



NATIONAL INSTITUTE FOR HEALTH AND WELFARE

Monitoring Physical Activity in Finnish Population

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Monitoring PA in Finnish Population-based Datasets

Dataset	Health Behaviour among the Finnish Adults (AVTK)	Health Examination Survey (HEALTH 2000)	The National FINRISK Study
Sample	Annual random sample N=5000, national	Two-stage stratified random sample, N= about 8000, national	Stratified random sample, N=10 000, currently 5 regions
Design	Cross-sectional survey, since 1978	Cross-sectional survey and health examination, every 10th year since 2000	Cross-sectional survey, every 5th year since 1972
Age-range	15-64 years	18 years and above	25-64 years
Response rate	65-84%	80-89%	68-82%
Costs	0,04M€	8M€	2M€
Physical activity (self-reported)	Exercise/Leisure-time (frequency, categorical) Commuting (min/day) Occupational (categorical)	Exercise/Leisure-time (frequency, categorical) Commuting (min/day) Occupational (categorical) Short IPAQ	Exercise/Leisure-time (frequency, duration, categorical) Daily and household (categorical) Commuting (min/day) Occupational (categorical) Short IPAQ
Sedentary behavior (self-reported)	-	Sitting (min/ day, part of IPAQ)	Sitting (min/day, separate from IPAQ)
Fitness (self-reported)	Self-rated fitness (categorical)	Self-rated fitness (categorical)	Self-rated fitness (categorical)

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Summary of the experiences of monitoring physical activity in Finnish population

- **Negative experience of IPAQ-short / self-administered**
 - gives more missing data than other PA instruments
 - has unclear time units for respondents
 - overestimates the level of PA
 - does not correlate with BMI and waist-hip-ratio
 - confuses the reader because of too much text
 - unable to separate different domains of PA, only total PA or rough METh/wk
- **Leisure-time PA, Occupational PA and Commuting PA , and Self-rated fitness have worked well in Finnish Population**
 - give less missing values than IPAQ
 - are easy to fill in and understand for respondents
 - have relatively good dose-health response with several health indicators in general population and risk population (Barengo et al 2004 Eur Heart J, Hu et al 2007 Eur Heart J)
 - Do not, however, allow a calculation of recommended PA levels or continuous variables



Conclusions and suggestions

- To assess PA in population level we should
 - use such measures that cover the large population
 - use simple and self-explanatory PA measures that clearly differentiates inactive from active
 - aim at securing/maximising response rate
 - include the different domains of PA to be able estimate total PA
 - utilize measures with good dose-response association on health
 - consider including measurements on sedentary behavior, for example sitting
- A local expert of PA habits is needed when interpreting the results
 - Questions feasibly in one culture do not work in other

