

CON = Control Group.
INT = Intervention Group.

Table 5.4 shows the mean change for sedentary behaviour and each of the physical activity intensities from pre- to post-intervention for boys within the control and the intervention groups. Mean change scores are shown for the control and intervention groups and for the difference between the two groups. There was a significantly higher decrease in sedentary time for the intervention group than the control group, and a significantly higher increase in light and moderate physical activity (P < 0.05). Although the intervention group increased MVPA by more than the control group, this difference did not reach significance (P > 0.05).

5.5.2 Interviews

Interview data is presented using pen profiles to demonstrate the general dimension themes of Physical activity guidelines (PAG) and Exer-gaming Nintendo Wii / X-Box (ENX) for men and boys. Each diagram shows a hierarchical thematic structure. The general
**dimension theme** is coloured in blue and refers to the main interview topic under investigation. Branched off this theme are the **higher order themes**. The higher order themes are in green and illustrate the main ideas that emerged for each of the general dimension themes. Branched off the higher order themes are the **raw data themes**, and branched off these are the **sub-raw data themes**. Each pen profile provides verbatim quotes as examples of participant responses (shown in brackets) and a frequency count that refers to the number of participants who commented on each theme (shown as “n= “).
Impact of physical activity guidelines intervention

Interview (Men)

Figure 5.2 The General dimension theme of Physical Activity Guidelines (PAG) for men.
Figure 5.3 The General dimension theme of Physical Activity Guidelines (PAG) for boy
Figure 5.2 reveals the general dimension theme of the Physical Activity Guidelines (PAG) for men. The majority of men felt the PAG intervention was not effective in helping them increase their physical activity levels. Some men felt the guidelines were difficult to put into practice, and another commented how the guidelines contained little information for disabled individuals. Two participants acknowledged they had not revisited the guidelines since they were first given to them. On the other hand, some men were positive about the PAG intervention and felt it contributed to them increasing their PA during the intervention period. For example “I was surprised by the information in the Guidelines and it motivated me to be more physically active”.

In contrast to the men, boys (figure 5.3) were more affected by the PAG intervention and they found it successful to improve their physical activity levels. One boy expressed that “the information was very helpful and encouraged me to be more physically active than my previous performance”. Some of the boys actively used techniques to help them improve their physical activity. For example, one boy described how he monitored his physical activity levels and another described how
his mother would use the guidelines as a prompt to motivate him, which he in turn used to motivate his friends (the use of the guidelines to motivate friends was also described by one man participant). Where boys felt the PAG intervention was ineffective, this was mostly due to not being able to understand the guidelines. Although one boy acknowledged he had forgotten about it, and another felt he was already active enough so the intervention had little effect.
Experiences of exer-gaming

Negatives

For children n=3 {I think this game designed for the children not for adults}

Unrealistic n=2 {I'm not excited toward the non-realistic physical activity}

Novelty effect n=4 {I bought it for children but they were excited at first, and then their excitement decreased; now they are not playing it very much}

Disinterest n=1 {I have never ever played with it, but my children do}

Recommendations of PA guidelines n=1 {Even if I played Exer-gaming it will not enable me to reach the recommended rates for physical activity in the guidelines}

Lack of facilities n=2 {It is an enjoyable game, but the space of the small house does not make me play with my family comfortably}

Positives

Enjoyable n=2 {I enjoy playing with Nintendo / X box very much particular playing}

Family Fun n=5 {It encourages all family members playing together and have some fun with doing a type of physical activity}

Physical exertion n=2 {When I play Nintendo / X box I feel that I am making a real physical effort and my body sweats sometimes}

Reason for playing

The reason for buy it n=2 {my friends advised me to acquire the game because it motivates children to be more physically active}

Recommend n=10 {I recommend and encourage anyone thinks to acquire Exer-gaming}

Reason for Keeping

Recommendations of PA guidelines n=1 {Even if I played Exer-gaming it will not enable me to reach the recommended rates for physical activity in the guidelines}

Ownership n=2 {Even if I do not play it but I will keep it at home}

Future use n=1 {I keep it for future use}

For children n=7 {Even if I do not play it is for children to play}

Figure 5.4 The General dimension them of Exer-gaming Nintendo Wii / X-Box (ENX) for men.
Figure 5.5 The General dimension theme of Exer-gaming Nintendo Wii / X-Box (ENX) for boys.
Figure 5.4 demonstrates the general dimension theme of the Exer-gaming Nintendo Wii/ X-Box Connect (ENX) for men and figure 5.5 for the same general dimension theme for boys. This general dimension theme includes two higher order themes for both men and boys: *negatives* and *positives* of exer-gaming. All 10 men in the study sample were positive about owning an ENX, agreeing with the idea of “*I recommend and encourage anyone thinks to acquires Exer-gaming*”. However there was a feeling that the initial attraction and excitement of ENX wears off in time. For example 4 men highlighted the negative side of it, one man saying “*I bought it for children but they were excited at first, and then their excitement decreased; now they are not playing it very much*” Other negative sides of ENX mentioned by men included the perception that is was for *children*, the games were not comparable with “real PA” and playing them required a lot of space at home.

Boys expressed similar views to ENX as their fathers. All boys (n=10) preferred to keep the ENX at their home (even if they did not use it regularly). Furthermore, more than 7 out of 10 boys considered the (ENX) a fun game when they play as a family “*it is a funny game when we play together as a family particularly when my parents play with us as well*”.

On the negative side there was compatibility between boys and their fathers in a number of answers, such as *unrealistic games*, whereby fathers expressed their opinion toward exer-games with the example “*I’m not excited toward the non-realistic physical activity*” and some boys said “*it is a fake game and not real game*”. Similarly both men and boys felt that exer-gaming did not allow them to meet the required intensity levels of PA. For example, fathers said “*even if I played Exer-gaming it will not enable me to reach the recommended rates for physical activity in the guidelines*” and boys said “*when I play N/X I don’t perform a high intensity of physical activity*”.

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Both fathers and their sons described a decreasing interest in the exer-game after time. For example, one boy noted that “I was excited at first time when my dad bought it but now my excitement decreased and I don’t play it too much like before” which was very compatible with some fathers responses: “I bought it for children but they were excited at first, and then their excitement decreased; now they are not playing it very much”.

Some fathers and sons also felt exer-games can lack excitement at times, with fathers saying that “I have never ever played with it, but my children do sometimes” and boys adding “I feel bored when I play N/X”.

5.6 Discussion

The purpose of this study was to investigate the impact of a brief physical activity guidelines intervention on the physical activity levels of Arabic males. A secondary aim was to explore the perceived positive and negative factors of owning an exergaming console. Accelerometry results showed the intervention had a significant effect on the light activity, moderate activity and MVPA of the participating men but no effect on their sedentary levels. For boys, effects were seen on their sedentary, light and moderate activity but there was no significant difference between the post-intervention MVPA levels of the intervention and control groups.

Qualitative data showed that the majority of men thought that an intervention providing physical activity guidelines (PAG) alone was not sufficient to motivate them to change their physical activity levels. However, the accelerometry data demonstrated that the intervention
was effective and impacted on their physical activity levels. Perhaps this discrepancy between the qualitative and quantitative results could be attributed to their knowledge levels, whereby they were unable to evaluate the amount of physical activity they had done (Anand et al., 2011). Or perhaps there was a lack of understanding of the PAG i.e. the participants thought they had to follow the same examples that were provided by the PAG to reach the recommended PA levels. Furthermore, participants could have been motivated to increase their physical activity levels by virtue of participation in the study (which they were aware was aimed at promoting physical activity) rather than the intervention itself. For example, some participants may consciously or subconsciously have changed their behaviour to make the intervention a success or perhaps they had thought they were helpful to the researcher by increasing their levels of physical activity. It is also possible that informing participants about physical activity levels and introducing them to accelerometers at baseline might have motivated them to change their behaviour, participation in the study itself being a reminder of the importance of leading a healthy lifestyle.

It is possible an increase in exer-gaming contributed to the improved PA levels in the intervention group, however the data collected in this study does not allow conclusions to be drawn regarding time spent on the exer-gaming console. However it is plausible the positive views of exer-gaming expressed by both boys and men was influenced by their improved knowledge of the physical activity guidelines following the intervention.

In the case of men, the intervention had no impact on sedentary time, while in boys; the intervention group reduced their sedentary time significantly more than the control group. Perhaps the intervention was more successful with boys than men due to several factors such as increasing the interest of the boys in use of the ENX. It is possible also that children had
more opportunity to increase their physical activity levels during school times (Verstraete et al., 2006; Aaron et al., 2012).

Overall boys had higher PA levels than men, as found previously in study one. There was however no improvement in boys’ MVPA as a result of the intervention, whereas men significantly improved their MVPA levels. This could be because the intervention dose was not enough to increase boys (already relatively high) MVPA levels, but it was sufficient to make an impact on the (very low) MVPA levels of men. Although some researchers have found high energy videogames produce a high energy expenditure and enhanced heart rate (Graf, 2009), others have suggested Nintendo Wii programmes may not be enough to induce MVPA level intensity (e.g. Peng et al., 2011). It must also be acknowledged that the current study did not measure time spent playing on the Nintendo Wii/ Xbox Kinect, therefore it is possible participants reached the MVPA level by performing other type/s of physical activity (as a result of improving their knowledge about physical activity).

There was a significant increase in light physical activity for both men and boys following participation in the intervention. This corresponds to the first study of this thesis which pointed out that Arabic males spent more time in light intensity physical activity than moderate intensity physical activity or MVPA. Whereas exer-games are not always of sufficient intensity to increase MVPA (Peng et al., 2011), it is reasonable to expect exergames to play a role in increasing light physical activity. For example, Kirkwood (2011) showed that exergames can fulfil the same energy output as traditional walking, and the fact that increases were seen with the intervention in the boys suggests it is possible to increase physical activity levels with a very brief intervention. Further research is required to explore
how the intervention could be improved to promote more substantial changes to physical activity levels.

5.6.1 Physical Activity Guidelines (PAG) for men and boys

In the qualitative analysis, nearly half of the men found the physical activity guidelines ineffective as they perceived them to be unrealistic and hence unreachable. Others discussed a difficulty in translating the PAG into practice. Several men were convinced of the importance of the information contained in the PAG, but they felt unable to organize their lifestyle in line with what was required to meet the recommended levels of physical activity. This could be due to the participants’ situation (either studying full-time or full-time employees) which left them in little control of their time. Practical barriers such as these were also highlighted in a recent British Heart Foundation Report (2012) which reported physical activity statistics for children and adults across England, Scotland and Northern Ireland. This perception of not being able to fit physical activity into their lives suggests Arabic males do not prioritise physical activity, despite the many health benefits associated with physical activity (Perspectives in Public Health, 2013). It is possible this is due to factors associated with the Arabic culture, as has been found by Caperchione et al. (2011). For example participants expressed that the Arabic culture prevents them being physically active as a family, particularly using swimming pools. Similarly, the lack of priority given to physical activity could be due to a lack of knowledge about physical activity and its benefits, as noted by Anand et al. (2011) who found that knowledge about physical activity guidelines was at a very low level among male and female adults.
Perhaps the perceptions of the intervention being ineffective were related to the participants’ beliefs and behaviours even if the intervention increased their knowledge level about the benefits of physical activity (Heinrich et al., 2011). Some participants were concerned that the PAG contained no specific recommendations for individuals with disabilities. Although there are a number of research papers about physical activity for individuals with disabilities (e.g. Martin, 2013) there are no specific physical activity guidelines for individuals with disabilities published in the UK.

In contrast to their fathers, most boys felt the PAG was effective in motivating them to be physically active. They put this down to the PAG being helpful, prompting and monitoring them to change and to the health factors associated with physical activity. Where boys felt the PAG was ineffective was because they were either unable to understand, were already active or had forgotten about it. It is possible that the boys for whom the PAG intervention was not perceived as effective were those who received the PAG from their fathers rather than from the researcher (three fathers studying at Liverpool John Moores University were asked to pass the information onto their sons). It has been shown that children are more likely to listen to messages from “credible others” rather than from their parents (Watson, 2012).

The lack of understanding of the PAG could have been due to the children’s age or to their perceptive capabilities, especially as there is some overlap and similarities between the descriptions of the different intensities of physical activity in the PAG. This is supported by study 2 results that showed some boys lacked an understanding about the concept of physical activity. Further research is required to explore reasons behind this low understanding, which could include a range of intrinsic and extrinsic influences (Genevieve et al., 2008; Emma et
As noted earlier, parental encouragement is important to help children achieve the recommended levels of PA (Townsend et al., 2012b). This was supported by one participant who expressed that his mother was behind him to engage and support him to reach the requirements in the PAG: “my mother always read it to me and reminds me to reach the requirements, I took it with me to the school and showed to my friends”. This role played by his mother made him happy with the PAG and proud of following its recommendation, which in turn led him to take it to school and show it to his friends. Educational and/or cultural factors may have contributed positively to this mother’s attitude, as Goodway and Smith (2005) and Lindsay et al. (2009) suggested that cultural beliefs may influence physical activity behaviours in children. In addition, parents’ beliefs and behaviours associated with physical activity could impede or promote physical activity among their children (Emma et al., 2010). Furthermore the British Heart Foundation National Centre (BHFNC) (2012) and Lethbridge-Čejku et al. (2004) suggested parents’ educational attainment is an important factor in promoting physical activity among their children. However, research in this area is mixed. Some studies have shown an association between a high level of parent education and youth physical activity (e.g. Oehlschlæger et al., 2004; Kantomaa et al., 2007), others have found a negative link between parent education level and child physical activity (e.g. Gorely et al., 2004). In any case the current findings again support the importance of parents in contributing to improve the PA in their children.

There were however some children who understood the PAG very well. For example, one boy was able to assess and compare his level of physical activity as he stated that his level of

*al., 2010). For example, it is possible the important role of parents and teachers can contribute to children’s understanding of physical activity (Emma et al., 2010).
physical activity was already higher than the recommended levels in the (PAG): “I already do more physical activity levels that recommended by the guidelines” Although that is a positive indication which reflected good levels of understanding and a good level of knowledge, a report on physical activity for health carried out by Chief Medical Officers in the UK (2011) and Townsend et al. (2012b) indicated that being moderately to vigorously active declines with age (CMOs, 2011; Townsend et al., 2012b) thus this level of understanding could have resulted from the age of these boys.

For the few men who felt the PAG intervention was effective, they described how this helped them incorporate a diet into their lifestyle and walk more “The Guidelines made me walk for long distances and do a diet” The connection the participants made between eating patterns and physical activity indicated an implicit understanding of the importance of physical activity as part of a healthy lifestyle, despite there being no mention of diet or eating patterns in the PAG. Such connections have been made elsewhere by Roberts and Marvin (2011), who noted the relationship between knowledge, diet and physical activity. This therefore suggests the intervention had a positive effect on the knowledge, diet and physical activity of these Arabic men, which they were able to link to their health as a result of the intervention.

The PAG intervention was also perceived to be effective in cases where the information provided was totally new to the participants. For example, one participant stated: “I was surprised by the information in the Guidelines and it motivated me to be more physically active”. This contrasts with some of Roberts and Marvin’s (2011) findings from analyses of national level data which indicated that the majority of adults in England were conscious that physical activity recommendations (PAG) exist. However, being aware recommendations exist does not necessarily mean adults know what the recommendations are.
This study showed the potential for a brief PAG intervention not only to impact on the lifestyles of Arabic males, but also to spread among their networks. For example, one individual informed that he advised others to encourage them to be more physically active: “I told my friends about the guidelines and advised them to perform some physical activity”. This reinforces the findings of Mackett and Brown (2011) who referred to the importance of sharing knowledge for doing a type of physical activity such as walking and cycling. The important role played by friends to encourage and enthuse others to be physically active has also been highlighted elsewhere (e.g. Chau, 2007; Tuagalu, 2011).

5.6.2 Exer-gaming Nintendo Wii / X-Box (ENX) for men and boys

Participants reported both positive and negative aspects of owning an Exer-gaming Nintendo Wii / X-Box (ENX). Whilst most participants were positive about active games and about owning an ENX, the main negative factor was the “novelty effect” associated with it. For example, “I bought it for children but they were excited at first, and then their excitement decreased; now they are not playing it very much”. This may be attributed to the nature of being human, whereby repeated activities soon become boring (Svendsen, 2005). Another possible reason for the loss of interest over time is the strength of competition from other video games. New games are continuously evolving and various video game choices exist at any one time. Some children may have preferences for certain types of games, as shown by Ihori et al. (2007) who pointed out that sports or racing games ranked second stage after violent games for boys. Despite the men thinking ENX was designed for children, some boys considered the ENX to be a boring game, with graphics that are like “the baby cartoon”.

This demonstrates factors related to age perceptions on the one hand, and toward the image quality level on the other hand. These results are supported by Kirsh (2003) who concluded
that the age factor affected the level of interest in video games, with younger people more interested in playing video games than older generations. Similarly both men and boys commented on the unrealistic nature of the games, which could be related to image quality as previous research suggested that players strongly prefer to play games with more realistic graphics (Wood et al., 2004; Bracken et al., 2009). For boys who were already physically active their non-acceptance of the ENX could be due to a lack of interest in playing a “fake game” as long as the real game is available (Bracken et al., 2009).

In contrast some of the men held positive views toward the ENX whereby they perceived it as an active and effective game making the player exert a physical effort equivalent to that of playing the real sport: “When I play Nintendo / X box I feel that I am making a real physical effort and my body sweats sometimes”. These participants focused on the ENX in terms of its physical outputs regardless of image quality particularly if they enjoyed playing which in turn would motivate them to be more physically active (Barnett et al., 2011) and gain the benefit of moderate-intensity physical activity (Gao et al., 2012).

Another barrier to sustained engagement according to the men was the lack of space in the home to use the ENX. This is supported by findings from the Commission for Architecture and the Built Environment (2010) who reported that the smallest homes in the EU are in the UK. However exer-gaming can be considered as a compensatory tool for physical activity when other barriers exist such as bad weather preventing families from leaving the house (Shayne et al., 2012). This view was supported by participants in this study, for example: “When I play N/X it is physical effort and it is a compensatory factor during the bad weather”.

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As has been noted elsewhere (e.g. Dixon et al., 2010; Vet et al., 2012), many participants expressed positive views about active gaming and the ENX. Although most participants acknowledged they did not use the ENX as much as when they bought it, both boys and men were positive about owning the ENX. All of the boys wanted to keep it at their home “I just want to keep it at home” and all of the men said they would recommend it to anyone thinking of buying an ENX “I recommend and encourage anyone to think to acquire Exer-gaming”. They expressed more than one reason for keeping it such as “Even if I do not play it, it’s for children to play”, “I keep it for future use”. Even participants who did not consider the ENX as a helpful tool to make them more physically active were keen to keep the ENX in their home. This could be just for ownership, or perhaps a willingness from the children to maintain possessions even if they do not use them.

Both men and boys noted their enjoyment in playing the ENX as a family. Boys described the ENX as a good opportunity to have some fun with their family members and they emphasised the advantage of playing with their parents. This is consistent with research that suggests exer-gaming is indisputably fun among all players (Sinclair et al., 2007; Grammenos 2012). Lieberman (2006) found that the top reason for playing exergames was to have fun. This consensus between parents’ and children’s views toward the ENX as an opportunity to have family time by playing together again highlighted the importance of the role of parents in improving their children’s physical activity levels (Townsend et al., 2012b). Thus, this gives a good indication about the positive side of using ENX as either a tool to promote physical activity or as an opportunity to promote a fun environment for the family which encourages them to engage in physical activity together. It is possible that this awareness of the importance of physical activity as a family is a reflection of the increased knowledge from the PAG intervention.
Although this study was strengthened by a mixed-method approach, there were several limitations that must be acknowledged. For pragmatic reasons, this study did not include a follow-up. Therefore it is not known if the intervention effect lasted beyond the initial 4-week period. Furthermore, no measure was collected of exer-game usage therefore it is not possible to draw conclusions about the impact of the PAG intervention on exer-game usage in the home. All interviews were carried out in Arabic then translated into English; therefore meaning could have been lost as a result of translation. Moreover, the study included only males of this population and excluded the females while they are an important part and also influential as family members, whether through the role of mothers or sisters. Furthermore, the sample included varying levels of education among the males which could lead to different ways and levels of expression to present their ideas during the interviews, and also different levels of understanding the questions. The PAG intervention was new for all participants thus it was not easy for them to understand all of its contents which perhaps prevented them putting it into action.

5.7 Conclusion

This study aimed to investigate whether a brief intervention designed to increase knowledge of physical activity guidelines impacts on the physical activity levels of Arabic males who have exer-gaming consoles available at home. A secondary aim was to explore positives and negatives of exer-game usage. The findings of the study indicated that the intervention had a significant effect on the light activity, moderate activity and MVPA of the participating men however no effect on their sedentary levels. For boys, effects were seen on their sedentary, light and moderate activity but there was no significant difference between the post-intervention MVPA levels of the intervention and control groups.
The majority of men thought that an intervention providing physical activity guidelines (PAG) alone was not sufficient to motivate them to change their physical activity levels. Nevertheless, the accelerometry data indicated that the intervention was effective and impacted on their physical activity levels. On the other hand, all of men expressed positive views of the Exer-gaming Nintendo Wii / X-Box (ENX) and said that they would recommend it to anyone who was thinking of acquiring an exer-gaming console.

In contrast boys viewed that the PAG was effective for them and had made them more physically active and this could be considered a sort of consensus with their positive view toward the ENX, particularly in terms of ownership exer-gaming.

In general, boys had higher PA levels than men, as found previously in study one. There was however no improvement in boys’ MVPA as a result of the intervention, whereas men significantly improved their MVPA levels. There was a significant increase in light physical activity for both men and boys following participation in the intervention.

The study's findings suggest that it is possible to increase physical activity levels in the short-term with a brief PAG intervention. However further research is required to investigate if these effects last, and to explore the potential role of exer-games in promoting physical activity for health.
Chapter 6

General Discussion
6.1 General Discussion

This thesis aimed to explore physical activity behaviour in three generations of Arabic males with a view to developing a feasible physical activity intervention for this population, and sought to achieve this goal through the completion of three main studies:

- **Study 1**: quantitative study - this study examined the patterns of physical activity in Arabic men and boys during 7 consecutive days and also examined individuals’ physical self-perception profile.

- **Study 2**: qualitative study - based on the findings of study 1, this phase investigated the barriers and motivators in becoming physically active by using focus group interview techniques.

- **Study 3**: intervention study, mixed methodology - based on the findings of study 2, this phase investigated the feasibility of an exergaming and awareness raising intervention in increasing the levels of physical activity in this sample.

The major new findings of this series of studies are:

1) Arabic men resident in the UK met the physical activity guidelines whereas their children did not. Results also highlighted that both men and boys were more active during weekdays than at the weekend, and moreover boys had higher physical activity levels than their fathers (**Study 1**).

2) that the level of body attractiveness and physical self-worth in PSPP questionnaire were higher than the other subscales in men and similarly in the YC-PSPP
questionnaire which showed greater level of body attractiveness and physical self-worth in the boys in this sample compared with previous studies (Study 1).

