

Stian Klokkeåsen

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## Signed up and dropped out:

Who are the non-exercisers, what are exercise dropout rates and perceived barriers at fitness clubs?

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# Abstract

**Background:** Physical activity (PA) and exercise is favorable, but inactivity is an increasing problem. At the same time fitness clubs have expanded in popularity. To date, the scientific overview of non-exercisers at fitness clubs is limited, and there is a need for longitudinal information of barriers and their influential over time.

**Aim:** The objective for this thesis was to examine the dropout rates and reasons for apostasy over time, as well as to identify the characteristics of the individuals categorized as non-exercisers at fitness clubs in Oslo, Norway.

**Methods:** This present project was part of a longitudinal prospective cohort study with repeated measurements, from inclusion and after 3, 6 and 12 months of fitness club membership. The present project included 125 participants, newly registered members at various SATS ELIXIA centers in Oslo. Data for this thesis was collected by a standardized electronic questionnaire including descriptive information, social support and barriers for exercise. The statistical analysis was performed using a t-test and descriptive analysis.

**Results:** Non-exercisers perceive their health as better than exercisers, despite more often being smokers, have lower education level, less social support for PA, and meet recommendations for PA and diet less often. The dropout rates were between 20.8% and 28.8% over a period of one year. The perceived barriers most frequently reported in this study were related to intrapersonal (not health) and policy categories. The highest reported perceived barrier over time was “I have neither time nor energy”. There was no significant difference between the participants who dropped out early and the participants who dropped out late.

**Conclusion:** About one in four new fitness club members drop out from exercise within a year, and many have an ambivalent exercise behavior. The same barriers affect dropouts over time, and fitness clubs should prevent this by facilitating intrinsic motivation and self-determined regulations, as well as evaluate the cost for their members.

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# Abbreviations

BNT	Basic needs theory
CET	Cognitive evaluation theory
COT	Causality orientation theory
CI	Confidence interval
ED	Early dropouts
LD	Late dropouts
MD	Mean difference
OIT	Organismic integration theory
PA	Physical activity
SD	Standard deviance
SDT	Self-determination theory

# 1.0 Background

To date, physical inactivity is an increasing public health issue increasing the risk of morbidity and premature death (Ekelund et al., 2016). It is well documented that regular PA both prevents and treats a variety of diseases and conditions, such as certain types of cancer (Kyu et al., 2016; Vainio, Kaaks & Bianchini, 2002), cardiovascular diseases (Pandey et al., 2017; Sattelmair et al., 2011), diabetes (Kyu et al., 2016), hypertension (Pedersen & Saltin, 2015), ischemic heart disease and ischemic stroke events (Kyu et al., 2016), muscle and skeletal disorders (Pedersen & Saltin, 2015), overweight and obesity (Ekelund et al., 2016) as well as premature death (Ekelund et al., 2016; Nocon et al., 2008). Further, PA may minimize the negative impacts of the aging process (Bauman, 2016) and has a positive effect on mental health (Martinsen, 2004; Rosenbaum, 2014).

PA has a number of beneficial physiological effects on the body, both acute and long-term, including increased skeletal muscle, stronger skeleton, increased heart, blood and lung capacity, more optimal blood vessels and blood pressure, body composition, heat regulating ability and hormone system (Booth, Chakravarthy, Gordon & Spangenburg, 2002).

PA can be defined as “*any bodily movement produced by skeletal muscles that results in energy expenditure*” (Caspersen, Powell & Christenson, 1985, p. 126). The term involves various forms of physical movement, including leisure time sports (e.g. running or swimming), active transportation (e.g. walking to the bus or cycling to the school), and everyday movement at home (e.g. using the lawn mower or vacuum cleaner), and at work/school (e.g. carpentry or baking).

PA is a complex behavior influenced by several different determinants, including both unchangeable factors such as age, gender and ethnicity, and modifiable factors such as environment, social support, and psychological factors (Croezen et al., 2012; Trost et al., 2002; Jones et al., 2016). Psychological factors include both cognitive and emotional variables, such as self-esteem, perceived barriers, attitudes, knowledge of health and PA, as well as personality variables (Trost et al., 2002; Plotnikoff et al., 2013; Antoniewicz & Brand, 2016). In order to develop interventions intended to promote PA in the population, it is necessary to obtain knowledge about how these factors are associated with the level of inactivity and PA.



Exercise is a subcategory of PA consisting of planned, structured, and repetitive bodily movement done to improve and/or maintain one or more components of physical fitness (Caspersen et al., 1985). The behavior of the participants exercising at fitness clubs is an example, as they may be performing this action, often with a planned training program which is repeated over time, with the intentions mentioned above.

Even though most people are aware of the health benefits, few meet the recommendations for PA in Norway (Anderssen et al., 2009). The current PA recommendations for adults in Norway are PA for at least 150 minutes per week, with moderate intensity, or at least 75 minutes per week with high intensity, or a combination of this (Anderssen & Meltzer, 2014), which is similar to international guidelines (Haskell et al., 2007). Also, high levels of PA are encouraged, as there is a dose response relationship until a certain level (Howley, 2001). Additionally, it is recommended to do exercises for muscle strengthening for at least two days a week, and reduce sedentary time (Anderssen & Meltzer, 2014; Haskell et al., 2007).

In Norway, only 32% meet the PA recommendations of 150 minutes of activity with moderate activity, or 75 minutes of activity with high intensity during one week (Hansen et al., 2015). Even though several studies show that we are more PA in our free time now than before (Breivik, 2008; Ommundsen & Aadland, 2009), many are not PA considering the recommendations (Ommundsen & Aadland, 2009). While earlier societies demanded a more naturally active lifestyle, today's community allows more sedentary time, with the result that this recreational exercise is now more important.

Furthermore, it has been shown that about 50 % of those who start to exercise regularly drop out from their training program within 6-12 months (Annesi, 2003; Weinberg & Gould, 2003; Marcus et al., 2000; Annesi, 1998). Therefore, it is not only important to motivate physically inactive individuals to become PA, but also encourage them to continue regular PA and exercise, and minimize the risks of discontinuation.

The understanding of why these high dropout rates occur are poorly described in the literature. Thus, it is important to know more about the reasons people have for stopping or decreasing the activity level. To reduce the risk of this from happening, it is important to identify these people and the associated factors to be able to make preventive efforts.

Breaking through in the 1990s, the fitness industry has rapidly grown in recent years, and may be a significant arena for PA and exercise. In a survey by Ommundsen et al. (2009), inactive individuals considered fitness clubs more likely to participate in versus team sports, with respectively 22% and 4% considering the context as a potential arena for PA. There is a variety of possibilities for PA in fitness clubs, including several group exercise classes, equipment for cardiovascular and strength training, swimming and aqua aerobics, with the opportunity of guidance from personal trainers and group instructors. Worldwide, the fitness club industry has about 145 million members and 180 000 fitness clubs (IHRSA, 2015). Still, the scientific knowledge of their members, and their motives and barriers is scant (Middelkamp & Steenbergen, 2015).

It would be beneficial to explore why individuals drop out from fitness clubs to enhance this knowledge gap. It may facilitate action to keep more individuals PA over time. In connection to this it would be relevant to gather information of the individuals who drop out from fitness clubs.

## **2.0 Purpose**

The objective for this thesis was to examine the dropout rates and reasons for apostasy over time, as well as to identify the characteristics of the individuals categorized as non-exercisers at fitness clubs in Oslo, Norway.

### **2.1 Research question**

There is a lot of research covering the term motivation, but the literature is scant in the knowledge of the people who drop out from exercise. This information may be beneficial in future work with preventing exercise dropout. Therefore, the aims of the present master thesis are three-folded:

Are there any differences in demographic, health factors and social support between exercisers and non-exercisers in a fitness club setting?

What are the dropout rates after three, six and twelve months of fitness club membership?

Why do new fitness club members stop exercising, and which barriers are the most frequently reported over time?

## 3.0 Theory

The concept of motivation has been explained by many, and there has been much research on this topic in sports psychology. The term has its origins in the Latin word "movere", which means "move" (Ryan & Deci, 2000). Motivation can be defined as "*the biological, psychological and social factors that activate, give direction to and maintain behavior in different degrees of intensity to achieve a goal*" (Kaufmann & Kaufmann, 1996, p. 93). The definition covers the inner processes that are conditioned by biological and psychological needs, and motivation explains human behavior (Ryan & Deci, 2000; Sinclair, Dowson & McInerney, 2006).

The term is complex and includes the inner and outer forces that start up, and give direction and energy to behavior, keeping it alike, and giving it purpose and meaning (Hassmèn et al., 2003; Sinclair, Dowson & McInerney, 2006). Furthermore, it is important to note that external relationships, such as social conditions, may also affect motivation, which is supported by Lillemyr (2007), who claims that motivation can be influenced by the relationships of the others, and the social interaction.

In relation to PA, motivation may be the driving force of whether we are active or not, to what extent, and why we choose to perform or not perform the behavior (Ryan & Deci, 2000).

When human beings participate in PA, there is some form of motivation behind, and when an individual has an optimal motivation, we can see that there is a lot of effort in all fields (Duda & Pensgaard, 2002). In order to start up, but also maintain a lifestyle change for increased PA, motivation is a key term;

*«Motivation is perhaps the critical variable in producing maintained change»* (Deci & Ryan 2000, p. 76).

As part of the term motivation, there may be several barriers to PA. This might affect a person to not start up or maintain PA, as studies have shown that those who encountered more barriers had less likelihoods of becoming PA (Pate et al., 2002; Sallis, Prochaska, & Taylor, 2000). Whether an individual exercise regularly or not, there will always be reasons for skipping or stopping PA.

In 2008 and 2009 the Norwegian Directorate of Health conducted a survey that included, among other things, factors of motivation and barriers for PA among adults and elderly in Norway. The most important motivational factors were “fresh air”, “keeping the weight”, “get in shape”, “physical and mental health”, and “maintenance of health”. The latter got the highest response, with 74% selecting this to be “very important” (Andersen et al., 2009). Gjestvang, Stensrud & Haakstad (unpub.) found the most important motivational factor for new fitness club members to be “increase in physical fitness” with 92.8% selecting this. It was followed by “to have a healthy body” and “bodily well-being” with respectively 66.4% and 64.8%. The most common barriers in the survey from Andersen et al. (2009) were “don’t have the time”, “cannot bear” and “would rather spend my time on other things”. Age and lack of facilities were not significant barriers (Andersen et al., 2009).

If an individual has little experience with exercising, it could be difficult to get started, as reported by Ommundsen & Aadland (2009). In addition, they found that bad experiences can make one not want to try exercising again. Further, they showed that previous negative experience with PA, from gym at school and/or sports clubs, can be a barrier to PA in adult life.

Even if an individual exercise routinely, there might be days one does not feel like going to the gym at all. Additionally, one can have physical and psychological challenges, i.e. health problems as barriers to overcome in order to succeed in staying active (Teixeira, Carraça, Markland, Silva & Ryan, 2012). In earlier literature, it has consistently been found that barriers were negatively correlated with different aspects of PA behavior, including frequency, intensity, and duration of PA sessions (Bozionelos & Bennett, 1999; Guillot, Kilpatrick, Hebert, & Hollander, 2004; King et al., 2000; Mitchell & Olds, 1999; Payne et al., 2002; Salmon, Owen, Crawford, Bauman, & Sallis, 2003; Trost, Owen, Bauman, Sallis, & Brown, 2002).

Furthermore, the behavior of friends and family might affect the level of PA, as supported by Ommundsen & Aadland (2009), who concludes that low PA level amongst friends and family while growing up can inhibit one’s own PA level, which can also lead to inactivity as an adult. As an example, friends and parents who are regularly PA can be motivational factors, while inactive friends and parents can be factors of barriers. Also, they reported an association between PA level in one self and significant others, meaning that someone perceived as important to one, i.e. a coach, teacher or relative, may affect an individual’s PA behavior.

In a review by Trost et al. (2002) it was found that all the studies they looked at who included social support for PA as a factor, showed a significant positive association.

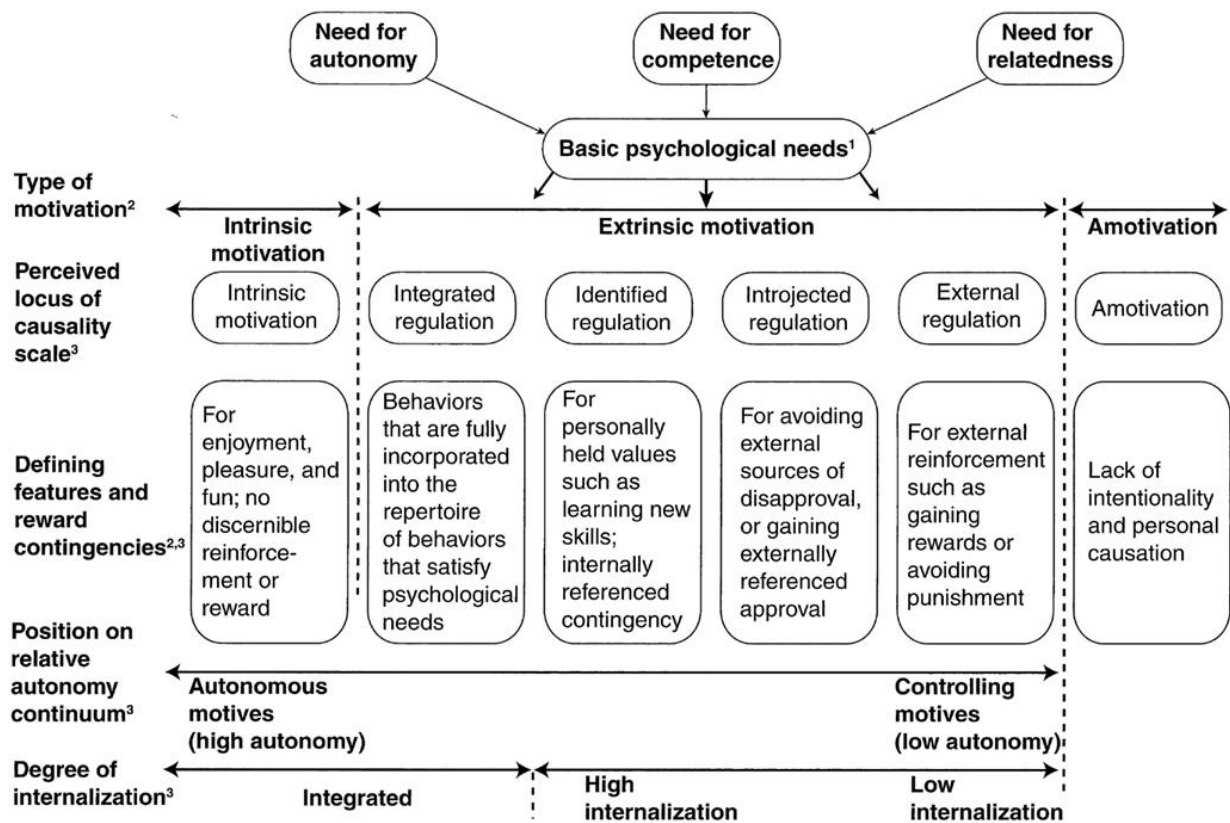
In a systematic review by Teixeira et al. (2012) they underwent 66 empirical studies exploring connections between the self-determination theory (SDT) and exercise. They concluded that in comprehension of exercise behavior, this theory is valued. The theoretical framework of this master thesis is SDT developed by Richard M. Ryan & Edward L. Deci.

