

1 Massimo M. Vencato<sup>a</sup>, Costas I. Karageorghis<sup>a\*</sup>, David-Lee Priest<sup>a,c</sup>, & Alan M. Nevill<sup>b</sup>  
2 (2017). Concurrent validity and cross-validation of the Brunel Lifestyle Physical  
3 Activity Questionnaire. *Journal of Science and Medicine in Sport*. Advanced  
4 online publication. doi:10.1016/j.jsams.2016.12.077

5  
6 Concurrent validity and cross-validation of the  
7 Brunel Lifestyle Physical Activity Questionnaire

8  
9  
10 Massimo M. Vencato<sup>a</sup>, Costas I. Karageorghis<sup>a\*</sup>, David-Lee Priest<sup>a,c</sup>, and Alan M. Nevill<sup>b</sup>

11 <sup>a</sup>Department of Life Sciences, Brunel University London, UK

12 <sup>b</sup>Faculty of Education, Health and Wellbeing, University of Wolverhampton, UK

13 <sup>c</sup>School of Higher Education, City College Norwich, UK

14  
15  
16 \*Correspondence concerning this article should be sent to:

17 Dr Costas I. Karageorghis, Department of Life Sciences, Brunel University London,  
18 Uxbridge, Middlesex UB8 3PH, England, UK. Tel: + 44 (0)1895 266 476, Fax: + 44  
19 (0)1895 269 769, Email: costas.karageorghis@brunel.ac.uk

1 Running head: Concurrent validity and cross-validation of the BLPAQ

2

3

4

5 Concurrent validity and cross-validation of the

6 Brunel Lifestyle Physical Activity Questionnaire

7

8

9

10 Revision submitted: 2 December, 2016

11

**1 ABSTRACT**

2 *Objectives:* Owing to the profoundly negative impact of inactivity on public health, it is important  
3 to have valid and reliable measures of lifestyle physical activity (LPA). The Brunel Lifestyle  
4 Physical Activity Questionnaire (BLPAQ) was designed as a measure of planned physical activity  
5 (PPA) and unplanned physical activity (UPA). The objective of the present study was to assess the  
6 criterion-related validity of the BLPAQ.

7 *Design:* A correlational design was employed.

8 *Methods:* A sample of British leisure centre users ( $N = 356$ ; age range 18 – 69 y; mean age  $26.5 \pm$   
9  $10.4$  y) completed the BLPAQ and two reference measures: the Baecke Questionnaire of Habitual  
10 Physical Activity (BQHPA) and the Godin's Leisure-Time Exercise Questionnaire (GLTEQ).

11 MANOVA was used to test for potential gender differences in LPA patterns. Each measure was  
12 also cross-validated using a split-sample approach and the limits of agreement (LoA) method.

13 *Results:* With the exception of the Moderate and Vigorous dimensions of the GLTEQ, the  
14 remaining scores of the reference instruments were correlated with both PPA and UPA factors ( $p <$   
15  $0.05$ ). A significant difference in levels of UPA was found between women and men ( $p = 0.039$ ).  
16 Furthermore, multiple linear regression analyses demonstrated that the BLPAQ subscales could be  
17 predicted by the criterion measures. The LoA analyses demonstrated satisfactory agreement  
18 between BLPAQ subscales and those of the BQHPA and GLTEQ.

19 *Conclusions:* The BLPAQ is a criterion- and cross-validated measure of PPA and UPA that can be  
20 used to assess the efficacy of LPA interventions by researchers and practitioners. Further research  
21 should address the predictive validity of the BLPAQ – another facet of criterion validity.

22

23 **Keywords:** concurrent validity, gender, limits of agreement, planned physical activity, unplanned  
24 physical activity.

## 1 **1. Introduction**

2 Valid and reliable measures of physical activity (PA) provide a basis for future  
3 epidemiological research, with the resulting interventions contributing to improvements in  
4 psychological and physiological health.<sup>1</sup> The Brunel Lifestyle Physical Activity Questionnaire  
5 (BLPAQ)<sup>2</sup> was designed to tap the planned physical activity (PPA) and unplanned physical  
6 activity (UPA) components of lifestyle physical activity (LPA; see Appendix 1). The initial  
7 development of the BLPAQ indicated that the instrument was reliable (Cronbach  $\alpha$  estimates of  
8 0.90 for the PPA subscale and 0.68 for the UPA subscale, which had only three items) and that the  
9 two-factor structure demonstrated factorial validity (Comparative Fit Index = 0.94, Standardised  
10 Root Mean Residual = 0.05, Akaike Information Criterion = 54.74).<sup>2</sup> In contrast to pre-existing  
11 North American instruments, the BLPAQ was developed to be culturally appropriate to the British  
12 population. This was achieved by using British participants for the initial validation process<sup>2</sup> and  
13 through employing a lexicon in the development of items that would be suitable for the British  
14 population. To assess the concurrent validity of the BLPAQ, a facet of criterion validity, responses  
15 were compared with those of the Baecke Questionnaire of Habitual Physical Activity (BQHPA)<sup>3</sup>  
16 and Godin's Leisure Time Exercise Questionnaire (GLTEQ).<sup>4</sup> Both of these measures have been  
17 widely used in large-scale epidemiological and health-related behavioural research,<sup>5, 6</sup> and have  
18 demonstrated satisfactory reliability and criterion-related validity (C-RV).<sup>7-9</sup> The purpose of this  
19 study was to test the concurrent validity of the BLPAQ using the BQHPA and the GLTEQ as  
20 reference measures. Subsumed under this central purpose, gender invariance was examined for the  
21 BLPAQ scores and reference measures. The limits of agreement (LoA) method was used to assess  
22 the agreement between the sets of scores.<sup>10</sup>

## 23 **2. Methods**

24 The present study was approved by the Brunel University London Ethics Committee and  
25 all procedures followed were in accord with the Declaration of Helsinki. The sample was  
26 composed of 356 participants (age range 18 – 69 y; mean age  $26.6 \pm 10.4$  y) recruited from a  
27 leisure centre in Berkshire, UK over a 3-month period. The sample comprised 201 women (56.5%  
28 of entire sample: age range = 18 – 60 y; mean age  $26.5 \pm 9.1$  y), and 155 men (43.5% of entire

1 sample: age range = 18 – 69 y; mean age  $26.7 \pm 11.9$  y; see Table 1). Each participant was  
2 approached in the reception area of the centre and written informed consent was obtained. The  
3 participant was then invited to complete the three PA questionnaires before engaging in a group  
4 exercise class or using any other leisure centre facility (e.g., gymnasium, swimming pool, etc.).  
5 Data were gathered during the day (10:00 – 16:00 h) to avoid disrupting the flow of users during  
6 peak periods.

7         The BQHPA taps habitual PA, which refers to activity that has been established over a  
8 period of deliberation regarding its usefulness, and consequently requires less decisional effort.<sup>11, 12</sup>  
9 Its three conceptually meaningful factors are classified as (1) PA at work; (2) sport during leisure  
10 time; and (3) PA during leisure time excluding sport. The factors are scored using 5-point Likert-  
11 type scales with 1 indicating very low levels of activity and 5 representing very high levels. Test-  
12 retest reliability over a 3-month period was acceptable ranging from  $r = 0.74$  (Leisure index) to  $r =$   
13  $0.88$  (Work index). Validation studies with specific patient groups have found moderate levels of  
14 C-RV for the BQHPA.<sup>13</sup>

15         The GLTEQ assesses the frequency of exercise sessions completed during free time for at  
16 least 15 min over a typical week. Four factors comprise Light, Moderate, Vigorous, and Sweat-  
17 inducing activity. Two-week, test-retest reliability was demonstrated ( $r = 0.74$ ) in addition to  
18 significant ( $p < 0.05$ ) correlations with both  $\dot{V}O_2$  max ( $r = 0.38$ ), and body fat ( $r = 0.21$ ).<sup>4</sup> For the  
19 purpose of this study, the timespan for each exercise bout was changed to 30 min in accordance  
20 with ACSM PA guidelines.<sup>14</sup>

21         Subsequent to data screening (see Appendix 2) and logarithmic transformations due to  
22 distributional non-normality, data analysis comprised of four phases: in the first, Pearson's  
23 product-moment correlations (PPC) were used to assess relationships among dependent variables.  
24 The second phase consisted of a 2 x 9 (Gender x BLPAQ [PPA, UPA factors]/GLTEQ [Light,  
25 Moderate, Vigorous, and Sweat subscales]/BQHPA [Work, Sport, and Leisure indices])  
26 multivariate analysis of variance (MANOVA). In the third phase, the dataset was subjected to a  
27 multiple linear regression to assess functional relationships among the dependent variables (C-  
28 RV). In the final phase, data were subjected to a LoA analysis and, to facilitate this, the original

1 sample was randomly subdivided into two groups of equal size ( $n = 178$ ). The LoA for each  
 2 subsample was then calculated using the formula:  $Md \pm 1.96 SD$ , where  $Md$  = mean of differences  
 3 and  $SD$  = standard deviation of the differences.

