

SHORT ACTIVE LIVES SURVEY FAQS JANUARY 2018

1. Why is Sport England recommending use of the Short Active Lives Survey instead of the IPAQ or the Single Item Measure?

Sport England worked with an experienced team of researchers from the University of Oxford, the University of East Anglia and Wavehill Social and Economic Research to test different self-report options for measuring physical activity levels.

The findings of this research suggested that the Short Active Lives Survey is the most appropriate tool for Sport England funding recipients to use to measure physical activity levels because:

- a) It shows good agreement with the full Active Lives Survey (whereas the IPAQ demonstrated a significant level of over-reporting)
- b) It shows good agreement with an objective measure of physical activity (accelerometry)
- c) It allows us to classify respondents in line with the Chief Medical Officer's guidelines i.e. it can identify those who do less than 30 minutes or more than 150 minutes of physical activity per week (unlike the Single Item Measure)
- d) It is quicker for respondents to complete than the IPAQ (about a minute compared to more than two minutes for the IPAQ)

2. How was the Short Active Lives Survey developed and tested?

In 2017 Sport England commissioned a project to identify a short physical activity self-report tool which is appropriate for use in project evaluation. The project team was led by Dr Karen Milton from the University of Oxford and Professor Andy Jones from the University of East Anglia, with support from Dr Andrew Engeli from Wavehill Social and Economic Research, Dr Nick Townsend from the University of Oxford, and Dr Emma Coombes from the University of East Anglia. Colleagues from Sport England and Public Health England sat on the project steering group.

The research project involved testing a range of established and new tools including the IPAQ, the Short Active Lives Survey, the Single Item Measure and two adapted versions of the Single Item Measure. These tools were compared with the full Active Lives Survey in phase one of the research and with an objective measure of physical activity in phase two of the research.

The full research report is available on the [Sport England website](#).

3. Who was in the research team that developed and tested the Short Active Lives Survey?

The project team was led by Dr Karen Milton from the University of Oxford and Professor Andy Jones from the University of East Anglia.

At the time of the project, Dr Karen Milton was a researcher in physical activity and health at the University of Oxford (she has since taken up a position at the University of East Anglia). She has over ten years' experience in physical activity and health research across measurement, interventions, evaluation and policy. Karen led the development of the Single Item Measure. She has also led the evaluation of a wide variety of physical activity interventions across a range of settings including healthcare, workplaces, sport, and the community.

Professor Andy Jones is a Professor in Public Health at Norwich Medical School. Andy has extensive experience of all aspects of physical activity research and measurement. He is a lead scientist in the Centre for Diet and Physical Activity Behaviours (CEDAR) (www.cedar.iph.cam.ac.uk), a national centre of excellence funded by the UK Clinical Research Collaboration. The Centre is driven by the overall goal of developing effective public health interventions for changing population-level dietary and physical activity behaviours.

4. Can the Short Active Lives Survey be used as a screening tool?

Yes, the research suggested that the Short Active Lives Survey was effective for classifying respondents as 'inactive', 'fairly active' or 'active'.

5. Can the Short Active Lives Survey be used to measure change in individuals' activity levels over time?

The research did not demonstrate that the Short Active Lives Survey can effectively detect changes in individuals' activity levels over time. This is a challenging thing to achieve, as illustrated by the fact that none of the other self-report tools (including the IPAQ and the Single Item Measure) have been successfully validated for this purpose either.

It is our current judgement that the Short Active Lives Survey represents the best of the available options because of its agreement with other measures (the full Active Lives Survey and an objective measure), its alignment with the Chief Medical Officer's guidelines, and the relative ease of administration (it is quicker for respondents than the IPAQ).

We are keen to work with others to validate measures for detecting change, and are open to reviewing and updating our recommendations as the evidence base develops.

6. Can the Short Active Lives Survey be used with children?

We are not recommending the Short Active Lives Survey for use with children and young people under the age of 16 because they were not included in the research. We plan to work with others to try and identify appropriate tools for measuring children's activity levels.