### **3.1 Self-determination theory (SDT)**

SDT is a social-cognitive meta-theory, consisting of five mini-theories. The agenda of SDT is to provide an overview that includes both of two evidently discrepant viewpoints in the field of psychology. The humanistic, psychoanalytic, and developmental theories, with a self-organizing and growth promoting standpoint, that employ an organismic meta-theory on one side. On the other side, the behavioral, cognitive, and post-modern theories, with the viewpoint that we are mere conditioned or reactive reflections of our surrounding, that don't employ an organismic meta-theory (Deci & Ryan, 2002).

SDT is based on a belief that every individual possesses an inherent drive to develop a holistic sense of self (Deci & Ryan, 2002). This behavior of integration includes both the aspect of autonomy - with inner organization and self-regulation, as well as homonomy - with the integration of oneself with other people. SDT describes this as basic psychological needs. This drive is seen as fundamental in humans, nevertheless it cannot be taken for granted. SDT claims that there are social-contextual factors that support or hinder this development (Deci & Ryan, 2002).

The meta-theory has evolved through several mini-theories. They are linked by sharing organismic and dialectical assumptions, and involving the concept of fundamental psychological needs. When these mini-theories are coordinated, they constitute the framework of SDT which covers all types of human behavior in all domains, shown in the following figure (Deci & Ryan, 2002).



*Figure 1:* Schematic representation of the motivational continuum. Several regulations can affect the type of motivation and change the degree of self-determination (SDT [Picture], 2013).

### 3.1.1 Cognitive evaluation theory (CET)

This theory was the first to be constructed. It describes the impact of social contexts on individual's intrinsic motivation. CET comprises the contextual elements that can be described as autonomy supportive, controlling and amotivating, which are connected to the various motivations (Deci & Ryan, 2002). A fitness club can be an arena for social context.

There are two primary cognitive processes that can affect intrinsic motivation; perceived locus of causality and perceived competence (Deci & Ryan, 2002). CET concerns feedback (e.g. rewards or punishment) and the impact of the climate and interpersonal context. The feedback is categorized as informational or controlling. Moreover, it can be interpreted otherwise depending on the climate and the individuals internal initiating events. For example, the attitude of a group instructor can be influential, but interpreted differently from various individuals. The needs for competence and autonomy are essential in relation to intrinsic motivation, whilst the need for relatedness may not be crucial, but can play a role (Deci & Ryan, 2002).

### **3.1.2 Organismic integration theory (OIT)**

OIT explains the extrinsic motivation, and the internalization and integration of values and regulations. This theory is linked with the basic needs theory in the way that social environments can be categorized as supportive or antagonistic of the needs (Deci & Ryan, 2002).

OIT views internalization in terms of a continuum, between amotivation and intrinsic regulation. The four types of extrinsic motivated regulation are external, introjected, identified and integrated regulation, where the last is basis for the most self-determined behavior (Deci & Ryan, 2002). What is the reasons a new member has for signing up at a fitness club, and how does this motivation develop? As noted the needs for competence and autonomy are more important for intrinsic motivation, whereas the need for relatedness is more central for promoting internalization.

### **3.1.3 Causality orientation theory (COT)**

To describe individual differences in people's likelihood for understanding the social environment, COT was formulated. It is interpreted in ways that support their own autonomy, are amotivating or controlling their behavior. Predictions of experience and behavior from lasting orientations of the person is made possible by this mini-theory.

Every person is socialized primary and secondary, and develops inner resources based on their interactions in various social contexts. According to COT these resources includes the autonomy, controlled and impersonal orientations, which we all possess in different degrees. Deci & Ryan (2002) developed the “General causality orientations scale”, which measures this individual difference. For example, what are the individual’s experience with PA from childhood to adult life, and do they have earlier experience with a fitness club?



### **3.1.4 Basic Needs theory (BNT)**

The connection between motivation and goals to health and well-being is explained by BNT. The basic psychological needs are present in every mini-theory, but is fully explained in this theory (Deci & Ryan, 2002).

The fundamental needs are autonomy, competence and relatedness (Deci & Ryan, 2002).

Autonomy means to perceive the roots of one's behavior from one self. Autonomy must not be confused with independence. Competence is not a person's achieved skills, but the feeling of mastering and expressing one's capacities. This need leads people to seek challenges that are optimal - not too boring and not too demanding. Relatedness involves a connection to other people, both the feeling of belongingness and contribution to other individuals and the community. This regards the psychological sense of being safe with other people or unity.

These needs may be more or less satisfied at a fitness club. If there is a wide range of group lessons, the members will have the opportunity to choose a way of exercising that they like more, and might have a stronger feeling of autonomy. If these groups are marked with degrees of difficulty, the members will easily match their skill level, and get appropriate challenges, while a fitness club with few group lessons could be too demanding, or too little challenging for certain members. A personal trainer or group instructor can help members to get optimal challenges, and be a factor of relatedness. Fellow group exercise members may satisfy this need as well, while training on your own may not give the feeling of relatedness.

## 4.0 Methods

This master-thesis was part of a longitudinal prospective cohort study that followed a large group of new members at fitness clubs in Oslo, Norway. The main purpose of the study was to determine characteristics of those individuals who were able to stay active and continue regular PA, as well as to understand the process of compliance and non-compliance associated with regular exercise. The project gathered repeated measures of health status, including a wide range of psychosocial parameters. The measurements were assembled at baseline, and after three, six and twelve months.

### 4.1 Participants and recruitment

The participants (n=125) in this study were newly registered members (<4 weeks of membership) from several SATS ELIXIA fitness clubs in Oslo, equally females and males. In Norway, the two first months of the year, as well as the two months following the summer holidays, are the months with highest enrollment of new members to fitness clubs. Therefore, individuals enrolling in one of these time-spans were included. They received written and oral information about the project. Participants who were interested was individually approached by the project manager or others in the research group. Primarily, the purpose and utility of the study were presented to the participants, and the eligibility criteria was examined.

Inclusion criteria were  $\geq 18$  years, ability to speak, understand and read Norwegian, and set to fulfill all measurements (three visits) at the Norwegian school of sports science over a 12-month period.

Exclusion criteria were chronic disease or serious illness, pregnant at inclusion time, or regular PA in the past six months in other fitness clubs, or organized leisure time PA. Regular PA was defined as participating in structured exercise  $\geq 60$  min one day/week, or vigorous walking  $\geq 150$  minutes/week, with the goal to preserve or enhance physical fitness.

## 4.2 Sample size considerations

Several factors can influence exercise adherence and membership retention (Troost et al., 2002; Burton et al., 2007; Kohlstedt, Colangelo & Carter, 2013). Hence, in calculating this cohort sample, it was required to emphasize many key variables including psychological factors and subjective health complaints. Power calculations were performed in cooperation with Ingar Holme, professor in biostatistics, and were conservatively based on results in other studies (Edvardsen et al., 2013; Kulavic, Hultquist & McLester, 2013; Ihlebaek, Eriksen & Ursin, 2002), as well as figures assumed to be clinically relevant over a training period of 12 months.

Furthermore, studies have shown significant dropout (25-30%) to follow up in recently starting exercisers (Suresh & Chandrashekara, 2012; Rustaden, 2015), and many drop out from PA within the first year (Annesi, 2003; Weinberg & Gould, 2003; Marcus et al., 2000; Annesi, 1998). For those reasons, it was aimed to include 125 participants, equally females and males.

## 4.3 Collection of data and outcome measures

Data was gathered by a standardized electronic questionnaire at inclusion and after three, six and twelve months of fitness club membership (complete questionnaires attached). The questionnaire at inclusion consisted of 52 questions, and was somewhat different from the follow-up questionnaire consisting of 65 questions. The ten questions and responses used in this thesis were translated from Norwegian for the purpose of publication in English.

All participants (n=125) were asked to reply to the questionnaires that required approximately 30 minutes to answer at every timepoint, and contained several outcomes, of which the following were relevant for the present master thesis:

**Demographic:** Age was written in number by the participants. Regarding education the question was “What is your highest completed education?” with the response options “Primary school”, “College, vocational”, “College, general”, “University less than four years”, “University more than four years”, “Other education” and “Do not want to answer”.

**Health factors:** Self-perceived health was attained from the question “How would you rate your current health (disease, ailments and/or injuries)”, with the response options “Very good”, “Good”, “Fairly”, “Bad”, “Very bad” and “Don’t know”.

The number meeting PA recommendations was attained from the question “The health authorities recommend physical activity for at least 30 minutes of moderate intensity (mild sweat and breath) 5 times a week. This equals 150 minutes a week and includes activities like walking to the job/store and other physically strenuous activities such as snow shoveling and washing (each activity must be done for a minimum of 10 minutes continuous). Accordingly, do you want to characterize yourself as a regular physically active?” with the response options “Yes”, “No” and “Do not know”.

The number meeting diet recommendations was attained from the question “The Health Directorate recommends a varied diet that contains a lot of vegetables, fruit and berries, coarse grain products and fish, as well as a limited intake of processed meat, salt and sugar. On a scale from 0-10, where 0 is very bad and 10 is very good, how would you say that you have followed these recommendations in the last 4 weeks?”.

Smoking habits was attained from the question “Do you smoke daily?”, with the response options “Yes” and “No”.

**Social support for PA** was based on a questionnaire developed by Sallis and colleagues (Lorentzen, Ommundsen & Holme, 2007; Sallis et al., 1987). The text was translated into Norwegian by three members of the research group. The following two questions were included in this master-thesis.

“Was there anyone in your close family (mother, father or sibling) who were regularly physical active during your upbringing (before you reached the age of 18)?” with the response options “Yes” and “No”.

“How common is it to practice physical activity in your closest circuit?” with the response options “Not common”, “Occurs” and “Very common”.

**Attendance** was based on self-report from the question “Have you exercised the last 4 weeks?”, with the response options “Yes” and “No”.

**Perceived barriers to PA at the fitness clubs** was based on questions and identified barriers used in prior studies conducted in Norway (Anderssen et al., 2010; Breivik & Rafoss, 2012; Sorensen & Gill, 2008). In the present study the participants rated the importance of 18 different perceived barriers, from “Not important” (1) to “Very important” (3) and “Do not want to answer” (4). The barrier statements were:

“It is too expensive for me”

“I do not have an organized offer and do not have anyone to be PA with”

“I do not have transportation to and from exercise”

“I do not think it is of importance to my health”

“Health challenges hinder me”

“I am bothered by dizziness”

“I am afraid of injury”

“I do not like being PA”

“I have neither time nor energy”

“I do not think I’ll get anything out of it”

“I do not see myself as a PA person”

“I would rather relax and take it easy”

“I would rather do other things”

“I dare not”

“I lack knowledge of how to work out”

“I am afraid others watch when I exercise”

“I am afraid I am doing exercises wrong”

“I consider myself as active enough in everyday life”

## 4.4 Statistical analysis

Statistical analysis was performed using SPSS Software (V. 24) for Windows. All the participants (n=125) were included in exploring exercise dropout rates. These rates were calculated from the question “Have you exercised the last 4 weeks?”. Participants selecting “no” were categorized as “exercise dropouts”, and participants selecting “yes” were categorized as “exercisers” according to each timepoint.

Further, the participants were divided into three groups according to self-reported attendance, attained from the question mentioned above. Participants who did not answer this question on all three follow-up questionnaires were excluded from further analysis (n=56).

**“Early dropouts” (ED)** (n=15) answered “no” to the question every time, or “yes” at three months, but “no” at six and twelve months. Meaning they were not exercising during the entire period, or exercising at the beginning, but not after six and twelve months.

**“Late dropouts” (LD)** (n=18) selected “yes” or “no” at three months, “yes” at six months, and “no” at twelve months. Meaning they were exercising at some point during the first six months, but not towards the last twelve months.

**“Exercisers”** (n=36) selected “yes” at three, six and twelve months. Meaning they were exercising during the entire period.

ED and LD were grouped regarding analyzing **“Non-exercisers”** (n=33). Three of these participants had determined their fitness club membership at some point during the study period, and were also included.

The age of the non-exercisers was presented as mean with standard deviance. The following demographic, health factors and social support variables was presented as frequencies and percentages. The number selecting “University more than four years” regarding education. The number selecting “Good” or “Very good” regarding self-perceived health. The number selecting “Yes” regarding daily smoking. The number selecting “Yes” regarding PA recommendations. The number selecting 7 or higher on the diet scale (0-10). The number selecting “Yes” regarding PA among family in childhood. The number selecting “Very common” regarding PA among friends.

Perceived barriers at multiple timepoints were assessed with descriptive statistics, and the participants selecting “Very important” was presented as frequencies and percentages.

An independent samples t-test was performed to investigate differences between the groups ED and LD from rating of perceived barriers at baseline (valued 1, 2 and 3). Level of statistical significance was set at  $p < 0.05$ . One participant from each group selected “do not want to answer” in one or more of the barriers, which was given the value 4, and thus were excluded to prevent false means. The perceived barriers were categorized into four groups by socioecological framework, as recommended by Sallis, Owen, & Fisher (2015). The groups were intrapersonal (health and not health related), interpersonal, environmental and policy.

## **4.5 Ethical concerns**

The project was revised by the Regional Committee for Medical and Health Research Ethics (REK 2015/1443 A), who determined that, according to the Act on medical and health research (the Health Research Act 2008), this project did not need full review from REK. The study was approved by the Norwegian Social Science Data Service (NSD 44135). All participants received written information about the project’s aims and procedures, and provided consent to participate, in accordance with the Declaration of Helsinki.

Data from the present project was anonymous, and kept confidentiality in accordance to the law. Participants in the study was not involved in any harmful or invasive investigations. Everyone who chose to participate could withdraw from the project at any time without further explanation, and it was highlighted that participation was voluntary. It was not provided any financial compensation to the participants.

## **4.6 Validity and reliability**

To evaluate the credibility of a research work, it is important to make a strict assessment of methods that are used, and findings made (Brown, 2013).

Reliability is assessed by stability and accuracy, and concerns to what degree questions produce reliable answers in a questionnaire (Haraldsen, 1999). With high reliability, random measurement errors will be minimised, and the answers given can be trusted to be true.