### 4 3. Results

5 Twenty-five of the 36 PPCs were significant ( $p < 0.05$ ; see Table 2). The notable  
 6 exception was the Moderate subscale of the GLTEQ, which did not correlate ( $p = 0.533$ ) with  
 7 UPA, the Work, Sport, and Leisure indices of the BQHPA, or the Light subscale of the GLTEQ. In  
 8 addition, the Work index of the BQHPA did not correlate ( $p = 0.976$ ) with the Sport index of the  
 9 BQHPA or the Light, Moderate, and Vigorous subscales of the GLTEQ.

10 In the MANOVA (see Table 3), the omnibus statistics indicated a main effect of gender  
 11 (Hotelling's Trace = 0.21,  $F[9,346] = 7.97$ ,  $p < 0.001$ ,  $\eta_p^2 = 0.17$ ). However, only the Leisure index  
 12 of the BQHPA ( $p = 0.011$ ), and all of the GLTEQ subscales differed by gender ( $p < 0.001$ ).  
 13 Women reported higher scores on the Vigorous and Sweat subscales of the GLTEQ than men  
 14 (both  $p < 0.001$ ), whereas men reported higher scores on the Light and Moderate subscales (both  $p$   
 15  $< 0.001$ ). All of these differences were meaningful in terms of associated effect sizes ( $\eta_p^2 = 0.04 -$   
 16  $0.09$ ).

17 The linear regression analysis for PPA showed that the Sport index of the BQHPA made  
 18 the largest unique contribution to the predictive model ( $B = 0.67$ ,  $\beta = 0.47$ ,  $p < 0.001$ ), followed by  
 19 the Sweat subscale of the GLTEQ ( $B = 0.20$ ,  $\beta = 0.25$ ,  $p < 0.001$ ), the Leisure index of the  
 20 BQHPA ( $B = 0.12$ ,  $\beta = 0.14$ ,  $p = 0.001$ ), the Light subscale of the GLTEQ ( $B = 0.07$ ,  $\beta = 0.16$ ,  $p <$   
 21  $0.001$ ), and the Moderate subscale of the GLTEQ ( $B = -0.03$ ,  $\beta = -0.08$ ,  $p = 0.041$ ; see Table 4).  
 22 The remaining variables did not significantly contribute to the model ( $\beta \leq 0.03$ ,  $p > 0.05$ ). In  
 23 regard to the female subsample, the Sport index of the BQHPA made the largest unique  
 24 contribution to the predictive model ( $B = 0.72$ ,  $\beta = 0.51$ ,  $p < 0.001$ ) followed by the Sweat ( $B =$   
 25  $0.22$ ,  $\beta = 0.27$ ,  $p < 0.001$ ), the Light subscale of the GLTEQ ( $B = 0.05$ ,  $\beta = 0.11$ ,  $p = 0.047$ ), and  
 26 Moderate subscale of the GLTEQ ( $B = -0.05$ ,  $\beta = 0.11$ ,  $p = 0.020$ ). The remaining variables did not  
 27 significantly contribute to the model ( $\beta \leq 0.06$ ,  $p > 0.05$ ).

1 With reference to males, the Sport index of the BQHPA made the largest unique  
 2 contribution to the predictive model ( $B = 0.59, \beta = 0.41, p < 0.001$ ) followed by the Sweat  
 3 subscale of the GLTEQ ( $B = 0.27, \beta = 0.27, p < 0.001$ ), the Leisure index of the BQHPA ( $B =$   
 4  $0.24, \beta = 0.28, p < 0.001$ ), and finally, the Light subscale of the GLTEQ ( $B = 0.08, \beta = 0.21, p <$   
 5  $0.001$ ). The remaining variables did not significantly contribute to the model ( $\beta \leq 0.01, p > 0.05$ ).

6 Results of the linear regression analysis for UPA (see Table 5) revealed that the Work  
 7 index of the BQHPA made the largest unique contribution to the predictive model ( $B = 0.36, \beta = -$   
 8  $0.30, p < 0.001$ ), followed by the Leisure index of the BQHPA ( $B = 0.23, \beta = 0.22, p < 0.001$ ), and  
 9 the Sweat subscale of the GLTEQ ( $B = 0.20, \beta = 0.22, p < 0.001$ ). The remaining variables did not  
 10 significantly contribute to the model ( $\beta \leq 0.07, p > 0.05$ ). For the female subsample, the Leisure  
 11 index of the BQHPA made the largest unique contribution to the model ( $B = 0.37, \beta = 0.37, p <$   
 12  $0.001$ ), followed by the Work subscale ( $B = 0.30, \beta = 0.29, p < 0.001$ ), the Sweat ( $B = 0.14, \beta = -$   
 13  $0.17, p = 0.017$ ), Moderate ( $B = 0.07, \beta = 0.14, p = 0.016$ ), and Vigorous ( $B = -0.04, \beta = -0.14, p =$   
 14  $0.027$ ) subscales of the GLTEQ. The remaining variables did not significantly contribute to the  
 15 model ( $\beta \leq 0.09, p > 0.05$ ).

16 For the male subsample, the Sweat index of the GLTEQ made the largest unique  
 17 contribution to the model ( $B = 0.48, \beta = 0.38, p < 0.001$ ), followed by the Sport subscale of the  
 18 BQHPA ( $B = -0.32, \beta = -0.17, p = 0.020$ ), the Vigorous subscale of the GLTEQ ( $B = 0.14, \beta =$   
 19  $0.33, p < 0.001$ ), and the Light subscale of the GLTEQ ( $B = 0.08, \beta = 0.17, p = 0.021$ ). The  
 20 remaining variables did not significantly contribute to the model ( $\beta \leq 0.14, p > 0.05$ ; see Table 5).

21 The LoA analysis is essentially a visual scrutiny without established statistical assessment  
 22 criteria<sup>10</sup> (see Appendix 3 and Figures 1A and B, 2A–C, and 3A–D). The results of the LoA  
 23 analyses for the cross-validation of the BLPAQ and the criterion measures appear in Table 6. The  
 24 agreements demonstrated by the subscales of each questionnaire were compared across  
 25 instruments. The BLPAQ and BQHPA subscales were scored using a 5-point scale, and were thus  
 26 expected to exhibit comparable LoA results.<sup>15</sup> Unsurprisingly, the subscales of these instruments  
 27 demonstrated similar LoAs (PPA: 0.511 to -0.511, and UPA: 0.495 to -0.495 vs BQHPA-Work:  
 28 0.492 to -0.492, and BQHPA-Leisure: 0.518 to -0.518) with the exception of the Sport index of the

1 BQHPA, which returned superior agreement (0.389 to -0.389; see Table 6). The interval between  
2 the upper and lower LoA for each of the GLTEQ subscales were considerably larger than those of  
3 the BLPAQ and BQHPA (GLTEQ-Light: 1.861 to -1.861; GLTEQ-Moderate: 1.966 to -1.966;  
4 GLTEQ-Vigorous: 2.549 to -2.549), whereas the Sweat subscale of the GLTEQ presented a tighter  
5 agreement (0.648 to -0.648; see Table 6). The low number of data points present in Figures 3A–D  
6 relative to the other LoA analyses, reflect the fact that each point represents the scores of multiple  
7 participants and the narrower 3-point scale attached to the GLTEQ.

## 8 **5. Discussion**

9       The correlations between the BLPAQ factors, the BQHPA indices, and the GLTEQ  
10 subscales indicated reasonable concurrent validity of the BLPAQ ( $r = 0.11 - 0.64$ ). PA measures  
11 generally inter-correlate within a similar range (i.e.,  $r = 0.20 - 0.50$ );<sup>9, 11, 13, 16</sup> only the correlation  
12 between PPA and the Sport index of BQHPA exceeded the ideal value of  $r = 0.60$ .<sup>16</sup> Overall, the  
13 PPC analysis identified six significant negative correlations between the BLPAQ and reference  
14 measures (see Table 2). The MANOVA results indicated that women and men reported similar  
15 levels of PPA ( $p = 0.128$ ) but men reported slightly higher levels of UPA than women ( $p = 0.039$ ;  
16 see Table 3), albeit that the associated effect size was not meaningful ( $\eta_p^2 = 0.01$ ). Hence, in terms  
17 of the UPA component, it can be argued that the BLPAQ is equally valid for women and men  
18 drawn from a physically active population. The results of the linear regression analyses also  
19 showed gender differences in the prediction of the BLPAQ subscales by the two criterion  
20 measures. In the LoA analysis, every subscale demonstrated satisfactory agreement (across split  
21 samples). The BQHPA and BLPAQ subscales demonstrated broadly similar plot distributions and  
22 LoAs (see Figures 1A and B, 2A–C, and 3A–D).