3) that the low levels of physical activity of Arabic male boys suggest that strategic interventions are needed with a view to provide opportunities to become more physically active in their daily routines and lifestyles (Study 1).

4) that physical activity plays a significant role in the individual’s health of Arabic males and that they perceive several benefits of physical activity for the individual, such as self-confidence, mental health and improved physical condition (Study 2).

5) that responses given by participants indicated that the understanding of physical activity varied from one individual to another. For example, some respondents viewed physical activity as a type of sport, while others believed it is a factor that leads to energy expenditure and burning of fats or calories (Study 2).

6) that the results revealed that respondents differed in their satisfaction of their own physical activity levels, wherein some were satisfied, while others were unsatisfied (Study 2).

7) that participants cited several barriers to physical activity that included lack of time, a lack of culture for being physically activity as a family unit (males and females), particularly in public places and an emphasis on engaging in sedentary behaviours, such as opting for activities perceived to be easy, seeking distraction by watching a movie or by using the playstation (Study 2).
8) the identification of several facilitators that encouraged participants to be physically active that included religion and enjoyment. These aspects related to being a “good healthy Muslim”, and also to the role the family can play in promoting an entertaining and fun environment in which to promote child physical activity (Study 2).

9) that the physical activity guidelines intervention had a significant effect on the light activity, moderate activity and MVPA of the participating men but no effect on their sedentary levels. For boys, effects were seen on their sedentary, light and moderate activity but there was no significant difference between the post-intervention MVPA levels of the intervention and control groups (Study 3).

10) that the majority of men thought that an intervention providing physical activity guidelines (PAG) alone was not sufficient to motivate them to change their physical activity levels, whereas the boys viewed the PAG as an effective instrument to signpost them to become more physically active (Study 3).

6.2 Synthesis

Observations in both study 1 and 3 confirm findings of previous studies which suggest that boys spend more time in all physical activity categories than adult men (in this case their fathers), and less time being sedentary. This is reflected by the greater time spent in sedentary behaviour than their sons. The differences in men vs boy activity levels in this study suggests that age determines the degree of variance in the different categories of activities (Bundred et al., 2001; Reilly et al., 1999; Dorosty et al., 1999; Young et al., 2009). Perhaps this is due to
the cycle of weekly commitments and obligations of parents versus children. Given that children generally have more access to physical activity opportunities, for example in school recreational breaks and physical education classes and well as general play, than their fathers, this appears unsurprising. This is particularly so, in that fathers reported relatively sedentary occupational times that included work and college and university study. From these activity profiles it is evident that adults spent much time in the sitting position, particularly given that they recorded less than 8000 steps per day on average.

Although it is evident that children are more active than their fathers, these data indicate that these numbers of minutes do not meet the minimum required minutes for the MVPA level daily of 60 minutes (Department of Health, 2011b; Riddoch et al., 2009; Strong et al., 2005; Jago et al., 2005; Department of Health., 2004; Jago et al., 2004; Biddle et al., 1998), and are somewhat less than the average amount of moderate to vigorous physical activity (MVPA) of 85 minutes per day for white British boys reported in the Joint Health Surveys Unit (2010). This lack of achieving the weekly threshold of MVPA, is reinforced by the observation that children performed the most activity in the light intensity category compared with moderate and MVPA intensity. From study 3 there is the finding that the children found the existence and knowledge of the physical activity guidelines more motivating than their fathers (and in this study reached required levels of MVPA), which suggests that if such guidelines could be marketed in a child friendly and culturally sensitive manner, then a greater proportion of this population might meet MVPA. Whilst the use of exergaming was entertaining and allowed the family unit to become recreationally active together (a key cultural need identified as a facilitator to promoting physical activity in this culture), the novelty of using these devices soon wore off and it is also questionable whether the exercise stimulus provoked would be sufficient to reach thresholds of activity in the long term.
Whereas children were not meeting recommendations, the novel new finding of this study was that Arabic men were performing moderately intense physical activity in excess of the recommended weekly guideline of 150 min per week (cumulative total of approximately 190 minutes per week). These data indicate that Arabic men in this sample exceeded the current UK guidelines for recommended physical activity, whereas the boys did not reach the levels of MVPA required, despite being more active than their fathers overall. This finding compares favourably with the UK population (39% of males in England met current guidelines).

An issue with the guidelines for physical activity is the fact that this population interpreted physical activity in many different ways. Both the men and boys studied here were most likely to view physical activity as a type of sport, although others gave a broader interpretation focused on lifestyle activities, but it is clear that each individual has their own unique view of what physical activity is (Rimmer, 2006), depending on personal interests, capabilities and environmental factors. Even though the men reached the recommended dosage of physical activity, the majority said that they found their physical activity levels insufficient, largely because their felt were sitting for long periods of time watching TV (n=9), using computers (n=9) and using the PlayStation (n=3). Manson et al. (2004) also found the most common reasons why men tend to be physically inactive are the over-use of computers and television. However, this may be the result of their lack of understanding of physical activity and the guidelines, since they were clearly performing sufficient moderate intensity activity per week. For example, the cost of owning a car in the UK and the difficulty of getting a full UK driving license led most Arabic males to use public transport, which in turn encouraged them to walk to bus stops etc. in order to reach their destinations,
and even those who had a car preferred to walk to the city centre rather than drive, due to the lack of free car parks. In addition, the green areas such as public parks provided a good opportunity to walk around or engage in physical activity, and the large shopping centres promoted family-based walking. These everyday opportunities for physical activity were evidently not recognised as contributing to recommended levels of activity. Such an observation needs to be addressed by policy makers in designing information about these thresholds of activity. As a family unit, the boys were often engaged in these activities and paradoxically, most boys were satisfied with their physical activity levels. However, these levels of activity were not intense enough to include in MVPA. Again there is a lesson here for policy makers in designing the correct information for adults and for children that makes the clear distinction between required intensities in order to hit different age-related thresholds. This is particularly important for children as in the Arabic culture there is a large focus on academic study, with parents putting pressures on their children to complete homework and attend additional classes (Garrett, 2006), which includes going to school over the weekends thereby limiting the available time for physical activity.

Of the reported barriers to becoming more physically active, lack of time, the weather, health conditions or injury and socio-cultural factors were considered important. Many noted that their social status among their families motivates them to be physically inactive: “because I am always busy (study / work) I prefer to spend the rest of the day with the family”. Additionally, data from the men’s focus groups suggested cultural perceptions of what constitutes relaxation may act as a barrier to physical activity since their free time is for relaxing rather than undertaking physical activity. Whereas individuals of British origin might view physical activities as a means of relaxing (Gies, 2006), the Arabic male participants in this study perceived activities requiring physical exertion as “work”. It is
therefore necessary to educate different populations with distinct cultural viewpoints using bespoke strategies.

6.3 Recommendations for future work

In performing future work related to this topic and in similar populations, the following recommendations are made. It would be useful for research practice and policy to build a demographic database for minority groups living in the UK that includes information such as, ethnic distribution, UK geographical distribution, socioeconomic and health status (including obesity profile, nutritional habits and physical activity metrics). This data should be expressed relative to age, gender, ethnicity and educational attainment. This would allow for the precise tailoring of activity recommendations. Such a database should also distinguish between the length of habitation in the UK, since physical activity patterns could differ between those individuals that have long term vs short term residency.

6.3.1 Research recommendations.

- As the studies in this thesis have outlined there are clear differences in activity levels and the perception of activity levels in men and boys. There is a need for further quantitative and qualitative research among Arabic population to identify the correct physical activity levels among girls and women such that the whole family can be catered for. This will allow the best interventions to be created for whole family activity and health. This could also take into consideration the impact of different seasons of the year on physical activity levels and prescription.

- It would be interesting to compare the physical activity levels between Arabic populations that have lived in the UK for long time or short term with the Arabic population living in the Arabic world in order to investigate and identify any
difference in barriers and facilitators to physical activity, and in addition compare these to other ethnic minority groups in the UK and with white British citizens.

- Further research is required to investigate the efficacy of exergaming as an alternative tool to being physically active in light of the fact that bad weather, lack of time and spending time with family are barriers that might impact negatively on being regularly physically active.

- There is a need to carry out more research to identify the perceptions and rates of children's understanding toward the physical activity guidelines and identify the barriers that prevent the children to achieve the recommended levels of physical activity.

- Conducting more research on the ethnic minorities groups needed to identify the barriers to adopting physical activity as a part of their lifestyle which associated with their culture, religion, social culture, socioeconomic state and etc.

6.3.2 Practice and policy recommendations.

- It is recommended that decision and policy makers plan strategies and design permanent intervention programs to encourage Arabic population to be physically active through the utilisation of the different local communities and local agencies where such ethnic groups usually exist.

- Physical activity and dietary awareness campaigns should be established through the local community centres and distinct social-media networks using the Arabic language and inform them about the available facilities that could help them to enhance physical activity.

- The decision makers could invest in Mosques and Arabic schools to distribute leaflets in Arabic and English to advise and educate them about physical activity.
The English language schools and the universities that minority groups attend could also be considered as good places to communicate with Arabic population and conduct programmes to help them to be physically active, particularly for those individuals only in the UK just for study for about 3-5 years. For example, competitive championships between Arabic students such as football/handball leagues or any other competitive sport could be established between the schools or the faculties or the universities, and also the Mosque, the Arabic schools and the Arabic social and cultural centres. This could also represent an important opportunity to design and carry out multicultural physical activity programmes which could support connections among the Arabic and British population.
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Appendices
Appendix (1) Focus groups Interview Schedule (for both, Men and Boys)

<table>
<thead>
<tr>
<th>Topic</th>
<th>Questions of interest</th>
<th>Relation to Welk (1999) <em>Youth Physical Activity Promotion Model</em></th>
</tr>
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<tbody>
<tr>
<td><strong>Terminology</strong></td>
<td>What do participants understand by the terms physical activity, exercise and sport?</td>
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<tr>
<td><strong>Physical activity behaviour</strong></td>
<td>How active do participants feel they are?</td>
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<td></td>
<td>What types of physical activity do participants engage in?</td>
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<td></td>
<td>Do their current activity levels and types of activity differ from when they lived in their home countries?</td>
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<tr>
<td><strong>Sedentary behaviour</strong></td>
<td>What sedentary pastimes do participants engage in?</td>
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<td></td>
<td>Are the most active individuals always the least sedentary?</td>
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<tr>
<td></td>
<td>What drives participants’ choices to engage in sedentary behaviours (explore cultural and religious factors)?</td>
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<tr>
<td><strong>Physical self-perceptions</strong></td>
<td>How important are the dimensions of physical conditioning, sports competence, body attractiveness and strength to these participants?</td>
<td><em>Am I able? / Is it worth it?</em></td>
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<tr>
<td></td>
<td>How do these concepts influence, and how are they influenced by, physical activity levels?</td>
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</tr>
<tr>
<td></td>
<td>Further exploration of physical self-perceptions based on the questionnaire responses from phase 1</td>
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<tr>
<td><strong>Benefits of PA</strong></td>
<td>How important is it for participants to be physically active?</td>
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<td></td>
<td>What benefits of physical activity are they aware of?</td>
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<tr>
<td><strong>Barriers to PA (esp. low active groups)</strong></td>
<td>What prevents participants from being physically active?</td>
<td>Enabling factors / <em>Am I able?</em></td>
</tr>
<tr>
<td></td>
<td>How could these barriers be overcome?</td>
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<tr>
<td></td>
<td>What differences exist in the coping strategies for overcoming barriers between physically active and physically inactive individuals?</td>
<td></td>
</tr>
<tr>
<td><strong>Motivations for PA (esp. high active groups)</strong></td>
<td>Why do participants engage in physical activity?</td>
<td>Reinforcing factors / <em>Is it worth it?</em></td>
</tr>
<tr>
<td></td>
<td>What motivates participants to make an active rather than a sedentary choice? (i.e. explore decision-making processes)</td>
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<td></td>
<td>What types of physical activity do participants enjoy?</td>
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<tr>
<td><strong>Family factors</strong></td>
<td>Do participants engage in physical activity as a family?</td>
<td>Pre-disposing factors / Enabling factors / Reinforcing factors</td>
</tr>
<tr>
<td></td>
<td>Are there gender differences in the physical activity behaviours within their family?</td>
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<tr>
<td><strong>Religion</strong></td>
<td>How do religious practices affect participants’ physical activity beliefs and behaviour?</td>
<td></td>
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</tbody>
</table>
Physical activity guidelines for
CHILDREN AND YOUNG PEOPLE
(5–18 YEARS)

1. All children and young people should engage in moderate to vigorous intensity physical activity for at least 60 minutes and up to several hours every day.

2. Vigorous intensity activities, including those that strengthen muscle and bone, should be incorporated at least three days a week.

3. All children and young people should minimise the amount of time spent being sedentary (sitting) for extended periods. Individual physical and mental capabilities should be considered when interpreting the guidelines.

Examples of physical activity that meet the guidelines

Moderate intensity physical activities will cause children to get warmer and breathe harder and their hearts to beat faster, but they should still be able to carry on a conversation. Examples include:

- Bike riding
- Playground activities

Vigorous intensity physical activities will cause children to get warmer and breathe much harder and their hearts to beat rapidly, making it more difficult to carry on a conversation. Examples include:

- Fast running
- Sports such as swimming or football

Physical activities that strengthen muscle and bone involve using body weight or working against a resistance. Examples include:

- Swinging on playground equipment
- Hopping and skipping
- Sports such as gymnastics or tennis

Minimising sedentary behaviour may include:

- Reducing time spent watching TV, using the computer or playing video games
- Breaking up sedentary time such as swapping a long bus or car journey for walking part of the way

What are the benefits of being active for at least 60 minutes each day?

- Improves cardiovascular health
- Maintains a healthy weight
- Improves bone health
- Improves self-confidence
- Develops new social skills

For further information: Start Active, Stay Active: A report on physical activity for health from the four home countries’ Chief Medical Officers (2011)
Appendix (3) physical activity guidelines for adults aged (19-64)

FACTSHEET 4

Physical activity guidelines for

ADULTS (19–64 YEARS)

1. Adults should aim to be active daily. Over a week, activity should add up to at least 150 minutes (2½ hours) of moderate intensity activity in bouts of 10 minutes or more – one way to approach this is to do 30 minutes on at least 5 days a week.

2. Alternatively, comparable benefits can be achieved through 75 minutes of vigorous intensity activity spread across the week or combinations of moderate and vigorous intensity activity.

3. Adults should also undertake physical activity to improve muscle strength on at least two days a week.

4. All adults should minimise the amount of time spent being sedentary (sitting) for extended periods. Individual physical and mental capabilities should be considered when interpreting the guidelines.

Examples of physical activity that meet the guidelines

Moderate intensity physical activities will cause adults to get warmer and breathe harder and their hearts to beat faster, but they should still be able to carry on a conversation. Examples include:

- Brisk walking
- Cycling

Vigorous intensity physical activities will cause adults to get warmer and breathe much harder and their hearts to beat rapidly, making it more difficult to carry on a conversation. Examples include:

- Running
- Sports such as swimming or football

Physical activities that strengthen muscles involve using body weight or working against a resistance. This should involve using all the major muscle groups. Examples include:

- Exercising with weights
- Carrying or moving heavy loads such as groceries

Minimising sedentary behaviour may include:

- Reducing time spent watching TV, using the computer or playing video games
- Taking regular breaks at work
- Breaking up sedentary time such as swapping a long bus or car journey for walking part of the way

What are the benefits of being active daily?

- Reduces risk of a range of diseases, e.g. coronary heart disease, stroke, type 2 diabetes
- Helps maintain a healthy weight
- Helps maintain ability to perform everyday tasks with ease
- Improves self-esteem
- Reduces symptoms of depression and anxiety

For further information: Start Active, Stay Active: A report on physical activity for health from the four home countries’ Chief Medical Officers (2011)
Appendix (4) Interview Schedule (Fathers)

**Intervention group: Interview Schedule (Fathers - Post-intervention)**

**Introductory statement:** Hi my name is Khaled Refaie.

This discussion should take about 45 minutes, however if you no longer wish to continue at any time please let me know and we can finish our discussion. On the basis that you have read the participant information sheet and signed the informed consent form we will begin our discussion.

1. How active are you? How active are your children?

2. What activities do you do to be active at present (how much, how long)? What activities do your children do to be active at present (how much, how long)?

3. Do you know how much physical activity children should do each week? Do you know how much physical activity adults should do each week?

4. What do the guidelines suggest about the time adults spend inactive? What do the guidelines suggest about the time children spend inactive?

5. Why is it important to be physically active? Why is it important to reduce the time you and your children are inactive?

6. 4 weeks ago a researcher informed you of the physical activity guidelines for children and adults. Did this impact on your physical activity levels/ time spent inactive? If so, how? Did this impact on your children’s physical activity levels/ time spent inactive? If so, how?

7. How do you feel about using the Nintendo Wii/ X-Box Connect to reduce time spent inactive/ to increase physical activity levels?

8. Can you describe to me if/how you have used the Nintendo Wii/ X-Box Connect during the last 4 weeks? (games played, favourites, frequency of use, amount of time spent playing, playing with others)

9. What was your experience of using the Nintendo Wii/ X-Box Connect over the last 4 weeks like? (about positives and negatives)

10. What factors affected your participation playing on the Nintendo Wii/ X-Box Connect? (about motivation, barriers and facilitators)

11. Can you describe if/how the Nintendo Wii/ X-Box Connect influenced your physical activity levels/ time spent inactive. Can you describe if/how the Nintendo Wii/ X-Box Connect influenced your children’s physical activity levels/ time spent inactive.
12. For you/your children/your family, what are the benefits of using the Ninetendo Wii/X-Box Connect?

13. How do you feel the Nintendo Wii/X-Box Connect has influenced your PA levels/inactive behaviour? How do you feel the Nintendo Wii/X-Box Connect has influenced your children’s PA levels/inactive behaviour?

14. What advice would you give to other families thinking about using the Nintendo Wii/X-Box Connect to increase their physical activity levels/reduce their time spent inactive?

15. Would you like to continue using the Nintendo Wii/x box connect to increase your physical activity levels/reduce time spent inactive? (if so, how and why?) Would you like to continue using the Nintendo Wii/x box connect to increase your children’s physical activity levels/reduce time spent inactive? (if so, how and why?)
Appendix (5) Interview Schedule (boys)

Interview Schedule (Children - Post-intervention)

Introductory statement: Hi my name is Khaled Refaie.

This discussion should take about 30 minutes, however if want to stop at any time please let me know and we can finish. Do you have any questions before we begin?

1. How active do you think you are?
2. What activities do you do (how much, how long, where (in school/ outside of school))?
3. How much physical activity do you think children should do each week? How should your body feel when you do this activity? What do the guidelines say about the time children spend inactive or sitting down?
4. Why is it important to be physically active?
5. 4 weeks ago a researcher told you about the physical activity guidelines, how did this make you feel? Did this affect the amount of time you spend physically active/ the amount of time you spend inactive or sitting down? If so, how
6. How do you feel about using the Nintendo Wii/ X-Box Connect to reduce the time you spend inactive or sitting down/ to increase the amount of physical activity you do?
7. Can you describe to me if/how you have used the Nintendo Wii/ X-Box Connect during the last 4 weeks? (games played, favourites, frequency of use, amount of time spent playing, playing with others)
8. What was your experience of using the Nintendo Wii/ X-Box Connect over the last 4 weeks like? (positive and negatives = enjoyable, frustrating, different)
9. Over the last 4 weeks, what things stopped/ encouraged you to play on the Nintendo Wii/ X-Box Connect? (motivation, barriers and facilitators)
10. Can you describe if/how the Nintendo Wii/ X-Box Connect influenced the amount of physical activity you do/ the amount of time you spend inactive or sitting down
11. For you, what are the advantages of using the Ninetendo Wii/ X-Box Connect?
12. How do you feel the Nintendo Wii/ X-Box Connect has influenced the amount of physical activity you do/ the time you spend sitting or inactive?
13. What would you tell other children thinking about using the Nintendo Wii/ X-Box Connect to increase the amount of physical activity levels they do/ reduce the amount of time they spend inactive or sitting down?
14. Would you like to continue using the Nintendo Wii/ X-Box Connect to increase the amount of physical activity you do/ reduce the amount of time you spend inactive or sitting down? (if so, how and why?)
Appendix (6) focus gropes Interview in Arabic (MEN)

لبدء الحوار بطرح سوال مرتبط بشكل عام بالمعرفة ومعلوماتكم العامة بالدرجة الأولى عن الموضوع، أمنئى على كل منك أن يعلمني فكرة عامة عن معرفته عن شيء يسمى (النشاط البدني) ما هو النشاط البدني بالنسبة لك كثقافة عامة دعنا لما تقوم به أنظف أو التعرف على مستوى معرفتك ومعلوماتك العامة عنه يعرف بالنشاط البدني.

المشارك 1: بسم الله بالنسبة للنشاط البدني مفهومي هو جميع ما يقوم به الإنسان خلال نشاطه اليومي منذ الاستيقاظ حتى النوم.

هذا حسب مفهومي أنا للنشاط البدني ممكن أن أساسا عندنا وجهة نظر أخرى.

المشارك 2: بالنسبة للنشاط البدني يختلف من شخص لشخص من جنس لجنس الشاب الصغير يختلف عن الكبير.

المشارك 9: هو يشمل جميع النشاطات التي تقوم بها في اليوم سواء كان نشاط بدني رياضي شواء كان أي نشاط آخر.

المشارك 1: لا أدرى ما هي وجهة نظر خالد.

المشارك 2: نحن ننظر نظرية أخرى ممكن أو من نظرته.

المشارك 9: لا أدرى ما هي وجهة نظر خالد.

الم участник 4: وجهة نظري حول النشاط البدني هي كما قال يوسف سابقا هو مجموعة نشاطات بدنية يقوم بها الإنسان على مدار اليوم ولكنها تختلف من سن لأخرى أو نوعية النشاط أو الجنس.

المشارك 3: يتضح الأمر من خلال الإسم حيث أنه مرتبط بالعملية الحركية وليست ذهنية بدني يعتقد أنه يتعلق بحركة البدن وهي ما يقوم به الشخص من حركات يوم من خلالها يحرق عضلات الجسم ما يؤدي إلى استهلاك طاقة وحرارة حرارية وكذا بالناتي فإنه سيكون سببا في عملية حرق الدهون الزائدة في الجسم وبناء الجسم وتشكله بحسب ما يرضاه الإنسان أو يرفضه.

بحث: قد يكون قد يكون، المسألة ترجع إلى وجهة نظركم قد تكون هناك فوائد تعود على الشخص من ممارسة النشاط البدني. "أتمى عليكم إخباري عن أي فوائد تعفرهن، من أو ما هي الفوائد المذكورة من خلال ممارسة أي نوع من النشاط البدني كان، إذا كانت تشعر أو تعتقد أن هناك فوائد تعود علينا جراء ممارسة النشاط البدني؟؟؟؟؟؟؟؟؟؟؟

المشارك 1: أنت تتحدث عن الفوائد المكتسبة من النشاط البدني؟

المشارك 2: لا أدرى أي أن كانت هناك فوائد فما هي.