Validity can be divided into conceptual validity, internal validity and external validity. Conceptual validity comprises the validity of the term being studied, and the internal and external validity is based on whether the conclusions of the study are valid, meaning if there is a clear connection between what is measured and what is concluded (Bjørndal & Hofoss, 2004). According to Haraldsen (1999) the evaluation of validity in a questionnaire depends on to what extent the questions provide answers to the purpose of the measurement.

Validity and reliability are the two most important criteria of quality in assessing a questionnaire. If the questions produce inaccurate and inconsistent responses, the sustainability is weakened in relation to the desired context to map (Haraldsen, 1999).



# 5.0 Results

## 5.1 Flowchart

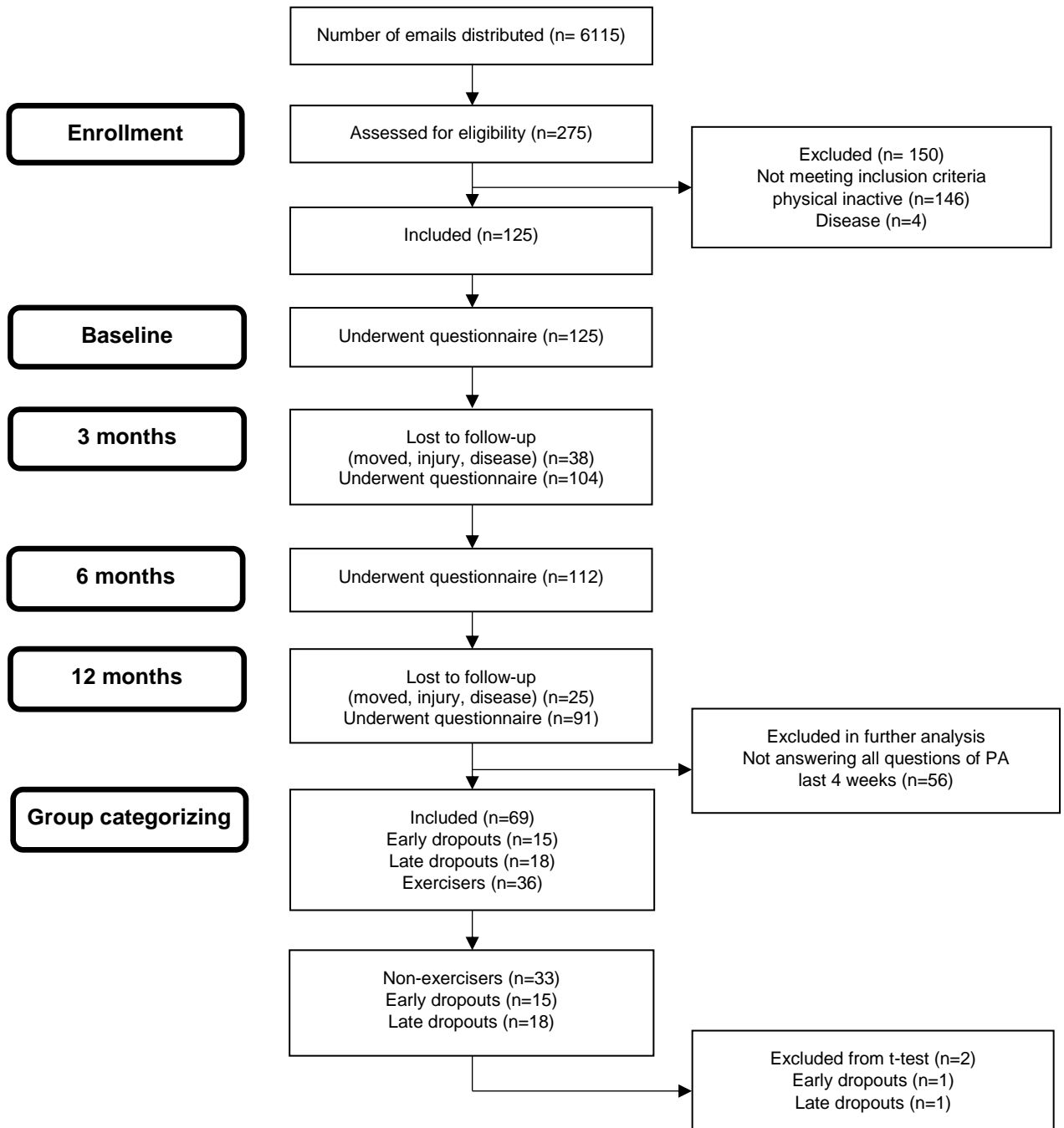


Figure 2: Flowchart of participants throughout the study, and included participants for the present master thesis.

## 5.2 Non-exercisers

**Table 1:** Comparisons of demographic, health factors and social support between non-exercisers and exercisers at baseline (n=69). Data are presented as mean (SD) for continuous variables, and n (%) for categorical variables.

Variable	Non-exercisers (n=33)	Exercisers (n=36)
Age in years	36.6 (10.2)	39.3 (12.8)
Higher education > 4 years	12 (36.4)	17 (47.2)
Self-perceived health $\geq$ good	22 (66.7)	21 (58.3)
Current smoker	4 (12.1)	1 (2.8)
Meeting PA recommendations	11 (33.3)	16 (44.4)
Meeting diet recommendations $\geq 7$	15 (45.4)	20 (55.6)
Family PA while growing up	19 (57.6)	23 (63.9)
Friends PA now	13 (39.4)	19 (52.8)

The age of non-exercisers ranged from 18 to 57 with a mean of 36.6 ( $\pm$  10.2) years. Fewer non-exercisers had higher education of more than four years than exercisers. More non-exercisers considered their health to be good or very good than exercisers. There was four times as many daily smokers among non-exercisers. Non-exercisers did not meet recommendations for PA and diet as much as exercisers. It was not as common with PA among non-exercisers social circle either during childhood or present.

## 5.3 Dropout rates

**Table 2:** Exercise dropout rates after three, six and twelve months of fitness club membership ( $n=125$ ). Data are presented as  $n$  (%).

	3 months	6 months	12 months
Exercise dropouts	26 (20.8)	36 (28.8)	33 (26.4)
Exercisers	77 (61.6)	74 (59.2)	56 (44.8)
Don't know	1 (0.8)	2 (1.6)	2 (1.6)
Unanswered	21 (16.8)	13 (10.4)	34 (27.2)

The amount of exercise dropouts stayed relatively consistent throughout the whole period. If it was the same participants not exercising at every timepoint this could imply that most of those who drop out from exercise do so early. It is also notable that the amount not answering was high, especially after twelve months. It is unknown if they have dropped out from exercise or only replying to the questionnaire.

## 5.4 Barriers

The barrier statements were shortened for the purpose of enhanced table overview. The original statements are used elsewhere in the thesis.

**Table 3:** Perceived barriers to leisure-time exercise at baseline, three, six and twelve months among non-exercisers (n=33). Data are presented as n (%).

Barriers	Baseline (n=33)	3 months (n=15)	6 months (n=15)	12 months (n=32)
<b>Intrapersonal</b>				
<b>Health related</b>				
No importance to my health	5 (15.2)	0 (0.0)	0 (0.0)	2 (6.1)
Health challenges hinder me	1 (3.0)	3 (9.1)	3 (9.1)	1 (3.0)
Fear of injury	1 (3.0)	1 (3.0)	1 (3.0)	1 (3.0)
Bothered by dizziness	0 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)
<b>Not health related</b>				
Insufficient time and energy	9 (27.3)	2 (6.1)	6 (18.2)	9 (27.3)
I'd rather do other things	6 (18.2)	6 (18.2)	5 (15.2)	7 (21.2)
I'd rather relax and take it easy	5 (15.2)	4 (12.1)	3 (9.1)	5 (15.2)
Lack knowledge of how to work out	4 (12.1)	2 (6.1)	1 (3.0)	1 (3.0)
Active enough in everyday life	3 (9.1)	2 (6.1)	1 (3.0)	0 (0.0)
Don't see myself as a PA person	2 (6.1)	2 (6.1)	0 (0.0)	4 (12.1)
Fear of doing exercises wrong	1 (3.0)	0 (0.0)	2 (6.1)	0 (0.0)
Don't think I'll get anything out of it	3 (9.1)	0 (0.0)	0 (0.0)	0 (0.0)
Don't like being PA	1 (3.0)	1 (3.0)	1 (3.0)	1 (3.0)
I dare not	1 (3.0)	1 (3.0)	1 (3.0)	2 (6.1)
<b>Interpersonal</b>				
Lack of offer and none to be PA with	3 (9.1)	2 (6.1)	2 (6.1)	2 (6.1)
Fear others watch when I exercise	3 (9.1)	0 (0.0)	1 (3.0)	2 (6.1)
<b>Environmental</b>				
Transportation problems	2 (6.1)	0 (0.0)	0 (0.0)	0 (0.0)
<b>Policy</b>				
Too expensive	8 (24.2)	3 (9.1)	1 (3.0)	5 (15.2)

At every timepoint, the perceived barrier most frequently reported was in the category intrapersonal and not health related. Less than half of non-exercisers answered the questionnaire at three and six months, thus the focus was set to perceived barriers at baseline and after one year.

The most frequently reported barriers at baseline were “I have neither time nor energy” (27.3%), “It is too expensive for me” (24.2%), “I would rather do other things” (18.2%), “I would rather relax and take it easy” (15.2%) and “I do not think it is of importance to my health” (15.2%).

After one year, the most frequently reported perceived barriers were “I have neither time nor energy” (27.3%), “I would rather do other things” (21.2%), “I would rather relax and take it easy” (15.2%), “It is too expensive for me” (15.2%) and “I do not see myself as a PA person” (12.1%).

In total, the most frequently perceived barriers reported were associated with the categories intrapersonal (not health) and policy (expenses).

**Table 4:** Perceived barriers to leisure-time exercise at baseline between early dropouts (ED) and late dropouts (LD). Data are presented as mean (SD).

Barriers	ED (n=14)		LD (n=17)		MD	95% CI		p-value
	Mean	SD	Mean	SD		Lower	Upper	
<b>Intrapersonal</b>								
<b>Health related</b>								
No importance to my health	1.21	0.58	1.59	0.87	-0.37	-0.91	0.16	0.16
Health challenges hinder me	1.21	0.43	1.41	0.62	-0.20	-0.56	0.20	0.32
Fear of injury	1.21	0.58	1.18	0.39	0.04	-0.32	0.40	0.83
Bothered by dizziness	1.14	0.36	1.06	0.24	0.08	-0.14	0.30	0.45
<b>Not health related</b>								
Insufficient time and energy	1.79	0.80	2.00	0.79	-0.21	-0.80	0.37	0.46
I'd rather do other things	2.07	0.73	1.71	0.59	0.37	-0.12	0.85	0.13
I'd rather relax and take it easy	1.86	0.86	1.65	0.61	0.21	-0.33	0.75	0.43
Lack knowledge of how to work out	1.21	0.58	1.65	0.70	-0.43	-0.91	0.05	0.07
Active enough in everyday life	1.36	0.63	1.35	0.61	0.00	-0.46	0.46	0.98
Don't see myself as a PA person	1.21	0.43	1.41	0.62	-0.20	-0.60	0.20	0.32
Fear of doing exercises wrong	1.14	0.36	1.47	0.62	-0.33	-0.70	0.04	0.08
Don't think I'll get anything out of it	1.36	0.74	1.24	0.56	0.12	-0.36	0.60	0.61
Don't like being PA	1.29	0.61	1.24	0.44	0.05	-0.33	0.44	0.79
I dare not	1.14	0.53	1.12	0.33	0.02	-0.30	0.35	0.87
<b>Interpersonal</b>								
Lack of offer and none to be PA with	1.36	0.63	1.53	0.72	-0.17	-0.67	0.33	0.49
Fear others watch when I exercise	1.21	0.43	1.41	0.71	-0.20	-0.62	0.23	0.35
<b>Environmental</b>								
Transportation problems	1.21	0.58	1.18	0.53	0.04	-0.37	0.44	0.85
<b>Policy</b>								
Too expensive	1.93	0.92	1.65	0.79	0.23	-0.34	0.91	0.36

CI; Confidence interval, SD; Standard deviance, MD; Mean difference.

None of the perceived barriers were ranked significantly different between the two groups. New fitness club members had essentially the same reasons whether they dropped out early (within three or six months) or late (within a year).

# 6.0 Discussion

## 6.1 Results

The non-exercisers had lower scores than exercisers in age, education, meeting PA and diet recommendations and social support, but higher scores in self-perceived health and smoking. The exercise dropout rates were 20.8% after three months, 28.8% after six months, and 26.4% after one year. The most frequently perceived barriers reported in this study can be associated with the categories intrapersonal (not health) and policy. The highest reported perceived barriers over time were “I have neither time nor energy”, “It is too expensive for me”, “I would rather do other things”, “I would rather relax and take it easy”, “I do not think it is of importance to my health” and “I do not see myself as a PA person”. There was no significant difference between the early and late dropouts.

The fact that non-exercisers had worse scores in demographic, health factors and social support, but perceived their health as better than exercisers is interesting. These results may indicate that non-exercisers had less internalization and integration of values of exercise and health than exercisers, in relation to OIT (Deci & Ryan, 2002). They did not perceive the importance of exercise and health as high as exercisers, despite e.g. meeting the recommendations for PA and diet to a lesser extent. In relation to COT the non-exercisers view makes sense, as their social surroundings in childhood and present involved less PA among friends and family. It is also previously shown that behavior of friends and family might affect the level of PA (Ommundsen & Aadland, 2009), and that social support is positively associated with PA (Trost et al., 2002).

When we know that about 50 % of those who start to exercise regularly drop out from their training program before a year has passed (Annesi, 2003; Weinberg & Gould, 2003; Marcus et al., 2000; Annesi, 1998), the dropout rates from this study seems to be low. Looking at the percentage selecting no after twelve months (26.4%) one could be optimistic. But the bigger picture shows a substantial dropout from answering the questionnaire after twelve months (27.2%). Therefore, we only know the behavior of around 70% of the study selection. If we were to hypothesize the greater amount not answering the questionnaire after twelve months to be inactive, the dropout rate would be around 50%, which is similar to recent studies (Annesi, 2003; Weinberg & Gould, 2003; Marcus et al., 2000; Annesi, 1998).

The definition of a dropout may be discussed. Being inactive for the last four weeks does not necessarily mean the individual has dropped out, if we look at a longer time span. One might have a vacation with little PA, injury, sickness or other temporary happenings resulting in less exercise for a period. In this study the participants were categorized into early and late dropouts, as well as regular exercisers. After the categorizing, the study selection was 69, with only 36 participants stating they were active the last four weeks at every questionnaire, and 33 who could be classified as dropouts. Thus, 56 participants were ambivalently exercising or did not answer. Many of the early and late dropouts were also ambivalently active. The process to be PA might be an ongoing behavior over time for many. Therefore, an even longer study on this behavior could be interesting.