23       The BLPAQ factors were inversely correlated, which was expected, given that they reflect  
24 *mutually exclusive* patterns of PA with divergent intensity levels ( $r = -0.25$ ,  $p < 0.001$ ). UPA  
25 correlated positively with the Light subscale of the GLTEQ ( $r = 0.24$ ,  $p < 0.001$ ). This result was  
26 also expected, as UPA is more likely to be of a light intensity; high-intensity activities, by their  
27 very nature, require some degree of planning.<sup>17, 18</sup>



1 UPA was negatively correlated with each BQHPA index (Work:  $r = -0.38, p < 0.001$ ;  
2 Sport:  $r = -0.13, p = 0.016$ ; and Leisure:  $r = -0.36, p < 0.001$ ) and the Sweat subscale of the  
3 GLTEQ ( $r = -0.39, p < 0.001$ ). The inverse correlation between UPA and the Work and Leisure  
4 indices of the BQHPA is problematic, as the UPA descriptors used in the BLPAQ incorporate  
5 activities that are reflected in both indices (e.g., walking, lifting loads at work). Nonetheless, the  
6 descriptor list also includes activities that are typically undertaken outside of work (e.g., playing  
7 with children, shopping, etc.), and those that are ambiguous in terms of their pertinence to leisure;  
8 that is, activities that may be enjoyable pastimes but also routine in nature (e.g., dog walking,  
9 gardening, etc.). The PPA correlated positively with all indices of the BQHPA and all subscales of  
10 the GLTEQ, with the exception of the Light subscale, with which it was negatively associated.  
11 These findings are in line with expectations inasmuch as PPA is likely to be moderate-to-vigorous  
12 in intensity; one does not systematically plan to engage in activities of a very light intensity.<sup>19, 20</sup>

13 Physical activity behaviour differed by gender, which accounted for 17% of the explained  
14 variance (see Table 3). The most meaningful of these differences was in respect of the GLTEQ  
15 subscales. Women reported a higher incidence of vigorous and sweat-inducing PA. The activities  
16 listed as exemplars for the Light subscale include many stereotypically masculine pastimes such as  
17 golf, archery, and fishing.<sup>21</sup> With reference to the Sport index, it appears that, similar to the general  
18 population,<sup>22</sup> the female subsample was as likely to engage in sport as the male subsample. The  
19 lack of gender invariance in respect of the Work index may reflect changing gender roles within  
20 the workplace; almost every participant reported a form of work-related activity. Although patterns  
21 of PA adoption are thought to differ by gender,<sup>23</sup> no differences in the BLPAQ factor scores were  
22 found.

23 It appears that only three subscales made a significant contribution ( $p < 0.001$ ) to the  
24 regression equation to predict UPA: the Work and Leisure indices of the BQHPA and the Sweat  
25 subscale of the GLTEQ. Each of these predictors were positively correlated with UPA ( $p < 0.001$ ).  
26 It is noteworthy that the relationship between UPA and the predictor variables differed markedly  
27 between genders. Women who engaged in a high frequency of UPA behaviour tended to partake in  
28 sweat-inducing physical exercises and in sporting activities. The implication is that sport-

1 orientated women are also highly active in other exercise settings, which is consistent with the  
2 notion of a dichotomy between active and sedentary women.<sup>24, 25</sup>

3         The regression equations for PPA differed markedly by gender (see Table 4) and among  
4 women, four variables made a unique contribution to the model. The strongest predictor was the  
5 Sport index of the BQHPA followed by the Sweat, Light, and Moderate subscales of the GLTEQ.  
6 With the exception of the Moderate subscale of the GLTEQ ( $\beta = -0.11, p = 0.020$ ), each of these  
7 variables loaded positively, indicating that women intentionally planned their participation in more  
8 vigorous forms of PA.<sup>17-20</sup> Among men, four variables made a unique contribution to the model:  
9 Sport index of the BQHPA was clearly the strongest followed by the Leisure index of the BQHPA  
10 and the Sweat and Light subscales of the GLTEQ. The overall variance explained for women and  
11 men for both PPA and UPA was similar, albeit that the cluster of significant predictors in each  
12 regression equation was different (see Table 4 and Table 5). It is notable that the BQHPA indices  
13 are stronger predictors of PPA among the male subsample when compared to the female  
14 subsample, but that the converse was observed for the GLTEQ subscales.

15         Because no previous research has established facets of the criterion validity for PPA and  
16 UPA, the present results can be viewed as useful benchmarks for future scale development. Both  
17 BLPAQ factors demonstrated similar LoAs to those of the Work and Leisure indices of the  
18 BQHPA, with which they were directly comparable. In contrast, the Sport index demonstrated a  
19 narrower range, indicative of greater agreement between the split samples. Within the PA  
20 spectrum, sporting behaviour is among the easiest to identify and recall owing to its specific  
21 nature, whereas light activity proves more nebulous.<sup>11, 15</sup>

22         A probable limitation of the present study was that a physically active sample was chosen  
23 (i.e., leisure centre users). Such participants likely differed from the general population in terms of  
24 their PA behaviour. In particular, women reported a higher frequency of intense PA; a finding that  
25 highlights the distinctness of the present sample from the general population.<sup>27</sup> For this reason, one  
26 must apply caution when generalising the present results to less active populations. A further  
27 limitation is that participants' PA behaviours were not subsequently observed (i.e., the predictive  
28 validity facet of criterion validity) and this might be a focus for future research efforts.

## 1 **6. Conclusions**

2           The BLPAQ demonstrated acceptable concurrent validity, which strengthens the evidence  
3 base surrounding it as a valid measure of planned and unplanned PA. The LoA analyses showed  
4 that the internal agreement of the BLPAQ factors was commensurate with those of the criterion  
5 measures. The results also indicated that gender bears influence on PA patterns and should,  
6 therefore, be taken into account in the design of PA interventions.<sup>24, 28</sup> Further C-RV development  
7 with the BLPAQ should be conducted using anthropometric measures such as percentage of body  
8 fat,<sup>8</sup> ecological momentary assessment<sup>29</sup> with an activity diary,<sup>30</sup> and objective assessments of PA  
9 such as an accelerometer,<sup>12, 31</sup> or doubly labelled water.<sup>7</sup> To complete an initial construct validation  
10 process, the theoretical basis for the BLPAQ – the Theory of Planned Behaviour<sup>32</sup> – should be  
11 used to predict planned and unplanned PA.

### 12 **Practical implications**

- 13           • The BLPAQ is a measure of Lifestyle Physical Activity (LPA) with an emerging evidence  
14 base regarding its validity and reliability.
- 15           • The BLPAQ is a tool that might be considered for assessment of LPA within the British  
16 population, as well as other English-speaking populations, with further validation work.
- 17           • This questionnaire can be easily administered, and is thus particularly useful for  
18 researchers and health professionals concerned with promotion of LPA.

- 1 **Funding:** This research was not funded.
- 2 **Competing interests:** The authors declare no conflict of interest.
- 3 **Ethics approval:** The study was approved by the Brunel University London Ethics
- 4 Committee and all participants provided written informed consent. Participants consented
- 5 to publication of the data so long as their identity was not revealed.

**REFERENCES**

1. Biddle SJH, Mutrie N, Gorely, T. *Psychology of physical activity: determinants, well-being and interventions*, 3rd ed., London, Routledge, 2015:33–67.
2. Karageorghis CI, Vencato MM, Chatzisarantis NLD, et al. Development and initial validation of the Brunel Lifestyle Physical Activity Questionnaire. *Br J Sports Med* 2005; **39**(5):e23–e30.
3. Baecke JAH, Burema J, Frijters JER. A short questionnaire for the measurement of habitual physical activity in epidemiological studies. *Am J Clin Nutr* 1982; **36**(5):936–942.
4. Godin G, Shephard RJ. A simple method to assess exercise behavior in the community. *Can J Appl Sport Sci* 1985; **10**(3):141–146.
5. Remsberg KE, Rogers NL, Demerath EW, et al. Sex differences in young adulthood metabolic syndrome and physical activity: The Fels Longitudinal Study. *Am J Hum Biol* 2007; **19**(4):544–550.
6. Bell EJ, Lutsey PL, Windham BG, et al. Physical activity and cardiovascular disease in African Americans in ARIC. *Med Sci Sports Exerc* 2013; **45**(5):901–907.
7. Philippaerts RM, Westerterp KR, Lefevre J. Doubly labelled water validation of three physical activity questionnaires. *Int J Sports Med* 1999; **20**(5):284–289.
8. Amireault S, Godin G. The Godin-Shephard leisure-time physical activity questionnaire: validity evidence supporting its use for classifying healthy adults into active and insufficiently active categories. *Percept Mot Skills* 2015; **120**(2):604–622.
9. Shephard RJ. Limits to the measurement of habitual physical activity by questionnaires. *Br J Sports Med* 2003; **37**(3):197–206.
10. Bland JM, Altman DG. Statistical methods for assessing agreement between two methods of clinical measurement. *Int J Nurs Stud* 2010; **47**(8):931–936.
11. Ono R, Hirata S, Yamada M, et al. Reliability and validity of the Baecke physical activity questionnaire in adult women with hip disorders. *BMC Musculoskelet Disord* 2007; **8**(1):61–66.