المشارك 1: الأولين قال أن الحركة فيها بركة فإن الحركة فيها بركة مرات دهون وترفع طاقة معدة بالتالي فإن الإنسان دائما نقول بقدر ما يأكل بقدر ما يحرق، ولا يكون أكثر من حركة في حلقة تراكمه للدهون ويبقى في تصوري أنه ليس كل نشاط بدني سيكون صحيح، فليس كل نشاط بدني مفيد، فهناك بعض الأنشطة غير مفيدة. لماذا؟ لأنك كنت تمارس نشاط بدني ما في وضعية غير صحيحة فلا بد أن تبرتع عن أصابات، مشاكل في ممارسة نشاط بدني مفيد فهناك بعض الأنشطة هي صحية مفيدة بالتالي فأنا أرى أن يكون هناك نشاط بدني مفيد، في الحركة في حد ذاتها شيء جيد ولكن في بعض الأنشطة لديك هناك نشاط على جميع عضلات معدة مفيدة.

بحث: نعم أي أن كانت هناك فوائد فما هي.
الباحث: حتى من خلال تفاعلك العامة فاطرح الذي لديك قدمنا لنا

المشارك 1: على سبيل المثال، هذا مفصل عندي، يشير إلى المرفق. ففي الحال، بغض النظر عن أي مشاكل في المفصل بحيث يكون المفصل به جانب ضعيف، وآخر قوي، في حالة الخلق، المشارك 2: لو أنني أريد التركيز على الفوائد فقط، بالنسبة لي. فليست النشاط البدني، لأن اليوم الذي لا أبذل فيه أي مجهود، ولم أقم فيه بأي نشاطات، يوم كله خامل، وحين النشاط الذئبي يصب بنوع من الركود، ويزيدني لا يعرف حتى كيف أفكر، فأنا أتوقع أن من ذيقي معدل نشاط كبير، وهكذا يخلق مشاكل في حالة حصوله.

المشارك 2: إذا أنظر إليه ينعكس على الأداء الذهن؟

المشارك 1: بالطبع، بالطبع.

المشارك 2: أكيد.

المشارك 9: بالطبع، بالطبع.

المشارك 2: أكيد، هذه سيكون فوائد.

المشارك 9: بالطبع، إنعكاس النفس مهعم جدا.

المشارك 2: ذلك يحدث معني، فاليوم الذي أكون فيه، في حالة ركود بعض الشيء، ولم أقم بشيء قبل النام، وهذا يعكس حتى على أدنائي في حياتك اليومية، عندما تمارس نشاط ما لا تلهث جراءه، وهذا يعطيك أنطباع جيد، فماريا.كم.

المشارك 1: طبعاً الإنعكاس النفس يعطي الكثيف، والعامل الجسمي فكل، إجمالاً الشكل الخارجي للجسم يعني إعطاء النقص في النماذج، هذا يعكس على أدائك، وكذلك، هذا يعكس عليه أنك مستمر في البناء داخل الجسم. والمشارك 2: ومن فوائد الرياضة تعطي الثقة بالنفس، فكل ما كان جسم الإنسان متناسق، ومع العامل الجسمي، قبل إنزال الشكل الخارجي للجسم يعني إعطاء النقص في النماذج. في الوقت الحالي.

المشارك 1: وأقل عرضة للإصابة، وأقل عرضة للمرض، وأقل عرضة لأشياء كثيرة.

المشارك 3: فواند عديدة.

المشارك 9: أليك مرجعية بنفسك.

الباحث: إلى أي مدى ترى نفسك بأنه إنسان نشط بدنياً؟ كيف تقيم نفسك ومستوى أدائك؟

المشارك 2: في الوقت الحالي.

المشارك 1: في الوقت الحالي.
المشارك 1: بالنسبة لشخصي صراحة صراحة مقارنة بأوقات سابقة فإني أصنف نفسي من الخاملين إلى حد ما على اعتبار أن معظم أوقاتنا ( أكيد هناك بعض النشاط لأن البقاء على جهاز الكمبيوتر هو يعتبر نشاط في حد ذاته ولكن كانت هناك بعضن حركي) سيتوقف عن بنائي نشاطي صرف لا طبعا هو نشاط ( 08:09 ) بنني ، أحدث بصفة عامة هذا شيء مختلف نشاطي البدني صراحة لا أصفه كنشاط شخص يحمل في أشياء وينقلها أكيد نشاط البدني سيكون أقوى من نشاطي بناضجي نشاط أجدى أنفنا حومي صراحة لا يوجد ذلك نشاط ولا يوجد تلك الأنشطة التي نمارسها بشكل ... هذه وجهة نظري صحة في الوقت الراهن أنا لست براضي على ذلك في الوقت الراهن هذا عن نشاط نفسي بإعتبار أن ( أنت أيضا تلاحّظ ذلك ) حتى أوزاننا زادت ولكنه لم يكن ... كان من الممكن أن يكون أفضل هذا خاصة نحن متخصصون في مجال كهذا فهذه وجهة نظري بالنسبة لي , لا أدرى ؟

المشارك 2: وجهة نظري بالنسبة لي فيما يخصني أنا لذي معدل نشاط بدني صريف حاليا صرف حاليا فترة على هذا المنوال لأكثر من حوالي 3 أو 4 سنوات نتيجة إصابتي بإصابة غضروف في ظهرني , ثم من سنة حتى الآن كان تحت ضغط منه لأنه يؤثر على الأعصاب فكان متعاقيا لمنذ كل سنة ومن سنة فائقة حتى الآن أجريت عملية هذه العملية .......

المشارك 1 : تعويض هذا على السير الآن ؟؟

المشارك 2 : ولكن لا أستطيع التحرك براحة حيث أني أستخدم في النشاطات البسيطة جدا و لوني فترة لا أستطيع ممارستها فأعتني بها الآن أيضا زاد عن ذي قبل حيث بلغت زيادة لأكثر من 15 كيلو

المشارك 1: طبيعي طبيعي...

المشارك 4 : أنا أعتقد أن نشاطي البدني أفضل من يوسف وأسامة ولكن المشكل الذي أقوم به والساعات التي أخرجها أسرع تعويضهم بسرعة في الأكل هذه هي مشكلتي

المشارك 1: كنشاط حالي هل تمارس أي نشاط أو رياضة ما

المشارك 4 : ليست رياضة ولكن أبذل في جهود كبير .. المشي لم يحافظ على النشاط البدني لأنه يجبرك أنك تتوقف وتقوم ردوة أفعال معينة.

الباحث : كيف أستطيع أن أكون أشد فائدة من لايتمحورص في الأكل هذه في الأكل هذه ممكن

المشارك 1: تعويض ذلك ب척 الحالة في البيت يترتب عليه أكل ؟

المشارك 4 : نعم تماما مثلا يكون لذي عمل كبير في الجامعة وتحرك من مكان لآخر حيث أحضر محاضرة في مكان وساعية ثم انطلق لمكان آخر لمحاضرة ساعتين، ثم عدت عدًا في الليل فجدي نفسي في اليوم التالي محتاج أن أرتاح يوم كامل فالمجهود الذي بذلت في اليوم السابق عوضته في يوم آخر يعني يومي الأول كان نشاط وحركة ومشكل كبير في اليوم التالي نفسي سد ورق ووجد نفسي جالسا في البيت يوم كامل.

الباحث : وعهد البيت يتراقب عليه أكل ؟

المشارك 4 : تماما هذا ما يحدث ...

المشارك 3 : أنا في ليبيا كنت معتادة على الشغل العضلي وهدي في بريطانيا عوضه بالمشي وكتبت أمور الرياضة في ليبيا في النادي الرياضي وبه وهذا أفضل أن أمشي على أن أركب الناص بمفيض وصباحي اليوم وهذا يجعلني أعوض أيضا بألما هذا ما يحدث عند رجل أخر في اليوم السابق عوضته في يوم آخر يعني يومي الأول كان نشاط وحركة ومشكل كبير وفي اليوم الثاني أجد نفسي في فراق ووجد نفسي جالسا في البيت يوم كامل.

الباحث : وبقاء البيت يترتب عليه أكل ؟

المشارك 4 : تماما هذا ما يحدث ...
المشارك 1: تشارك أكبر مجموعة عضلية.

المشارك 3: إذا ما كان أي راضي بأنني وازنت بين ما كان قبل حضور لبريطانيا وبين الآن، في ليبيا كنت أمارس الرياضة يوميا ساعتين في اليوم، أذهب للنادي ثم أعود لمشاهدة التلفزيون، عند حضوري هنا بقيت في البيت كثيرا ترهبت وظهرت بعض البثورات في جسمي فأبحث ووزعى نسير على الأرجل أفضل من النص.

المشارك 2: هذا ما كنت سأشير إليه.

المشارك 1: صراحة كنشاط رياضي فإن ذلك مبني ومنطق بظروف الشخص نفسه.

الباحث: عفوا هذا بنذ منفصل.

الباحث: أنت كان أي شخص يرى (ولو إلى حد ما) أنه نشط بدنيا كما في حالة خالد أو أحمد أو إلى حد ما يوسف الذي يمارس بعض النشاط، أسامة كذلك فذكرت أنك تستعمل السيارة للمشي،...

المشارك 9: بشكل عام أتمنى عليك لاتذكر النشاط الرياضي إن كان أخبرنا عنه ولمدة كم تمارسه؟؟؟

المشارك 1: أنت تعلم قبل حضورنا من ليبيا.

الم участник 1: قرية وحيدة في بريطانيا. خلال فترة الماضية كنت إلى حد ما ذا بعض الوقت وكنت أمارس بعض الأنشطة الرياضية لوعد وقفه، ولكن كلما اقتربنا من نهاية مدة الدراسة زاد على الضغط في المدة وأنت تعلم هذا يزيد الضغط بشكل أكبر (14:24). فقذفت نفسك تقلل من ممارسة النشاط الرياضي والترفي للدراسة وهذا يعكس على الجسم وحتى على الحالة النفسية، أن غير راضي صراحة عن وضع ومجيئ ما؟ لأنني لم أتعد كيأ في ليبيا كنت أمارس الرياضة الجري، لعبة التدوير وتخلفي أصلا تدريبا فكت كنت أدرست في السباحة والألعاب الجماعية فكتنا دائما تنشط حيث أنني لا أسمح بسحد التوتر طبيبي ولم أبدي في السياق أنا، ونحن هنا أصبحنا في حمل بصرارة، قل نشاطنا وبطبيعلاحنا أصبحنا جالسون على الأجهزة أربع وعشرين ساعة.

الم участник 3: والمطبخ بجانب غرفة المعيشة.

الم участник 4: قريبا جدا. أنت تعرف الصالحة في المطبخ. أجمل وأصالة مشكلة.

الباحث: هل تمارس أي نوع من النشاط؟

الم участник 2: أنا وأنا شيء واحد. أكثر الأطباء الذين راجعتهم ورأيتهم ينصحون في بالمصري لأنه هناك بعض الآلات لا أستطيع العمل عليها وتعتي ظهري حتى أن البيت منها. لمزيد؟ لا أنني متعدد دائما على القيادة ولأن أنا أكثر من 6 أشهر من غير سيارة ووزني زاد كثيرا أكثر من 15 كيلو فلم أعد قادرا فلأت إلى المشي.

الم участник 3: هل وضعت معدلا يوما للمشي أم فقط الظروف أجرتكم لعدم وجود سيارة؟

الباحث: هل وضعت معدلا يوما للمشي، أم فقط الظروف أجرتكم لعدم وجود سيارة؟

الم участник 2: ونحو 60% أنا أمشي يوميا، وأنا أنني أتعد، مرات أخرج من البيت وأمشي إلى مركز التسوق على شيء غير وهلا ولا يستوجب أن أسير مشي، فقط لأني أريد المشي، وما يجعلني أنا أمشي أنا نعود إلى النقطة الأولى، وهني أنا أن تكون أطماع قوية.

الم участник 1: الظروف الجوية.

الم участник 2: زاد أي أرغب في المشي لاني بالخروج نفسي وذهني ينشطان أفضل من أبقى يوما لا أخرج فيه.
الم характеристик: هو موضوع المشاهدة ولكن يمكن في النهاية الأخيرة تعلم عادة سينية حيث أنني أتحدث أن أعمل في كرت البارص ما تربت عن أنني أتحدث أستعمل عن المشاهدة . في بداية حضوري إلى بريطانيا فقد الكثير من وزني أذكر أنني بعد وصولي عن طريق بلند وكأنني لذي ظصي لي فست وزني عندئذ في نفس ليلة وصولي لبريطانيا حيث كان وزني 112 كيلو وبعد 6 أشهر لم أتحدث حيث وصلبنا 93 أو 94 كيلو حيث أنني فقدت الكثير من الوزن ولكن بعدها وكما أخبرته تعلم عادة أستعمل الكرت فقص معدل المشاهدة.

المشارك 4: بشكل ملحوظ حتى أنني أعتقد أن وزني الآن أكثر من الأول.

المشارك 3: بالنسبة لي فإن المشاهدة أكثر شيء أعتبره كرياضة. وهناك شيء آخر حيث أنني في البيت أحيانا وليس بشكل ملحوظ. ولا هو موضوع الرياضة بعض التمارين الرياضية كان أضع رجلي تحت الحزام وأقوم باضطغ ( كرسي مضغط ) وبيض الحركات الرياضية التي كنت أمارسها. والشيء الآخر عن أي شيء أجد في البيت يؤدي إلى نشاط بدني أقوم به كما رأى رأي رأي أنه لم أنغرة إلى غرفة قمت به في ليلة 18:43 أيضًا قدم بمشاعر حيث كان ماء الحافية جيدا. فالاة البصائر من الشفة بمجرد عد مع 19 درجة من السلم على كم مرة.

المشارك 4: يوسف عيدي بك تلعب في كرة القدم?

المشارك 3: كنت ألعب ولكن الآن الاونة الأخيرة لم أعد ألعب تعرف لما ؟ لأني أصبحت أكثر انشغالا فقل النشاط بطبيعة الحال.

المشارك 1: كنت ألعب ولكن الاونة الأخيرة لم أعد ألعب تعرف لما ؟ لأني أصبحت أكثر انشغالا فقل النشاط بطبيعة الحال.

المشارك 2: أود توضيح وضعي ، أنا في ليبيا صراحة حتى بعض النظر عن أنني أمارس رياضة الحركة التي أقوم بها والأنياب التي لدي. والتي أقوم بها، والعمل الذي أقوم به، كان في حد ذاته يعطي عن أن أمارس أي رياضة أخرى في قاعة رياضية أو غيرها حيث أنني أحتاج في البداية إلى دفع كم من الصبح فيلييا وأخرج منذ الصباح وأحيانا أعد للغداء وأحيانا لا أعود فحيانا لا أعود إلا في الليل. في كل هذا الوقت يكون حركة وعمل باكتشافها حتى ولو تخرج أو بدلت جميع سيكون ساعة ساعتين أو ثلاث وبعدها بابي الوقت كله جلوس على الكمبيوتر أو التلفزيون أو كلا أو شرب أنا أرى أنه لا يوجد لوجه مقارنة بين ليبيا وبين هنا.

الم участник 1: يعني في رايك نشاطك عينا كان أفضل؟

الم участник 2: لا في ليبيا كان أفضل بكثير في ليبيا كان أفضل بكثير أكيد.

الم участник 1: خالد هل نفس قصة أسامة هل تعتبر في نشاطك هو نشاط متعمد مقصود هو موضوع المشاهدة أم أن هناك نشاط آخر؟

الم участник 4: هو موضوع المشاهدة ولكن يمكن في النهاية الأخيرة تعلم عادة سيني حيث أنني أتحدث أستعمل في كرت البارص ما تربت عن أنني أتحدث أستعمل عن المشاهدة . في بداية حضوري إلى بريطانيا فقد الكثير من وزني أذكر أنني بعد وصولي عن طريق بلند وكأنني لذي ظصي لي فست وزني عندئذ في نفس ليلة وصولي لبريطانيا حيث كان وزني 112 كيلو وبعد 6 أشهر لم أتحدث حيث وصلبنا 93 أو 94 كيلو حيث أنني فقدت الكثير من الوزن ولكن بعدها وكما أخبرته تعلم عادة أستعمل الكرت فقص معدل المشاهدة.

الم участник 4: بشكل ملحوظ حتى أنني أعتقد أن وزني الآن أكثر من الأول.

الم участник 3: بالنسبة لي فإن المشاهدة أكثر شيء أعتبره كرياضة. وهناك شيء آخر حيث أنني في البيت أحيانا وليس بشكل ملحوظ. ولا هو موضوع الرياضة بعض التمارين الرياضية كان أضع رجلي تحت الحزام وأقوم باضطغ ( كرسي مضغط ) وبيض الحركات الرياضية التي كنت أمارسها. والشيء الآخر عن أي شيء أجد في البيت يؤدي إلى نشاط بدني أقوم به كما رأى رأي رأي أنه لم أنغرة إلى غرفة قمت به في ليلة 18:43 أيضًا قدم بمشاعر حيث كان ماء الحافية جيدا. فالاة البصائر من الشفة بمجرد عد مع 19 درجة من السلم على كم مرة.

الم участник 4: يوسف عيدي بك تلعب في كرة القدم؟

الم участник 3: كنت ألعب ولكن الآن الاونة الأخيرة لم أعد ألعب تعرف لما ؟ لأني أصبحت أكثر انشغالا فقل النشاط بطبيعة الحال.

الم участник 1: كنت ألعب ولكن الاونة الأخيرة لم أعد ألعب تعرف لما ؟ لأني أصبحت أكثر انشغالا فقل النشاط بطبيعة الحال.

الم участник 2: أود توضيح وضعي ، أنا في ليبيا صراحة حتى بعض النظر عن أنني أمارس رياضة الحركة التي أقوم بها والأنياب التي لدي. والتي أقوم بها، والعمل الذي أقوم به، كان في حد ذاته يعطي عن أن أمارس أي رياضة أخرى في قاعة رياضية أو غيرها حيث أنني أحتاج في البداية إلى دفع كم من الصبح فيلييا وأخرج منذ الصباح وأحيانا أعد للغداء وأحيانا لا أعود فحيانا لا أعود إلا في الليل. في كل هذا الوقت يكون حركة وعمل باكتشافها حتى ولو تخرج أو بدلت جميع سيكون ساعة ساعتين أو ثلاث وبعدها بابي الوقت كله جلوس على الكمبيوتر أو التلفزيون أو كلا أو شرب أنا أرى أنه لا يوجد لوجه مقارنة بين ليبيا وبين هنا.

الم участник 1: يعني في رايك نشاطك عينا كان أفضل؟

الم участник 2: لا في ليبيا كان أفضل بكثير في ليبيا كان أفضل بكثير أكيد.
المشارك 1: أنا في تصوري حتى سبل الراحة هناك متاحة أكثر بعض الشيء على اعتبار عندك سيارة وعندك خيارات أفضل ولمنك الناس هو يوجد لدينا ذلك وهنا البيئة أيضا تحكم أي ظروفك الأنبية حاليا علاوة على البيئة التي تعيش فيها تشجع...، الملفق أيضا هناك أمور عديدة قد تساهم.

المشارك 4: بالنسبة لحالتني بين هنا وهناك تختلف تماما حيث عندما كنت في ليبيا كان أغلب حركتي محدودة السيارة والبيت مثل مناسبة اجتماعية مثلا عمل أي لا يوجد ذاك الجهد البدني إن كانت المقارنة بهنا فاننا أعتقد بأنه أكبر وفرق كبير لكن كما أخبرتك بعض العادات السنية التي جعلت نفس الحالة بالنسبة للوزن ولكن كحركة ونشاطات هنا أعتقد أنها أكثر من هناك.

الباحث: ماذا عنك أحمد؟

المشارك 3: بالنسبة لنشاط الرياضي كمارس نشاط رياضي، كنت في ليبيا أفضل من هنا غير ذلك كان عملي عضلي في ليبيا، لكن عند مجيئي هنا عرضت ذلك بالمشي بكثرة أبلاتي أزرد وزن نقص هنا، نقصت في الوزن لما كنت هناك أمارس لم يبقي صيدا في الوزن كنت عادي نموه جيد وأصبح بشكل جيد ولكن هنا، فمثلا، أن كان هناك 80% فهنا سيكون 65% يعني بالتأكيد هناك أحسن.

المشارك 1: بالنسبة للنشاط البدني، هناك أفضل.

المشارك 9: بالنسبة للنشاط البدني، هناك أفضل.

المشارك 4: بالنسبة للنشاط البدني، هناك أفضل.

المشارك 2: نقص الوزن قد ينتج عن أمور أخرى.

المشارك 3: أود إضافة نقطة أخرى هي أيضا لها دور كبير جدا في نقص الوزن، العالم النفسي حيث أن العامل النفسي.

المشارك 2: هذا يجعله تنقص بسرعة حتى ولو تأكل في المعدل، أشعر بأن هناك نقص.

المشارك 3: هناك ثلاث وجبات ليس كما هنا وجبة واحدة.

المشارك 1: نقص الوزن قد ينتج عن أمور أخرى.

المشارك 2: نقص الوزن قد ينتج عن أمور أخرى.

المشارك 3: هناك ثلاث وجبات ليس كما هنا وجبة واحدة.

المشارك 2: نقص الوزن قد ينتج عن أمور أخرى.

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المشارك 1: نقص الوزن قد ينتج عن أمور أخرى.

المشارك 2: نقص الوزن قد ينتج عن أمور أخرى.

المشارك 3: هناك ثلاث وجبات ليس كما هنا وجبة واحدة.

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المشارك 2: نقص الوزن قد ينتج عن أمور أخرى.

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المشارك 2: نقص الوزن قد ينتج عن أمور أخرى.

المشارك 3: هناك ثلاث وجبات ليس كما هنا وجبة واحدة.

المشارك 2: نقص الوزن قد ينتج عن أمور أخرى.

المشارك 3: هناك ثلاث وجبات ليس كما هنا وجبة واحدة.

المشارك 2: نقص الوزن قد ينتج عن أمور أخرى.

المشارك 3: هناك ثلاث وجبات ليس كما هنا وجبة واحدة.

المعتقد 1: التلفزيون عادة بصورة في نظري أنه عادة لكن التسلية غالبا إذا كان الشخص يفكر في أن يسل نفسه ممكن أن يفكر أن يطلع في نزهة مع عائلته أو يود.

المشارك 2: حيث أنك تعيش في حالة خمول؟

المشارك 1: التلفزيون غالبا هو السائد إن أراد الشخص التسلية أو تغيير المزاج.

المشارك 4: وهناك من يفضل إستخدام الألعاب الحديثة كالبلايستيشن.

المشارك 1: صراحة أنا هنا في بريطانيا لا يوجد وقت للتسلية.

المشارك 4: ممكن لأن حالتنا تختلف فانا مراقب وليس كوضعك.