7. What are the limitations of the Short Active Lives Survey?

Like all the other self-report tools, accurate data collection relies on respondents recalling and truthfully reporting their physical activity behaviour.

The Short Active Lives Survey has not yet been validated for measuring change in individual activity levels over time, although neither have other self-report tools.

The Short Active Lives Survey takes longer for the respondents to complete than the Single Item Measure.

Despite these limitations, our current judgement is that the Short Active Lives Survey represents the best of the available options because of its agreement with other measures (the full Active Lives Survey and an objective measure), its alignment with the CMO guidelines, and the relative ease of administration (it is quicker for respondents than the IPAQ).

8. What other self-report tools are available and when should they be used?

The IPAQ is the most well-established measure of physical activity and is widely used and respected in academic research internationally. We recognise that it may be desirable for Sport England funded projects to use this measure in certain circumstances, such as where there is an intention to publish evaluation findings in academic papers or where it is already being used in current evaluation practice. The drawbacks with the IPAQ that we identified in our research are that it takes longer to complete and it demonstrated a significant level of over-reporting in the classification of respondents as 'inactive', 'fairly active' and 'active'.

The Single Item Measure is commonly used in existing evaluation practice in England and is attractive to many practitioners because it is the shortest and easiest to administer of all the validated measures. We recognise that it may be desirable for Sport England funded projects to use this measure in certain circumstances, such as where the burden of administering a longer measure is not proportionate or manageable. The limitation is that it is a days-based tool rather than a minutes-based tool, so has the potential to misclassify people against the current Chief Medical Officer's recommendations, and may also be less sensitive to measuring change over time.

Funded projects should contact Sport England if you wish to discuss the use of one of these alternatives to the Short Active Lives Survey in your project evaluation.

9. How do I analyse the data from the Short Active Lives Survey?

For each activity that respondents indicate was sufficient to raise their breathing rate, the total number of days is multiplied by the usual minutes spent undertaking the activity to give a measure of total minutes over the 7-day period for that activity.

The respondent's final score is calculated by summing all activities which were sufficient to raise breathing rate, as follows:

(Days of walking * usual minutes of walking IF sufficient to raise breathing rate) + (Days of cycling * usual minutes of cycling IF sufficient to raise breathing rate) + (days of sport, fitness or dance * usual minutes of sport, fitness or dance IF sufficient to raise breathing rate).

Any activities which were not identified as sufficient to increase breathing rate by the respondent are excluded from the calculation.

Anyone completing a total of less than 30 minutes activity sufficient to increase breathing rate is classified as 'inactive', anyone completing between 30 minutes and 149 minutes is classified as 'fairly active' and anyone completing 150+ minutes is classified as 'active'.

10. Can I change the wording of the Short Active Lives Survey?

The default should be to use the exact wording of the tool that was used in the research. Please contact Sport England if you wish to discuss potential adaptations to meet the needs of your project respondents e.g. translated versions of the tool.

11. Why doesn't the Short Active Lives Survey prompt respondents to only consider bouts of at least 10 minutes, in line with the CMO guidelines?

While the questions about cycling and sport/fitness/dance do not refer to ten minute bouts, the question about walking in the survey does ask respondents to only include walks lasting at least ten minutes.

Of all the activities, walking is the one that is frequently carried out in shorter bouts. We are therefore confident that the survey includes this constraint where it could make a meaningful difference to the results that are reported. We do not think that including it in the other questions would make a meaningful difference to the results.

12. Why doesn't the Short Active Lives Survey identify activity that was carried out at vigorous intensity, in line with the CMO guidelines?

The Short Active Lives Survey questions allow us to distinguish between activity carried out at light intensity and activity carried out at moderate or vigorous intensity. We felt this was the crucial distinction to include because the CMO activity level guidelines cover activity of at least moderate intensity (so we need to be able to remove light intensity activity from the results for classifying respondents against the guidelines). We did not include additional questions in the survey to isolate vigorous intensity activity because we were trying to manage the survey length and complexity (the amount of time it takes the respondent to complete and the administrative complexity of the coding of the results).