12. Helmerhorst HJF, Brage S, Warren J, et al. A systematic review of reliability and objective criterion-related validity of physical activity questionnaires. *Int J Behav Nutr Phys Act* 2012; **9**(1):103–158.
13. Hertogh EM, Monninkhof EM, Schouten EG, et al. Validity of the Modified Baecke Questionnaire: comparison with energy expenditure according to the doubly labeled water method. *Int J Behav Nutr Phys Act* 2008; **5**(1):30–35.
14. American College of Sports Medicine [ACSM]. *ACSM's guidelines for exercise testing and prescription*, 9th ed., London, Lippincott, Williams & Wilkins, 2013:166–174.
15. Nevill AM, Lane AM, Kilgour LJ, et al. Stability of psychometric questionnaires. *J Sp Sci* 2001; **19**(4):273–278.
16. Rennie KL, Wareham NJ. The validation of physical activity instruments for measuring energy expenditure: Problems and pitfalls. *Public Health Nutr* 1998; **1**(04):265–271.
17. Bargh JA. The four horsemen of automaticity: Awareness, intention, efficiency, and control in social cognition. In: Wyer SR, Srull TK, eds. *Handbook of social cognition*. Hillsdale, Erlbaum, 1994:1–40.
18. Bargh JA, Chartrand TL. The mind in the middle: A practical guide to priming and automaticity research. In: Reis HT, Judd CM, eds. *Handbook of research methods in social and personality psychology*. New York, Cambridge University Press, 2000:253–285.
19. Ouelette JA, Wood W. Habit and intention in everyday life: The multiple processes by which past behavior affects future behavior. *Psychol Bull* 1998; **124**(1):54–74.
20. Gardner B. A review and analysis of the use of 'habit' in understanding, predicting and influencing health-related behavior. *Health Psychol Rev* 2015; **9**(3):277–295.
21. Rhodes RE, Mark RS, Temmel CP. Adult sedentary behavior: a systematic review. *Am J Prev Med* 2012; **42**(3):e3–e28.
22. Bell JA, Hamer M, van Hees VT, et al. Healthy obesity and objective physical activity. *Am J Clin Nutr* 2015; **102**(2):268–275.
23. Health and Social Care Information Centre Statistics (HSCIC). *Statistics on obesity, physical activity and diet: England 2014*. London, The Stationary Office, 2014:24–33.

www.hscic.gov.uk/catalogue/PUB13648/Obes-phys-acti-diet-eng-2014-rep.pdf. Accessed 21 March 2016.

24. Williams PT. A cohort study of incident hypertension in relation to changes in vigorous physical activity in men and women. *J Hypertens* 2008; **26**(6):1085–1093.
25. O'Dougherty M, Arikawa A, Kaufman B, et al. Purposeful exercise and lifestyle physical activity in the lives of young adult women: Findings from a diary study. *Women Health* 2009; **49**(8):642–661.
26. Eyler AE, Wilcox S, Matson-Koffman D, et al. Correlates of physical activity among women from diverse racial/ethnic groups. *J Womens Health Gend Based Med* 2002; **11**(3):239–253.
27. Dornelas EA, Stepnowski RR, Fischer EH, et al. Urban ethnic minority women's attendance at health clinic vs. church-based exercise programs. *J Cross Cult Gerontol* 2007; **22**(1):129–136.
28. Dias MR, Simão R, Machado GH, et al. Relationship of different perceived exertion scales in walking or running with self-selected and imposed intensity. *J Hum Kinet* 2014; **43**(1):149–157.
29. Shiffman S, Stone AA, Hufford MR. Ecological momentary assessment. *Annu Rev Clin Psychol* 2008; **4**:1–32.
30. Tasca GA, Illing V, Balfour L, et al. Psychometric properties of self-monitoring of eating disorder urges among treatment seeking women: Ecological momentary assessment using a daily diary method. *Eating Behaviors* 2009; **10**(1):59–61.
31. Freene N, Waddington G, Chesworth W, et al. Validating two self-report physical activity measures in middle-aged adults completing a group exercise or home-based physical activity program. *J Sci Med Sport* 2014; **17**(6):611–616.
32. Ajzen I. The theory of planned behavior. *Organ Behav Hum Decis Process* 1991; **50**(2):179–211.

**Table 1**

Details and ethnic background of participants ( $N = 356$ ) employed in the BLPAQ Criterion-related validity analyses after the deletion of univariate and multivariate outliers.

	Participants	Women	Men
	( $N = 356$ )	( $n = 201$ )	( $n = 155$ )
Age range (yr)	18-69	18-60	18-69
Mean age (yr)	26.68	26.49	26.70
Standard deviation (yr)	10.37	9.06	11.88
Ethnicity			
White UK/Irish	62.4	58.2	67.7
Black-Caribbean	2.5	4.0	0.6
Black-African	6.2	4.5	8.4
Indian	11.8	13.9	9.0
Pakistani	4.2	5.0	3.2
Bangladeshi	0.6	1.0	0.0
Chinese	1.4	2.5	0.0
Mixed race	2.2	4.0	0.0
White European	7.3	6.0	9.0
White-Other	0.6	0.0	1.3
Asian-Other	0.8	1.0	0.6
Gender percentage (%)		56.5	43.5

*Note:* BLPAQ = Brunel Lifestyle Physical Activity Questionnaire.



**Table 2**

Pearson's product-moment correlations (2-tailed) between BLPAQ, BQHPA, and GLTEQ subscales ( $N = 356$ ).

Subscales	BLPAQ / UPA	BQHPA / Work	BQHPA / Sport	BQHPA / Leisure	GLTEQ / Light	GLTEQ / Moderate	GLTEQ / Vigorous	GLTEQ / Sweat
BLPAQ / PPA	-0.25	0.11	0.64	0.30	-0.47	0.12	0.13	0.56
<i>p</i>	<0.001	0.040	<0.001	<0.001	<0.001	0.021	0.011	<0.001
BLPAQ / UPA		-0.38	-0.13	-0.36	0.24	0.03	-0.01	-0.39
<i>p</i>		<0.001	0.016	<0.001	<0.001	0.533	0.808	<0.001
BQHPA / Work			0.00	0.17	-0.01	0.06	0.10	0.22
<i>p</i>			0.976	0.001	0.827	0.251	0.061	<0.001
BQHPA / Sport				0.16	-0.34	0.06	0.09	0.37
<i>p</i>				0.003	<0.001	0.258	0.106	<0.001
BQHPA / Leisure					-0.22	-0.04	-0.10	0.30
<i>p</i>					<0.001	0.485	0.051	<0.001
GLTEQ / Light						0.04	-0.06	-0.48
<i>p</i>						0.414	0.251	<0.001
GLTEQ / Moderate							0.30	0.10
<i>p</i>							<0.001	0.051
GLTEQ / Vigorous								0.15
<i>p</i>								0.004

*Notes:* BLPAQ = Brunel Lifestyle Physical Activity Questionnaire; PPA = planned physical activity; UPA = unplanned physical activity; BQHPA = Baecke Questionnaire of Habitual Physical Activity; GLTEQ = Godin Leisure-Time Exercise Questionnaire.

**Table 3**Descriptive statistics and MANOVA for BLPAQ, BQHPA, and GLTEQ subscales ( $N = 356$ ).

Dependent variable	Men		Women		$F$ (df)	$p$	$\eta_p^2$
	$M$	$SD$	$M$	$SD$			
<b>BLPAQ</b> PPA factor	1.40	0.19	1.44	0.21	2.33 (14.45, 354)	0.128	0.01
<b>BLPAQ</b> UPA factor	1.63	0.21	1.59	0.20	4.27 (15.01, 354)	0.039	0.01
<b>BQHPA</b> Work Index	1.39	0.16	1.43	0.22	3.35 (13.29, 354)	0.068	0.01
<b>BQHPA</b> Sport Index	1.50	0.12	1.51	0.15	0.54 (6.95, 354)	0.464	0.00
<b>BQHPA</b> Leisure Index	1.53	0.21	1.59	0.20	6.47 (14.83, 354)	0.011	0.02
<b>GLTEQ</b> Light subscale	1.69	0.59	1.33	0.74	25.00 (161.16, 354)	<0.001	0.07
<b>GLTEQ</b> Moderate subscale	1.34	0.63	1.03	0.79	15.56 (187.16, 354)	<0.001	0.04
<b>GLTEQ</b> Vigorous subscale	1.09	0.84	1.58	0.83	29.85 (247.11, 354)	<0.001	0.08
<b>GLTEQ</b> Sweat subscale	1.18	0.22	1.34	0.29	34.49 (24.19, 354)	<0.001	0.09

Omnibus statistics: Hotelling's Trace = 0.21,  $F(9, 346) = 7.97$ ,  $p < 0.001$ ,  $\eta_p^2 = 0.17$

Notes: BLPAQ = Brunel Lifestyle Physical Activity Questionnaire; PPA = planned physical activity; UPA = unplanned physical activity; BQHPA = Baecke Questionnaire of Habitual Physical Activity; GLTEQ = Godin Leisure-Time Exercise Questionnaire.

**Table 4**

Summary of multiple linear regressions for variables predicting PPA factor of the BLPAQ (N = 356).