المشارك 2: عند وقت
المشارك 1 : صح صح للترفيه عن النفس بعض الشيء.
المشارك 3 : زد على ذلك تصفح النت.
المشارك 1 : ذلك أيضا قد يكون تسليه.
المشارك 3 : عدا الدراسة يستخدم البعض النت لرفعات أن الأنسان يقرأ قصة ...........
المشارك 1 : البوب تويبيب أجيانا.

الباحث : جميعنا أتفقنا نظريا وعمليا أيضا من خلال واقع حياتكم أنه هناك بعض طرق التسلية من خلال أذاك وأنت في حالة خمول تام أي أن تستمتع وتنقل دون دليل نشاط بدني هنا تتنسأ عن الأصابع والدوافع التي تجعلك تسلئ وتستمتع وتستعمل وسيله تعتمدي على الخمول التسلية بينما جميعنا يعرف أنه هناك وسائل أخرى سلية وممتعة وجميلة وفيها نشاط بدني مالذي يجعلك تهمل وتتجه تجاه الأخرى التي تعتمدي على الخمول كالتفصيرون والبلايستشن أو تصفح البحث...

س. ما هي الطرق التسلية التي تعتمدي على الخمول البدني؟

المشارك 1 : أولا الوجه للتسليه والقيام بهذا النوع من التسلية يأتي مدفوع بحبك لهذا النوع من الدراسة فينندن سيبين رئيسيين أعتقد في نظري أن تلجأ لهذا النوع بالعكس من التسلية.
المشارك 2 : أود منك أن توضح لي شيء ما .. هل أنت تقصص في الوضع الحالي هنا أم أنك تقصص حياة عامة.

المشارك 1 : أنا أقصد هنا في بريطانيا ؟
المشارك 2 : أود منك أن توضح لي شيء ما .. هل أنت تقصص في الوضع الحالي هنا أم أنك تقصص حياة عامة.

المشارك 2 : أوكي ، بالنسبة لي الأسباب الرئيسية تعود إلى ظروف الصحبة بالإضافة إلى وضعي الاجتماعي إذ أنني لأكثر من 6 أشهر أعيش في مدينة أخرى ولا يوجد لدى أصدقائي بقرب أدرك الوقت لأحاول أن أكون قريبا من عائلتي في البيت في إضافة أحد الأسباب على الرغم من ذلك هناك شيء قريب من بيتي وهناك سيبو أكون قادر على الخروج والترفيه والأنشطة التي أقوم بها هي أنني استفتي من جهة لبذل الجهود ومن جهة أخرى للتسوق.

المشارك 1 : ولكن أنت أحيانا قد تلجأ لهذه التسلية بالذات والتي تعتمد على الخمول لماذا؟

المشارك 2 : أن هذا الوضع ناتج أصلا عن أن تركيبتي ليس يسمح هذا الهوايات ممكن هذا نوعي وأحب الشيء السهل.

المشارك 1 : نعم هذا ما أريد قوله على الرغم من أنك ذكرت بأن الجيم قريب منك؟

الم участник 2 : لا أنا أقصد هنا في بريطانيا ؟

المشارك 4 : أنا فيت السوال . أنا أعتقد أن العامل النفسي في هذه النقطة يلعب دور وساحكني عن نفسني على سبيل المثال أن أدردت الراحة في البيت فاني سالجع إلى شيء بسيط وقريب جدا مني كما التلفزيون أو البلايستشن وهي قريبة بعكس التفكير في الخروج الذي يعني أنك تتقدم بنشاط أخر وذا أفكار طالما أنا جالس ومهاجم فما السبب للقيام بأي جهد فاجد نفسه أفضح أن الشيء السهل يعني العامل النفسي يلعب هنا.

المشارك 1 : شيء سهل ومريح.

المشارك 4 : تمامًا.

الم участник 2 : كل ذلك يرجع على انتهاز أوقات الفراغ يعني أن وقت الفراغ ليس منظم، فعندما تشعر بتوفر وقت فراغ تجد نفسي تود استمراره في هواية لأجل الترفيه عن النفس.
المشارك 1: لما الترفق بالذات؟

المشارك 4: لأن الإنسان يطيعته يتجه إلى الأقرب له. لأن هذا الوقت اسمه راحة، يبتدئ أي جيد أو شيء فيلجأ لنوع من الركون.

الباحث: أنت ترى بأنه طالما الشخص يبحث عن المتعة والراحة فإنه ليس ملزمًا ببذل جهد.

المشارك 1: قد يفتح قلما لمشاهدته.

أحمد: قد يكون ذلك موروث تقليدي، أن أرد الراحة عليه أن يستريح تمامًا بالكامل وليس مطلوبًا منه طالما يريد الراحة أن يبتدئ جيد وهذا فيه اختلاف عند العرب وهذا ناجح عن اختلاف الثقافات حتى عندما يريد الخروج والاستجمام والراحة فإنه ممارس رياضي وتشاهدنا على الشواطئ البحر يهرولون ومارسون رياستهم المعتادة في الصباح الباكر ممارس بشكل ولو أن مشهور فهو راحة واستجمام بينما تفاقتنا طالما راحة فإنها تامة 2:39

الباحث: وجهة نظر.

المشارك 1: هناك نوعين، أحدهما راحة إيجابية والأخرى راحة سلبية، والسلبية هي النوم فقط كم لعب البلايستيشن وله أن هناك حركة ولكنها قليلة جدًا لا تذكر.

الباحث: لأن لدينا مجموعه من المتغيرات أو العوامل وباختلاف في كل مرة لأحدها، أرجو منك أن تعلمني

المشارك 1: الحالة البدنية هي الحالة التي عليها الشخص نفسه أي المواصفات التي يتصف بها الشخص.

الباحث: ما هي درجة أهميتها بالنسبة لك.

المشارك 1: الحالة البدنية بالنسبة لي تأتي من كوني أستطيع القيام بأي شيء أريد القيام به بينما إن كانت حالتي البدنية لا تتوافق مع القيام بهذا شيء فإنه سأعترض بشيء من عدم الرضي. بالتالي أن كانت الحالة البدنية جيدة والحالة البدنية تؤهل للقيام بأي شيء يقوم به أي شخص آخر فإنه يعطي شيء من الرضي عن الذات. بالتالي فالحالة البدنية تعتبر مهمة أكيد.

المشارك 2: الحالة البدنية بالنسبة لي هي مهمة جدا ولكن نعود للنشاط البدني ولهما أن نشاطي البدني ضعيف. ولكن أكيد جدا.

المشارك 4: أن يمكنه الاستمتاع أو رياضته أو شيء يفعله لكن الحالة البدنية الخاصة بي سببية جدا، أو لا يجعيس ليش منتناقا لا يوجد لدي حركة خفيفة وألته بسرعة.

الباحث: ولكن هل تشعر بأن هناك أهمية للحالة البدنية؟

المشارك 2: بعدنها أدت لا شيء. لا تستطيع القيام بأي شيء.

المشارك 1: بيدنا أن لا شيء، لا تستطيع القيام بأي شيء.

المشارك 4: أعتقد بأن الحالة البدنية أهميتها تكمن في أنها تعطيك الثقة أن تحرك بسرعة على الرغم من وجود عوامل تؤثر عليها مثل ما أسأل مرتين كيف تتنزلة الشفاف أو مشكلة الأرق أو ما عن نفسك أجريت عملية على الرقبة أي أن الإصابات أحيانا تلعب دور فيما يتعلق بها ولكنها تبقى مهمة جدا بالنسبة للشخص حيث أنه بتحرك بثقة وسرعه ويمكنه أن ينجذب عمله في وقت قصير.

الباحث: مشارك 3، درجة أهمية الحالة البدنية بالنسبة لك.
المشارك 3: أكيد مهمة مهمة لأي إنسان وتعرف أهميتها عند فقدانها حيث لو عجز الإنسان عن ممارسة شيء أو إيفائه أو حتى شيء من الحياة بصفة عامية. في هذا النص، نرى شخص في حالة مكتئبة. هذا يظهر بشكل واضح، أن التحقق من صحة الوضعية ونوعية الأنشطة يلعب دورًا مهمًا في التأكد من أن الإنسان العاطفي صحي وشامل.

الباحث: هل ترى أنه مهم؟

المشارك 4: مهم جدا، فننصح الإنسان بكونه على مستوى الشخص الذي أمامه على الرغم من أن هناك عامل أساسي في هذه النقطة وهو نوعية الشخص الذي ستنافسه إذا كان هو مثلا إنسان رياضي، وله فترة تريدة ويحتاج أن يبدأ الآن فقط معه وتحاول أن تنافس أكيد يؤثر عليه نفسيا لأنه مستوى أصلا سيكون عليه.

المشارك 1: أتمنى أن تكون هناك مشكلة.

المشارك 4: إذا أرسل أنفسك إلى نفس الحالة.

المشارك 1: في عدم وجود تجنب تكون هناك مشكلة.

المشارك 4: أما بالنسبة للمشوار، لا يمكن أن يكون شيء من بنفس الشيء وهنا سيكون هناك تنافس إذا تم التأكيد عليه، وهو النشاط الذي سنقوم به سيؤثر عليه السيطرة في التنافس.

المشارك 1: هل أرى بأنه مهم؟

المشارك 4: مهم جدا.

المشارك 1: مثال أنا أعرف أن أساسة أفضل مني ولكن عندما أناقش وأبلغه فإن ذلك سيؤثر على النفسية بشكل جيد.

المشارك 4: إذا أرسل أنفسك إلى نفس الحالة.

المشارك 1: مثال أنا أعرف أن أساسة أفضل مني ولكن عندما أناقش وأبلغه فإن ذلك سيؤثر على النفسية بشكل جيد.

المشارك 4: نعم ولكن أنا أتحدث عن بداية يمكنك بعد البقاء معه فترة طويلة صحيح أنك تصل إلى هذه المرحلة حيث تكون ترغب في الوصول إلى هذه الدرجة وكأنه إنسان خبير ومريض قد فعّل إنجاز ذلك شعر بأن أرزقته شيء مهم. لكن في البداية ستلتقط نفسيا ويمكن أن يؤثر عليك أي مرده عليك سلب (59:38) وهذا تأثر عليك حتى نوعية الأنشطة التي تمارسها.

المشارك 3: التنافس يمكن أن يكون ما الشخص نفسه ينتظره حققه هو في السابق أو شيء يرغب في تحقيقه. يمكن أن يتلف مع نفسه لإثبات شيء يرضيه أو ما كتبت قد أشرت إليه أي مع أناشير أخرين أو أشياء ذات دواله أو
يكون بين الشخص وأخرين ويسعى لتحقيق نتائج والتنافس هو الذي أوجد الاختلافات والفروق بين الناس وأوجد أذاع في أثره.

الباحث: تعني أنه مهم.

المشارك 3: مهم جدا لأنه هو الذي أوجد البطولات وأوجد الأبطال وأوجد التنافس والفروق وأوجد الدراسات التيب قامت على الرياضة.

الباحث: ماذا لو تحدثنا عن الجانبية الجسمية ودرجة أهميتها.

المشارك 1: الجانبية الجسمية بغير أو ليس.

المشارك 2: الجاذبية الجسمية لك أنت ودرجة الرضي عن جسمك وأنه جاذب في عيني히.

المشارك 1: كأني إنسان مختص في الرياضة فأنا أعتبر أن جسمي جيد ولديه تناسق وأكثر شيء أعاني منه هو المنطقة البطنية.

المشارك 1: حقاً. لكن بالنسبة لي بشكل خاص لذي البطن تقلقني جداً، دائماً أحب أن ألبس ملابس تظهر بشكل جيد. ولكن عندما أرى بشائر بارزة بهذا الشكل تشوه اللباس بالكامل لا يعود هناك تناسق ولا شكل فأشعر أنها في نظر الآخرين..... وأزعج منهما.

المشارك 1: ماذا عنك أسامة فيما يخص أهمية جاذبية الجسم.

المشارك 2: أنا سأجيب جواب صريح جدا جدا بالنسبة لي يؤثر في كثيرا ورسما دائما أحب أن يكون جسمي جيد ومتناسق وأكثر شيء أعاني منه هو المنطقة البطنية.

المشارك 1: كيفينا.

المشارك 2: لا بالنسبة لي بشكل خاص لذي البطن تقلقني جداً، دائماً أحب أن ألبس ملابس تظهر بشكل جيد. ولكن عندما أرى بشائر بارزة بهذا الشكل تشوه اللباس بالكامل لا يعود هناك تناسق ولا شكل فأشعر أنها في نظر الآخرين..... وأزعج منهما.

المشارك 2: ماذا عنك خالد فيما يخص أهمية جاذبية الجسم.

المشارك 2: أعتقد أن أهمية الجاذبية الجسمية تكمن في العامل النفسي وهنا نعود من جديد إلى نفس النقطة.... أنا ذهبت في رحلة من الشباب إلى هيرسفيلد وقد رأيت صديق لي لم أره منذ حوالي 3 سنوات فقال لي يا خالد أن وزنك زاد كثيرا حيث أنه لم يكن رني بهذه الظاهرة جراء هذا الشيء أصيب بإحباط شديد جدا فشعرت أنه ليس هذا وضعياً أي ليس هذا المفروض شكلياً ووضعياً فشعرت بأنك مقرض في حق نفسك كثيرا.

المشارك 2: ماذا ترى بأن لها أهمية كبيرة بالنسبة لك؟

المشارك 2: جدا جدا نعم جدا جدا.

المشارك 2: ماذا عنك خالد.

المشارك 4: أعتقد أن أهمية الجاذبية الجسمية تكمن في العامل النفسي وهنا نعود من جديد إلى نفس النقطة.... أنا ذهبت في رحلة من الشباب إلى هيرسفيلد وقد رأيت صديق لي لم أره منذ حوالي 3 سنوات فقال لي يا خالد أن وزنك زاد كثيرا حيث أنه لم يكن رني بهذه الظاهرة جراء هذا الشيء أصيب بإحباط شديد جدا فشعرت أنه ليس هذا وضعياً أي ليس هذا المفروض شكلياً ووضعياً فشعرت بأنك مقرض في حق نفسك كثيرا.

المشارك 4: يعني أنك ترى من وجهة نظرك أن هناك أهمية للجاذبية الجسمية؟

المشارك 2: أنا أضيف شيء آخر.

المشارك 1: لا ننسى العنصر ( الجنس الآخر ) الآخر.
الباحث : تقصد أن يكون جسمك جاذباً من وجهة نظر الجنس الآخر
المشارك 2 : أنا أضيف شيء آخر في هذه النقطة حيث أنها أصبحت إحدى وسائل المجلمة مع الآخرين كي يدخل الفرح
لهم من خلال المجلمة بالقول أن وزنك نازل، أنا أقرحني عندما تقول لي أنك نازل وهذا معناه بالنسبة لي أنني بدت أعود
لوضع الطبيعى.
المشارك 1 : مرات يقول لك هذا الكلام من باب أنه يريدك أن تأكل عندما تأتي لبيته من بابا الكرم.
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المشارك 4: أعتقد بأن أهميتها تساعدك في حياتك اليومية في أنجاز أعمالك وتسهل عليك الأمور صح كثيرا، وكما قلت أنت ما تحتاج مساعدة كثيرة من الناس وتكون تعود على نفسك أكثر من الآخر.

الباحث: نعم أحمد، هل ترى بأن القوة البدنية عامل مهم

المشارك 3: أكيد في تحديد أطر شخصية الإنسان أن يكون مستقل بقوة بدنية تكفيه لأنه لو حصل فيها إعتلال سيؤثر ذلك في نفسه في الشخصية العامة للشخص فبقدر ما كان مكتمل جسديا ولديه القوة البدنية التي تكفه عن الإستعانة عن الآخرين ولو أن الإنسان وجد بطبعه اجتماعي يحتاج إلى الآخرين مما كان (41:47) ولا غنى له عن الناس لكن نوع ما وبشكل كبير هي ضرورية لأنها تسد حاجات نقص كثيرة في الإنسان إلغان كان وكما قال اساسًا إنسان كامل ويعتمد على نفسه تمام.

الباحث: أوكي أعتقد بأن السؤال القادم في جزء من خوارنا كنا قد جاوبنا عليه ولكن نحاول أن نركز على بحث كل واحد

المشارك 1: أولا أنت عارف طبعا، فالباحث: حتى لو أردت إعادة جزء من كلامك اليسابق.

المشارك 9: لا أحكي عن وضعي أنا شخصي ولكن أن أتكلم بشكل عام في ضروف أشروا لها سابقا.

المشارك 1: لا أقوى نشاط رياضي فقط ، أقصد نشاط بدني عام.

المشارك 1: أعرف ذلك في نظري أن أول شيء يحول أحيانا بينك وبين أن تمارس رياضة هو ضروفك الصحية.

الباحث: ليست شرطًا ممارسة رياضية للعبة ما بل نشاط بدني بشكل عام.

المشارك 1: نعم نعم أنا احترمت بصفة عامة.

المشارك 1: كما كنت خالد يحيى سابقاً، وهو كان يستعمل ي المشي ثم سلكه تغير ببنك النبات.

المشارك 1: نعم أنا أقول أن الظروف الصحية تحول أحيانا دون ممارسة النشاط البدني بصفة عامة،، الضروف الصحية،، كذلك الضروف البيئة تحول بينك وبين أكل تمارس رياضة.

المشارك 1: ما مفهوم البئية بالنسبة لك؟؟

المشارك 1: الطقس أحيانا لا يساعد أو يمكن بتعلق بظروفك الشخصية وقت فراغك،، هل مثلاً عندك فراغ تستطيع أن تدوينه و،، هل تحت مشغول،، أحياناً أنت لا تستطيع الخروج أحياناً لأني شغل على جهازك.

المشارك 1: نعم الوقت أحياناً عندك وقت فراغ وأحياناً ليس لذلك وقت فراغ،، حتى الظروف النفسية قد تلعب دور أحياناً.

المشارك 1: تمتعك من ممارسة النشاط؟؟
المشارك 1: تمنعك من ممارسة الرياضة، مثلًا لا قدر الله جاك خبلا ليس جيد وبالتالي أصبحت مفسيتك ليست، فلا تستطيع أن تخرج أصلا فتبقى متقلّبة على نفسك، يعني في تصوري هناك ضروف كثيرة تحول أحيانا بين ممارستنا الرياضية.

الباحث: نعم مشارك؟

المشارك 2: تمنعك من أنا دعني أعيد تعض من (11:50)

المشارك 2: أبقى أكد أن لا أقصد الممارسة الرياضية بل النشاط البدني بشكل عام.

المشارك 2: أن أسألك لك بشكل عام.

المشارك 2: تمنعك من أنا دعني أعيد تعض من (11:50)

الباحث: بشكل عام مثال حديثا البيت لما تتحملها فيهما شيء جميل.

المشارك 2: تمنعك من أنا دعني أعيد تعض من (11:50)

المشارك 2: أن سأقول لك بشكل عام.

المشارك 2: تمنعك من أنا دعني أعيد تعض من (11:50)

الباحث: يعني العامل الصحي.

أسامة: العامل الصحي هو الذي يأثر على أنا العامل الصحي، المشكلة التي يلتقى بالناس في البدنية والنفسية عندما يحدث ضغط من العصب على العصب يفترض على حتى في المراج، حيث يكون منتجي جدا، هذا أكثر شيء، إضافة إلى أنني إذا تمت واستدعت وشعرت براحة من ظهري فإني أكون نشط جدا، وفي كل شيء. وعندني في الرياضة وفي الطلعة.

الباحث: يعني أن مشكلتك الوحيد هي العامل الصحي.

أسامة: العامل الصحي باضبط.

الباحث: يعني لو عندك وضع صحي جيد كان نشاطك البدني يكون عالي.

أسامة: بالضبط لكن لو أنني تعتني به بعض الشيء، وأستثمرت، بعض الألم فان يكون كصور جدا، ومستوى النشاط يكون منخفض.

المشارك 2: بالنسبة لي أن أعتقد أن حجم الفائتازمات الوبائية التي أن ملتزم أنك فعلا يوفر عليك ذلك وضعك البدني أو الصحي مثلًا إذا كان أنك إصابات، كما ذلك بعض الناس، فاقتئ عقود المعلومات لدينا في الموضوع هذا الآن أغلب الناس تساهل عن الرياضة ووضعها يقول صحيح شيئًا جديد للإنسان لكن لا يعرف مدى أضرارها إن كان لا يمارسها.

المشارك 2: أضرار عدم ممارستها.

خالد: نعم عدم ممارستها (23:52) هو يعرف أن عدم ممارستها ضارة ولكنه لا يعرف حجم الضرر أو خطر عدم ممارستها.

المشارك 2: أضرار عدم ممارستها.

الباحث: الأسباب التي تحول دون أن تكون نشط بدنيًا.

أحمد: والله بالنسبة لي كمغترب، كنت هنا أن القول في العلاقات الاجتماعية، و هذه تعد من أنك تتواصل بدنيا مع الناس تزورهم هنا هذا هنا في بريطانيا وفي ليفربول، ففي كل شيء مجال محدود، ومحدودية المجال هذه تؤثر وتقوم بتوعيتك، بكلي للنوادي وكل ما أجد فرصة للرياضة ولا أنها ليست الرياضة بمعنى الرياضة، ولكن أي جهد عضلي.

الباحث: نشاط بدني.
المشارك 3: هذا ما أقصده نشاط بدني يمكنني القيام به.

الباحث: طالما خرجت لنا كل هذه العقبات منها ما كاتن نمرت بالمعلومات العامة وجزء بالعامل الصحي وحزء بعامل الزمن، السلوك.. الثقافة كيف يمكن أن تتغلب على كل هذه العقبات من أجل أن تنفع من معدل النشاط البدني لدينا أو نحل مشاكلنا هذه التي تحول دون أن تكون تشغيل؟

أسامة: أنا لذي نقطة واحدة حيث أنك وعند طرحك لهذا السؤال جاء على بالي موضوع زوجتي تجري عليه في دراسة وهي إدارة الوقت وهي أهم شيء فإن أن تلمع تنظيم وتتكيف بعض الشيء بغض النظر عن ضروف كل شخص فلو استطعت نوعا ما من الترکيز وتتنظا وفكاك ستجد مجال كبير أن تمارس رياضة أو نشاط عام بصفة عامة أما أن أنت ترتك الوقت المفتوح هكذا ستجد نفسك غير محصل على الكفاية.

المشارك 2: تماما، فأننا أقول أن تقوم بإدارة للوقت

أحمد: المشكلة لأي شخص هي كما قال أحدنا إنت احتمال اجمجأع، وآخر قال الوقت. البحث عن مشكلة ومحاولة إيجاد حلول لها حيث أنه على منا يحاول أن ينظر ويعرف مشكلته وبالضبط أي وصقل حل لها أي يعرف يوجد مشكلة يجده لها حول.

الرفاعي: خالد ما هي وجهة نظرك في هذا الموضوع كيف يمكن أن نتغلب على مشاكلنا وأنت أشرت إلى أن جزء منها المعلومات العامة وهي نقطة مهمة جدا الشاباب أشاروا إلى عوامل أخرى تحول دون ممارسة الرياضة الآن كحلول لها,

أحمد قال أول علينا أن عرف موطن الداء كي نتغلب عليه أسامة قال نريد إدارة للوقت ما هي وجهة نظرك في الموضوع؟؟؟؟؟

المشارك 4: أعتقد أن حجم دراية الشخص بأهمية الرايضة، عن نفسي أنا أعرف أن هناك خطر من عدم ممارسة الرياضة، فإنها ستكون جزء أساسي وتجربتي أن أدخلها في الجهاز الزمني.