It was a tendency that participants drop out, and start up again. It was shown that some participants were active at three months, inactive at six months, and active again at twelve months. This kind of behavior pattern could be continuous, and individuals may be more active in some periods, and less active in other periods. This may be depending on other priorities in life, e.g. heavier workload in periods, or sick children etc. Therefore, the group categories could have been different if the questionnaires were answered at other time points. As the question was “Have you been exercising the last four weeks?”, we do not know if the participants who answered no, maybe were active in the current period, but just not for the last four weeks.

According to the Transtheoretical model (Buckworth, Dishman, O’Conner & Tomporowski, 2013), people move back and forth between stages of change. This could be used to describe individuals who start up with exercise. Some are able to maintain the behavior, but others move back to earlier stages, and might start up again later. This is backed up in a retrospective study based on the Transtheoretical model, by Middelkamp, Rooijen & Steenbergen (2016). They found that in a sample of 400 ex-members at fitness clubs, about half of these members (49%) were inactive for one full month, but restarted exercising again. The barriers and motivation to PA may be the reason.

Seven of the studies included in the systematic review by Teixeira et al. (2012) explored stages of change for exercise participation. They found an increase in self-determined regulations in relation to the stages in every study. Therefore, the participants who were inactive at some point of this study period may have had less autonomous regulations, and changed back to earlier stages of behavior change.



The individuals who dropped out did not have a pleasurable perspective on exercising, as the most reported perceived barriers were related to PA as a negative aspect. It is nearby to assume they are aware of the benefits of PA as they signed up to a fitness club, but in relation to the OIT, these values may not be integrated enough. This corresponds with the literature showing a tendency in the direction of identified regulation more associated with immediate implementation, and intrinsic motivation more associated with lasting implementation of exercise (Teixeira et al., 2012).

Motivation and priority to exercise may be a challenge. In the review by Teixeira et al. (2012) considering the statement “Being PA does not really interest me, I would rather do other things with my spare time”, around 40% of Europeans reported to agree.

In this present study, the two statements “I would rather do other things” and “I would rather relax and take it easy” were two of the highest reported perceived barriers among the dropouts. The type of motivation to exercise was a problem. Some individuals may inherent a controlled motivation, where they do not really want to, but feel like they must be PA (Teixeira et al., 2012). Although there was some form of motivation to start up, it may have come from others, e.g. friends, health personnel or media, and not from one self. It is evident that more intrinsic motives are positively associated with PA behaviour (Teixeira et al., 2012). One future aim could be to get these individuals more intrinsic motivated.

On the other hand, the statement “I do not like being PA” was only reported by 3% among the dropouts at every timepoint. This could indicate that most of these participants enjoy PA, at least some form of it. Maybe exercising at a fitness club is not what they enjoy the most, and they may have a more lasting PA behaviour by trying something else, e.g. outdoor cycling or cross-country skiing. The individuals should pursue a form of PA they want to do themselves, as the literature is supporting that motivation which is more autonomous is positively related to exercise (Teixeira et al., 2012).

The most reported perceived barrier at baseline and after one year among non-exercisers, was “I have neither time nor energy”. Considering this barrier includes two aspects – time and energy – the participants’ rating may have been influenced by this. The statement could have been split into two statements, and may have produced different results. There was only one other barrier including to different aspects – “I do not have an organized offer and do not have anyone to be PA with” – which was reported by 9.1% at baseline, and 6.1% at the other timepoints.

ED and LD had no significant difference in rating of perceived barriers. This indicates there may be other reasons that also affect new fitness club members to become non-exercisers. The barriers included in this study may not be sufficient. Maybe there are other barriers that play a significant role, which we did not reveal in this project. It may also be that the timespan was too short, as we know the PA behavior may vary over time (Buckworth, Dishman, O'Conner & Tomporowski (2013).

The participants were asked how the barriers fit them personally. In this study, the participants' perceived reporting of each different barrier was investigated. One can argue that the total amount of barriers is just as important. Obviously, it is easier to deal with one or two barriers, than many. It may be the total load of several barriers that impacts individuals to drop out over time.

## **6.2 Methodological considerations**

This project was a longitudinal prospective cohort design with questionnaires at four timepoints. A challenge with questionnaires is that the results consist exclusively of the participants reported behaviours, and the actual behaviour is not directly measured. In the present study, all information was self-reported and therefore subjective to recall and social desirability bias. In this regard, the collection of data was done at several timepoints, therefore the recall bias was minimized. The participants were informed there was no correct answers, encouraged to give honest replies and guaranteed anonymity, hence the social desirability bias may have been minimized as well.

The power calculations in this project was not done specifically for this master thesis, but the project as a whole. The number of non-exercisers (n=33) may have been satisfactory for this thesis, but researchers may want to apply larger numbers in the future. The participants were also exercising at the same fitness club chain in the same city. To better generalize these results, replication in a larger and more diverse sample may be performed.

Recommended length of a questionnaire is between 50 and 125 questions, depending on the participants interest in the subject, and 45 minutes is the upper time limit suggested (Hassmén & Hassmén, 2008). The questionnaires in this project consisted of respectively 52 and 65 questions, and took approximately 30 minutes to complete, which should be tolerable. On the other hand, the participants had to come back and fill out the questionnaires three times. As this was an inclusion criterion, they had been informed before inclusion, still many did not return at every timepoint. The total length and time spent may have been too much for some of the participants.

### **6.3 Practical implications**

Fitness clubs may benefit to seek and facilitate intrinsic motivation to exercise for their members. It could be done by emphasizing the pleasure of the actual exercising, the improvement of skill and the individual's achievement in the fitness clubs.

New fitness club members should pursue self-determined regulations. It should be encouraged to find and implement a form of PA they want to do themselves. Social support for PA should be encouraged both in childhood and adult life. Finally, fitness clubs ought to evaluate the cost for their members to prevent dropout, and clarify the value of exercising.

### **6.4 Future research**

Characteristics of non-exercisers in fitness-clubs in Oslo have been described, and non-exercisers at other areas and cultures should also be mapped. Dropout rates should be investigated with other methods than self-report. To be able to find differences in barriers over time, larger sample size of dropouts over an even longer period may be necessary. Total load of barriers should also be explored in future research. There is need for more research on the subject, and randomized controlled studies should be conducted.

## **6.5 Strengths and limitations**

The longitudinal prospective cohort design with an even distribution of men and women, and a wide range in age (18-71 years) are great strengths in this project. The sample size of 125 participants is a strength, and may be adequate for the aims in this master thesis despite the high dropout rate, but is limited to participants who work out in one fitness club chain (SATS ELIXIA), in one city (Oslo). It would be interesting to see if the results would vary in other fitness club chains, as well as other cities/villages and countries.

Questionnaire is a method with limitations. The attendance level was obtained via self-report, which might be biased. For example, individuals may reply in a direction of what they believe is socially acceptable.

The method was strengthened with the use of previously validated surveys (Anderssen et al., 2010; Breivik & Rafoss, 2012; Sorensen & Gill, 2008; Lorentzen, Ommundsen & Holme, 2007; Sallis et al., 1987). As the questionnaire was electronic, the costs in conjunction with printing and distributing paper-based surveys was eliminated, and the data was quickly assembled.

## 7.0 Conclusion

Non-exercisers are more often smokers, have lower education level, less social support for PA, and meet recommendations for PA and diet less often than exercisers, but still perceive their health as better.

About one in four new fitness club members drop out from exercise within a year. Many dropouts have an ambivalent exercise behavior, whereas they are more and less PA in different periods.

The perceived barriers most frequently reported in this study may be categorized as intrapersonal (not health) and policy. “I have neither time nor energy” was the highest reported perceived barrier over time.

To prevent new members becoming non-exercisers, the fitness clubs should facilitate intrinsic motivation and evaluate the cost for their members. Individuals who want to start exercising ought to seek self-determined regulations, and pursue a form of PA they enjoy doing.

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# Table overview

**Table 2:** *Comparisons of demographic, health factors and social support between non-exercisers and exercisers at baseline (n=69). Data are presented as mean (SD) for continuous variables, and n (%) for categorical variables.*

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**Table 2:** *Exercise dropout rates after three, six and twelve months of fitness club membership (n=125). Data are presented as n (%).*

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**Table 3:** *Perceived barriers to leisure-time exercise at baseline, three, six and twelve months among non-exercisers (n=33). Data are presented as n (%).*

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**Table 4:** *Perceived barriers to leisure-time exercise at baseline between early dropouts (ED) and late dropouts (LD). Data are presented as mean (SD).*

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# Figure overview

**Figure 1:** Schematic representation of the motivational continuum. Several regulations can affect the type of motivation and change the degree of self-determination (SDT [Picture], 2013). Obtained from <https://www.frontiersin.org/articles/10.3389/fpsyg.2012.00611/full>

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**Figure 2:** Flowchart of participants throughout the study, and included participants for the present master thesis.

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# Attachments

**Deltakernummer**

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Baseline

**Kjære deltager,**

Treningssentre er i dag en voksende bransje og en viktig arena for fysisk aktivitet. Vi vet svært lite om hvordan medlemmer bruker sentrene for å trene, samt hvilken rolle dette spiller i forhold til andre aktiviteter. Det er også liten kunnskap om hva som bidrar til mer aktivt bruk av senteret og hvordan det kan legges til rette for at flest mulig opprettholder regelmessig og anbefalt fysisk aktivitet.

Ved å besvare dette spørreskjemaet bidrar du til å få frem nyttig kunnskap uansett om du er svært aktiv på et treningssenter eller ikke.

En liten oppfordring før du starter, vær ærlig - her er det ingen riktige eller gale svar!

Totalt vil spørsmålene ta ca. 30 minutter å besvare. Velg den svarkategorien som passer best for deg og sett kryss (marker) eller fyll ut på linje/boks.

**På forhånd takk for hjelpen!**



## 1. Kjønn

- Mann
- Kvinne

## 2. Alder (år)

\_\_\_\_\_

## 3. Fødeland

\_\_\_\_\_

## 4. Hva er din nåværende samlivsstatus?

- Bor alene uten barn
- Bor alene med barn
- Bor med ektefelle/samboer uten barn
- Bor med ektefelle/samboer med barn
- Annet

## 5. Hvor mange barn har du?

\_\_\_\_\_

## 6. Hva er din høyeste fullførte utdanning?

- Grunnskole
- Videregående skole, yrkesfag
- Videregående skole, allmennfag
- Høyskole/universitet mindre enn 4 år
- Høyskole/universitet mer enn 4 år
- Annen utdanning
- Ønsker ikke svare

## 7. Hva er din arbeidsstusasjon?

- Ansatt i offentlig virksomhet
- Ansatt i privat virksomhet
- Selvstendig næringsdrivende
- Student
- Lærling/yrkespraksis
- Attføring/ufør
- Arbeidssøkende/permittert
- Hjemmeværende
- Pensjonert
- Annet
- Ønsker ikke svare

8. Dersom du er i arbeid utenfor hjemmet, hvor stor prosentandel arbeider du (inkludert ev. lunsjpause, fastlagte timer, betalt overtid og annet ekstraarbeid)? Skriv prosenttallet.

\_\_\_\_\_

**9a. Er du for tiden fraværende fra ditt vanlige arbeid?**

- Ja
- Nei

**9b. Dersom ja, hva er årsaken til fraværet (sett eventuelt flere kryss)?**

- Sykemelding
- Permisjon
- Sykt barn
- Annet
- Ønsker ikke svare

**9c. Dersom du er sykemeldt, hvor stor prosentandel er du sykemeldt? Skriv prosentall.**

\_\_\_\_\_

**10. Hvor høy var husholdningens samlede bruttointekt siste år (ta med alle inntekter fra arbeid, trygder, sosialhjelp og lignende)? Sett et kryss.**

- Under 125.000 kr
- 125.000-200.00 kr
- 201.000-300.00 kr
- 301.000-400.000 kr
- 401.000-550.000 kr
- 551.000-700.00 kr
- 701.000-850.000 kr
- Over 850.000 kr
- Ønsker ikke svare

## Livsstil og helse

11. Hva er din kroppsvekt i dag (kg)?

\_\_\_\_\_

12. Hva er din kroppshøyde (centimeter)?

\_\_\_\_\_

13. Har du hatt større vektendringer (+/- 5kg) det siste året?

Ja

Nei

13a. Hvor stor har vektendringen vært?

Vektnedgang (i kilo) \_\_\_\_\_

Vektoppgang (i kilo) \_\_\_\_\_

13b. Har du prøvd å gå ned i vekt ved å faste eller ved lavkalori-diett?

Aldri

Sjelden

Noen ganger

Ofte

Veldig ofte

Ønsker ikke svare



15b. På en skala fra 0-10, hvor 0 er svært dårlig og 10 er svært bra, hvordan vil du vurdere din søvnkvalitet?

0	1	2	3	4	5	6	7	8	9	10
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

16. Hvordan vil du vurdere din nåværende helse (sykdom, plager og/eller skader) i alminnelighet?

- Meget god
- God
- Noenlunde
- Dårlig
- Meget dårlig
- Vet ikke

17. Hadde du ved innmeldelse på treningssenteret generelle helseproblemer som smerte og/eller ubehag i kroppen (generelle helseproblemer i bevegelsesapparatet er forstått som smerter og/eller ubehag i ankel, kne, hofte/bekken, håndledd, albue, skulder, bryst/rygg, nakke, korsrygg)?

- Ja
- Nei
- Vet ikke

18. Har du blitt anbefalt å begynne med trening av din lege og/eller annet helsepersonell?

- Ja
- Nei
- Vet ikke
- Ønsker ikke svare

**19. Helseproblemer de siste 4 uker** Nå nevnes noen vanlige helseplager. Vi vil be deg om å vurdere hvert enkelt problem/symptom, og oppgi i hvilken grad du har vært plaget av dette i løpet av de siste 4 ukene.

	0 Ikke plaget	1 Litt plaget	2 Endel plaget	3 Alvorlig plaget	Ønsker ikke svare
Forkjølelse, influensa	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hodepine	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Migrene	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Nakkesmerter	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Smerter i ryggen (øvre del av rygg og/eller korsrygg)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Smerter i skuldre/armer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bekkenløsning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Artrose (slitasjegikt)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Brystsmerter og/eller hjertebank, ekstraslag	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Magesmerter	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Tarmproblematikk (løs avføring, diarè eller forstoppelse)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Urinlekkasje	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Søvnproblemer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Tretthet	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Angst	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Nedtrykt, depresjon	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**19b. Dersom du på forrige spørsmål oppga å være fra litt til alvorlig plaget av urinlekkasje, når skjer dette (du kan sette flere kryss)?**

- Når jeg er fysisk aktiv
- Når jeg må veldig på do
- Når jeg hoster og/eller nyser
- Når jeg ler
- Jeg har ikke urinlekkasje
- Ønsker ikke svare

**20a. Vet du hva bekkenbunnstrening er?**

- Ja
- Nei
- Vet ikke

**20b. Har du gjort bekkenbunnstrening de siste 4 ukene?**

- Ja
- Nei
- Vet ikke

**20c. Hvor mange ganger i uken har du gjort bekkenbunnstrening? Skriv et tall for antall ganger.**

\_\_\_\_\_



## Kosthold og matvaner

Helsedirektoratet anbefaler et variert kosthold som inneholder mye grønnsaker, frukt og bær, grove kornprodukter og fisk, samt et begrenset inntak av bearbeidet kjøtt, salt og sukker.