Physical activity questionnaires subscales	Entire sample (N = 356)					Women (n = 201)					Men (n = 155)				
	Unstandardised		Standardised			Unstandardised		Standardised			Unstandardised		Standardised		
	B	SE B	β	t	p	B	SE B	β	t	p	B	SE B	β	t	p
(Constant)	0.94	0.21		4.53	<0.001	1.00	0.30		3.39	0.001	0.63	0.31		2.07	0.040
BQHPA/Work	0.03	0.04	0.02	0.64	0.521	0.06	0.05	0.06	1.24	0.215	0.01	0.08	0.01	0.13	0.898
BQHPA/Sport	0.67	0.06	0.47	11.97	<0.001	0.72	0.08	0.51	9.54	<0.001	0.59	0.09	0.41	6.89	<0.001
BQHPA/Leisure	0.12	0.04	0.14	3.43	0.001	0.04	0.05	0.04	0.86	0.390	0.24	0.05	0.28	4.65	<0.001
GLTEQ/Light	0.07	0.02	0.16	3.77	<0.001	0.05	0.03	0.11	2.00	0.047	0.08	0.02	0.21	3.68	<0.001
GLTEQ/Moderate	-0.03	0.02	-0.08	-2.05	0.041	-0.05	0.02	-0.11	-2.36	0.020	-0.01	0.02	-0.03	-0.51	0.613
GLTEQ/Vigorous	-0.01	0.01	-0.04	-1.09	0.274	-0.01	0.02	-0.03	-0.61	0.546	-0.03	0.02	-0.10	-1.59	0.113
GLTEQ/Sweat	0.20	0.04	0.25	5.54	<0.001	0.22	0.05	0.27	4.54	<0.001	0.27	0.07	0.27	4.00	<0.001
	<i>R</i> = 0.75, <i>R</i> <sup>2</sup> = 0.57.					<i>R</i> = 0.77, <i>R</i> <sup>2</sup> = 0.60.					<i>R</i> = 0.76, <i>R</i> <sup>2</sup> = 0.57.				

Notes: BLPAQ = Brunel Lifestyle Physical Activity Questionnaire; PPA = planned physical activity; BQHPA = Baecke Questionnaire of Habitual Physical Activity; GLTEQ = Godin Leisure-Time Exercise Questionnaire.

**Table 5**

Summary of multiple linear regressions for variables predicting UPA factor of the BLPAQ (N = 356).

Physical activity questionnaires subscales	Entire sample (N = 356)					Women (n = 201)					Men (n = 155)				
	Unstandardised		Standardised			Unstandardised		Standardised			Unstandardised		Standardised		
	<i>B</i>	<i>SE B</i>	$\beta$	<i>t</i>	<i>p</i>	<i>B</i>	<i>SE B</i>	$\beta$	<i>t</i>	<i>p</i>	<i>B</i>	<i>SE B</i>	$\beta$	<i>t</i>	<i>p</i>
(Constant)	0.27	0.30		0.91	0.361	0.06	0.37		0.17	0.862	1.21	0.48		2.53	0.013
BQHPA/Work	0.36	0.06	0.30	6.28	<0.001	0.30	0.06	0.29	4.75	<0.001	-0.22	0.13	0.14	1.72	0.087
BQHPA/Sport	0.01	0.08	0.00	0.08	0.934	0.12	0.09	0.09	1.31	0.192	-0.32	0.13	-0.17	-2.35	0.020
BQHPA/Leisure	0.23	0.05	0.22	4.57	<0.001	0.37	0.06	0.37	6.02	<0.001	0.01	0.08	0.01	0.10	0.922
GLTEQ/Light	0.03	0.03	0.07	1.38	0.168	-0.01	0.03	-0.02	-0.34	0.737	0.08	0.04	0.17	2.33	0.021
GLTEQ/Moderate	0.03	0.02	0.07	1.38	0.169	0.07	0.03	0.14	2.43	0.016	-0.06	0.04	-0.11	-1.51	0.132
GLTEQ/Vigorous	0.01	0.02	0.01	0.30	0.770	-0.04	0.02	-0.14	-2.23	0.027	0.14	0.03	0.33	4.33	<0.001
GLTEQ/Sweat	0.20	0.05	0.22	3.89	<0.001	0.14	0.06	0.17	2.40	0.017	0.48	0.11	0.38	4.53	<0.001
	<i>R</i> = 0.55, <i>R</i> <sup>2</sup> = 0.30.					<i>R</i> = 0.63, <i>R</i> <sup>2</sup> = 0.40.					<i>R</i> = 0.59, <i>R</i> <sup>2</sup> = 0.35.				

BLPAQ = Brunel Lifestyle Physical Activity Questionnaire; UPA = unplanned physical activity; BQHPA = Baecke Questionnaire of Habitual Physical Activity; GLTEQ = Godin Leisure-Time Exercise Questionnaire.

**Table 6**

Limits of agreement analysis for BLPAQ, BQHPA, and GLTEQ subscales (N = 356).

Physical activity questionnaires subscales	Difference between A-B		95% LoA		One-sample <i>t</i> -test		95% CI of the Difference	
	<i>Md</i>	<i>SD</i>	Upper	Lower	<i>t</i>	<i>p</i> (2-tailed)	Lower	Upper
BLPAQ/PPA	-0.023	0.272	0.511	-0.511	-1.11	0.270	-0.063	0.018
BLPAQ/UPA	0.006	0.250	0.495	-0.495	0.30	0.765	-0.031	0.043
BQHPA/Work	-0.005	0.254	0.492	-0.492	-0.29	0.775	-0.043	0.032
BQHPA/Sport	0.006	0.196	0.389	-0.389	0.43	0.671	-0.023	0.035
BQHPA/Leisure	-0.001	0.265	0.518	-0.518	-0.07	0.948	-0.041	0.038
GLTEQ/Light	-0.009	0.954	1.861	-1.861	-0.13	0.896	-0.151	0.132
GLTEQ/Moderate	0.054	0.975	1.966	-1.966	0.75	0.457	-0.090	0.199
GLTEQ/Vigorous	0.165	1.217	2.549	-2.549	1.81	0.072	-0.015	0.345
GLTEQ/Sweat	-0.038	0.350	0.648	-0.648	-1.46	0.147	-0.090	0.014

*Notes:* *Md* = Mean of difference between subsample 1 and subsample 2; LoA = limits of agreement; CI = confidence interval; BLPAQ = Brunel Lifestyle Physical Activity Questionnaire; PPA = planned physical activity; UPA = unplanned physical activity; BQHPA = Baecke Questionnaire of Habitual Physical Activity; GLTEQ = Godin Leisure-Time Exercise Questionnaire.

Figures: 1A, and 1B

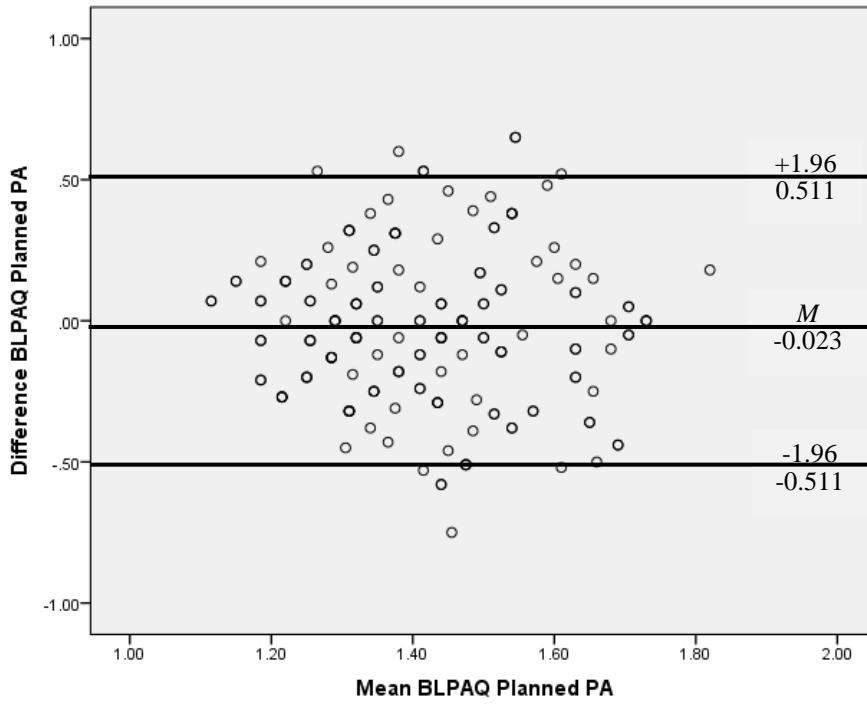


Figure 1A: Limits of Agreement for the BLPAQ - Planned Physical Activity subsample 1 and subsample 2.