المشارك 4: بالضبط بالضبط

المشارك 4: كيف يمكننا القيام بذلك من وجهة نظرك؟

المشارك 4, كيف نرفع مستوى المعرفة هذه عند الناس تعني الرايضة.

المشارك 4: نعم عند الناس

المشارك 4: يمكن أن نستخد مطرقة جديدة مع أجيال جديدة، على سبيل المثال السباق الصغير. مثلنا إذا أعد أن كبرت عرفت أنه هناك خطأ بينما لم تعلم ذلك من صغير أو من المدرسة في تركز عليه أكثر فكان من الممكن أن سيكون شيء طبيعي أو جزء من حياني أي مهما زادت الإستمرار وحجم العمل عندي لكنها ستكون أساسية عندني

الرفاعي: الجزء من خطيئة.

خالد: نعم ولا أستطيع التنزل عنه.

الباحث: وأنت يوسف؟
المشارك 1: والله فيما يتعلق بأهمية أن الناس تعترف بأهمية الرياضة، ففي تصور أن هناك أناس كثير تعرف أهمية الرياضة.

والباحث: حاكم تخصصك عرفت أقصد الناس العوام.

المشارك 2: أنت أحكم على نفسك في الرياضة كも多い الناس، ولكن أود أن أقول بأن معظم الناس يعرفون أهمية الرياضة خاصة أن معظم الطلبة الذين أتحدث عليهم، لأن القصيدة أن مشكلتنا في التسويف، أي دائما نقول سوف، أي ساقوم بها فقط بعد الإنتهاج من هذه وهذا.

المشارك 1: أنا أحاول أن أتذكر أوقات أسف وأدعنا، حيث أشتقت الناس على الرياضة في اتجاه جيد وإدارتي الوقت التي أثار لها. نفسي صراحة يعني سليمة ونفسي صحة عندًا، سأكون نفسًا في الرياضة ونفسي صحة عندًا، سأكون نفسًا في الرياضة.

المشارك 2: أنات أحكي عن نفسي بقيت أسوف دائمًا بحيث أصبحت أقول لنفسي إنعمل هذة وعندما أقدم أطروحتي سأهتم بالرياضة فالتسويف في حد ذاته ليس جيدا وإدارة الوقت التي أسار لها أسامة، نقطة صراحة يعني سليمة وفي نفس الوقت إن أرى أن الوقت ظهورًا صحيح ونفسي صحة عندًا بحكم أنك في رياضة وفي إجازة أفضل عنك أو ماراكم!! معنى في ذلك فهذا سيعود عليك بالنفع الميكانيكي ولكن نحن مشكلتنا ما هي؟!! مشكلتنا أصبحت تجد أحدنا يقول، والله أنا الآن الذي شغل متراكم وأراه أمامي على الطاولة، وMage سعوري وثلاثين في الجري فاني سعور وضعها)، وهذا أشتقت الناس في الرياضة، على الرغم من معرفتي من أن تواجد الرياضة.

المشارك 1: أنا أحاول أن أتذكر أوقات أسف وأدعنا، حيث أشتقت الناس على الرياضة في اتجاه جيد وإدارتي الوقت التي أثار لها. نفسي صراحة يعني سليمة ونفسي صحة عندًا، سأكون نفسًا في الرياضة ونفسي صحة عندًا، سأكون نفسًا في الرياضة.

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المشارك 1: وأنت أحكم على نفسك في الرياضة ك.mdl oluşturulIVEAGE.GNEMOYDUMT.UQF.XYUW.GNIMORATU.WHUSER.1QDOY, ونفسي صحة عندًا، سأكون نفسًا في الرياضة ونفسي صحة عندًا، سأكون نفسًا في الرياضة.

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المشارك 1: وأنت أحكم على نفسك في الرياضة كذلك لا يوجد تحويل لدواليب.
ضحك جماعي

فنا أنقل أثاث الشقة مع زوجتي من غرفة لأخرى ونلتقطها لقيم ببعض الحركات الرياضية معاً. وهذا أحياناً.

الباحث: كمامة يوسف؟

يوسف: كمامة والله صراحة لا أعرف ممكن يحكم أن زوجتي أيضا مشغولة وكان معها الأطفال فلما يوجد لنا وقت للأسرة في ليبيا كنت قد سجلتها في صالة وذهبت لها وتمارس الرياضة وقد إشترت لها جهاز تريدميل فعلى إعتبارى كنت أريد أن أضع غرفة مخزنة لها لأجل أن تمارس نشاط وهذا مهم جداً لأنه في ضل وجود نشاط بدني لا يوجد مرض

أحمد: العقل السليم في الجسم السليم.

يوسف: نعم أكيد تبحث عن الأمراض تبحث عن الحمول تبحث عن السمنة تبحث عن أمراض القلب وهذه كلها أمور مرتبطة بحماسة الرياضة. وفي الرياضة، خمول زيادة في الوزن وتترتب عليه مشاكل كثيرة صحية. وبالتالي نتضح أنك تستطيع الدورة الأولى وفي نفس الوقت أطفالك والأسرة جميعها تستطيع.

أحمد: علم الرياضي الاجتماعي، عاداً عن أن الإنسان يعود على النفع على جسمه، يكون صداقات ويلتقي مع الأخرين ويتبادل معهم.

الباحث: تمام ولكن دعنا في إطار الأسرة فهل أي أجد يمارس أي نشاط بدني كأسرة?

المشارك: بالنسبة لي في حدود الأسرة أنا صراحة، الفترات الماضية لم أكن مركزاً عليه ولكن أخيراً ركزت عليه بالنسبة، حتى بشكل خاص النساء يركزن كثيراً.

الباحث: كيف ذلك؟

أسامة: من أي ناحية؟ يركزن على الأمانة التي تكون مشغولة في دراسة، في الدخول أو شرب أو الجلوس لدراسة.

والنازلة لنا نحن كليبين ومسلمين لا أستطيع أن أترك زوجتي تذهب للجم لأنك تعرف الوضع هنا فالنادي قمت به، اختصرت شريط أجهزة رياضية ووضعتها في البيت وأحفرها بحيث.

الباحث: هل هناك تجاوب؟

أسامة: نعم هناك تجاوب وفي نفس الوقت حتى خالف البيت تشاركنا وتخريج مع الأحيانا للمشي من جهة أنا لا أمل ومن جهة أخرى هي تستفيد، أما أنا استفيد عندما نعود البيت تكون ساخنة بعض الشيء فقط.

المشارك: هل تخرجون خصيصاً للمشي?

الباحث: هل هناك فرق سواء جسمياً أو نفسياً بين أن تمارس المشي مع زوجهك أو بمفردك؟

أسامة: فيه فرق كبير جداً.

الباحث: إيجب؟
المشارك 2: أيجابي جدا حيث يمكنني أن أقول أن نسبة الإيثابية فيه تصل إلى نسبة 100% لماذا؟ لأنني عندما أمارس لوجدي أمل بسرعة وأدخل في التفكير في بعض الأشياء ولكن عندما تكون معي تشجعني زايد أن الوقت بمر بسرعة.

المشارك 1: هل تمشي لغاية المشي أو لغاية أخرى مثلا؟

المشارك 2: لغاية المشي زايد أنيث أحيانا أكون متعمد أن أمشي لغرض التفرج على شيء ما أي أختلق عذرًا للخروج.

المشارك 4: أني أعتقد أنه بالنسبة لهذا السؤال أنا عكس أسامة بالكامل بصدق لأنني لا أملك هذه الثقافة أي أمارس تمارين أنا وزوجتي ولكن لدي رأي آخر ففي نقطة أشار لها أحمد عندما قال الواجبات أو عمل البيت فانا أعتقد بأنه ليس نشاط رياضي.

المشارك 3: نشاط بدني.

المشارك 4: هو نشاط بدني ولكن تقوم به أنت وزوجتك لأنه لا يوجد شخص آخر سيساعدك في نقل شيء من مكان لأخر وكذلك هي أيضا حيث لو أنها تستطيع فضاء عمل ما يمكن أن تقوم به بمفردها ولكن شبيه نقل فذلك ستطضر بأن تتوّزب عنها.

الباحث: فقط لأنك ملزم بها.

خالد: أحيانا غير واردة أصلا في تفكيرك.

الرفاعي: تعني أنه من غير الواعرد عندك ثقافة ممارية نشاط بدني مع زوجتك؟

المشارك 4: لا والله بصدق.

المشارك 3: لا والله هي من تشجعني.

المشارك 1: ثم أنه ليس أي نشاط متاسب مع المرأة. ... أنا عندما أخرج في رحلة في ليبيا فأتي أقوم بتركيب أعمدة وشبكية وكرة طائرة فطبدا النساء دائما يجبن لعبة الكورة الطائرة في ألعاب تتناسب مع المرأة بخلاف ذلك لا تجدها تفعّل في كرة قدم فإهتماماتك في الرياضة تختلف عن إهتمام زوجتك أحيانا (01:06).

المشارك 3: بالنسبة لزوجتي هنا في بريطانيا دائما تشجعني لمارسة الرياضة، بدأ أن جارنا الإنجليزي من نفس عمري يود أن يشارك في ماراثون مانشستر بات بومبا يستعد له ودائما تضعه مثلا لي وتعابريه به ودائما تشير تعبرتي ببطني وهي تشكل لها هاجس وهي ترغبها على مستوى الصدر وهي تمارس الرياضة معي كي أمارس أنا ذلك.

الرفاعي: آخر سؤال في جلستنا الكريمة هذه ما هي وجهة نظر الدين فيما يخص ممارسة النشاط البدني؟

المشارك 1: طبعا إسلامي يتحثنا على الرياضة ويحثنا على الممارسة والانسان لا يكون خالما وعُيّن حديث للرسول صلى الله عليه وسلم (المؤمن القوي خير عند الله من المؤمن الضعيف) فنشاطك بل على العكس الذين لم يقتصر حث على
ممارسة النشاط للرجال فقط بل على العكس للجميع وسبحان الله... الدين لم يتعارض ابدا مع شيء يتعلق بصحة أو يتعلق بالنفيع بالتالي الدين يشجع على نقاط كهذه.

المشارك 4: هناك أثر على سيدنا عمر يقول في (علموا أولادكم السباحة والرماية وركوب الخيل) فرضي الله عنه كان مصدره لهذا الكلام أو لهذه الفكرة عدة أشياء كنشاط بدني أو رياضي وهي تهيئة الأجيال. تلك الفترة كانت فترة قرون ذات إسلامية فكان الإسلام يحتاج إلى ناس تكون صممتهم جيدة ومتعلمين من هذه الناحية.

المشارك 1: والرسول عليه الصلاة والسلام كان يقول (تخوشنوا تخوشنوا فإن النعمة لا تدوم) فمن باب أنه يبت فينا على العمل حتى أنه عندما قيل بما وجدنا ناعمة, ((قبل يد خشنة, قبل يد ناعمة ووجدنا كالمرأة)) فالإنسان المتخوشن.

المشاركون 3: التاريخ الإسلامي بالسيرة يمجد ويدكر بالخير الناس الذين كانوا أقوياء وأجسامهم على قوة بدنية،كذا كانوا مصارعين،حتى النبي صلى الله عليه وسلم كان هناك رجل لا أحد يصرعه،والتقي صلى الله عليه وسلم صرعه،

المشارك 1: كان يسابق في زوجته الرسول عليه السلام, يسابق السيدة عائشة وهو كان يمارس الرياضة كعائلة. يقز لها سابقتي, فهي مرةعلت ومرة غلبها فقتلها صلى الله عليه وسلم واحدة بوحدة.

الباحث: أسامة ماقولك؟

المشارك 2: نفس ما قال أحمد هو ما كنت أود قوله زهر بن بقين...

الباحث: أين الدين يؤيد مسألة النشاط البدني؟

المشارك 2: بالضبط تماما

الحمد لله
تحليل المقابلة. الدراسة الثانية (رجال)

* النشاط البيني كثقافة عامة

هو جميع ما يقوم به الإنسان خلال نشاطه اليومي من الاستقاض حتى النوم. يختلف من شخص لشخص من جنس لجنس الشاب الصغير يختلف عن الكبير. بالعملية الحركية وليس ذهنية. ما يؤدي إلى استهلاك طاقة وسعة حرارية.

الفوائد المجانية من خلال ممارسة أي نوع من النشاط البيني.

بعض الأنشطة الغير مفيدة، لماذا؟ لأنك أن كنت تمارس نشاط بدني ما في وضعية غير صحية مثال فقط يترتب عليه إصابات ومشاكل نفس كل نشاط بدني مفيد. اليوم الذي لا يبذل فيه أي مجهود وللمهم فيه بأي نشاطات فيكون يوم كتاب خنوع وحتى النشاط الذهني يصاب بعمرات من الركود (لا تعكس على الاء الذهن). عند ممارسة عضلي تشعر بالسعادة لأنك قمت بمشي عاد عليك بالنفع على جسدك تعطي الثقة بالنفس (كما كان جسم الإنسان متناسق) وأقل أمراض وأقل عرضة للإصابة. أقل عرضة للمرض.

- أصنف نفسك من الخاملين... أنا لست براضي على ذلك.
- لذي معدل نشاط بدني يساوي صغر... نتيجة إصاباتي بانزلاق غضروفي في ظهري.
- مشكلتي أن النشاط الذي أقوم به والساعات التي أحرقها أسارع بتعويضهم بسرعة في الأكل.
- أن الشغل العضلي ونها في بريطانيا عوضه بالمشي، أعمل في مطعم وهذا يجعلني أعوض أيضا.
- فإن المشي أكثر شيء أعتبره كرياضة.

** معدلات النشاط البيني الآن وما كانت عليه في البلد القادم منه.

هذه القضية مرتبطة بشكل أساسي بالظروف الشخصية. كان أفضل بكثير لأننا هنا لدينا لا تقوم بأنشطة رياضية بينما كنت سابقًا يوماً أمازس الرياضة. كان أفضل بكثير في ليبيا.

** عندك سيارة ونالك خيارات أفضل... علاوة على البتينه... الطقس أيضا.

كان أغلب حركتي محدودة السيارة والبيت مثل مساحة اجتماعية مثلا عمل أي لا يوجد ذلك الجهد. بيني. النبي إن كانت المقارنة بهذا فناناً اعتقد بأنه هنا أكبر. كنت في ليبيا أفضل من هنا غير ذلك كان عملي عضلي في ليبيا.

الأنشطة التي تعتمد على الخمول البيني؟
 التلفزيون.
كالبلايستيشن.
في بريطانيا لا يوجد وقت للتسليه.
تصفح النت.

الدوافع للتسليه التي تعتمد على الخمول البدني؟

- يحبك لهذا النوع من الإستمتاع عن الروتين.
- تطور الضغوط الواقع جراء الدراسة.
- ظروف الصحة.
- ظروف الإجتماع.
- تركيبتي ليس لدى حواشت.
- سيكون هذا نوعي وأحب الشيء المريح.

سألجاء إلى شيء بسيط وقرب جدا (قرب وسائل الترفيه التي تعتمد على الخمول ) بعكس التفكير في الخروج للجري وهذا يعني أنك ستقوم بنشاط آخر (البحث عن الشيء السهل).
وقت الفراغ ليس منظم.

- لأن هذا الوقت زمن راحة يرغب الشخص فيها في الراحة فلا يبذل أي جهد.
- فلما لمشاهدته.
- وليس مطلوبا منه طالما يريد الراحة أن يبذل جهد. (ذلك موروث ثقافي أي)

أهمية الحالة البدنية

- أستطيع القيام بأي شيء أريد القيام -- الرضي عن الذات.
- بدونها أنت لا شيء، لا تستطيع القيام بأي شيء.

أهمية الكفاءة الرياضي

- حافز.
- مهم جدا.

- التنافس جعل الناس يتابعوا الرياضة ويلعبون لها مسابقات وهو منذ بدء الخليفة.
- وأوجد الأبطال.
- وأوجد الولاء.
- وأوجد الموارد والفروق.
- وأوجد الدراسات.

أهمية الجاذبية الجسمية:

- مهم جدا.
- أعاني من منطقة البطن.
- بطني بارزو بهذا الشكل تشوه اللباس بالكامل.
- العامل النفسي -- تأثير نفسي سلبي وإحباط للجسم المكتنز.
- ولكن الناس يمكن أن يلاحظونه.
الجنس الآخر

هي الشكل الذي توضع عليه الملابس وهي الشكل الذي نقابل به الآخرين فهي تشكل أهمية كبيرة.

أهمية القوة البدنية:
- تعطيك ثقة.
- درجة أهميتها كبيرة جدا.
- تعتمد على نفسك.
- نفسها وشخصية.

الأسابيع التي تحول دون ممارسة النشاط البدني:
- ظروفك الصحية.
- الجو مرات لا يساعد.
- وقت فاراغك (قلة الوقت).
- الظروف النفسية.
- الوضع الإجتماعي في بريطانيا (وبالنسبة لنا نحن كليبين ومسلمين لا أستطيع أن أترك زوجتي تذهب للمشي).

نتغلب على كل هذه العقبات:
- إدارة الوقت.
- البحث عن مشكلة.
- تنمية المعلومات العامة.
- استخدام طرق جديدة مع أجيال جدیدة.
- آتي تعلم ذلك من صغير أو من المدرسة.
- أحيائي أي ما زادت التزاماتي وحجم العمل عندي لكنها ستكون أساسية عند.
- حجم دراية الشخص بأهمية الرياضة.

النشاط البدني كعائلة:
- أرفع معها شيء في البيت.
- زوجتي أيضا مشغولة.
- الوضع الاجتماعي في بريطانيا (وبالنسبة لنا نحن كليبين ومسلمين لا أستطيع أن أترك زوجتي تذهب للمشي).
- لا أملك هذه الثقافة.

وجهة نظر الدين فيما يخص ممارسة النشاط البدني:
- إسلامنا يحثنا على الرياضة.
Focus Group Interview translated into English (MEN)

➢ Terminology & Knowledge of Physical activity (TKPA)

- Gender differences n=2 {Sports for men are different from women}
- The practice of various sports activities n=11 {When I play football or go to the Gym}
- All the activities that we do from waking up till going to bed n= 2 {Anything that I do during the day}
- Energy expenditure and calories and burning excess fat in the body n= 1 {Physical activity contributes to fat burning}

➢ Physical Activity & Sedentary Behaviour (PASB)

1 Satisfied with my physical activity level n=5

- Working in a restaurant and doing a hard work n=3 {I carry boxes inside the shop and move around}
- Helping my wife to do her work at home n=2 {I like to help my wife in the kitchen and the work of house}
- Overeating after doing physical activity n=2 {I am doing a good physical activity, but I compensate that by overeating}
- Walking rather than public transportation n=3 {although I have a bus ticket, I prefer walking}
- Doing a type of sport n= (5)

2 Unsatisfied with my physical activity level n=11

- Sit for a long time at the computer n=9 {because I am too busy for my study most of my time on the computer}
Sit for a long time watching TV n=9 {I like watching TV programs or movies and that’s leads me to eat more}

Use PlayStation n=3 {I enjoy a lot playing playstation with my children and my wife and we spend a long time in that}

3 Physical activity level in the UK and your country

I was more active in my country n=9 {I had a lot of free time that I used to go to the gym and play football}

I was less active in my country n=7 {I had many social engagements and I did not have a free time but here I am able to manage my time}

➤ Positives of Physical Activity (PPA)

1 Benefits of PA

I feel self-confident n=3 {When my physical fitness high I feel that I am very confident}

I feel my mind is actively n=3 {when I do a PA I feel that my mental activity rate is very high}

I feel active to do everything n=9 {I feel that I am able to do anything and lift anything}

I feel healthier n=10 {When I do exercise I feel that I am in a good health}

Less susceptible to diseases and injuries n=3 {when my physical fitness high that protects me of injuries such as muscle tension}
2 Facilitators for PA.

- Enjoyment n=8 {I enjoy a lot going out with my family to the city centre and shopping, walking}
- Religion n=16 {our religion encourages us to do sport}

➤ Barriers to PA (BPA)

1. Lack of time n=13 {I don't have much spare time}
   - Caring for children while my wife studying n=4 {because my wife doing a (PhD/M.A) I have to stay at home to care my kids}
   - Busy studying n=9 {because I am busy all day for my studies I need to stay at home with my family rest of the day}
   - Busy working n=4 {because I am busy all day for my work I need to stay at home with my family rest of the day}
   - I do not have a car n=12 {because I do not have a car I would need for a long time to reach the facilities to do physical activity}
   - Difficulty of organizing leisure time n=8 {I have a problem that I’m unable to organize and manage my time}

2. Health conditions n = 3
   - Disease n=2 {I have a chronic disease for years ago prevents me from doing physical activity}
   - Chronic injury n=1 {because I have chronic injury for years I cannot engage in sporting activity}
3- Sociocultural.

- Cultural n=9 {because it is my leisure time I do not want to do any work}
- Social status n=12 {because I am always busy (study / work) I prefer to spend the rest of the day with the family}

4- Weather inappropriate n=5{because it is always raining I cannot cycling or doing exercise outdoor/ I hate the cold and winter is very cold in Britain}

5- Psychological state n=7 {I don't feel any desire to engage in any physical activity when my psychological mode is bad}

6- Social-economic situation n=2 {my social economic situation not enables me to pay for gym or buy sports equipment}

- Motivations for sedentary behaviour (MSB)

1- Distraction

- Get away from the study pressure n=3{to stay away from the pressure of the study I prefer to play any videogame like play station}
- Get away from the daily routine n=7 {When I watch a movie that helps me to change my mood and stay away from the monotony}

2- It’s who I am

- Personality n=2 {I tend to be inactive guy this my personality}
- I have no hobbies n=1 {this is my nature; I have no hobbies to do}

3- Easy option

- Looking for an easy activity n=2 {in my spare time I’m looking for anything close and easy to do}
4- I like this type of activity n=11 {I like to do this type of activity since I was young}

➢ Family factors (FF)

1. Work at home n=5 {I like to help my wife to do her work at home and I think I’m physically activate through that}

2. Culture n=6 {I do not have this culture}

3. Walking n=8 {I enjoy a lot going out with my family to the city centre and shopping, walking because I don’t have a car}
قبل كل شيء دعونا نتعرف على أسمائه

المشارك 1
المشارك 2
المشارك 3
المشارك 4

الباحث هل كل منكم أخذ إذن من أسرته بالمشاركة

المشاركون نعم

الباحث وأولا شكرًا على موافقتكم رغم صغر سنكم ولكنكم منفتحون ومتفهمون بالهدف أن نعطيك فكرة عامة عن البحث قبل البدء في الأسئلة، أوكى أجريت دراسة أولى لمعرفة معدلات النشاط البدني عند العرب المقيميين في ليفربول، هل نشاطكم البدني عالي أم منخفض؟ لأسف منخفض جداً، هل تعتبره نسبة مكونة في الحياة اليومية

الباحث هل كنت تعرف أي ممارسة الرياضية وكم مرة?