21. På en skala fra 0-10, hvor 0 er svært dårlig og 10 er svært bra, hvordan vil du si at du har fulgt disse anbefalingene **de siste 4 uker**?

0	1	2	3	4	5	6	7	8	9	10
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

22. Velger du produkter som er nøkkelhullsmerket?

- Ja, alltid
- Ofte
- Av og til
- Nei, aldri
- Nøkkelhull betyr ikke noe for valget mitt
- Jeg vet ikke hva nøkkelhullsmerking er

23. Helsedirektoratet anbefaler 5 enheter med frukt og grønnsaker daglig.

23a. Hvor mange enheter med frukt får du i deg daglig?

\_\_\_\_\_

23b. Hvor mange enheter med grønnsaker får du i deg daglig?

\_\_\_\_\_

24. Helsedirektoratet anbefaler inntak av 3 enheter kalsiumprodukter daglig. En enhet kan f. eks. være gulost på brødskiven, yoghurt, melk etc. Inneholder din daglige kost til sammen 3 eller flere enheter av kalsiumprodukter?

Nei, aldri

Av og til

Ofte

Ja, alltid

25. Hvor ofte i en vanlig uke spiser du fisk og/eller kjøtt (som f. eks. kylling, rødt kjøtt, kjøttpålegg etc.)?

	1 gang i uken	2 ganger i uken	3 ganger i uken	4 ganger i uken	5 ganger i uken	6 ganger i uken	7 ganger i uken	Aldri	Ønsker ikke svare
Fisk (inkluder alle måltider)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Kjøtt (inkluder alle måltider)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

25b. Jeg er vegetarianer

Ja

Nei

Ønsker ikke svare

26. Hvor ofte i en vanlig uke spiser/drikker du:

	1 gang i uken	2 ganger i uken	3 ganger i uken	4 ganger i uken	5 ganger i uken	6 ganger i uken	7 ganger i uken	Aldri	Ønsker ikke svare
Mat som pizza, kebab, pølse, hamburger etc.?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Søte matvarer som f.eks. syltetøy, nugatti, søt frokostblanding etc.?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mat som potetgull, sjokolade, smågodt, kaker, is etc.?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Søte drikkevarer som saft, fruktjuice, brus, energidrikk etc.?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

27. Drikker du kaffe?

- Ja
- Nei

27b. Hvor mange kopper kaffe drikker du daglig? Skriv antall kopper.

\_\_\_\_\_

**28. Drikker du alkohol?**

- Ja
- Nei

**28a. Hvor mange enheter per uke drikker du (en alkoholenhet = en flaske 33cl pils eller ett glass vin)?**

\_\_\_\_\_

**29. Har du brukt vitaminer, mineraler eller annet kosttilskudd de siste 4 ukene?**

- Ja
- Nei

**29a. Hvilken type har du brukt (sett gjerne flere kryss)?**

- Multivitamin-/mineraltilskudd
- Tran/fiskeolje
- Proteintilskudd
- Jerntabletter
- Kalsiumtilskudd
- Folat (folsyre)
- Annet

## Totalt fysisk aktivitetsnivå

Helsemyndighetene anbefaler fysisk aktivitet i minimum 30 minutter av moderat intensitet (lett svett og andpusten) 5 ganger i uken. Dette tilsvarer 150 minutter i uken, og inkluderer aktiviteter som å gå til jobb/butikken og andre fysisk anstrengende aktiviteter som f. eks. snømåking og vasking (hver aktivitet må gjøres i minimum 10 minutter sammenhengende).

30. I henhold til dette, vil du karakterisere deg selv som regelmessig fysisk aktiv?

- Ja
- Nei
- Vet ikke

## Transportaktiviteter

31. Kan du angi hvor mye du i gjennomsnitt går i løpet av en vanlig ukedag (her inkluderes all aktivitet, f. eks. til og fra arbeid og butikken, hente/bringe barn, på jobb, turer, trening osv.)?

Skriv antall timer og/eller minutter (skriv 0 i rubrikken om du ikke gjør aktiviteten).

Timer \_\_\_\_\_

Minutter \_\_\_\_\_

**32. Hvor mange av disse minuttene ble du lett svett og andpusten (moderat intensitet)? Skriv antall timer og/eller minutter (skriv 0 i rubrikken om du ikke gjør aktiviteten).**

Timer \_\_\_\_\_

Minutter \_\_\_\_\_

### **Jobbaktiviteter**

**33. Vil du karakterisere jobben din som fysisk krevende?**

- Ja
- Av og til
- Nei

**34. Hvor mye tid bruker du daglig på stillesittende aktiviteter på jobb? Skriv totalt timer og/eller minutter (skriv 0 i rubrikken om du ikke gjør aktiviteten).**

Timer \_\_\_\_\_

Minutter \_\_\_\_\_



**38. Hvor mange timer i snitt bruker du totalt (både arbeid og fritid) på stillesittende aktiviteter (f. eks. se TV, slappe av, internett, PC, høre på musikk, kontorarbeid m.m.)?Skriv antall timer (skriv 0 i rubrikken om du ikke gjør aktiviteten).**

På en hverdag \_\_\_\_\_

På en helgedag \_\_\_\_\_

### **Sport og trening**

**39. Har du tidligere vært medlem på et annet treningscenter?**

- Ja
- Nei

**39a. Hvorfor avsluttet du medlemskapet (sett gjerne flere kryss)?**

- Bedre fasiliteter andre steder
- Flyttet
- Sykdom
- Graviditet
- Mistet motivasjonen for trening
- Manglende tid
- Bedre pris på medlemskap på andre treningscentre
- Flere gruppetimer på andre treningscentre
- Lengre åpningstider på andre treningscentre
- Venner på andre treningscentre
- Kortere avstand til andre treningscentre
- Endret daglige rutiner
- Annet



**40. Hvordan ble du oppmerksom på treningssenteret du er medlem av i dag?**

- Jeg tok selv kontakt med treningssenteret
- Jeg kjente til treningssenteret fra før
- Jeg deltok på "Åpent hus"-arrangement
- Jeg så en reklame/annonse for treningssenteret og meldte meg deretter inn
- Jeg fant informasjon via internett
- Jeg ble introdusert gjennom familie, venner, bekjente eller kollegaer
- Jeg hørte om treningssenteret gjennom en idrettsforening
- Jeg ble oppmerksom på treningssenteret via min arbeidsplass
- Jeg ble kontaktet av en selger fra treningssenteret og meldte meg deretter inn
- Annet

**41. Hva har vært den viktigste årsaken til innmeldelse på treningssenteret (sett gjerne flere kryss)?**

- Forebygge smerte og/eller ubehag i kroppens bevegelsesapparat
- Kroppslig velvære
- Bedre fysisk form
- Vekttap
- Større muskelmasse
- En flottere, mer veltrent kropp
- Opptrening etter en skade
- Annet

## Vurdering av egen fysisk kapasitet

42. Marker den mest anstrengende aktiviteten du tror du klarer å utføre i 30 minutter. Kan du i en halvtime eller mer...

- 1 Sitte
- 2
- 3 Gå langsomt
- 4
- 5 Gå i normal takt/sykle langsomt
- 6
- 7
- 8 Jogge/sykle
- 9
- 10 Løpe
- 11
- 12 Løpe fort/sykle fort
- 13
- 14
- 15 Løpe veldig fort (mer enn 15 km/t)
- 16
- 17
- 18 Utføre utholdenhetstrening på elitenivå (kvinner)
- 19
- 20 Utføre utholdenhetstrening på elitenivå (menn)







#### 44. Barrierer for fysisk aktivitet

Nå følger en rekke utsagn som folk ofte oppgir når de blir spurt om hvorfor de ikke trener. På en skala fra 0-3, hvor 0 er ikke relevant og 3 er veldig viktig, hvordan vil du si at hvert utsagn passer deg personlig?

	1 Ikke viktig	2 Ganske viktig	3 Veldig viktig	Ønsker ikke svare
Det er for dyrt for meg	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Jeg mangler et organisert tilbud og har ingen å være fysisk aktiv med	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Jeg mangler transport til og fra trening	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Jeg syns ikke det er av betydning for helsen min	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Helseutfordringer hindrer meg	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Jeg er plaget av svimmelhet	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Jeg er redd for skader	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Jeg liker ikke å være fysisk aktiv	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Jeg har verken tid eller energi	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Jeg tror ikke jeg vil få noe ut av det	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Jeg ser ikke på meg selv som en fysisk aktiv person	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Jeg vil heller slappe av og ta	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

1 Ikke viktig

2 Ganske viktig

3 Veldig viktig

Ønsker ikke svare

det med ro

Jeg ønsker heller å gjøre  
andre ting

Jeg tør ikke

Jeg mangler kunnskap om  
hvordan jeg skal trene

Jeg er redd for at andre ser  
på når jeg trener

Jeg er redd for at jeg gjør  
øvelser feil

Jeg anser meg selv som nok  
aktiv i hverdagen

#### 45. Sosial støtte

Uansett om du trener eller ikke, les, og gi et svar til hvert spørsmål/påstand nedenfor. Tenk i gjennom de siste 4 uker, hvor ofte har venner og/eller familie gjort det som er beskrevet?

Velg et nummer som passer.

	Aldri	Sjelden	Noen få ganger	Ofte	Veldig ofte	Ikke relevant	Ønsker ikke svare
Trent sammen med meg	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Oppfordret/motivert meg til å gjennomføre treningsprogrammet mitt	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Klaget eller kritisert over den tiden jeg bruker på trening	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Planlagt feller sport og trening på fritiden	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lagt til rette for at jeg skal kunne få trent	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Spurt meg om tips om hvordan de kan trene	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

46. Var det noen i din nære familie (mor, far eller søsken) som drev regelmessig fysisk aktivitet under din oppvekst (før du fylte 18 år)?

- Ja
- Nei













## Informasjonskilder

51. Har du fått og/eller innhentet informasjon/råd om fysisk aktivitet fra noen av følgende informasjonskilder de siste 4 ukene (sett gjerne flere kryss)?

- Blogger/internettforum
- Magasiner/ukeblader
- Faglitteratur/brosjyrer
- Venner/familie
- Lege og annet helsepersonell
- Personlig trener
- Annet
- Jeg har ikke fått eller innhentet informasjon om fysisk aktivitet

52. Hvilke av alternativene har hatt størst betydning for din motivasjon for å drive fysisk aktivitet?

- Blogger/internettforum
- Magasiner/ukeblader
- Faglitteratur/brosjyrer
- Venner/familie
- Lege og annet helsepersonell
- Personlig trener
- Annet
- Jeg har ikke fått eller innhentet informasjon om fysisk aktivitet

Hvor lang tid brukte du på spørreskjemaet?

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Har du kommentarer til spørreskjemaet er du velkommen til å skrive de her:

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Takk for din deltakelse!

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Prosjektleder Lene Haakstad.

Alle rettigheter reservert.

**Deltakernummer**

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**Kjære deltager,**

Uavhengig av om du per i dag er regelmessig aktiv eller ikke, ønsker vi å vite litt mer om årsaker til at du trener, eventuelt ikke trener.

Ved å besvare dette spørreskjemaet vil vi få mer kunnskap om hva som kan bidra til mer aktivt bruk av treningssenteret og hvordan det kan legges til rette for at flere opprettholder regelmessig og anbefalt fysisk aktivitet.

Vi ønsker også å kartlegge ditt generelle forhold til trening og fysisk aktivitet, kosthold, kropp og utseende.

En liten oppfordring før du starter, vær ærlig - her er det ingen riktige eller gale svar!

Totalt vil spørreskjemaet ta ca. 30 minutter å besvare. Velg den svarkategorien som passer best for deg og marker eller fyll ut på linje.

**På forhånd takk for hjelpen!**



1. Dersom du er i arbeid utenfor hjemmet, hvor stor prosentandel arbeider du (inkludert ev. lunsjpause, fastlagte timer, betalt overtid og annet ekstraarbeid)? Skriv prosenttallet.

\_\_\_\_\_

1a. Er du for tiden fraværende fra ditt vanlige arbeid?

- Ja
- Nei

1b. Dersom ja, hva er årsaken til fraværet (sett eventuelt flere kryss)?

- Sykemelding
- Permisjon
- Sykt barn
- Annet
- Ønsker ikke svare

1c. Dersom du er sykemeldt, hvor stor prosentandel er du sykemeldt? Skriv prosenttall.

\_\_\_\_\_

2. Hva er din kroppsvekt i dag (kg)?

\_\_\_\_\_

3. Hva er din kroppshøyde (centimeter)?

\_\_\_\_\_

4a. Hvor mange timer sover du vanligvis i løpet av et døgn?

	3 til 4 timer	4 til 5 timer	5 til 6 timer	6 til 7 timer	7 til 8 timer	8 til 9 timer	9 til 10 timer	Mer enn 10 timer
På en hverdag?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
På en helgedag?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

4b. På en skala fra 0-10, hvor 0 er svært dårlig og 10 er svært bra, hvordan vil du vurdere din søvnkvalitet?

0	1	2	3	4	5	6	7	8	9	10
(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>	(6) <input type="checkbox"/>	(7) <input type="checkbox"/>	(8) <input type="checkbox"/>	(9) <input type="checkbox"/>	(10) <input type="checkbox"/>	(11) <input type="checkbox"/>

5. Hvordan vil du vurdere din nåværende helse (sykdom, plager og/eller skader) i alminnelighet?

- (5)  Meget god
- (4)  God
- (3)  Noenlunde
- (2)  Dårlig
- (1)  Meget dårlig
- (6)  Vet ikke

**6. Hadde du ved innmeldelse på treningssenteret generelle helseproblemer som smerte og/eller ubehag i kroppen (generelle helseproblemer i bevegelsesapparatet er forstått som smerter og/eller ubehag i ankel, kne, hofte/bekken, håndledd, albue, skulder, bryst/rygg, nakke, korsrygg)?**

- (1)  Ja
- (2)  Nei
- (3)  Vet ikke

**7. Har treningen hjulpet deg med de generelle helseproblemene som du opplever/har opplevd?**

- (5)  Nei, tvert imot. Smertene og/eller ubehaget er blitt forverret av treningen
- (4)  Nei, smertene og/eller ubehaget er der stadig
- (3)  Vet ikke/det er for tidlig å si noe om
- (2)  Ja smertene og/eller ubehaget er blitt vesentlig mindre ved hjelp av treningen
- (1)  Ja smertene og/eller ubehaget er helt vekk ved hjelp av treningen
- (6)  Ønsker ikke svare

## 8. Helseproblemer de siste 4 uker

Nå nevnes noen vanlige helseplager. Vi vil be deg om å vurdere hvert enkelt problem/symptom, og oppgi i hvilken grad du har vært plaget av dette i løpet av de siste 4 ukene.