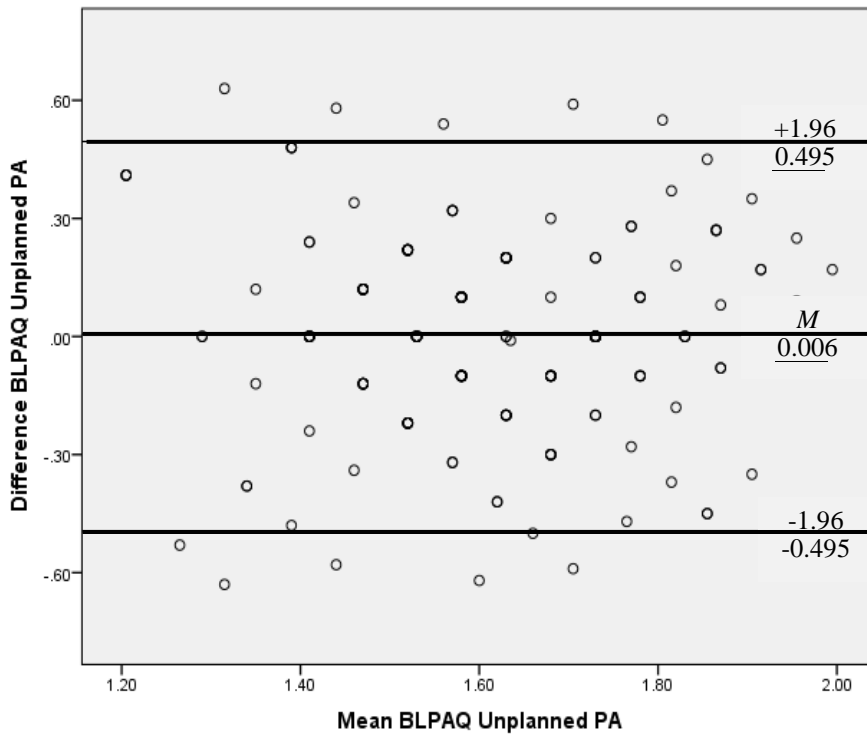


Figure 1B: Limits of Agreement for the BLPAQ - Unplanned Physical Activity subsample 1 and subsample 2.

Figures: 2A, 2B, and 2C

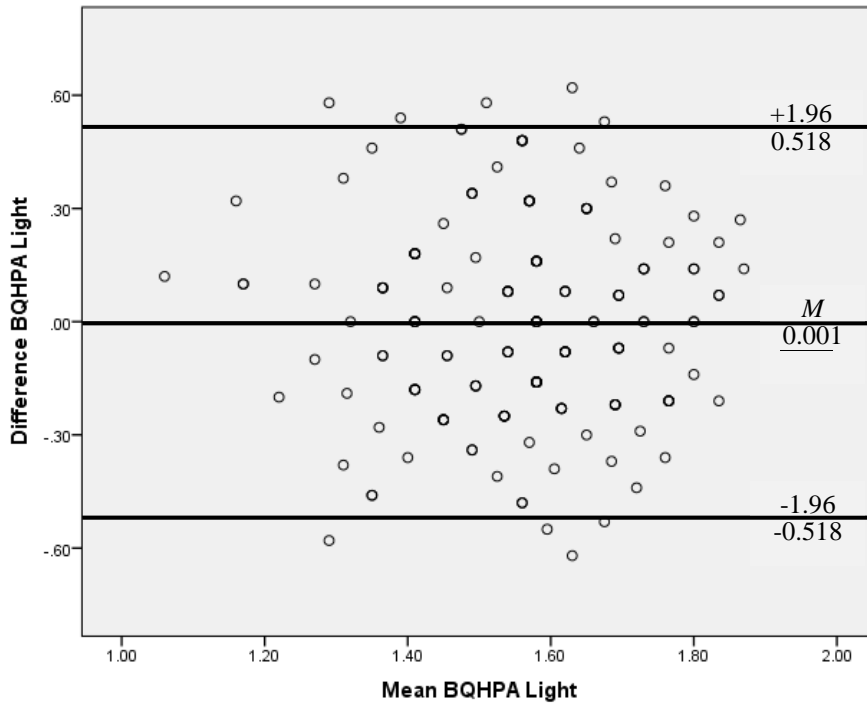


Figure 2A: Limits of Agreement for the BQHPA - Light Index subsample 1 and subsample 2.

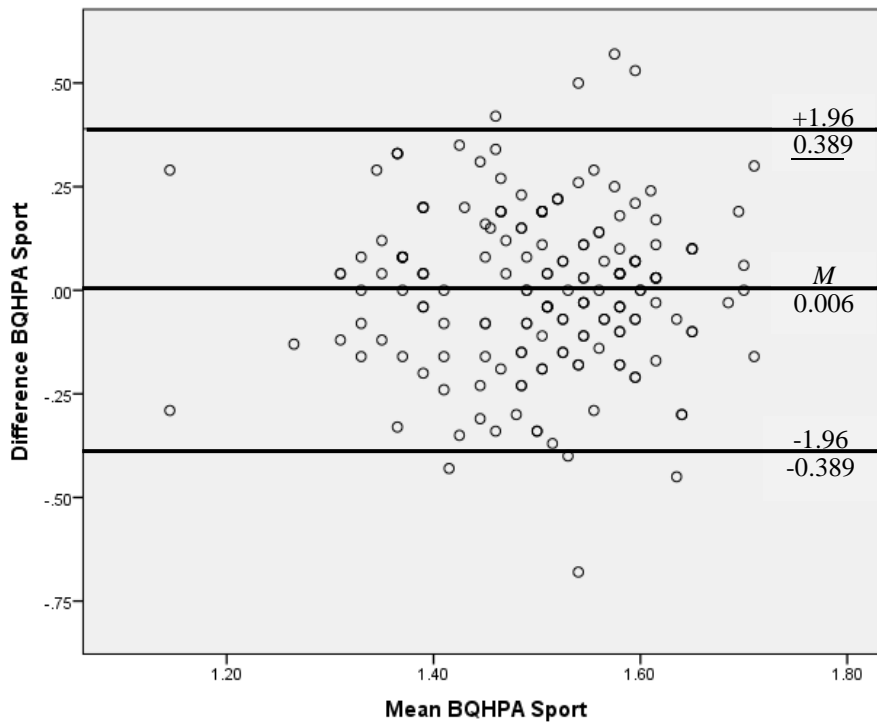


Figure 2B: Limits of Agreement for the BQHPA - Sport Index subsample 1 and subsample 2.

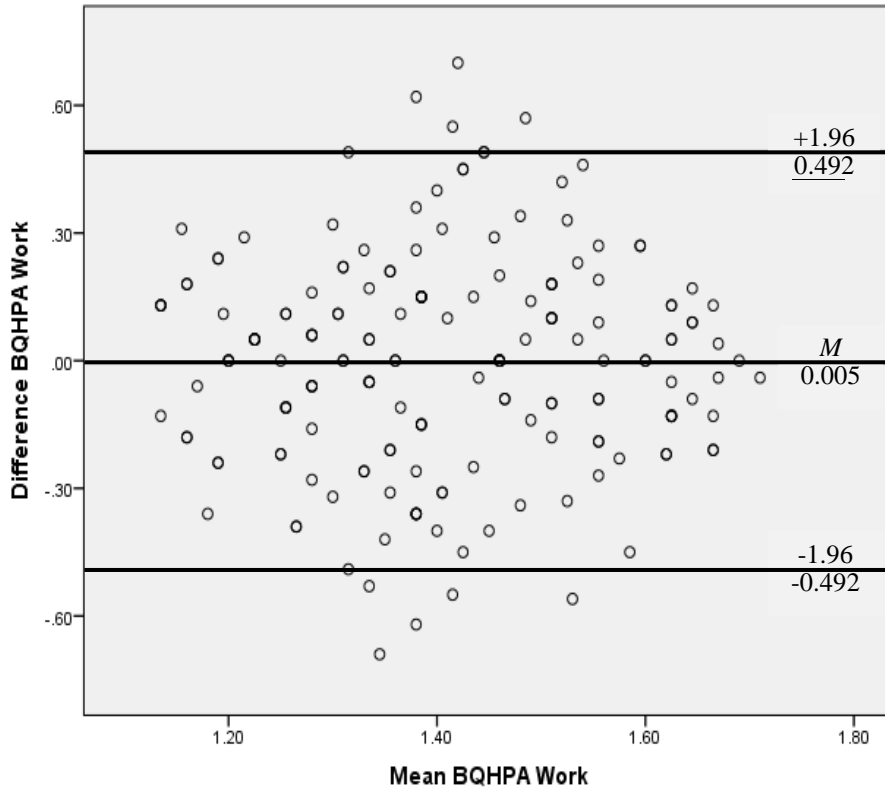


Figure 2C: Limits of Agreement for the BQHPA - Work Index subsample 1 and subsample 2.