المشارك 1، هل تعتبر نشاطك نشط؟
المشارك 2، هل تختار مناسبة بدنية تُلَّكُه أو تُجُدُهِ؟

المشارك هل تتوقع أن نفسك تكتب بلاغة مناسبة عن النشاط البدني؟

المشارك 1، هل تعتبر نشاطك هواية، هل تختار نفسك شخص نشط أم لا؟
الباحث: "في الوقت الحالي لا بحث، هل يوجد مالذي تقصده بنك في الوقت الحالي لا؟؟؟
المشارك 1: "لأتي حوالي ثلاثة أشهر لا رياضة لا ألعب كروة ولا رياضة كل الوقت إلا على البلايستشن.
الباحث: "لذا تعتبر في نفسك خلال هذه الفترة غير نشط.
المشارك 1: "الفترة هذه لا效益... قبل ذلك كيف كان وضعك.
المشارك 1: "كل أحد كرة قدم كل أحد تدريب وكتبت أذهب للجم وامام السباحة أذكر كل أربعاء وسبت.
الباحث "ماذا عن المدرسة هل تقومون بأي نشاط.
المشارك 1: في المدرسة كل يوم أو يومين.
الباحث "نشاط بدني.
المشارك 1: "نعم خاصة لو الجو جميل تلعب كثيرا، ولكن لو الجو ليس جميل لا تلعب كثيرا.
الباحث "عبدالله ماذا عنك؟؟؟
المشارك 2: "أعتبر نفسي نشط.
الباحث "تعتبر نفسك نشطا، لماذا؟؟؟
المشارك 2: "نعم خاصة لو الجو جميل نلعب كثيرا.
الباحث "أناش طببي من حيث على السباحة.
المشارك 2: "مسافة بعيدة؟؟؟؟
المشارك 2: "ليس بعيد كثيرا، ولكن المشكلة أنه لو الجو برود اضطر أركوب الباص أو استعمل الدراجة، كنت دائما كل أسبوع ألعب كرة قدم ............... في المدرسة وفي وقت حصة الرياضة دامو ألعب كرة مع أصدقائي.
الباحث: كنت تمارس الرياضة والأن توقف؟؟؟؟؟؟
المشارك 2 "بسبب مشكلة الاتصالات.
الباحث "تعتبر بسبب مشكلة الاتصالات؟
المشارك 2: "نعم.
الباحث "هل هو مكان بعيد الذي تمارس فيه الرياضة؟؟؟
المشارك 2: "لا يمكن أن أبادو ولكن الجو بارد حيث أنه قريب من البيت وأستطيع الذهاب له.
الباحث: هل الحوض مفتوح أم مغلق؟
المشارك 2: لا أنه مغلق
المشارك 3: ولكن بسبب البرد.
المشارك 2: أي تدخن داخل المبنى ولكن عند خروجك يكون الجو بارد.
المشارك 3: تأييد.
المشارك 1: في هذه البلد الجو متقلب مرة أمطار ومرة أخرى شمس ومرة أخرى برد في نفس اليوم؟
رياض: إذا مشكلة عدم الذهاب للسباحة (على الرغم من أن المكان مهيئ من الداخل أي دافئ)
لكن المشكلة عند خروجك.
المشارك 2: لو بقيت، ولكن لو يخرج مباشرة إلى السيارة ويتجنب الباب يعتبر الأمر عادي ولكن لو بالباص.
المشارك 3: سلطان، إذا تعتبر نفسك نشط بدني؟
مرابح: نعم
المشارك 3: نعم سلمان كيف تصنف نفسك؟
سلمان: لا غير نشط
خالد: لمذا؟
سلمان: لأن الجو غير جميل في الخارج.
07.03
خالد: تقصد الطقس.
سلمان: نعم، كنت ألعب مع فريق كرة
خالد: هل توقفت على لعب الكرة؟
سلمان: نعم (بهز الرأس)
خالد: إذا هذا هو السبب الذي يجعلك تعتبر نفسك غير نشط بدنيا، إذا كيف تقضي وقتك، بلاستيشن أيضا كما أخيل.
سلمان: نعم
خالد: هل لديك أي نشاط بدني في المدرسة؟
سلمان: نعم هناك نشاط في المدرسة.
خالد: ما هو نوع النشاط البدني الذي تمارسه في المدرسة.
سلمان: سباحة، كرة يد.
سلامان: لا لا فقطجمعةوخميس
خالد: رياض كيفتصنيف نفسك هل أنت تعتبر نفسك نشط بدنيا
رياض: نعم أنا نشط بدنيا
خالد: لماذا وعلى أي أساس جاء هذا التصنيف وقيمت نفسك بأنك نشط؟
رياض: لأنني أتحرك كثيرا وألعاب كرة وأمارس رياضيات في المدرسة
خالد: هل تلعب الكلكرة كل يوم
رياض: أغلب الأيام
خالد: قلت أنك تتحرك، فهل تعني بأنك تمشي كثيرا
رياض: نعم في بعض الأحيان
خالد: أين تكون مشاويرك عادة
رياض: أحيانا أعود إلى البيت من المدرسة
عبدالله: هل المسافة بعيدة من البيت إلى المدرسة
خالد: هل تقصد مشي من المدرسة إلى البيت؟
عبدالله: المسافة بعيدة
خالد: بينه بالقرب من بيتنا والمسافة بعيدة
رياض: حوالي 2 ميل.
خالد: كلنا عرب ولنا خلفيات عربية مرتبطة بدولنا العربية، وأتمنى تجربة النشاط البدني في دولنا العربية وهنا، فما هو الفرق من حيث معدلات النشاط البدني الخاصة بك بين هنا في بريطانيا وبين هناك؟
عبدالله: لعندما تكون في البلاد العربية الأب والأم لا يخافون عليك كثيرا ويشعرون بأمان أكثر، فالأمر عادي أن تخرج وتتربى، ولكن هنا في بريطانيا نحن في غربة. غالبًا، الأب والأم يخافون عليك أكثر الأحيان لا يتركونك تخرج، إذا أخبرتهم بأنك أذهب إلى مكان أو أذهب إلى رحلة أو أمارس رياضة أو إلى أي مكان أنا وأصدقائي يجب أن يوصلني أحد إخواني الكبار، ولن يتركونك تخرج. أنا مثلا، إذا أخبرتهم بأن أذهب إلى مكان مع الأصدقاء، أو إذا أخبرتهم بأن أذهب إلى مرمى يتابعني ويرفعي حركتي وذلك خشية أن تحصل لي المشاكل، ولكن عندما كنت في اليمن، كنا نحب تلعب كل يوم وتخرج لأي مكان.
خالد: هل هذا يمكنك أن تمارس نشاط بدني هنا
عبدالله: نعم الأمر عادي لأن ذلك أمام، ونتبع بالأمان. تعرض الناس جميعاً والجبانأما هذا فأنه يمكننا محدود ولا يتكمن كثيراً، ونعيش في البلد العربي دحر بأن تخرج لأي مكان، بالنسبة لأصدقائي أو حتى قلبي لأن الأمل والأب يشعون بأنهم يعرفون أنك تخرج بينما هنا يمكننا لأنهم لا يعرفون الأماكن التي تذهب لها.
خالد: هل هذا يمكن أن تمارس نشاط بدني هنا
عبد الله: نعم، أكثر الأحيان
خالد: ما رأيك سلطان؟
سلطان: نسخ الشيء، بس فيما يخص المزيد الذين يعيشون في الجامعة والذين لا يعملون في الدكاكين والمحلات والمطاعم، هم جالسون لا يتحركون.
خالد: عفوا، أنا أقصد الذين في أعماركم، ما هو وضع النشاط البدني عندك عندما كنت في الإمارات؟
سلطان: نفس القصة، أمري تقول لا تخرج، تخاف.
خالد: في الإمارات أم هنا?
سلطان: هذا.
خالد: ماذا عن هناك في الإمارات؟
سلطان: هناك الأمر عادي يمكن أن أخرج عادي.
خالد: هذا ما أقصده، أعني، وجهة نظرك، هل هي مثل عبدالله؟
سلطان: بالضبط.
خالد: وهناك هل الأمر عادي وسموح لك بالخروج لأي مكان?
سلطان: عادي، أخرج لأي مكان.
خالد: هل هنا يوجد حرص مبالغ فيه?
سلطان: هنا الأمر مختلف.
خالد: هل هناك، هل الأمر عادي، ليس لديهم مشكلة في ذلك؟
سلطان: (بهز الرأس) نعم.
خالد: هل هذا أمر عادي، ليس لديهم مشكلة في ذلك؟
سلطان: لم تكن هناك منشآت تمارسها هناك.
خالد: هناك خلف بيتي شاطيء أمام البيت حديقة وأصدقائي هم جيران الملاقصين لدينا، فخرجنا معا إلى الشاطيء، سواء بالدراجات أو نلعب كرة.
سلطان: هناك الخراجت مبالغ فيه.
خالد: هل هذا أمر عادي مع والديك، ليس لديهم مشكلة في ذلك؟
سلطان: (بهز الرأس) نعم.
خالد: هل تستطيع القيام بذلك هنا في بريطانيا؟
سلطان: لا يوجد مجال، لا حديقة ولا غيرها، حتى وأن ذهبت إلى الحديقة، لا شيء يمكن أن نفعله، لن نجد ما تفعله.
خالد: لو قارنا المدارس هنا والمدارس هناك؟
سلطان: لا المدارس هنا تختلف/ حسن مليون مرة من هناك.
خالد: أقصد من حيث النشاط البدني.
سلطان: نعم
خالد: هل هي مجهزة أكثر أم البرنامج نفسه أو حصص الرياضة أين الفرق
سلطان: الاستراحة هناك ما بين 10 إلى 20 دقيقة أما هنا فتستغرق ساعة
خالد: فيما يخص النشاط البدني وحصص الرياضة هل هناك إختلاف بين هنا وهناك؟
سلطان: نعم هناك إختلاف
خالد: ما الفرق بين هنا وذلك?
سلطان: هناك تأخر على هنا ، حيث هناك يختلف الأمر البلدية ، مثلا عندما تحظر لاعب كرة من الإمارات أو من اليمن ولعب كرة من هنا فإنها سيقول علموني فانا لا أعرف شيء، لا يعرف شيء فلاعب هناك يودي كل شيء من استخدام الرياضة هناك أصلا من اليمن أو من الأمارات وهم مختلفين لا يعرفون شيء ... هنا فرق
خالد: فيما يخص النشاط البدني وحصص الرياضة هل هناك إختلاف?
سلطان: هنا أفضل من حيث المعدات وزمان الحصة
خالد: عبدالله ، ما رأيك فيما يخص وضع المدارس هنا و هناك من حيث النشاط البدني أقصد
عبدالله: لا أستطيع الكلام عن المدارس في اليمن لأنني كنت في اليمن كان عمري حوالي 5 سنوات ولا زلت في الروضة ولكن عند الرجال تخرجت من السنة الأولى حتى الآن في الصف التاسع ولكن هنا أحسن لأنه هذا المعدات وكل شيء هنا أفضل كما أنهم يوفرون شخص مختص في كل مجال فهناك مدرب كرة وأخر للسباحة وكل في مجاله ، يعني التقنية أفضل في البلدان العربية لا يمكن أن تتحصل على كل شيء وفجأة لك حيث للحصول على هذه الخدمة فإنه من الضروري أن تدفع للمدارس لكن هنا تلقى المساعدة في كل شيء.
خالد: ماذا عن حصة الرياضة بين هنا و هناك. هل هناك اختلاف
عبدالله: لا أتذكر لأنني كنت صغير
سلطان: لا أذكر لأنني كنت صغير
خالد: محاورًا على المدارس في اليمن و في الإمارات ؟ رأيك أنت الشخصي
سلطان: نفس ما ذكر الشباب
خالد: هل هناك فرق بين هنا وهنا
سلطان: مالذي رأيته في الإمارات ، و مالذي رأيته هنا
خالد: في المدارس ، مالذي رأيته هنا وهنا
سلطان: في الإمارات يمكننا الخروج في أي وقت ، ولكن هنا لا
خالد: تخصص أو تخصص في الشارع: سلمان: نعم
خالد: أي أنه من غير الضروري أن يكون معلم شخص كبير ، أمر عادي
سلمان : نعم
خالد : ما نوع الألعاب التي تمارسونها في الشارع
سلمان : كرة القدم
خالد : نعم رياض لنسمع صوتك ( رياض أنت أصلا من اليمن ؟؟؟ )
رياض : نعم
خالد : ما رأيك في الفرق في معدلات النشاط البدني بين ما تراه هنا في بريطانيا أو في اليمن
رياض : كل الأشياء المطلوبة متوفرة ، كالرياضة هنا أفضل من اليمن فعندما كنا في اليمن في حصة الرياضة لم نكن نعمل أشياء كثيرة
خالد : تقصد في المدرسة
رياض : نعم ، ولكن هنا يمكننا أن نمارس كرة القدم ، السباحة وأشياء كثيرة
خالد : وخارج أوقات المدرسة ؟؟
رياض : هنا يوجد أشياء أكثر يمكن عملها في أثناء عطلة نهاية الأسبوع حيث لا يوجد أشياء كثيرة نعملها في اليمن
خالد : لماذا عن باقي الأيام ، وأقصد أيام الأسبوع وليس العطل
رياض : يمكننا أن نخرج وتلعب كرة ولكن ليس أمان كما في اليمن
خالد : هل ذلك يستوجب أن يكون هناك شخص بالغ معك
رياض : نعم
سلطان : مثلا في المدارس العربية تبدأ الساعة 6 أو 7 صباحا ، فأنا عندما كنت في الإمارات أبدأ عند الساعات و 8 أو التاسعة و نص حسب الساعات 7 بينما هذا الوضع يكون في اليمن في المدارس العربية، إلا أن الرؤية أكثر من الوقت في اليمن، حيث هناك وقت للصلاة، وتقرأ القرآن، ويكون هناك وقت للبس، ولهذا نعمل في اليمن
خالد : هل هذا هنا في بريطانيا تقصد ؟
سلمان : لا نعم في الإمارات هناك لجنة للصلاة، حيث يوجد وقت للصلاة وإلقاء البارود، ونجد وقت للصلاة
خالد : هل لديك وقت للصلاة في المدرسة ؟
سلطان ، عبد الله : نعم لدينا
عبد الله : نعم ويساعدنا على ذلك أنه في المدرسة هناك أستاذ عربي، ومعناه أنه نحن نستفيد من أستاذ عربي يدرسون الجزء الإسلامي في وقت الحصة حيث يوجد وقت للصلاة، وهنا نعم لدينا
خالد : هل لديك أماكن لإقامة صلاة الظهر
عبد الله : نعم ، سلمان : نعم هناك
سلطان : إلى حد ما مساحة صغيرة
عبد الله: لا يوجد الكثير يصلون ولكن أذهب أنا وأصدقائي العرب لأداء الصلاة ثم نأكل شيء بعدها نذهب للعب الكرة
خالد: بشكل عام أتمنى على منكم أن يعطيني ملخص لنمط العام أو معدل النشاط البدني لديه في حياته العامة بين هنا و هناك فهل تعتبر نفسك أنشط من هناك؟
سلمان: نعم
خالد: هذا انت سلمان وماذا عنك عبدالله؟ هل هنا أنشط مما كنت في اليمن؟
عبد الله: أعتقد نعم لأنني كنت في اليمن كنت في حينها لا أزال صغير ولا أستطيع عمل أشياء كثيرة، بينما هنا بعد ما كبرت ألعب كرة وأمارس السباحة أو أي شيء.
خالد: أنت سلمان هل تصنف نفسك هنا أكثر نشاطا أو عندما كنت في الإمارات؟
سلمان: لا هنا أكثر.
خالد: ما هو نوع النشاط الذي تمارسه والذي يجعلك تشعر بأنه نشط بدني أو أحسن شيء توديه وتشعر أنه مفيد لك بدنيا يجعلك نشط بدنيا.
سطن: الجم (صالات التمارين الرياضية)
سطن: هل تذهب للجم؟
سلمان: نعم
سطن: هل تشعر أنه أفضل نشاط تمارسه يجعلك نشط بدنيا؟
سلمان: نعم
خالد: ماذا عنك عبدالله؟
عبد الله: العب الكرة
خالد: كرة القدم؟
عبد الله: نعم
سلمان: كرة القدم
خالد: وانت رياض.
رياض: كرة القدم
خالد: سليمان لماذا تحبذ الجم عن كرة القدم أو السباحة
سطن: لا أذهب إلى الجم في الأسابيع حوالي 4 مرات بينما الكرة مرة حوالي ساعتين أو تضعها ضمن زمن الأيام فإنها ستكون ساعتين، المباراة المبارة ساعة، والتدريب ساعة 20:48 ولكن الجم من الساعة 5 إلى الساعة 7 كل أربع أيام
خالد: ماذا ترى أن كرة القدم هي أفضل نشاط بالنسبة لك؟
عبدالله: لأنها أكثر نشاط بدني أمارسه غير المشي وباقي الأشياء فأكثر الأنشطة التي أمارسها هي كرة القدم حيث هناك مدربين خاصين أنا لأني في عمري الدراسي لا أستطيع أن أدخل الجم حيث أنه بدأ من سن الصف العاشر
خالد: قدص أن عمرك لا يسمح؟
عبدالله: نعم
سلطان: لو أستطيع الذهاب إلى الجم سأذهب، وأنان في التأريخ الثاني ساذا، وهنا، هناك مدرب خاص والأدوات والمعدات الخاصة بكل شيء، كذلك يكون مناسبًا من حيث الوقت، الكرة، فيها، مثلًا أستطيع اللعب مع فريقي المدرسة، كذلك، مع الفريق الذي أنا مشترك معه في يوم الأحد والتدريب معه، يعني أكثر رياضة أمارسها هي كرة القدم.
خالد: لماذا تعتبر كرة القدم هي أفضل نشاط بدني تمارسه؟ لماذا تفضلها على غيرها؟
سلمان: لأنني أحبها
رياض: لأنه يمكن أن تلعب كرة القدم في أي وقت، كذلك فيها أشياء كثيرة
خالد: مثل ماذا؟
رياض: تكون قادرًا على ممارستها وترحني
خالد: سأسأل سوال آخر قريب من السابق، لماذا تحب أن تمارس أي نشاط بدني سواء الجم أو سباحة أو كرة قدم أو
سلمان: نقصد لماذا أحبها؟
خالد: ما أعنيه لماذا تمارس هذا النشاط أصلا ليس فقط لماذا تحب دعنا نبدأ بك رياض، لماذا تمارس أي نشاط بدني
رياض: لأنه أحبها
خالد: فقط لأنك تحبه؟
رياض: نعم
خالد: هل تشعر أن فيه فوائد أخرى أو ميزات أخرى
رياض: يمكن أن تساعد في الجري أو شيء ما في الرياضة الخاصة بي 23:28
سلمان: أحبها كثيرًا أني عندما كنت صغيرًا كنت تلعب الكرة ض
خالد: كرة القدم؟
سلمان: نعم
خالد: تعي أن هذا السبب الذي يجعلك تحب ممارستها؟ لا تشعر أن هناك فوائد أخرى يمكن أن نجنيها من ممارسة النشاط البدني؟
سلطان: مليون فائدة، من فوائدها مثلًا يعني أن كنت قد تعرضت لضرب تكون جاهز، هيهههههه
خالد: تقص معركة وضرب هيههههههههـ
سلطان: ضحك جماعي
خالد: غير ذلك
سلطان: كون قوي
خالد: فأصد ما السبب الذي يجعلك تمارس نشاط بدني ,, ما الفائدة التي تجنيها منه ,, مادافع الذي يجعلك تمارس نشاط بدني ,, ما فوقك
سلطان: سهلة
خالد: مثالا ؟ تقصد لأنه سهل
سلطان: نعم تنهض ,, تمارس ,, تجلس
خالد: ذلك هو ؟؟؟ هل تقصد أنه لا يوجد بها جهد بدني
سلطان: لا تحتاج أن تفكر كثير ,, فقط كذا أو كذا فقط ,, هههه
خالد: ياً تقصد هنا سهولته ( ممارسة النشاط )
سلطان: نعم هذه سهولته
خالد: يعني تقصد كما قال رياض أنه من السهل ممارسته ,, تمام الا توجد فوائد أخرى نجنيها منه ؟؟ عبدالرحمن
عبدالرحمن: أحب أمارس الكرة لأنها سهلة ,, كذلك فوائدها عالية هناك أيضاً , ما هي الفوائد الأخرى أن نجلبها من الكرة ؟؟
خالد: هل هناك أي شخص لديه أي إضافة ثانية على هذه النقطة ( الأسباب التي تجعلك تمارس نشاط بدني ).
عبدالرحمن: لو تكلمنا على الموضوع ولكن من زاوية عكسية مغايرة تماما ؟ كنا نسأل ما الذي يجعلك تمارس نشاط بدني
وأنواع النشاط البدني ,, ولكن قل ليلي أخبرتموني بأنكم أحببتوا الاستماع لمندرب principio نائبين نشطين بدني ,, ما هي الأسباب من جهة
نظرتك الشخصية التي تجعلك غير نشط بدني ولا تتمتع النشاط بدني ,, ما هي الأسباب التي تجعلك منك من أن تكون نشط ؟ لماذا ؟ فماذا ؟ فماذا ؟ أنت أنتو تقول أنك في هذه الفترة ولمدة 3 أشهر لم تمارس على سبيل المثال
سلطان: لا أنا لا أختفي وضعي ,, حيث أنني لدي الأم في رحلتي ,,, ولكن الآن عالجتها ومطلوب مني 6 أشهر لا أمارس
أي نشاط
خالد: تقصد أنك لدك إصابة في رجلك
سلطان: نعم أنتو أصابتك الأمر يختلف ,, لو أنني لست مصابا وأقوم بهذه الأشياء ( يقصد عدم الممارسة لفترة طويلة )
فإنها ستكون مشكلة كبيرة .
خالد : تقصص أنك كنت تمارس الرياضة بشكل عادي
سلطان : سابقا كان الأمر عادي , أيضا بعد فيرارايي عندما أنني علاجي ,,,
خالد : كما تبقى لك
سلطان : أصلا 6 أشهر
خالد : تعني أنك أنهيت 3 وتبقى لك 3
سلطان : نعم ,, باقي 3 أشهر .
خالد : عبدالله ما هي الأسباب التي تمنعك من أن تمارس أي نشاط بدني.
عبدالله : الخوف من والدي ( الأب والام ) لأنهم يخافون علي ,، يقولون أنه لابد أن يكون معني أخ أكثر مني أو معي أولاد من أبناء الناس الذين يعرفونهم كي يطمئنوا ,, لأنهم أكثر الأحيان يخافون من المشاكل ,, لو مثلا أتعارك أنا و أي أحد
أصلى
خالد : ما نوع المشاكل التي يخافون منها.
عبدالله : مثلا هكذا كله بحبون ( الاستعراض )
خالد : مالذي تقصده بهـ ( show off )
عبدالله : المقصود لذلك ,, يعني أنهم مثلا إذا قمت بشيء أفضل منهم فإنهم سيسعون لتخريبها من باب الحسد فتجدهم دائما يخولون أن يكونون الأحسن ولا يتقبل أي شخص آخر يفعل أمور أفضل منهم ,, لكن في المدرسة لو قمت بعمل الأمر عادي حيث هناك أساتذة ولكن إذا ذهبت مع أصحابك ولا يوجد مع ( no adults ) يعني لا يوجد أحد كبير معكم ولتغلب مثلا مباراة كرة وفزت على الفريق الثاني وما يربحوا فأنهم يقولون بإنهم مخطئون , ولكن هم يفوزون فإنهم لا يقولون شيء فالرابطة عندهم غير .
خالد : هل تعني أنه لا روح رياضية عالية عندهم ؟؟
عبدالله : نعم
خالد : تعني الآعمار الصغيرة
عبدالله : كل الآعمار
خالد : لا توجد لديهم روح رياضية ؟
سلطان : مثلا عندما يخرج فريق ليفربول أو مانشستر سيتي فأنهم لا يقولون أي شيء ولا يفعلون مشاكل لكن لو أنهم خارجا فإنهم يقولون
خالد : عذرًا لم أفهم جيدا مالذي تعنيه ؟؟؟
سلطان : مثلا فريقي أنا وعبدالله نلعب مع فريق ثاني وأعرف ذلك الولد في المدرسة وانا لا أحبه وهو لا يحبني , فعندما أقوم ( أنا حركة زينة ) بمهارة جيدة وأعجبت الجميع وأيضا إعجابهم فتجده هو لا يبدي أي تعلق و يظهر إعجابه , أو مثلا أن أن أجازت هذا , وهو لم يعجب ذلك فإنه يغضب و ينزعج ويحاول أن يطردني أو شيء من هذا القبيل
خالد : تقصص أنه يحاول خلق مشكلة ؟
سلطان : نعم.
رياض : أو يحاول أن يعرقله في اللعب.
سلطان : يحاول أن يعرقلني ( يكسرني ) أثناء اللعب أو شيء من هذا القبيل , بينما شيء كهذا في مباراة كبيرة وعلى التلفزيون تجدهم يبتكرون ولا يقولون أي شيء , لأنهم يعرفون أم مилиون شخص يشاهدهم.
خالد : تقصدون هذا نوعا من المشاكل التي يخفف منها الأبوين.
رياض, عبدالله, سلطان ,, نعم.
خالد : تمام ,, هذا عامل أو سبب ممكن أن يتمكن من ممارسة النشاط ,, هل هناك أسباب أخرى.
سلطان : تقصد أسباب لا تجعلنا نمارس نشاط بدني ؟؟
خالد : نعم لا تجعلك تمارس نشاط بدني.
عبدالله : الإدمان على التلفون أو الإكس بوكس أو الأجهزة الإلكترونية.
رياض : كاللاعبةشين ...).
عبدالله : أو تصفح الإنترنت.
سلطان : الأيفون.
رياض: التلفزيون.
خالد : تقصد أنه يأخذ وقتك ولا يجعلك تمارس نشاط بدني ؟؟؟؟ ما رأيك أنت سلمان ؟؟.
عبدالله : الاستيقاظ متأخر يجعلك تشعر بأنك متعب , تشعر بأنه ليس لديك القدرة أن تفعل أي حاجة وتشعر بأنك تعب وغير قادر على النهوض.
خالد : تقصد أن هذه أسباب تجعلك لا تمارس نشاط بدني ,, تمام لنتكلم في نفس الموضوع وهو عدم ممارسة نشاط بدني طالما أنا أنا لا أمارس نشاط بدني ,, المفروض أن وقتك هذا ساقيه في تسلية ما ,, عادة ما هو نوع التسلية التي تفضل فيها أوقاتك ولا يوجد بها أي نشاط بدني ؟؟؟؟؟
عبدالله : بلايستيشن.
سلطان : نعم صح هذه احسن حاجة ,, ملايين وملايين وملايين أشخاص في العالم على الإكس بوكس أون لاين.
خالد : تقصد اللعب أون لاين ؟؟
سلطان عبد الله : نعم.
خالد : وانت ( مشيرًا إلى سلمان ) ما هي أحسن تسليه توديها بدون نشاط بدني أي نشاط لا يستند على الحركة.
سلطان : لإكس بوكس كمبيوتر ,, أكثر شيء الإكس بوكس هذه الشائعة عند الجميع والتلفونات , البالك بيري والأيفون.
خالد : هل هذه تأخد وقت ؟؟؟
سلطان ,, رياض : نعم تأخد وقت , فكل مرة تقرر أن تتوقف , تشترك , وتقرر التوقف ويشتكي وهذا.
خالد: تأخذ وقت كثير ؟؟؟
سلطان: نعم
خالد: رياض ما رأيك ؟
رياض: التلفزيون والإنترنت يأخذون الوقت، حيث تبدا ولا تستطيع الوقوف
خالد: تقصد أنك تبقى مستمتعا بالتلفزيون فلا تستحي منه
رياض: نعم
خالد: حالياً قلت أنه يأخذ وقت كثير، دعنا نبدا بك، هل يأخذ منك الكثير من الوقت ؟؟
رياض: نعم
خالد: هل تحب الأفلام أو المسلسلات أو برامج الأطفال
رياض: الأفلام
خالد: حالياً الأفلام، هل تضع ذمتي بدي لفلم أو تنظر أن يأتي فلم على التلفزيون ؟؟
رياض: عادي أي فلم موجود على التلفزيون
خالد: تمام، الآن لدينا نشاط بدني ونشاط غير بدني، هذا النشاط البدني كورة القدم، السباحة أو شيء، وليك نشاط آخر غير بدني. التلفزيون، أفلام إكس بوكس، بلايستيشن، الإنترنت، كمبيوتر، اللذي يجعلك تتجه للنشاط الذي لا يوجد به جهد بدني، وترتك الآخر، لماذا، لماذا؟؟؟
سلطان: لو عندك أصدقاء، أو 3 أو 4، كل هولاء الأربعة تتجه هنا، وأنت الواحيد تتجه هنا، أي ستجه؟؟؟
خالد: تقصد تطر أن تتجه معهم
سلطان: بالإيماء، نعم
عبدالله: الأسهل الأسهل أنك تلعب بدل عن الألعاب، يعني حتى الألعاب لا يسمح بأن تخرج فإنه من السهل أن تدخل اللعبة وتلعب ولكن تكون أصدقاء وتلتقي بالبيكرك، والاتصال يكون أسهل أو بالإنترنت أو الفيس بوك، يعني أكثر الأحيان العب البلايستيشن لأنه سهل ولا يأخذ جهد كثير
خالد: ما رأيك سلمان، عندي سلمان ما السبب الذي يجعلك تمارس نشاط لا يوجد به جهد بدني وترتك النشاط الذي به جهد بدني
سلمان: اللعبة البلايستيشن
خالد: لماذا؟ تلعب البلايستيشن بدلاً من أن تلعب كرة؟ في أوقات ما
سلمان: أحياناً الطقس لا يكون جميل
خالد: تنظر أن تمارس نشاط لا يوجد به جهد بدني؟
سلمان / نعم (إيماءة)
خالد: رياض ما فعلك أنت؟ مالسبب الذي يجعلك أحياناً تترك النشاط البدني وتتجه لنشاط غير بدني
رياض: مثلاً أكون العب مع أصدقائي، وعندما يذهبون للعب بالإكس بوكس أو شيء من هذا القبيل لا يمكن أن أبقى بمفردي وأذهب معهم.