	0 Ikke plaget	1 Litt plaget	2 Endel plaget	3 Alvorlig plaget	Ønsker ikke svare
Forkjølelse, influensa	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>
Hodepine	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>
Migrene	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>
Nakkesmerter	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>
Smerter i ryggen (øvre del av rygg og/eller korsrygg)	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>
Smerter i skuldre/armar	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>
Bekkenløsning	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>
Artrose (slitasjegikt)	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>
Brystsmerter og/eller hjertebank, ekstraslag	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>
Magesmerter	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>
Tarmproblematikk (løs avføring, diarè eller forstoppelse)	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>
Urinlekkasje	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>
Søvnproblemer	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>
Tretthet	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>
Angst	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>

	0 Ikke plaget	1 Litt plaget	2 Endel plaget	3 Alvorlig plaget	Ønsker ikke svare
Nedtrykt, depresjon	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>

**8b. Dersom du på forrige spørsmål oppga å være fra litt til alvorlig plaget av urinlekkasje, når skjer dette (du kan sette flere kryss)?**

- (1)  Når jeg er fysisk aktiv
- (2)  Når jeg må veldig på do
- (3)  Når jeg hoster og/eller nyser
- (4)  Når jeg ler
- (6)  Jeg har ikke urinlekkasje
- (5)  Ønsker ikke svare

### Kosthold og matvaner

Helsedirektoratet anbefaler et variert kosthold som inneholder mye grønnsaker, frukt og bær, grove kornprodukter og fisk, samt et begrenset inntak av bearbeidet kjøtt, salt og sukker.

9. På en skala fra 0-10, hvor 0 er svært dårlig og 10 er svært bra, hvordan vil du si at du har fulgt disse anbefalingene **de siste 4 uker?**

- |                              |                              |                              |                              |                              |                              |                              |                              |                              |                               |                               |
|------------------------------|------------------------------|------------------------------|------------------------------|------------------------------|------------------------------|------------------------------|------------------------------|------------------------------|-------------------------------|-------------------------------|
| 0                            | 1                            | 2                            | 3                            | 4                            | 5                            | 6                            | 7                            | 8                            | 9                             | 10                            |
| (1) <input type="checkbox"/> | (2) <input type="checkbox"/> | (3) <input type="checkbox"/> | (4) <input type="checkbox"/> | (5) <input type="checkbox"/> | (6) <input type="checkbox"/> | (7) <input type="checkbox"/> | (8) <input type="checkbox"/> | (9) <input type="checkbox"/> | (10) <input type="checkbox"/> | (11) <input type="checkbox"/> |

10. Velger du produkter som er nøkkelhullsmerket?

- (1)  Ja, alltid
- (2)  Ofte
- (3)  Av og til
- (4)  Nei, aldri
- (5)  Nøkkelhull betyr ikke noe for valget mitt
- (6)  Jeg vet ikke hva nøkkelhullsmerking er

11. Helsedirektoratet anbefaler 5 enheter med frukt og grønnsaker daglig.

11a. Hvor mange enheter med frukt spiser du daglig?

\_\_\_\_\_

11b. Hvor mange enheter med grønnsaker spiser du daglig?

\_\_\_\_\_

12. Helsedirektoratet anbefaler inntak av 3 enheter kalsiumprodukter daglig. En enhet kan f. eks. være gulost på brødkiven, yoghurt, melk etc. Inneholder din daglige kost til sammen 3 eller flere enheter av kalsiumprodukter?

- (4)  Nei, aldri
- (3)  Av og til
- (2)  Ofte
- (1)  Ja, alltid

13. Hvor ofte i en vanlig uke spiser du fisk og/eller kjøtt (som f. eks. kylling, rødt kjøtt, kjøttpålegg etc.)?

	1 gang i uken	2 ganger i uken	3 ganger i uken	4 ganger i uken	5 ganger i uken	6 ganger i uken	7 ganger i uken	Aldri	Ønsker ikke svare
Fisk (inkluder alle måltider)	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>	(6) <input type="checkbox"/>	(7) <input type="checkbox"/>	(8) <input type="checkbox"/>	(9) <input type="checkbox"/>
Kjøtt (inkluder alle måltider)	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>	(6) <input type="checkbox"/>	(7) <input type="checkbox"/>	(8) <input type="checkbox"/>	(9) <input type="checkbox"/>

### 13b. Jeg er vegetarianer

- (1)  Ja  
 (2)  Nei  
 (3)  Ønsker ikke svare

14. Hvor ofte i en vanlig uke spiser/drikker du:

	1 gang i uken	2 ganger i uken	3 ganger i uken	4 ganger i uken	5 ganger i uken	6 ganger i uken	7 ganger i uken	Aldri	Ønsker ikke svare
Mat som pizza, kebab, pølse, hamburger etc.?	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>	(6) <input type="checkbox"/>	(7) <input type="checkbox"/>	(8) <input type="checkbox"/>	(9) <input type="checkbox"/>
Søte matvarer som f.eks. syltetøy, nugatti, søt frokostblanding etc.?	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>	(6) <input type="checkbox"/>	(7) <input type="checkbox"/>	(8) <input type="checkbox"/>	(9) <input type="checkbox"/>
Mat som potetgull, sjokolade, smågodt, kaker, is etc.?	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>	(6) <input type="checkbox"/>	(7) <input type="checkbox"/>	(8) <input type="checkbox"/>	(9) <input type="checkbox"/>
Søte drikkevarer som saft, fruktjuice, brus, energidrikk etc.?	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>	(6) <input type="checkbox"/>	(7) <input type="checkbox"/>	(8) <input type="checkbox"/>	(9) <input type="checkbox"/>

**15. Driker du kaffe?**

- (1)  Ja  
(2)  Nei

**15b. Hvor mange kopper kaffe drikker du daglig? Skriv antall kopper.**

\_\_\_\_\_

**16. Driker du alkohol?**

- (1)  Ja  
(2)  Nei

**16a. Hvor mange enheter per uke drikker du (en alkoholenhet = en flaske 33cl pils eller ett glass vin)?**

\_\_\_\_\_

**17. Har du brukt vitaminer, mineraler eller annet kosttilskudd de siste 4 ukene?**

- (1)  Ja  
(2)  Nei



**17a. Hvilken type har du brukt (sett gjerne flere kryss)?**

- (1)  Multivitamin-/mineraltilskudd
- (2)  Tran/fiskeolje
- (3)  Proteintilskudd
- (4)  Jerntabletter
- (5)  Kalsiumtilskudd
- (6)  Folat (folsyre)
- (7)  Annet

**Totalt fysisk aktivitetsnivå**

18/65

Helsemyndighetene anbefaler fysisk aktivitet i minimum 30 minutter av moderat intensitet (lett svett og andpusten) 5 ganger i uken. Dette tilsvarer 150 minutter i uken, og inkluderer aktiviteter som å gå til jobb/butikken og andre fysisk anstrengende aktiviteter som f. eks. snømåking og vasking (hver aktivitet må gjøres i minimum 10 minutter sammenhengende).

**18. I henhold til dette, vil du karakterisere deg selv som regelmessig fysisk aktiv?**

- (1)  Ja
- (2)  Nei
- (3)  Vet ikke

**Transportaktiviteter**

1

19. Kan du angi hvor mye du i gjennomsnitt går i løpet av en vanlig **ukedag** (her inkluderes all aktivitet, f. eks. til og fra arbeid og butikken, hente/bringe barn, på jobb, turer, trening osv.)?

Skriv antall timer og/eller minutter (skriv 0 i rubrikken om du ikke gjør aktiviteten).

Timer \_\_\_\_\_

Minutter \_\_\_\_\_

20. Hvor mange av disse minuttene ble du lett svett og andpusten (moderat intensitet)? Skriv antall timer og/eller minutter (skriv 0 i rubrikken om du ikke gjør aktiviteten).

Timer \_\_\_\_\_

Minutter \_\_\_\_\_

### Jobbaktiviteter

21. Vil du karakterisere jobben din som fysisk krevende?

(1)  Ja

(2)  Nei

(3)  Av og til

22. Hvor mye tid bruker du daglig på stillesittende aktiviteter på jobb? Skriv totalt timer og/eller minutter (skriv 0 i rubrikken om du ikke gjør aktiviteten).

Timer \_\_\_\_\_

Minutter \_\_\_\_\_

23. Hvor mye tid bruker du på aktivitet på jobb daglig (gå/stå)? Skriv timer og/eller minutter (skriv 0 i rubrikken om du ikke gjør aktiviteten).

Timer \_\_\_\_\_

Minutter \_\_\_\_\_

## Aktivitet i hjem og nærmiljø

24. Hvor lang tid bruker du på lett til middels anstrengende arbeid i hjemmet daglig (f. eks. støvsuge, vaske gulv, lek med barn, innkjøp av mat, pleie og omsorgsoppgaver)? Skriv timer og/eller minutter (skriv 0 i rubrikken om du ikke gjør aktiviteten).

Timer \_\_\_\_\_

Minutter \_\_\_\_\_

25. På en skala fra 0-10, hvor 0 er svært lett og 10 er svært anstrengende, hvor fysisk anstrengende er dine daglige omsorgsoppgaver og gjøremål i og rundt hjemmet?

0      1      2      3      4      5      6      7      8      9      10  
(1)     (2)     (3)     (4)     (5)     (6)     (7)     (8)     (9)     (10)     (11)

26. Hvor mange timer i snitt bruker du totalt (både arbeid og fritid) på stillesittende aktiviteter (f. eks. se TV, slappe av, internett, PC, høre på musikk, kontorarbeid m.m.)? Skriv antall timer (skriv 0 i rubrikken om du ikke gjør aktiviteten).

På en hverdag \_\_\_\_\_

På en helgedag \_\_\_\_\_

## Sport og trening

**27. Har du vært medlem på treningssenteret de siste 4 ukene?**

- (1)  Ja
- (2)  Nei

**27a. Hvorfor avsluttet du medlemskapet (sett gjerne flere kryss)?**

- (1)  Bedre fasiliteter andre steder
- (2)  Flyttet
- (3)  Sykdom
- (4)  Graviditet
- (5)  Mistet motivasjonen for trening
- (6)  Manglende tid
- (7)  Bedre pris på medlemskap på andre treningssentre
- (8)  Flere gruppetimer på andre treningssentre
- (9)  Lengre åpningstider på andre treningssentre
- (10)  Venner på andre treningssentre
- (11)  Kortere avstand til andre treningssentre
- (12)  Endret daglige rutiner
- (13)  Annet

**27b. Vil du fornye ditt medlemskap på treningssenteret når ditt nåværende abonnement utløper?**

- (1)  Ja, helt sikkert
- (2)  Ja, sannsynligvis
- (3)  Kanskje, har ikke bestemt meg ennå
- (4)  Nei, sannsynligvis ikke
- (5)  Nei, helt sikkert ik

**28. Bedriver du fortrinnsvis sport og trening i sommer- eller vinterhalvåret?**

- (1)  Fortrinnsvis fra 1.april - 30.september (sommer)
- (2)  Fortrinnsvis fra 1.oktober - 31.mars (vinter)
- (3)  Ca. like mye gjennom hele året
- (4)  Jeg dyrker sport og trening i forskjellige perioder ujevnt fordelt gjennom året
- (5)  Jeg er nytt medlem og kan derfor ikke svare presist på mine treningsvaner
- (6)  Vet ikke

**29. Trening er det samme som fysisk aktivitet, men aktiviteten er planlagt og regelmessig, og inkluderer målsetting om å øke/vedlikeholde fysisk form, helse eller prestasjon. I henhold til dette, har du trent de siste 4 ukene?**

- (1)  Ja
- (2)  Nei
- (3)  Vet ikke

**30. Hvor mange økter trente du i snitt på treningssenteret per uke de siste 4 uker?**

- (2)  1 økt per uke
- (3)  2 økter per uke
- (4)  3 økter per uke
- (5)  4 økter per uke
- (6)  5 økter per uke
- (7)  6 økter per uke
- (8)  7 økter per uke
- (9)  Mer enn 7 økter per uke

31. I henhold til hvor mange økter du trente per uke **de siste 4 ukene**, har du generelt lyst til å trene oftere og/eller mer?

- (1)  Ja, jeg vil gjerne trene oftere/mer enn jeg gjør
- (2)  Nei, jeg er godt fornøyd med denne treningsmengden
- (3)  Vet ikke
- (4)  Nei

32. Hva er årsakene til at du ikke trener oftere på ditt treningssenter (sett gjerne flere kryss)?

- (1)  Generelt mangel på lyst og motivasjon
- (2)  Trening på treningssenter er ikke min foretrukne treningsform
- (3)  Jeg har ingen å trene med
- (4)  Treningssenteret har ikke de treningstilbudene jeg ønsker
- (5)  Jeg har hatt dårlige opplevelser og erfaring med min trening på treningssenter
- (6)  Jeg har ikke tid til å trene
- (7)  Jeg fikk medlemskapet i gave og har ikke brukt det siden
- (8)  Jeg kan ikke trene for tiden pga. en skade
- (9)  Jeg har flyttet
- (10)  Jeg har sluttet å trene
- (11)  Jeg synes jeg trener ofte nok
- (12)  Annet

33. Hvor lang tid bruker du på transport til og fra ditt treningssenter?Skriv antall minutter og/eller timer per besøk.

Timer \_\_\_\_\_

Minutter \_\_\_\_\_

34. Hvordan kommer du deg oftest til og fra ditt treningscenter?

- (1)  Går
- (2)  Sykler
- (3)  Kjører moped/motorsykkkel
- (4)  Kollektivt
- (5)  Kjører bil
- (6)  Annet

35. Hvor lang tid bruker du vanligvis når du trener på ditt treningscenter (ikke medregnet tid til skift, dusj og reisevei)?Skriv minutter og/eller timer.

Timer \_\_\_\_\_

Minutter \_\_\_\_\_

Hvert enkelt treningscenter tilbyr en rekke ulike aktiviteter du kan benytte deg av.

De neste spørsmålene handler om du har benyttet deg av disse **de siste 4 ukene** og hvor fornøyd du er som medlem når det gjelder service, renhold, pris, veiledning, åpningstider etc.

36. Trener du oftest individuelt (f. eks. tredemølle eller styrketrening) eller gruppetimer (f.eks. aerobic eller spinning)?