Figures: 3A, 3B, 3C, and 3D

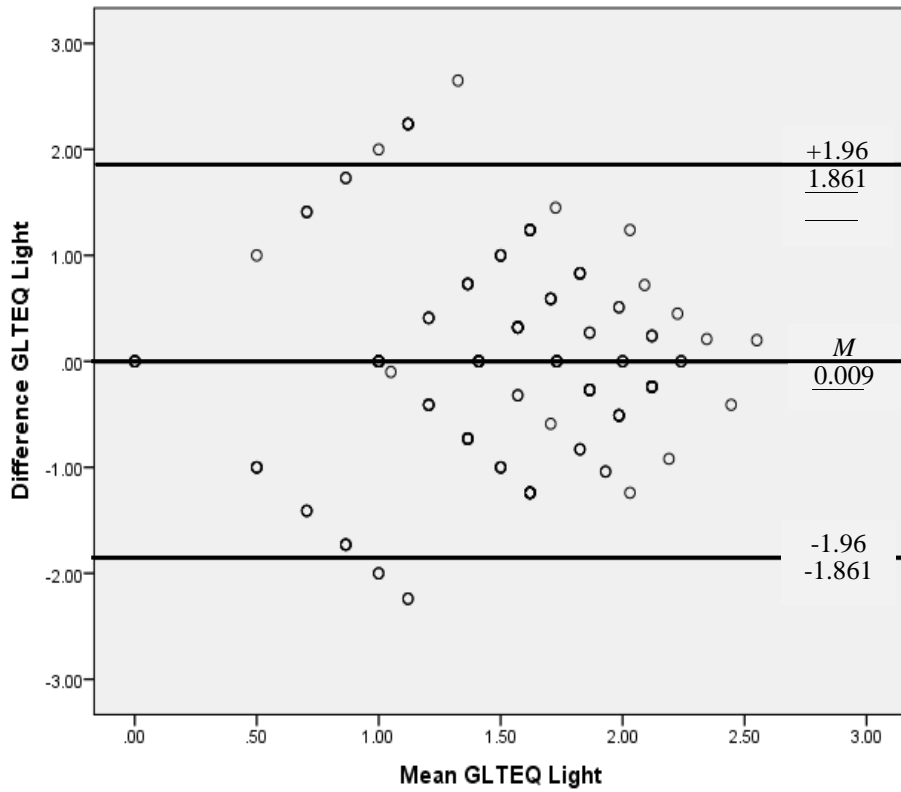


Figure 3A: Limits of Agreement for the GLTEQ - Light factor subsample 1 and subsample 2.

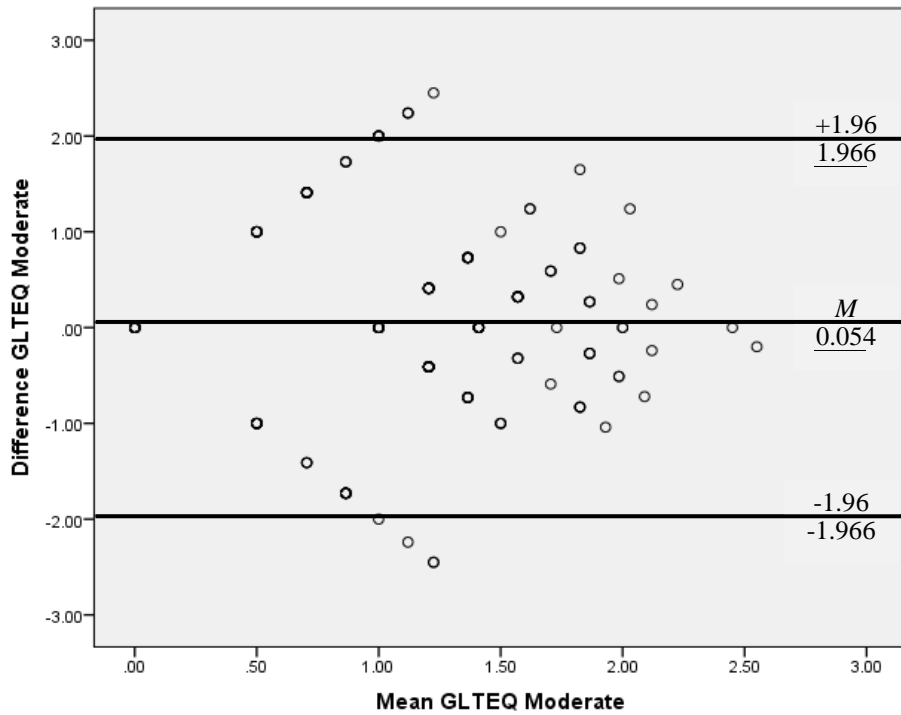


Figure 3B: Limits of Agreement for the GLTEQ - Moderate factor subsample 1 and subsample 2.

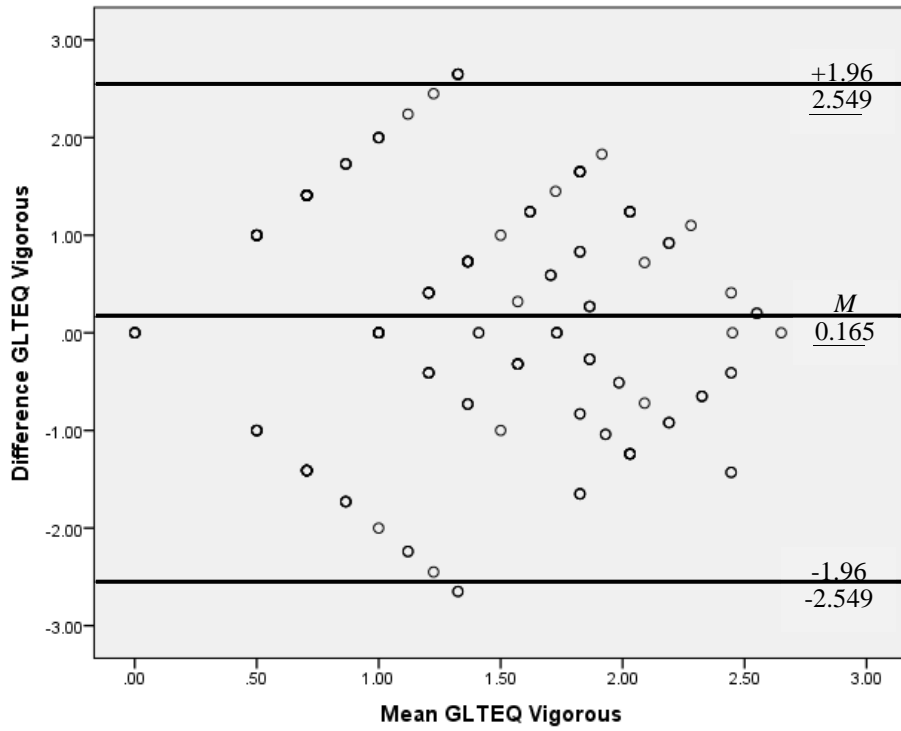


Figure 3C: Limits of Agreement for the GLTEQ - Vigorous factor subsample 1 and subsample 2.

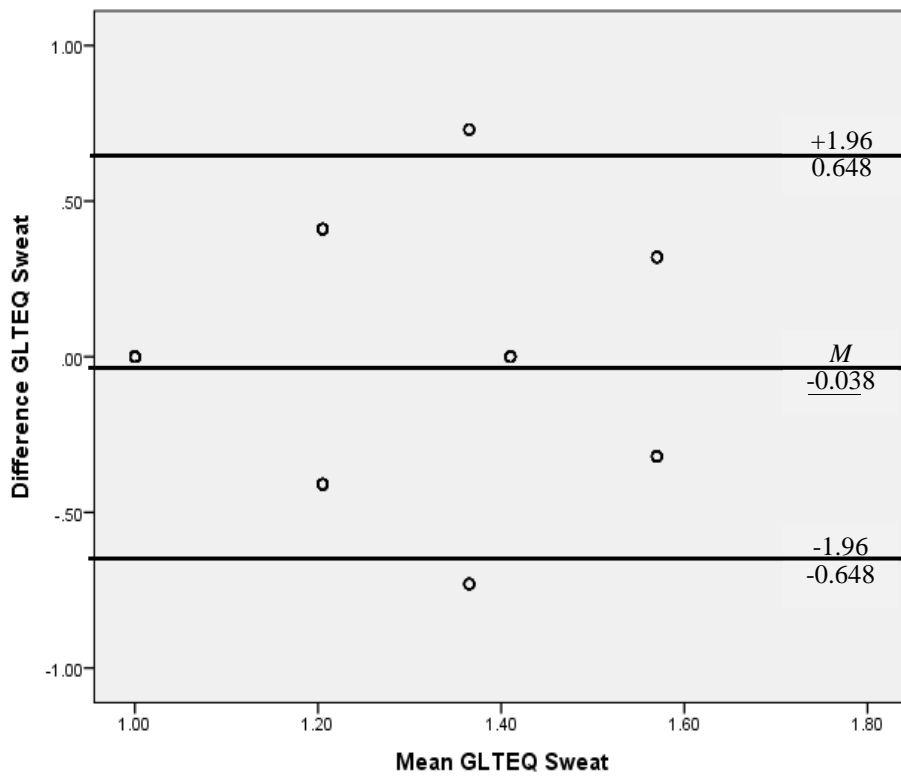


Figure 3D: Limits of Agreement for the GLTEQ - Sweat factor subsample 1 and subsample 2.

## APPENDIX 1

### Brunel Lifestyle Physical Activity Questionnaire<sup>1</sup>

Note: The demographics section has not been included in the interests of brevity and can be requested from the corresponding author.

We would like you to give an honest answer to each of the questions that follow. Give the response that BEST represents you and avoid dwelling for too long on any single question. Be sure to answer ALL of the questions otherwise you will not be permitted to proceed. The questionnaire takes less than 5 minutes to complete. We are sure that you will find the personal profile to be most illuminating.