خالد: يعتقد ذلك كما فعل أصدقائك تفعل أنت؟ تلعب إكسبوكس، أو تشاهد التلفزيون أو تقوم بأي شيء آخر؟

رياض: نعم.

عبدالله: أيضاً أكثر الناس لديهم إكس بوكس والمتقدمين في التكنولوجي، يشترون الألعاب الجديدة ويتناضون كل واحد.

خالد: يشترى أفضل من الآخر، والآخر يشترى ألعاب أكثر ليتفوق على الآخر في المعدل من حيث المستوى.

عبدالله: يعتقد، فمثلاً هناك بعض الألعاب المرتبطة بالقتال وغيرها، يعني هههههههههههههههههه، عندما تقتل الكثير من الناس كل ذلك يجل، كأنك أفضل لاعب في المسابقات، وما إلى ذلك وهناك مسابقات عالمية وتحاول أن تربح.

خالد: على مستوى العالم؟

سلطان: عبد الله: نعم على مستوى العالم.

سلطان: قبل شوي، قبل ما أتي معك كنت ألعب على الإكس بوكس مع حوالي 144 مليون شخص حول العالم على لعبة واحدة، هذا فقط على الإكس بوكس هذا ليس على الوي، والبي إس بي، والبلايستيشن وغيرها، هذا فقط على الإكس بوكس 144 مليون على لعبة واحدة وفي نفس الوقت 36:58.

خالد: 144 مليون؟؟؟ سلطان 144 مليون على لعبة واحدة، هناك أكثر من...

خالد: وهذه فيها تنافس.

سلطان: عبد الله: نعم كمبيوتر.

سلطان: خالد: يعني كل واحد يحاول أن يحسن من مستوى، ومن ثم يصنف يتم تصنيف في معدل معين، من وجهة نظركم هل هذا مفيد لكم بندي أمان أنه غير مفيد؟

رياض: ليس مفيد.

عبدالله: بدينا لا، لأنه هناك بعض الألعاب تجعلك تفكر بطريقة أحسن، حيث أن بعض الألعاب تتطلب منك أن تفكر كيف تجعل، مثلاً في الأتار، لإحتلال اللعبة، وهي عليك أن تترك أشياء وتعلق بعضها، ولكن بالتأكيد، بالنسبة إلى اللاعب الذي أتنكر للا chàng نقصة هذا أي، يمكن أن تنظر إليها، من الأعلى حتى لا تلفت أو الثانية، لو تلفت من تحت يمكن أن تلفت أشياء من هذا النوع تجعلك أذكى.

سلطان: أول ما ظهر الآن وهو شيء جديد أن الأتار بوكس فيه كنك، وهذا فيه رياضة تتحرك وتفقد.

خالد: هل جربتها أنت؟

سلطان: نعم جربتها.

عبدالله: هناك شيء يشبه الكاميرا وترى مكانك مثلاً لتلعب الكرة تكون واقفة وتحرك رجلك كأنك تحدد الكرة، وهذا في الإكس بوكس.

سلطان: أو مثلًا رياضة تودي هكذا أو هكذا ( بشرة للحركة بجسمه )
خالد: "عندما تستعملها تشعر أنك تنشط بدنياً.
سلطان: نعم، خاصة في الوي
عبدالله: الوي مختص بأنشطة مثل هذه وهو شيء كالعين، وفيه حساس حركة (motion sincere) في اليد مشابهة لمسك السنسد. لو تلعب تنس فأنك تمسك السنسد كأنك مضرب وتحرك في اللعبة، وعندما تضرب بهذا الوضع يحدث نفس الشيء في اللعبة. فهذا يجعلك تتحرك أو تجري، تقفز، تنزل، تتأمل.
خالد: هل حياتها أنت؟
رياض، سلطان، عبدالله، سلمان: نعم، جربناها.
عبدالله: هناك أيضاً ملاكمة، حيث تمسكها هكذا ومن ثم تشيدها وتتسرك في اليد الثانية وتمارس الملاكمة، أي تتلاكم أنت.
خالد: هل هناك مجال أن تلعب الوي أون لاين؟
سلطان: أجل، خاصة حتى الكونيكت، حتى البلايستيشن فيه نوع اسمي (بلايستيشن موف).
عبدالله: (بلايستيشن موف)
خالد: هل كلكم جربتم كل هذه الألعاب، هل جربتها أنت أيضاً سلمان؟
سلمان: نعم.
خالد: وهل جربتها أنت رياض؟
رياض: نعم.
خالد: هل تشعر بأنك تبذل جهد بدني عندما تمارسها؟
سلمان، سلطان، عبدالله: نعم.
عبدالله: ولكن ليس كما تتتحرك أنت فعلاً.
سلطان: هذه مناسبة للجو البارد أو الطقس غير جميل في الخارج يمكن أن تمارسها.
عبدالله: لكن معدل الوقت في استعمال الوي أكثر مما نتىجة لرياضة عادية لأنك باللعب بالوي، هم يصممون الألعاب بطريقة تحكّل ترغب في أن تلعب أكثر، فهذا تقتضي وقت أطول في اللعبة، مما أنت تذهب بنفسك للعبة. كذلك ليس من الضروري أن يكون أصدقاءك بالقرب منك تلعب حيث يمكنك أن تلعب بمفردك، أو أن كان أصدقاءك مكّنني أن ألعب معهم.
خالد: تقصد هناك مجال، هكذا أو كيف؟
عبدالله: نعم، خاصة الآن وفي هذا الوقت الطقس ليس جميل عند الخروج ولا يمكن أن تخرج أن تلعب كرة أو غيرها.
خالد: مثلاً رياض، ما إذا كنت في كل هذه الألعاب، الوي، الكونيكت، البلايستيشن؟
رياض: صحيحاً أفضل، إذ ليست كما تجلس وتلعب الإكس بوكس العادي وألعابه، بينما الكونيكت يمكنك أن تتتحرك به، ولا تبقى جالساً تستطيع الحركة.
خالد: جميل، هل تشعر بأن الجهد الذي تبذله مع الوي أو الإكس بوكس كنت أو غيرها من الألعاب التي بها حركة
ت剽 جيد أعلى وحيد أم أنها مجرد حركة بسيطة فقط.

سلطان: الآن هناك لعبة جديدة سننزل في فبراير في الكنكت تستعمل فيها الأوزان التي ترفع ( weight lifting )

خالد: رفع الأثقال

سلطان: نعم، تشتريها ومثلا تضع رقم 4 أو 5 أثقال، وهكذا وكلها ضرورية من استخدام الكوابل ليست
وايرلس، لا يمكن أن تكون ويرلس.

خالد: سوف يأتي يوم وتصنع ( ضحك جماعي )

سلطان: هذه أخر لعبة وهي الممتازة يمكنك أن تكون مع شخص آخر أون لاين والجهاز يخبرك بتلك تحصل على نقاط،
500 مثلا في الدقيقة وانت تحاول أن تتوزع عليه، والتي يفوز يتحصل على نقطة وتجد نفسك تعدي، لا توقف، وكل
شيء فيها

خالد: إن من مميزاتها أنها تفعزك إلى ممارسة النشاط، هل هناك أي شخص يود إضافة أي نقطة لهذه الجزئية

خالد: الآن سأعطيك 3 مصطلحات، وكل مصطلح أو كل حملة، أو كل كلمة من هذه المصطلحات، يعني لك
تبني لت، إبداء مك، نحن سلطان، أنها في الواقع أربع كلمات ولست عندما نقول ( الحالة البدنية ) ما الذي تمثله لك
هذه الكلمة أو هذا المصطلح هل هي مهمة، غير مهمة، الحالة البدنية للجسم.

سلطان: تقصص صحة الجسم.

خالد: الحالة العامة لجسمك، ما تقول عنها، ما وجهة نظرك بها.

سلطان: يعني هذه للحالة لا تأتي بطريقة الآخرين، لازم أن تقدم برياضة لأجل أن تحصل عليها

خالد: لأجل أن تكون حالة البدنية كوية

سلطان: تكون أحسن

خالد: عدالة مارايك

عبدالله: لم أفهم السؤال جيدا.

خالد: أنت سلمان ما الذي تعنيه لك هذه الكلمة، عندما تقول الحالة البدنية ما الذي تمثله لك حالة جسمك

سلطان: بإعما، لم أفهم السؤال.

رياض: يعني أن تجعل جسمك في الحالة التي تكون عليها أو لا تكون أكثر من الوزن الذي من الفروض ان تكون عليه
خالد: لا أقول التخصص الرياضي، ما الذي تعنيه لك عندما تحدث عن مسألة التخصص في رياضة ما، في نوع معين
من الرياضة ما الذي تعنيه لك، إلي أي مدى مفيد، مهم، ليس مهم، ما قوله؟

سلطان: التخصص الرياضي، أي أنك تعرف ما الذي تقوم به في الرياضة

خالد: أو تخصص في رياضة معينة...

سلطان، رياضة معينة كالكرة مثلا؟
خالد: مثلاً، الكرة أو غيرها، كرة القدم فقط، أو السباحة فقط، أو كرة يد فقط. ما الذي يعنيه لك هذا الكلام؟ التخصص في نوع النشاط الرياضي.
سلطان، مثلاً،
خالد: هل هو مهم أم ليس مهم، أم غير مهم، هل فيه ميزات ولا توجد له ميزات؟
سلطان: نعم، هو مفيد، فمثلًا إذا كنت تلعب كرة قد فقط ونتكون لاعبًا، لا تعرف أي شيء.
خالد: أقصد أنك تتخصص في رياضة ما ولا تهتم بالرياضات الأخرى، يعني تتخصص في كرة القدم فقط ولا تتخصص بالرياضات الأخرى مثل السباحة. ليس دائماً.
رضي: يعني تخصصك في هذه الرياضة تعليم أشياء.
ريض: لأنه مثلاً الملاكمة تتعلق بقوة اليد والسرعة ليس كل شيء، لكن أن تتكون حل لأنك في كل رياضة تتطلب أن تحرك جسمك بطريقة مختلفة أي تقوم بتمارين كل العضلات بطريقة مختلفة مثل الملاكمة العضلات الخاصة باليد والصدر أكثر شيء والأرجل لكن الكرة، الرجال أكثر شيء لأنك تحتاج أكثر الوقت.
خالد: مثلاً، لماذا قد تكون رياضك فيما يخص التخصص أي أنك تتخصص في لعبة ما هل هذا مفيد أم غير مفيد، أو غير جيد، أم غير مهم إيجابي أم سلبي؟؟
ريض: ليس مفيد، لأنك عندما تلعب الكرة لزم تحتاج أثناء ممارسة الرياضة أن تجري كثير لتمارسة الألعاب القوى والقوة وتقوي جسمك.
خالد: مارأيك سلمان، هل ترى أنه مفيد وجيد ومهم أم ترى أنه غير مفيد، وغير مهم، أنك تتخصص في رياضة معينة، كأن تتخصص في كرة القدم فقط، ولا تهتم بالرياضات الأخرى أو تتخصص في الرياضة ولا تتخصص في الرياضات الأخرى أو تمارس كرة اليد ولا تتخصص بالرياضات الأخرى ما رأيك أن البعض أفضل أن تتخصص أو أن لا تتخصص.
سلمان، (تعبير أيمني بلا إجابة)
خالد: هل هناك أي أحد يريد إضافة أي شيء لهذه النقاط؟
رافض: (حاول شرح السؤال) هل تحب الشكل العام لجسمك?
خالد: هل ترى أنها شيء مهم وجميل أم لا،
سلمان: (اعترض مفيد، بمقابلة) 51% أهميتها
خالد: لو ما عندك عضلات، ما عندك شيء،
عبدالله، ليست مهم لأن الشخص لو أنه صار جذابًا، ليس من الضروري أن يكون ذلك بالجسم، يمكن تذكاري، وبطريقة تفكيرك وبطريقة مختلفة عن الآخرين فستكون فريد من نوعك ومميز، وليس من الضروري أن تكون كما جميع

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لا يعرف شيء يعني يفكر فقط بالعضلات وشيئ كهذا، وشخص آخر ذكي كل شيء حيد

خالد: ما المانع أن الذكي يكون عضلة جذاب
أبو العدب: لا يوجد منع لأن تكون ذكي و جذاب، تستطيع عمل ذلك لو أردت

خالد: تقصد تبقى غير مهمة
أبو العدب: نعم ليست مهمة الجاذبية الجسمية، أهم شيء أن تكون ذكي و صححت بحالة جيدة

خالد: سلمان ما رأيك
سلمان: لم أفهم

خالد: بمعنى عندما يكون الإنسان جسمه البدني ذو عضلات مفتوحة وليس سمين وليس نحيف جدا جسمه رياضي، هل ترى أن هذا شيء مهم، أم ليس ضروري؟ مثلا سلطان قال 50% مهم عبادة قال أنه ليس مهم باتانا، شيء إنت كان موجود أوكي، وإن لم يكن موجودا أوكي، سيان ليست مهمة، مالذي تراه إنت هل ترى أنه من المهم أن يكون جسمك رياضي
أبو العدب: هل من المهم أن تكون جذاب
سلمان: ذو عضلات
خالد: هل ترى بأن هذه مهمة أو غير مهمة

رباط: مهم

خالد: أن يكون جسمك جميل، ما قولك إنت رياض
رباط: نص نص

خالد: ليس مهمة كثير تعني؟؟؟
رباط: نعم

خالد: ما نسبة مئوية تعطيها
رباط: 30%

خالد: 30% أهمية الجاذبية الجسمية

خالد الكلمة الأخرى التي تود معرفة ما تعنيه لك هي (قوة) القوة البدنية، إلى أي مدى تشعر أنها مهمة هل هي مهمة
أبو العدب: كثيرا أم لا؟ ما لدي تعنيه لك هذه الكلمة، ما أهميتها القوة البدنية
سلمان: مهمة

خالد: أن تكون قويا بدنيا
سلمان: مهمة في كل الرياضات مثلا في كرة السلة لازم تكون قوي لو تكون ضعيفة
الشخص يحتاج إلى القوة تقريباً في كل شيء يعني لو أنك قوي تستطيع رفع صناديق أو تمشي كثيراً، بينما لو أنك ضعيف أسياء كثيراً لا تستطيع عملها.

خالد: ما رأيك، سلمان، هل القوة البدنية مهمة أو غير مهمة؟

سلمان: مهمة

خالد: تقصد أنها مهمة... كثيراً!

سلطان: لماذا...

خالد: نعم لماذا ترى بأنها مهمة فيما تفيديك

سلطان: لو أنك قوي... لئن مثلاً سلمان، لأنك إن لم تكون قوياً، وتريد أن تضرب الكرة سوف لن تصل إلى مسافات بعيدة، بينما لو أنك قوي يمكن أن تضربها لمسافة بعيدة.

خالد: ما رأيك، سلمان، هل القوة البدنية مهمة... غير مهمة؟

رياض: مهمة

خالد: مهمة... كثير أم؟

رياض: مهمة كثير

خالد: مهمة كثيراً لماذا كما قال سلطان مفاجئة القوة البدنية تساعدك على اللعب بقوة كما في الكرة، أو نحتاجها في الملاكمة لأجل أن... مثلاً...

خالد: وفي الحياة العامة، إلا نستفيد من القوة.

رياض: بلا يعني لو ترغب أن ترفع أشياء من غرفة إلى غرفة...

خالد: الآن نعود للنشاط البدني في المدارس ما نوع النشاط البدني الذي تمارسه في المدرسة?

سلطان: مثلاً، يعني في كرة القدم، كرة السلة، الرياح، البينغ بونغ...