- (1)  Utelukkende individuelt (f.eks. tredemølle eller styrketrening)
- (2)  Oftest individuelt
- (3)  Både individuelt og gruppetimer
- (4)  Oftest gruppetimer
- (5)  Utelukkende gruppetimer (f.eks. aerobic eller spinning)
- (6)  Det er veldig varierende og tilfeldig hva jeg trener

37. I hvilket omfang består din trening av styrketrening eller utholdenhetstrening?

- (1)  Utelukkende styrketrening (f.eks. bruk av apparater eller frivekter)
- (2)  Primært styrketrening, men supplert med litt utholdenhetstrening
- (3)  Likt fordelt mellom styrketrening og utholdenhetstrening
- (4)  Primært utholdenhetstrening, men supplert med litt styrketrening
- (5)  Utelukkende utholdenhetstrening
- (6)  Det er veldig varierende og tilfeldig hva jeg trener

38. Trener du oftest alene eller sammen med andre?

- (1)  Oftest alene
- (2)  Oftest sammen med andre jeg ikke kjenner (f.eks. gruppetimer)
- (3)  Oftest sammen med en eller flere jeg har blitt kjent med på treningssenteret
- (4)  Oftest sammen med en eller flere treningsvenner jeg kjente før jeg begynte på treningssenteret
- (5)  Oftest sammen med et eller flere familiemedlemmer
- (6)  Det er veldig varierende og tilfeldig om jeg trener alene eller sammen med andre

39. Har du deltatt på gruppetimer på treningssenter **de siste 4 ukene**?

- (1)  Ja
- (2)  Nei



**40. Hvor ofte de siste 4 ukene har du deltatt på følgende gruppetimer?**

	1 gang de siste 4 ukene	2 til 3 ganger de siste 4 ukene	1 gang i uka	2 til 3 ganger i uka	4 til 5 ganger i uka	6 til 7 ganger i uka
Bevegelighet og balanse (f. eks. yoga og pilates)	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>	(6) <input type="checkbox"/>
Utholdenhet og koordinasjon (f. eks. aerobic og zumba)	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>	(6) <input type="checkbox"/>
Styrke (f. eks. bodypump)	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>	(6) <input type="checkbox"/>
Utholdenhet (f. eks. spinning)	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>	(6) <input type="checkbox"/>
Sirkeltrening (f. eks. crossfit, bootcamp)	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>	(6) <input type="checkbox"/>

**41. Har du trent på egenhånd på treningssenter de siste 4 ukene?**

- (1)  Ja  
(2)  Nei

**42. Hvor ofte de siste 4 ukene har du trent på treningssenteret på egenhånd?**

	1 gang de siste 4 ukene	2 til 3 ganger de siste 4 ukene	1 gang i uka	2 til 3 ganger i uka	4 til 5 ganger i uka	6 til 7 ganger i uka
Styrketrening med vekter eller maskiner	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>	(6) <input type="checkbox"/>
Kondisjonsapparater (f eks. tredemølle, sykkel og ellipsemaskin)	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>	(6) <input type="checkbox"/>
Annet (f. eks. squash, svømming)	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>	(6) <input type="checkbox"/>

43/65

**43. Har du benyttet deg av personlig trener (PT) for å nå dine treningsmål de siste 4 ukene?**

- (1)  Ja  
(2)  Nei

**43a. Hvor mange PT-timer kjøpte du ved siste kjøp?**

\_\_\_\_\_

## 44. Hvor tilfreds er du med følgende forhold på ditt treningssenter?

	1 Meget misfornøyd	2 Misfornøyd	3 Nøytral	4 Fornøyd	5 Meget fornøyd	Vet ikke	Ønsker ikke svare
Introduksjon og veiledning	(5) <input type="checkbox"/>	(4) <input type="checkbox"/>	(3) <input type="checkbox"/>	(2) <input type="checkbox"/>	(1) <input type="checkbox"/>	(6) <input type="checkbox"/>	(7) <input type="checkbox"/>
Åpningstider	(5) <input type="checkbox"/>	(4) <input type="checkbox"/>	(3) <input type="checkbox"/>	(2) <input type="checkbox"/>	(1) <input type="checkbox"/>	(6) <input type="checkbox"/>	(7) <input type="checkbox"/>
Vedlikehold og renhold	(5) <input type="checkbox"/>	(4) <input type="checkbox"/>	(3) <input type="checkbox"/>	(2) <input type="checkbox"/>	(1) <input type="checkbox"/>	(6) <input type="checkbox"/>	(7) <input type="checkbox"/>
Pris på medlemskap	(5) <input type="checkbox"/>	(4) <input type="checkbox"/>	(3) <input type="checkbox"/>	(2) <input type="checkbox"/>	(1) <input type="checkbox"/>	(6) <input type="checkbox"/>	(7) <input type="checkbox"/>
Plass i forhold til antall medlemmer på treningssenteret	(5) <input type="checkbox"/>	(4) <input type="checkbox"/>	(3) <input type="checkbox"/>	(2) <input type="checkbox"/>	(1) <input type="checkbox"/>	(6) <input type="checkbox"/>	(7) <input type="checkbox"/>
Garderobes	(5) <input type="checkbox"/>	(4) <input type="checkbox"/>	(3) <input type="checkbox"/>	(2) <input type="checkbox"/>	(1) <input type="checkbox"/>	(6) <input type="checkbox"/>	(7) <input type="checkbox"/>
Parkeringsforhold	(5) <input type="checkbox"/>	(4) <input type="checkbox"/>	(3) <input type="checkbox"/>	(2) <input type="checkbox"/>	(1) <input type="checkbox"/>	(6) <input type="checkbox"/>	(7) <input type="checkbox"/>
Kvaliteten på utstyr (kondisjonsapparater, styrkeapparater, frivekter etc.)	(5) <input type="checkbox"/>	(4) <input type="checkbox"/>	(3) <input type="checkbox"/>	(2) <input type="checkbox"/>	(1) <input type="checkbox"/>	(6) <input type="checkbox"/>	(7) <input type="checkbox"/>
Gruppeninstruktører	(5) <input type="checkbox"/>	(4) <input type="checkbox"/>	(3) <input type="checkbox"/>	(2) <input type="checkbox"/>	(1) <input type="checkbox"/>	(6) <input type="checkbox"/>	(7) <input type="checkbox"/>
Kvaliteten på gruppetimer	(5) <input type="checkbox"/>	(4) <input type="checkbox"/>	(3) <input type="checkbox"/>	(2) <input type="checkbox"/>	(1) <input type="checkbox"/>	(6) <input type="checkbox"/>	(7) <input type="checkbox"/>
Senterets gruppetimeplan	(5) <input type="checkbox"/>	(4) <input type="checkbox"/>	(3) <input type="checkbox"/>	(2) <input type="checkbox"/>	(1) <input type="checkbox"/>	(6) <input type="checkbox"/>	(7) <input type="checkbox"/>
Personlig trenere	(5) <input type="checkbox"/>	(4) <input type="checkbox"/>	(3) <input type="checkbox"/>	(2) <input type="checkbox"/>	(1) <input type="checkbox"/>	(6) <input type="checkbox"/>	(7) <input type="checkbox"/>
Kvaliteten på Personlig trenere	(5) <input type="checkbox"/>	(4) <input type="checkbox"/>	(3) <input type="checkbox"/>	(2) <input type="checkbox"/>	(1) <input type="checkbox"/>	(6) <input type="checkbox"/>	(7) <input type="checkbox"/>
Servicenivå på senteret	(5) <input type="checkbox"/>	(4) <input type="checkbox"/>	(3) <input type="checkbox"/>	(2) <input type="checkbox"/>	(1) <input type="checkbox"/>	(6) <input type="checkbox"/>	(7) <input type="checkbox"/>
Stemning og atmosfære på senteret	(5) <input type="checkbox"/>	(4) <input type="checkbox"/>	(3) <input type="checkbox"/>	(2) <input type="checkbox"/>	(1) <input type="checkbox"/>	(6) <input type="checkbox"/>	(7) <input type="checkbox"/>

**45. Dersom du har barn, benytter du deg av treningssenterets barnepass/aktivitetstilbud?**

- (1)  Ja
- (2)  Nei
- (3)  Har ikke barn

**46a. Vet du hva bekkenbunnstrening er?**

- (1)  Ja
- (2)  Nei
- (3)  Vet ikke

**46b. Har du fått veiledning med hensyn til bekkenbunnstrening på treningssenteret?**

- (1)  Ja
- (2)  Nei

**47. Har du gjort bekkenbunnsøvelser på treningssenteret eller hjemme de siste 4 uker?**

- (1)  Ja
- (2)  Nei
- (3)  Vet ikke

**47a. Hvor mange ganger i uken? Skriv et tall for antall ganger.**

\_\_\_\_\_

Vi er også interessert i å vite om du trener **utenom** det du gjør på treningssenteret.

De neste spørsmålene omhandler derfor sport/trening på andre arenaer.

48. Har du trent **utenfor** treningssenteret **de siste 4 uker** (trening er det samme som fysisk aktivitet, men aktiviteten er planlagt og regelmessig, og inkluderer målsetting om å øke/vedlikeholde fysisk form, helse eller prestasjon)?

- (1)  Ja
- (2)  Nei

49. Hvor mange økter trente du i snitt utenfor treningssenteret de siste 4 uker?

- (2)  1 økt per uke
- (3)  2 økter per uke
- (4)  3 økter per uke
- (5)  4 økter per uke
- (6)  5 økter per uke
- (7)  6 økter per uke
- (8)  7 økter per uke
- (9)  Mer enn 7 økter per uke

50. Ved hvilken arena utenom treningssenter utøver du vanligvis trening/fysisk aktivitet (sett gjerne flere kryss)?

- (1)  Idrettshall
- (2)  Idrettslag
- (3)  Marka/landevei/parken
- (4)  Treningsrom på jobb
- (5)  Hjemme
- (6)  Annet

**51. Har du drevet med utholdenhetstrening utenom treningssenteret de siste 4 uker?**

- (1)  Ja
- (2)  Nei

**51a. Hvor mange timer og/eller minutter i uken?**

Timer \_\_\_\_\_

Minutter \_\_\_\_\_

**51b. Hvilken type aktivitet gjør du vanligvis?**

- (1)  Gå tur
- (2)  Løp/jogg
- (3)  Dans
- (4)  Roing
- (5)  Sykling
- (6)  Aerobic
- (7)  Svømming
- (8)  Langrenn
- (9)  Annet

**52. Har du drevet med styrketrening utenom treningssenteret de siste 4 uker?**

- (1)  Ja
- (2)  Nei

**52a. Hvor mange timer og/eller minutter i uken?**

Timer \_\_\_\_\_

Minutter \_\_\_\_\_

**52b. Dersom ja, hvilken type aktivitet gjør du vanligvis?**

- (1)  Løfte vekter/apparater
- (2)  Crossfit
- (3)  Styrke med egen kroppsvekt
- (4)  Annet

**53. Har du drevet med annen trening utenom treningssenteret de siste 4 uker?**

- (1)  Ja
- (2)  Nei

**53a. Hvor mange timer og/eller minutter i uken?**

Timer \_\_\_\_\_

Minutter \_\_\_\_\_

**53b. Hvilken type aktivitet gjør du vanligvis?**

- (1)  Lagidrett (ballsport)
- (2)  Yoga
- (3)  Turn
- (4)  Pilates
- (5)  Kampsport
- (6)  Annet



## Vurdering av egen fysisk kapasitet

54. Marker den mest anstrengende aktiviteten du tror du klarer å utføre i 30 minutter. Kan du i en halvtime eller mer...

- (1)  1 Sitte
- (2)  2
- (3)  3 Gå langsomt
- (4)  4
- (5)  5 Gå i normal takt/sykle langsomt
- (6)  6
- (7)  7
- (8)  8 Jogge/sykle
- (9)  9
- (10)  10 Løpe
- (11)  11
- (12)  12 Løpe fort/sykle fort
- (13)  13
- (14)  14
- (15)  15 Løpe veldig fort (mer enn 15 km/t)
- (16)  16
- (17)  17
- (18)  18 Utføre utholdenhetstrening på elitenivå (kvinner)
- (19)  19
- (20)  20 Utføre utholdenhetstrening på elitenivå (menn)

## 55. Motiver for fysisk aktivitet

Nå vil du se en rekke utsagn som folk ofte oppgir når de blir spurt om hvorfor de trener. Uansett om du trener regelmessig eller ikke, les hvert utsagn nøye og merk på skalaen det tallet som passer best for deg. På en skala fra 0-5, hvor 0 er ikke sant og 5 er helt sant, hvordan vil du si at hvert utsagn passer deg personlig?

Personlig, så trener jeg (eller kan trene).....

	0 Ikke sant	1	2	3	4	5 Helt sant	Ønsker ikke svare
For å holde meg slank/kontrollere kroppsvekt	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>	(6) <input type="checkbox"/>	(7) <input type="checkbox"/>
For å gå ned i vekt	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>	(6) <input type="checkbox"/>	(7) <input type="checkbox"/>
For å kunne se mer ungdommelig ut	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>	(6) <input type="checkbox"/>	(7) <input type="checkbox"/>
For å ha en fin kropp	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>	(6) <input type="checkbox"/>	(7) <input type="checkbox"/>
For å ha en sunn kropp	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>	(6) <input type="checkbox"/>	(7) <input type="checkbox"/>
For å forbedre utseende mitt/føle meg mer attraktiv	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>	(6) <input type="checkbox"/>	(7) <input type="checkbox"/>
For å føle meg mer sunn	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>	(6) <input type="checkbox"/>	(7) <input type="checkbox"/>
Fordi trening hjelper meg med å forbrenne kalorier	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>	(6) <input type="checkbox"/>	(7) <input type="checkbox"/>
For å unngå dårlig helse	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>	(6) <input type="checkbox"/>	(7) <input type="checkbox"/>
Fordi legen min råder meg til det	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>	(6) <input type="checkbox"/>	(7) <input type="checkbox"/>
For å forebygge helseproblemer/opprettholde god helse	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>	(6) <input type="checkbox"/>	(7) <input type="checkbox"/>
For å forebygge mot arvelige sykdommer i familien	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>	(6) <input type="checkbox"/>	(7) <input type="checkbox"/>