#### Part A: Pre-planned Lifestyle Physical Activity

*Please click to indicate your response:*

*Note.* Pre-planned lifestyle physical activity is any activity that is scheduled into your daily routine, which may enhance your health, fitness or well-being. Examples include brisk walking, gardening, cycling, team games, etc.

1. How many times in a normal week do you engage in pre-planned physical activity?	Never	1-2 times	3-4 times	5-6 times	7 or more times
2. How long have you been engaging in pre-planned physical activity at this weekly rate?	Not relevant to me	Less than 1 month	1-3 months	4-6 months	More than 7 months
3. In general, what is the duration of each session of pre-planned physical activity that you engage in?	Not relevant to me	Less than 10 mins	10 - 20 mins	21 - 30 mins	More than 30 mins
4. If you add together each session of pre-planned physical activity that you engage in during a normal week, how much time would you estimate that you spend in total?	Not relevant to me	Less than 1 hour	1-2 hours	3-5 hours	More than 5 hours
5. In the past, how long have you generally persisted with a pre-planned physical activity program before giving up?	Not relevant to me, as I have never persisted	Up to 1 month	Up to 3 months	Up to 6 months	More than 6 months, or, I have never given up
6. How vigorously do you engage in pre-planned physical activity?	Not relevant to me	Very light	Moderately hard	Hard	Very hard

*(“Very light” means that you hardly get out of breath.*

*“Very hard” means that you exercise to the extent that you are breathing deeply)*

### Part B: Unplanned Lifestyle Physical Activity

7. **Excluding** your pre-planned physical activity sessions, how many hours do you estimate that you spend doing other forms of physical activity each week?  
*(These may include heavy housework, climbing stairs, cycling or walking to work, walking the dog, gardening, shopping, playing with children, etc.)*

	Fewer than 2 hours	2-4 hours	5-7 hours	8-9 hours	10 or more hours

8. How vigorously do you engage in these other forms of physical activity?  
*(“Very light” means that you hardly get out of breath. “Very hard” means that you perform the activities to the extent that you are breathing deeply)*

	Not relevant to me	Very light	Moderately hard	Hard	Very hard

9. In general, how physically demanding are your job or your day-to-day activities?  
*(“Not at all” means that your activities are sedentary without requiring much movement. “Highly” means that you are engaged in heavy labour or constantly moving around)*

	Not at all	A little	Moderately	Quite	Highly

10. Which of these types of physical activity do you enjoy participating in?  
*(Click as many as appropriate)*

Walking / Hiking	Swimming	Weight-training	Aerobics / Steps
Jogging / Running	Rowing	Cycling	Step Machine
Dancing	Yoga	None	Other (please specify below)

### References

1. Karageorghis CI, Vencato MM, Chatzisarantis NLD, et al. Development and initial validation of the Brunel Lifestyle Physical Activity Questionnaire. *Br J Sports Med* 2005; **39**(5):e23–e30.

## 1 APPENDIX 2

### 2 Preparing the Data for Statistical Analysis

3  
4 The number of participants required for the criterion-related validity and cross-validation  
5 phases ( $N \geq 360$ ) was estimated in accordance with recommendations that pertain to multiple  
6 linear regression,<sup>1</sup> multivariate analysis of variance (MANOVA),<sup>2</sup> and the LoA procedure.<sup>3,4</sup>  
7 Checks for univariate outliers using z scores ( $z > \pm 3.29$ ) revealed multiple outliers ( $n = 25$ ), and  
8 through a subsequent investigation for multivariate outliers revealed an additional seven cases ( $p$   
9  $< 0.001$ ). These cases, relating to 17 females and 15 males, were removed.<sup>2</sup> The data were also  
10 logarithmically transformed due to distributional abnormality. This is a practice that is  
11 commonplace within the physical activity domain owing to the skewed distributions that  
12 typically present.<sup>5,6</sup> The dataset was also checked for multicollinearity ( $r = .80$  and above).<sup>2</sup> All  
13 dependent variables returned inter-correlations of  $r < .70$ , which were unlikely to heavily  
14 influence the MANOVA and multilinear regression.

### 15 References

- 16 1. Tabachnick BG, Fidell LS. *Using Multivariate Statistics*. Harlow, UK: Pearson Education  
17 Limited 2015: 153–234.
- 18 2. Tabachnick BG, Fidell LS. *Using Multivariate Statistics*. Harlow, UK: Pearson Education  
19 Limited 2015: 285–354.
- 20 3. Altman DG. *Practical Statistics for Medical Research*. London, UK: Chapman & Hall 1991:  
21 396–403.
- 22 4. Bland JM, Altman DG. Treatment allocation in controlled trials: Why randomise? *Br Med J*  
23 1999; **318**(7192):1209.
- 24 5. Dishman RK, Oldenburg B, O’Neal H, *et al.* Worksite physical activity interventions. *Am J*  
25 *Prev Med* 1998; **15**:344–61.
- 26 6. Garcia-Aymerich J, Félez MA, Escarrabill J, *et al.* Physical activity and its determinants in  
27 severe chronic obstructive pulmonary disease. *Med Sci Sports Exerc* 2004; **36**:1667–73.

28

## 1 APPENDIX 3

2

3

4

### 5 Background

6 The use of Limits of Agreement (LoA) was developed in response to the criticisms  
7 surrounding the use of correlational statistics in the establishment of validity. Since then, the  
8 LoA approach has been widely endorsed by researchers in the fields of exercise and medical  
9 science.<sup>1-4</sup>

### 10 Interpretation of results

11 The effect of the logarithmic transformation carried out on the data is that the results of  
12 the LoA analysis can no longer be directly related to the original scales used (e.g., a 5-point  
13 Likert scale). Hence, the judgements that Bland and Altman referred to are impeded as the output  
14 of the analyses is no longer an analogue of the measures used. In visually assessing the data,  
15 vertical and horizontal symmetries are sought.<sup>5</sup> In terms of vertical symmetry, the grouping of  
16 the data points around the bias should not vary along the  $x$ -axis, which would indicate less  
17 agreement as the range of the measurement variable increases. It is expected that the data points  
18 should be normally distributed about the mean ( $x$ -axis) and the bias ( $y$ -axis).

### 19 Godin Leisure-Time Exercise Questionnaire (GLTEQ) results

20 The GLTEQ items are scored in terms of frequency of activity (number of incidences per  
21 week). Hence, a direct comparison with the subscale scores of the Brunel Lifestyle Physical  
22 Activity Questionnaire (BLPAQ) and Baecke Questionnaire of Habitual Physical Activity  
23 (BQHPA) was not possible. The intervals between the upper and lower LoA for each of the  
24 Light, Moderate, and Vigorous subscales of the GLTEQ were considerably larger than those  
25 pertaining to the BLPAQ and BQHPA (Light: range = 4.77; Moderate: range = 3.83; Vigorous:  
26 range = 3.74). Of these, the Light subscale demonstrated considerably less agreement.

27

## 1 **Visual analysis**

2 In terms of the visual comparison between the BLPAQ and BQHPA factors, planned  
3 physical activity (PPA) bears a strong resemblance to the Work index of the BQHPA and a  
4 moderate resemblance to the Sport index; whereas unplanned physical activity (UPA)  
5 approximates the Leisure index of the BQHPA (see Figure 2A). The Light, Moderate and  
6 Vigorous subscales of the GLTEQ demonstrated a highly similar pattern whereby the agreement  
7 between the subsamples was markedly reduced at the lower end of the measurement ranges.

## 8 **Discussion points**

9 The low number of data points present in Figure 3D (GLTEQ - Sweat subscale) relative  
10 to the other LoA analyses merely reflects the fact that each point represents the scores of  
11 multiple participants, which may be attributable to the low weekly frequency of sweat-inducing  
12 activity. The visual similarity between the PPA and Work index plots (see Figure 2C) may stem  
13 from the fact that both variables share some common features: by necessity work activity  
14 requires a higher degree of planning than some of the activities performed during leisure time.  
15 There is also a degree of similitude between the PPA and Sport index plots (see Figure 2B). This  
16 resemblance is readily explicable as sporting activity is, by its nature, likely to be planned.  
17 Notably, the Leisure index demonstrated a wider distribution of scores along the *x*-axis than the  
18 other BQHPA indices (see Figure 2A).

## 19 **References**

- 20 1. Atkinson G, Nevill AM. Selected issues in the design and analysis of sport performance  
21 research. *J Sports Sci* 2001; **19**:811–27.
- 22 2. Lane AM, Nevill AM, Bowes N, et al. Test-retest stability of the Task and Ego Orientation  
23 Questionnaire. *Res Q Exerc Sport* 2005; **76**:339–46.
- 24 3. Peyton PJ, Chong SW. Minimally invasive measurement of cardiac output during surgery  
25 and critical care: A meta-analysis of accuracy and precision. *Anesthesiology* 2010;  
26 **113**:1220–35.
- 27 4. Hofman CS, Melis RJF, Donders RT. Adapted Bland–Altman method was used to compare  
28 measurement methods with unequal observations per case. *J Clin Epid* 2015; **68**:939–943.

- 1 5. Bland JM, Altman DG. Statistical methods for assessing agreement between two methods of  
2 clinical measurement. *Int J Nurs Stud* 2010; **47**:931–36.