خالد: هل كل هذه الألعاب موجودة في المدرسة...
رياض, سلطان, نعم كل شيء, وبعض المدارس

خالد: عبد الله ماذا لديكم في المدرسة

عبد الله: عندنا كرة اليد, والسباحة, كرة المضرب البيزة, لكن في بعض الأحيان يأخذونا إلى المسبح, أيضا يوجد الأدوات الخاصة بالجيم (صالة الرياضة), أيضا جهاز التجديف, أيضا هناك الأثاث.

خالد: كل هذا موجود في المدرسة

عبد الله: نعم, أيضا يوجد الملاكمة, مثل المدمج ومجلس يعطيكم كم قولة الكلمته, وهناك مدربين يساعدون لاجلا

خالد: سلمان ماذا لديكم هناك

سلمان: عندنا كريكت, رغبي كرة القدم, كرة السلة, كرة اليد, سباحة.

خالد: وانت رياض

رياض: عندنا الكثير مثل كرة السلة, كرة المضرب, كرة اليد, وأشياء كثيرة مثلها

خالد: هل تمارسون كل هذه الألعاب, هل ترتدي الرغبي, الملاكمة وغيرها

سلمان: نعم, كل فصل

عبد الله: أول ما بدأ المدرسة وفي أول أسبوع كل مدة تقوم بعمل رياضة مخصصة لأجل أن تتعلم ثم بعد بعض الأسابيع تنتقل إلى رياضة مختلفة مثلاً, قبل أن تطلع كنا في الأسبوع الثاني, معروض رياضة أخرى, في الحصة الأولى نعمل كرة يد, هذا يوم الاثنين, ثم في الجمعية نمارس رياضة كرة السلة, إلى أن نتعلم لعبتي في وقت واحد, بعدها نعمل رياضتين مختلفتين وهكذا

خالد: ما هي أحسن رياضة يجب أن يمارسها كل واحد منكم أفضل رياضة تحبها أنت

سلمان: رياض (في وقت واحد) كرة القدم

عبد الله: سباحة

خالد: لماذا رياض, سلمان

عبد الله: سلمان تعلمك حتى في الأعماش,amines a만ا in the Emirates,, كل يوم كرة كل يوم

خالد: فاصحبن, سلمان, لماذا تحب السباحة وليس غيرها

عبد الله: يعني لا تستطيع أن تتعرّع بها كثيرا

خالد: كيف, لم أفهم

عبد الله: يعني في كرة القدم, 

خالد: تتعرّع, تحصل الإصابات

عبد الله: نعم, كذلك سهلة, وجبة للجسم, وتربص كل العضلات يعني تعطيها أيضاً أشياء كثيرة
خالد: تمام، لماذا كرة القدم سلمان؟
سلمان لأنني عندما كنت صغير كنت ألعب كرة قدم، يعني عندما كان عمري 4-5 كنت ألعب كرة قدم فحبتي كرة القدم.
خالد: حبيتها... و أنت رياض.
رياض: تسليحة.
خالد: مسلية، وممتعة.
رياض: نعم مسلية أيضا فيها الجري كثير.
خالد: الآن على وشك أن ننهي، أن شاء الله. هل فيكم أي شخص يمارس أي نشاط بدني مع الأسرة ككل مثلا، مع والدك، مع أمك، مع أخواتك، مع إخوانك، أي تمارسون أي نشاط في نوع من النشاط البدني كأسرة واحدة معًا؟
سلطان: الحج، والسباحة.
خالد: هل تذهب مع والدك، وأخواتك؟
سلطان: كل العائلة.
عبدالله: العائلة عندما تشترى الوي لأنها أصلا للعائلة، لأنك أكثر الأحيان لا تستطيع الخروج مع العائلة لأنك لا تستطيع أن تختلط مع الناس وترى السباحة ولا تستطيع أن تذهب أنت والدك وامك، نعم، لأنك في البيت وتشتري الوي، يمكنك أن تلعب أنت والعائلة ككلة، ليس من الضروري أن يكون أحد تعرضه، فكلكم تعرفون بعض وستستطيع أن تلعب أي شيء معًا، كالمالامكة، ولا إصابة، وتمارس رياضات كثيرة دون إصابة كذلك مع العائلة، ولا يوجد من الضروري الخروج لمكان مختص وما إلى ذلك، وستستطيع تعلم كل شيء من اللعبة.
سلطان: كما أنها ليست فقط للتسلية صدقا صدقا أنها جهد جهد، عندما تنتهي تعرق.
الباحث: هذا مع الوي.
المشارك 1: نعم، مع الوي، الأكلهة خاصة خاصة، الخصا.
الباحث: تبذل جهد لندرجه تترعرع.
المشارك 1: نعم.
المشارك 2: كذلك تجلس وقت طويل تلعبها ولا تأخذ منك... أو بعض الحياHEADER: سلمان، عندما تلتزم العائلة لن تكون مع العائلة لا تتمعن.
الباحث: تقصد لا تمل.
المشارك 2: لا لا تقصده لا تشعر بالحلج ويستبدل أقصي ما تستطيع لانه لا يوجد أحد سيضحك عليك، حتى ولو ضحك عليك فإنه عادي من عائلتك الجمعية، وكذلك بيننا جهد.
الباحث: تقصده هذا مع الوي.
المشارك 2: نعم.
الباحث: مارانيك انت (بالإشارة إلى سلمان)
المشارك : نفس الشيء

الباحث : تؤيدهم ؟؟

المشارك : نعم

الباحث : مرأيك أنت يا رياض ,, هل تمارس أي نشاط بدني عائلي كأسرة؟؟

المشارك : المشي

الباحث : المشي ؟

رياض نعم

الباحث : أنت وزعائلك مثلا ؟

المشارك / نعم بعض الأحيان نخرج مشي للذكاءكن لشراء حاجات

البحث: تسوق تخصص

المشارك : نعم

المشارك : نعم

الباحث : تعتبركو أنه أفضل حنة ولو في وجود سيارة ؟

المشارك : نعم

الباحث : هل أنت لديكم سيارة في البيت

المشارك : لا

الباحث : حتى ولو متاحة فرصة الباصل هل تفضلون المشي مثلا

المشارك : نعم

الباحث : تخصص هل تستطيعون ترك الباصل وتذهبون مشيا

المشارك : نعم

الباحث : تمام

المشارك شكرًا

الحمد لله
تحليل المقابلة, الدراسة الثانية (أولاد)

النشاط البدني كثقافة عامة

• أن أعرف أنه كيف أنك تأكل أكل صحي هو الرياضة والحركة المشي يعني الشخص يتحرك ومشي بطريقة الجلوس كذلك موعد النوم,, والصحو ماتذي يقوم به الشخص صباحا

• الرياضة

• أمelm ما الذي تعنيه ولكن لا أستطيع التعبير

• إلى أي مدى تعتبر نفسك نشط في الوقت الحالي لا أمر ما أي نشاط بدني لأني مصاب لا أستطيع اللعب لأني حوالي ثلاثة أشهر لا رياضة لا لعب لا كرة ولا رياضة كل الوقت إلا على البلايستشن,, كل أحد كرة قد كل أحد تدرب وكنت أذهب للجيم وأمارس السباحة أذكر كل أربعاء وسبت,, أعتذر نفسك لأني أمشي كل يوم (ولكن المشكلة أنه ل الجو برد أشتر لركوب الباص,, أمي وأبي يريداننا أن نركز في دراستنا ولا يسمح لنا باللعب في عطلة نهاية الأسبوع تذهب للمسدمة العربية,

• رضي إلى السباحة خمسة مرات في الأسبوع

• أذهب إلى الجم مع أبي وأخي

• العين الكرة كل يوم مع أصدائي

• المشارك 1: ماذا عن المدرسة, هل تقومون بأي نشاط في المدرسة؟ كل يوم أو يومين

• ؟لو الجو جميل نلعب كثيرا ولا الجو ليس جميل لا نلعب كثيرا حصة الرياضة دائماً لعبة كرة مع أصدائي.. كنت أمر بالسماحة ولكنني توقفت بسبب مشكلة الامعارات,, أي أنك تسخن داخل المبنى ولكن عند خروجك

• يكون الجو بارد إلى السيارة ويبني الباب يعتبر الأمر عادي

• لا غير تستحي لأن الجو غير جميل في الخارج

• نعم أنا شتاق بدني لأنني أتحرك كثيرا والعب كرة وأمارس رياضات في المدرسة,, أحياناً أعود إلى البيت من المدرسة مشي حوالي 2 ميل

• نوع النشاط البدني الذي يمارس في المدرسة, لعبة,, كرة بدق الجمعة وخميس

• سباحة,,,, كورة بد فرحة جمعة وخميس

فما هو الفرق من حيث معدلات النشاط البدني الخاصة بك بين هنا في بريطانيا وبين هناك؟؟؟

• عندما تكون في البلاد العربية الألف والألف람 لا يخفعون عليك كثيرا وتضرون بأمان أكثر (لن هننا في بريطانيا

• تخفى في غيرها يخفعون عليك وأكثر الأشياء لا تتحول تخرج

• ارغب الذهاب إلى مكان أم الرياضة يجب أن يوصلني أحد أخواني الكبار

• خشية أن تحصل لي المشاكل

• ولكن عندما كنا في اليمن,, كنا تعرفنا نلعب كل يوم وخرج لأي مكان.

• وتشعر بالأمان,, تعرف الناس جميعاً والجيران

• وأصادميهم جيني
هناك كنت أقل نشاطا لأنه لا توجد إمكانيات مثل التي هنا فلا يوجد جم ولا حوض سباحة

خالد: لو قارنا المدارس هنا والمدارس هناك؟

هنا تختلف/حسن مليون مرة من هناك

; الاستراحة هناك ما بين 10 إلى 20 دقيقة أما هنا فهي نصف ساعة

في النشاط البدني هناك متاخرين عن هذا

مدرس الرياضة هناك أصلا من مصر أو من اليمن أو من الإمارات وهم متخلفين لا يعرفون شيء

مثلا في المدارس العربية تبدأ الساعة 6 أو 7 صباحا

; لا يستطيع الكلام عن المدارس في اليمن لأني عندما كنت في اليمن كان عمري حوالي 5 سنوات ولا زلت في

الروضة

من حيث المعدات و زمن حصة الرياضة

هنا أفضل من حيث المعدات و زمن الحصة

يوفرون شخص مختص في كل مجال فهناك مدرب كرة وأخر للسباحة وكل في مجاله

كل الأشياء المطلوبة متوفرة

هنا الروضة كما أختي الصغرى الساعة 9 أو 12

خالد: ما هو نوع النشاط الذي تمارسه والذي يجعلك تشعر بالانخrous بدنيا؟

الجم (صالة التمارين الرياضية) لا تحتاج أن تفكر كثير

كرة القدم

(يمكن أن تلعب كرة القدم في أي وقت)

(تكون قادرا على ممارستها وتريحي)

(يمكن أن تساعد في الجري أو شيء ما في الرياضة الخاصة)

(إن ليين من الصعب الحصول على كرة وتعب بها)

(بقى على لياقة بدنية جيدة)

(أريد أن أشتهي مدرب أكون متدرب كثيرا وعندما أكون متدرب كثيرا فإنه من السهل إجتياز)

(الاختبارات لأخذ شهادات عالية)

عندما تكون قادرا فريق في الكرة، فإن ذلك مستقبلًا يمنحك الثقة بالنفس للتكلم مع الناس وتعامل مع

(إذا لا تعقبهم)

خالد: ما هي الأساسات التي تمنعك من أن تكون نشطًا؟ لماذا؟

(لأنا يختلف وضعني، حيث أنى لدي الالام في رجلي)

(الخوف من والدي الأبال أم) لأنهم يخشون علي (لا أريد أن يكون معي أخ أكبر مني) (لأنهم أكثر الأحيان

(يخافون من المشاكل)

(الاستعراض)

(مثلنا يحبون)

(فيجبون القيام بالمشاكل ليكون مميزين

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إذا قمت بشيء أفضل منهم فإنهم سيسعون لتخريبها من باب الحسد. (حاول أن يعرفنني بكرني) أثناء اللعب أو شيء من هذا القبيل. (لكن في المدرسة لوقت العمل الأمر عادي حيث هناك أساتذة)
ولكن إذا ذهبت مع أصدقائك ولا يوجد معك الإدمان على الألعاب الإلكترونية الأكس بوكس الأجهزة الإلكترونية كلاستيشن
أما أحب مشاهدة التلفزيون بالأخص الأفلام وأجلس لوقت طويل أنفرج أنا أتصفح الإنترنت كثيرا فهي مفيدة جدا لي وأجلس لوقت طويل على الكمبيوتر
إذا أحب ألعاب البلايستيشن كثيرا ولا أشعر بوقتي كيف يمر وأنا ألعب الاستقاض متأخر يجعلك تشعر بأنك متعب
خالد: عادة ما هو نوع التسلية التي تقضون فيها أوقاتكم ولا يوجد بها أي نشاط بدني؟
بالبلايستيشن مليلين وملايين ونلايين أشخاص في العالم على الأكس بوكس أون لاين
كمبيوتر البكيني بالأيفون
نعم تأخذ وقت فكل مرة تقرر أن تتوقف يشدك للفيديو
لندنفيون تلفزيون
خالد: ما الذي يجعلك تتجه للنشاط الذي لا يوجد به جهد بدني وترك الآخر وما هو السبب؟؟؟؟
عندك أصدقاء 3 أو 4 كل هؤلاء الأربعة اتجه هنا. وأنت الوحيد اتجهت هناك. أين ستتجه؟؟؟؟؟عندما أكون اللعب مع أصدقائي وعندما يذهبون للعب بالأكس بوكس أو شيء من هذا القبيل لا يمكن أن أبقى بمفردي وأذهب معهم
سيبده أن تمارس أي نوع من النشاط ولا تبذل أي جهد بدني ولا تشعر بالتعب
عم التواصل يكون أسهل أو بالإنترنت والغيش بوك وما إلى ذلك وهناك مسابقات عالمية وتحاول أن تربح (ومن ثم)
يضدرون الألعاب الجدد وينافسان
أحب أن ألعب البلايستيشن ما يجعلني أقضي جل مقتني في اللعب
When I play on the Internet that drives me to stay longer without any physical activity
لا لأنه هناك تنافس قوي مع أشخاص آخرين حول العالم على نفس اللعبة وهناك تصنيف عالمي للاعبين أبقى اللعب لوقت طويل
لأنه هناك تنافس قوي مع أشخاص آخرين حول العالم على نفس اللعبة وهناك تصنيف عالمي للاعبين أبقى اللعب لوقت طويل

البحث: من وجهة نظركم هل هذا مفيد لكم بنديا أم أنه غير مفيد؟
الألعاب تجعلك تفكر بطريقة أحسن
الأكس بوكس فيه كلك و هذا فيه رياضة تتحرك و تقف
خاصة في الوي (أيضا ملاكمة حيث تمسك هكذا ومن ثم يشبه و تمسك في اليد الثانية و تمارس الملاكمة، أي
تتلاقاكم أنت واحد دون أن تمسا بعض
( بلايستيشن موش)
هذه مناسبة للجو البارد أو الطقس غير جميل في الخارج يمكنك أن تمارسها.
معظم الوقت في استعمال الوي أكثر مما أنت توجه لرياضة عادية لأنك باللعب بالوي، هم يصممون الألعاب
بطريقة تجعلك تتحرك في أن تلعب أكثر
كذلك ليس من الضروري أن يكون أصدقائك بالقرب منك للتمارس حيث يمكنك أن تلعب بمفرده.
كان أصدقائك ممكن أن تلعب معهم.
ولكن ليس كما تتحرك أنت فعلاً

الباحث: هل تشعر بأن الجهد الذي تبذله مع الوي أو الاكس بوكس كلكت أو غيرها من الألعاب التي بها حركة تبذل
جهد عالية بعيد أنها مجرد حركة بسيطة فقط.

خالد: كلمة من هذه المصطلحات اخبرني أنت ما الذي تعنيه لك، عندما نقول (الحالة البدنية) ما الذي تمثله لك هذه
الكلمة أو هذا المصطلح،

الحالة البدنية لجسمك؟

يعني هذه الحالة لا تأتي بمفردها الآن، لازم أنت تقوم برياضة لأجل أن تحصل عليها
لم أفهم السؤال جيدا
لا تكون أكثر من الوزن الذي من الفروض أن تكون عليه
لا تكون أكثر من الوزن الذي من الفروض أن تكون عليه
الخصخص الرياضي؟

أي أنك تعرف ما الذي تقوم به في الرياضة
ليس مجرد أكاذيب عندما تلعب الكرة لازم تحتاج أثناء ممارسة الرياضة أن تجري كثير لتمارسة الرياضة
والفقرات نكون جسمك
لا توجد لدي أية
لم أفهم السؤال جيدا

الجاذبية الجسمية؟

مهمة بنسبة يعني 50%
لما هو عنك عضلات، ما عنك شيء
ليس مهم لأن الشخص لا أن صار جاذب مثل ليس من الضروري أن يكون ذلك بالجسم، يمكن بكذاك
ربما تكون مختلفة عن الآخرين فستكون قريباً من نوعك، نسيب (أهم شيء لكون ذكي
وصححتك جيدة
لم أفهم

القوة البدنية؟

مهمة ولكن ليس كثيرة أي أعطيها نسبة 30%
مهمة في كل الرياضات مثلا في كرة السلة
الشخص يحتاج القوة تقريبا في كل شيء.
إذا كنت ضعيف أشياء كثيرا لا تستطيع عملها.
إذا كنت قوي يمكن ان تضرب الكرة لمسافة بعيدة.
لذلك تحتاجها لو ترغب أن ترفع أشياء من غرفة إلى غرفة.

خالد: ما هي أحسن رياضة يحب أن يمارسها كل واحد منكم أفضل رياضة تحبها أنت.

كرة القدم
لاني مع عمي عندما كنتا في الإمارات، كل يوم كرة كل يوم.
يعني عندما كان عمري 4-5 كنت أحب كرة القدم فحبيت الكرة القدم.

سباحة
لأنك لا تتعرض للإصابة وأنت تمارس السباحة.
لأنها جيدة للجسم ومفيدة.
لأنها سهلة المزاولة.

خالد / هل تمارسون أي نشاط بدني كأسرة هل تذهب مع والدك، وأخواتك

كل العائلة
أكثر الأحيان لا نستطيع الخروج مع العائلة لأننا لا نستطيع أن نختلط مع الناس في السباحة.
لكن لو أنك في البيت وتشتري الوي، يمكنك أن تلعب أنت وعائلتك كاملة.
وتمارس رياضات كثيرة دون إصابة.
كلاً مع عائلته وليس من الضروري الخروج لمكان مخصص.
لا تشعر بالخجل وستبذل أفضل ما تستطيع لأنك لا يوجد أحد سيعجب عليك.
وحتى ولو نعم بعض الأحيان نخرج مشي للدكاكين لشراء حاجات حتى ولو متيحة فرصة الباش هل تفضلون المشي.
نتذهب للجم كلنا مع بعض أبي وأمي وأخوتي.
Focus Group Interview translated into English (BOYS)

➢ Terminology & Knowledge of Physical activity (TKPA)

1- It is the sport n= 5 {doing any type of sport}

2- The Healthy Eating n=1 {How do you eat healthy food}

3- It is the body movement n=3 {Physical activity is the sport and movement and walking I mean that when the person is moving and walking}

4- Lifestyle n= 1 {The Way to sit and to sleep and also what does a person do since morning}

5- Unable to express n= 2 {I understand you what you mean but I can't express that by speaking}

➢ Physical Activity & Sedentary Behaviour (PASB)

1- Physical Activity & Sedentary Behaviour (PASB)

- Walking rather than public transportation n=1 {I consider myself active because I walk everyday but the problem is that if weather cooled I have to use the bus}

- Doing a type of sport n= 7

- Going to the Gym n=2 {I’m going to the Gym with my father and my brother}

- Going to swim n=1 {I’m going to the swimming pool five times a week, and play football during weekends}

- Play football in weekends n=5 {I play football every Saturday and Sunday}

2- Unsatisfied with my physical activity level n=4

- Videogameing n=3 {I do not play sport or football all the time just use playstation, Xbox}
Focus on study \( n=2 \) {Mom and Dad want us to focus on our study and do not allow us to play}

The Arabic school \( n=2 \) {on weekends we go to the Arabic school}

3- The Arabic school \( n=2 \) {on weekends we go to the Arabic school}

- I was more active in my country \( n=3 \) {because my parents are afraid of problems with other English boys and youths; they are prevent me from going out and playing with them}
- I was less active in my country \( n=9 \) {in my country I don’t do too much physical activity during sport education lesson like what I do here}

BARRIRS TO PA (BPA)

1- Videogames \( n=7 \) {When I play online that leads me to stay longer time without doing any physical activity}

2- Health conditions \( n=1 \) {I have an injury in my leg that prevents me to do any type of physical activity till after three months}

3- Injury \( n=1 \) {I have an injury in my leg which unable me to do any type of physical activity}

4- The weather \( n=4 \) {When the weather is bad I cannot get out doing any type of physical activity or playing football particularly in weekends}

5- Parents \( n=6 \) {I am afraid of my parents because they prevent me to play out}

- Jealousy \( n=4 \) {If I do anything better than them they will do a problem as a jealousy}
Show off \( n=2 \) Youths like the show off, so they doing problems to be distinctive.

- **Motivations for sedentary behaviour (MSB)**
  1. **Social networking** \( n=4 \) {Communicate via Facebook and Twitter easier than get out and meet friends and allows to meet a lot of friends at the same time, that’s makes me stay for a long time on the computer without doing any physical activity}
  2. **I like this type of activity** \( n=3 \) {I like to use the computer (videogame, iPhone) which leads me stay on it for too long time}
  3. **Easy option** \( n=4 \) {It’s very easy to do any type of activity does not need any physical effort and does not makes me tired}
  4. **Peers** \( n=3 \) {When my friends go to play X-Box or something like that cannot be stay by alone, so, I go to play any video games}
  5. **Addiction to electronic games and the TV** \( n=9 \) {I like video games a lot and I do not feel the time going and I cannot prevent myself to play}

- **Family factors (FF)**
  1. **Positive parents’ role model / active family** \( n=8 \)
     - Positive family factor \( n=1 \) {we go to the Gym together as a family my father, my mother, me, my brother and my sister, and there is a swimming pool at the same place}
     - Positive Culture \( n=2 \) {we sometimes go together as a family to the park and do some exercise, (just play together at the park)}
Walking n= 2 {Sometimes we get out walking as a family for shopping or to the city centre even if the bus is available}

Effort {it is not just for fun it is honestly an effort, when you finish you will find yourself sweated}

All family {you can play with the family so, you do not need to get out to any place to do physical activity as a family}

All family {you can play with the family so, you do not need to get out to any place to do physical activity as a family}

No embarrassment {will not be shy and will do the maximum effort as you can because there is no anyone will laugh at you}

2- Not active as a family n=4 {we don’t get out as a whole family to the swimming pool or to do a type of physical activity}