	0 Ikke sant	1	2	3	4	5 Helt sant	Ønsker ikke svare
For å unngå hjerte- karsykdommer	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>	(6) <input type="checkbox"/>	(7) <input type="checkbox"/>
For å rehabilitere etter en sykdom/skade	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>	(6) <input type="checkbox"/>	(7) <input type="checkbox"/>
Fordi det får meg til å føle meg bra	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>	(6) <input type="checkbox"/>	(7) <input type="checkbox"/>
For å få rom til å tenke	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>	(6) <input type="checkbox"/>	(7) <input type="checkbox"/>
For å ha mål å jobbe mot	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>	(6) <input type="checkbox"/>	(7) <input type="checkbox"/>
Fordi jeg synes trening er tilfredstillende/stimulerende	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>	(6) <input type="checkbox"/>	(7) <input type="checkbox"/>
Fordi det hjelper å redusere anspenhet	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>	(6) <input type="checkbox"/>	(7) <input type="checkbox"/>
For å gi meg personlige utfordringer	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>	(6) <input type="checkbox"/>	(7) <input type="checkbox"/>
For å lade batteriene mine	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>	(6) <input type="checkbox"/>	(7) <input type="checkbox"/>
For stresshåndtering	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>	(6) <input type="checkbox"/>	(7) <input type="checkbox"/>
For å utvikle personlige ferdigheter	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>	(6) <input type="checkbox"/>	(7) <input type="checkbox"/>
Fordi jeg føler meg på mitt beste når jeg trener	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>	(6) <input type="checkbox"/>	(7) <input type="checkbox"/>
For å bli verdsatt	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>	(6) <input type="checkbox"/>	(7) <input type="checkbox"/>
Fordi jeg liker følelsen av å bruke kroppen min	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>	(6) <input type="checkbox"/>	(7) <input type="checkbox"/>
For å tilbringe tid med venner og	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>	(6) <input type="checkbox"/>	(7) <input type="checkbox"/>

	0 Ikke sant	1	2	3	4	5 Helt sant	Ønsker ikke svare
jeg liker de sosiale sidene ved trening							
For di jeg liker å konkurrere	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>	(6) <input type="checkbox"/>	(7) <input type="checkbox"/>
For å få anerkjennelse for mine prestasjoner/gjøre ting andre ikke klarer	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>	(6) <input type="checkbox"/>	(7) <input type="checkbox"/>
For gleden ved å trene/være i aktivitet	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>	(6) <input type="checkbox"/>	(7) <input type="checkbox"/>
For å ha det gøy med andre på trening	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>	(6) <input type="checkbox"/>	(7) <input type="checkbox"/>
For å få nye venner	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>	(6) <input type="checkbox"/>	(7) <input type="checkbox"/>
For å bli sterkere/bygge muskulatur	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>	(6) <input type="checkbox"/>	(7) <input type="checkbox"/>
For å vedlikeholde/bli mer bevegelig	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>	(6) <input type="checkbox"/>	(7) <input type="checkbox"/>
For å bedre min utholdenhet	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>	(6) <input type="checkbox"/>	(7) <input type="checkbox"/>

## 56. Barrierer for fysisk aktivitet

Nå følger en rekke utsagn som folk ofte oppgir når de blir spurt om hvorfor de ikke trener. På en skala fra 0-3, hvor 0 er ikke relevant og 3 er veldig viktig, hvordan vil du si at hvert utsagn passer deg personlig?

	1 Ikke viktig	2 Ganske viktig	3 Veldig viktig	Ønsker ikke svare
Det er for dyrt for meg	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>
Jeg mangler et organisert tilbud og har ingen å være fysisk aktiv med	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>
Jeg mangler transport til og fra trening	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>
Jeg syns ikke det er av betydning for helsen min	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>
Helseutfordringer hindrer meg	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>
Jeg er plaget av svimmelhet	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>
Jeg er redd for skader	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>
Jeg liker ikke å være fysisk aktiv	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>
Jeg har verken tid eller energi	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>
Jeg tror ikke jeg vil få noe ut av det	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>
Jeg ser ikke på meg selv som en fysisk aktiv person	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>
Jeg vil heller slappe av og ta det med ro	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>
Jeg ønsker heller å gjøre andre ting	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>

	1 Ikke viktig	2 Ganske viktig	3 Veldig viktig	Ønsker ikke svare
Jeg tør ikke	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>
Jeg mangler kunnskap om hvordan jeg skal trene	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>
Jeg er redd for at andre ser på når jeg trener	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>
Jeg er redd for at jeg gjør øvelser feil	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>
Jeg anser meg selv som nok aktiv i hverdagen	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>

## 57. Sosial støtte

Uansett om du trener eller ikke, les, og gi et svar til hvert spørsmål/påstand nedenfor. Tenk i gjennom de siste 4 uker, hvor ofte har venner og/eller familie gjort det som er beskrevet?

Velg et nummer som passer.

	Aldri	Sjelden	Noen få ganger	Ofte	Veldig ofte	Ikke relevant	Ønsker ikke svare
Trent sammen med meg	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>	(6) <input type="checkbox"/>	(7) <input type="checkbox"/>
Oppfordret/motivert meg til å gjennomføre treningsprogrammet mitt	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>	(6) <input type="checkbox"/>	(7) <input type="checkbox"/>
Klaget eller kritisert over den tiden jeg bruker på trening	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>	(6) <input type="checkbox"/>	(7) <input type="checkbox"/>
Planlagt feller sport og trening på fritiden	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>	(6) <input type="checkbox"/>	(7) <input type="checkbox"/>
Lagt til rette for at jeg skal kunne få trent	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>	(6) <input type="checkbox"/>	(7) <input type="checkbox"/>
Spurt meg om tips om hvordan de kan trene	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>	(6) <input type="checkbox"/>	(7) <input type="checkbox"/>

58. Var det noen i din nære familie (mor, far eller søsken)) som drev med regelmessig fysisk aktivitet under din oppvekst (før du fylte 18 år)?

- (1)  Ja  
(2)  Nei

**59. Hvor vanlig er det å drive fysisk aktivitet i din nærmeste omgangskrets?**

- (1)  Ikke vanlig  
(2)  Forekommer  
(3)  Svært vanlig

**60. Livskvalitet**

Nå følger fem utsagn som du kan være både enig eller uenig i. På en skala fra 1-7, hvor 1 er sterkt uenig og 7 er sterkt enig, hvordan vil du si at hvert utsagn passer deg personlig?

	1 Sterkt uenig	2	3	4	5	6	7 Sterkt enig	Ønsker ikke svare
På de fleste måter er livet mitt nær mitt ideelle liv	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>	(6) <input type="checkbox"/>	(7) <input type="checkbox"/>	(8) <input type="checkbox"/>
Jeg lever livet mitt på en god måte	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>	(6) <input type="checkbox"/>	(7) <input type="checkbox"/>	(8) <input type="checkbox"/>
Jeg er fornøyd med livet	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>	(6) <input type="checkbox"/>	(7) <input type="checkbox"/>	(8) <input type="checkbox"/>
Så langt har jeg oppnådd de viktige tingene jeg ønsker i livet	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>	(6) <input type="checkbox"/>	(7) <input type="checkbox"/>	(8) <input type="checkbox"/>
Om jeg kunne levd livet mitt om igjen, ville jeg nesten ikke ha endret på noe	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>	(6) <input type="checkbox"/>	(7) <input type="checkbox"/>	(8) <input type="checkbox"/>



## 61. Selvtillit og trening

Om du trener eller ikke, på en skala fra 1-5, hvor 1 er "jeg vet jeg ikke kan" og 5 er "jeg vet jeg kan", hvor sikker er du på at du kunne motivert deg selv til å klare målsettingene nedenfor i minst seks måneder?

	1 Jeg vet jeg ikke kan	2	3	4	5 Jeg vet jeg kan	Ikke relevant	Ønsker ikke svare
Stå opp tidlig, til og med i helgene for å trene	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>	(6) <input type="checkbox"/>	(7) <input type="checkbox"/>
Gjennomføre et treningsprogram, også etter en lang og slitsom dag på jobb	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>	(6) <input type="checkbox"/>	(7) <input type="checkbox"/>
Trene selv om du føler deg deprimert	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>	(6) <input type="checkbox"/>	(7) <input type="checkbox"/>
Sette av tid til regelmessig trening; som f. eks turgåing, jogging, svømming, sykling eller andre aktiviteter i minst 30 minutter, 3 ganger i uken	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>	(6) <input type="checkbox"/>	(7) <input type="checkbox"/>
Fortsette å trene med andre, selv om de enten er i bedre eller dårligere form enn deg	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>	(6) <input type="checkbox"/>	(7) <input type="checkbox"/>
Gjennomføre et treningsprogram, også under omfattende endringer i livet (f. eks. skilsmisse dødsfall i familien, flytting m.m.)	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>	(6) <input type="checkbox"/>	(7) <input type="checkbox"/>
Bare delta på fest etter at du har trent	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>	(6) <input type="checkbox"/>	(7) <input type="checkbox"/>

	1 Jeg vet jeg ikke kan	2	3	4	5 Jeg vet jeg kan	Ikke relevant	Ønsker ikke svare
Gjennomføre et treningsprogram når familien krever mer tid fra deg	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>	(6) <input type="checkbox"/>	(7) <input type="checkbox"/>
Gjennomføre et treningsprogram selv om du har plikter i hjem og nærmiljø	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>	(6) <input type="checkbox"/>	(7) <input type="checkbox"/>
Gjennomføre et treningsprogram, selv når du har stor arbeidsbelastning på jobb	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>	(6) <input type="checkbox"/>	(7) <input type="checkbox"/>
Holde deg til treningsprogrammet når sosiale forpliktelser er svært tidkrevende	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>	(6) <input type="checkbox"/>	(7) <input type="checkbox"/>
Lese eller studere mindre for å trene mer	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>	(6) <input type="checkbox"/>	(7) <input type="checkbox"/>

## 62. Treningsvaner

Nå følger en rekke utsagn om holdning og atferd i forbindelse med trening. Tenk igjennom de siste 4 uker. På en skala fra 1-6, hvor 1 er aldri og 6 er alltid, hvor godt passer utsagnene deg personlig?

	1 Aldri	2	3	4	5	6 Alltid	Ønsker ikke svare
Jeg trener for å ikke bli irritabel	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>	(6) <input type="checkbox"/>	(7) <input type="checkbox"/>
Jeg trener for å ikke føle meg anspent	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>	(6) <input type="checkbox"/>	(7) <input type="checkbox"/>
Jeg trener for å ikke bli engstelig	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>	(6) <input type="checkbox"/>	(7) <input type="checkbox"/>
Jeg trener når jeg er skadet /har gjentatte fysiske problemer	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>	(6) <input type="checkbox"/>	(7) <input type="checkbox"/>
Jeg øker kontinuerlig treningsvolumet (varighet, hyppighet, intensitet) for å oppnå en ønsket effekt	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>	(6) <input type="checkbox"/>	(7) <input type="checkbox"/>
Jeg trener ofte lenger enn jeg hadde planlagt	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>	(6) <input type="checkbox"/>	(7) <input type="checkbox"/>
Jeg tenker på trening når jeg egentlig bør konsentrere meg om arbeid/skole	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>	(6) <input type="checkbox"/>	(7) <input type="checkbox"/>
Jeg bruker store deler av fritiden min på trening	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>	(6) <input type="checkbox"/>	(7) <input type="checkbox"/>
Jeg vil heller trene enn å være sammen med familie/venner	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>	(6) <input type="checkbox"/>	(7) <input type="checkbox"/>

### 63. Kroppsbilde og trening

Nedenfor er det en rekke utsagn som handler om kroppsbilde og utseende. På en skala fra 1-5, hvor 1 er veldig uenig og 5 er veldig enig, hvor godt passer utsagnene deg personlig?

	1 Veldig uenig	2	3	4	5 Veldig enig	Ønsker ikke svare
Kroppen min er seksuelt tiltrekkende	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>	(6) <input type="checkbox"/>
Jeg bekymrer meg alltid om å være eller bli tykk	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>	(6) <input type="checkbox"/>
Jeg liker utseende mitt akkurat slik det er	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>	(6) <input type="checkbox"/>
Jeg ser meg selv i speilet så ofte jeg kan	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>	(6) <input type="checkbox"/>
Jeg er veldig bevisst på selv små vektendringer	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>	(6) <input type="checkbox"/>
De fleste vil si at jeg er pen	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>	(6) <input type="checkbox"/>
Det er viktig at jeg alltid ser bra ut	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>	(6) <input type="checkbox"/>
Jeg liker hvordan jeg ser ut naken	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>	(6) <input type="checkbox"/>
Jeg liker måten klærne mine sitter på kroppen min	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>	(6) <input type="checkbox"/>
Jeg bryr meg ikke om hva folk tenker om utseende mitt	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>	(6) <input type="checkbox"/>
Jeg misliker kroppen min	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>	(6) <input type="checkbox"/>
Jeg tenker aldri over utseendet mitt	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>	(6) <input type="checkbox"/>

	1 Veldig uenig	2	3	4	5 Veldig enig	Ønsker ikke svare
Jeg prøver alltid å forbedre mitt fysiske ytre	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>	(6) <input type="checkbox"/>

### Jeg har prøvd å gå ned i vekt ved å faste eller ved lavkalori-diett

- (1)  Aldri
- (2)  Sjelden
- (3)  Noen ganger
- (4)  Ofte
- (5)  Veldig ofte
- (6)  Ønsker ikke svare

### Jeg syns jeg er...

- (1)  Undervektig
- (3)  Normalvektig
- (4)  Overvektig
- (5)  Fet
- (6)  Ønsker ikke svare

På en skala fra 1-5, hvor 1 er veldig misfornøyd og 5 er veldig fornøyd, hvor misfornøyd eller fornøyd er du med følgende kroppsdel(er)?

	1 Veldig misfornøyd	2	3	4	5 Veldig fornøyd	Ønsker ikke svare
Rumpe, hofter, lår og legger	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>	(6) <input type="checkbox"/>
Midje, mage	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>	(6) <input type="checkbox"/>
Brystet eller brystene, skuldre, armer	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>	(6) <input type="checkbox"/>
Muskulatur	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>	(6) <input type="checkbox"/>
Kroppsvekt	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>	(6) <input type="checkbox"/>
Helhetsinntrykket	(1) <input type="checkbox"/>	(2) <input type="checkbox"/>	(3) <input type="checkbox"/>	(4) <input type="checkbox"/>	(5) <input type="checkbox"/>	(6) <input type="checkbox"/>

### Informasjonskilder

64. Har du fått og/eller innhentet informasjon/råd om fysisk aktivitet fra noen av følgende informasjonskilder de siste 4 ukene (sett gjerne flere kryss)?

- (1)  Blogger/internettforum
- (2)  Magasiner/ukeblader
- (3)  Faglitteratur/brosjyrer
- (4)  Venner/familie
- (5)  Lege og annet helsepersonell
- (6)  Personlig trener
- (7)  Annet
- (8)  Jeg har ikke fått eller innhentet informasjon om fysisk aktivitet

65. Hvilke av alternativene har hatt størst betydning for din motivasjon for å drive fysisk aktivitet?

- (1)  Blogger/internettforum
- (2)  Magasiner/ukeblader
- (3)  Faglitteratur/brosjyrer
- (4)  Venner/familie
- (5)  Lege og annet helsepersonell
- (6)  Personlig trener
- (7)  Annet

**Hvor lang tid brukte du på spørreskjemaet?**

\_\_\_\_\_

**Har du kommentarer til spørreskjemaet er du velkommen til å skrive de her:**

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**Takk for din deltakelse!**

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Norges idrettshøgskole, Seksjon for idrettsmedisinske fag.

Prosjektleder Lene Haakstad.

Alle rettigheter reservert.