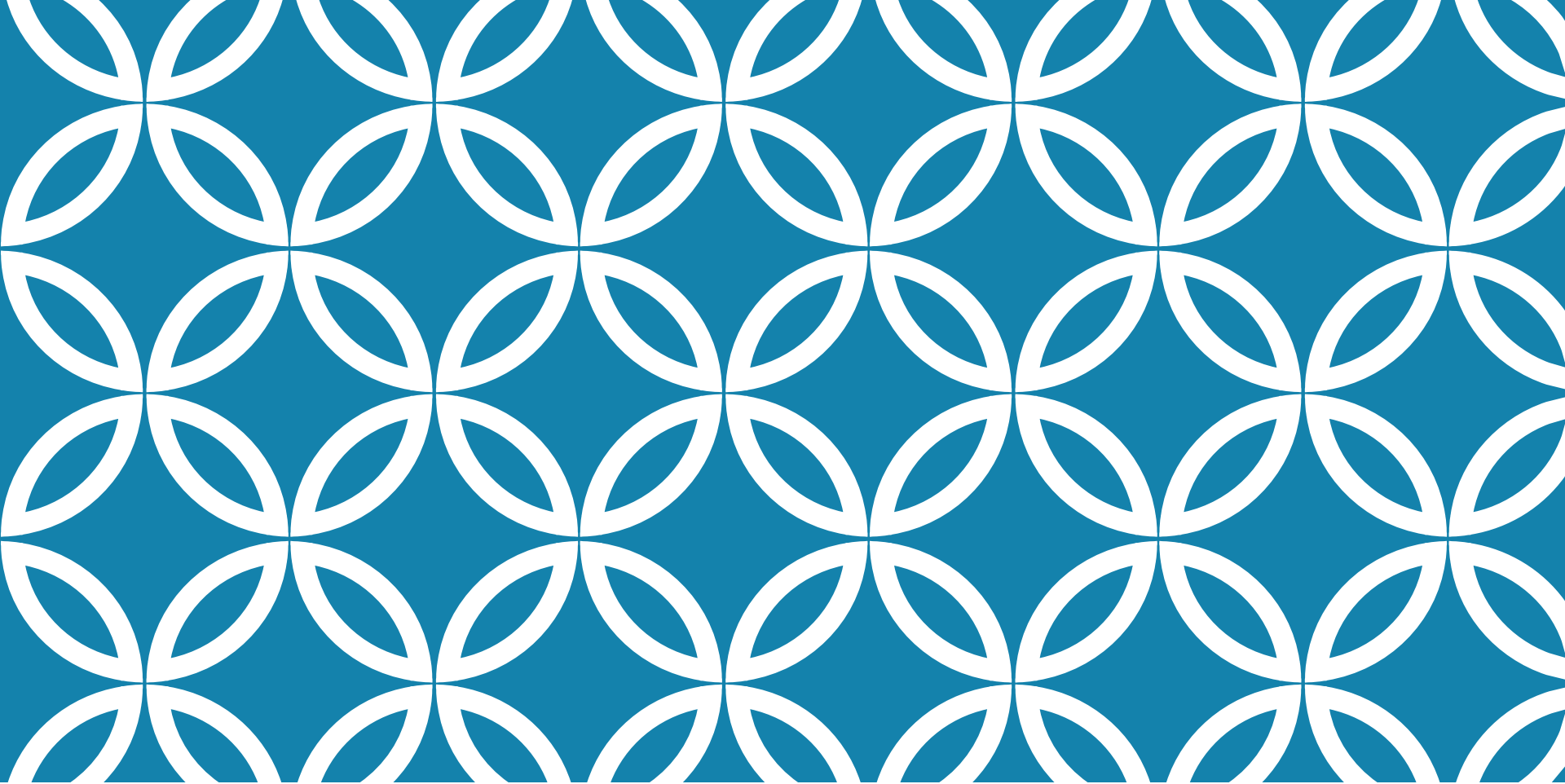




BEING ACTIVE — NEGATIVE EFFECTS

The Psychology of Exercise
and Physical Activity

Week 5

BMHN5003

RE-CAP... LEADING ON FROM SPA COVERED LAST YEAR

BODY DISSATISFACTION — WHAT CAN INFLUENCE THIS IN AN EXERCISE SETTING?

- Where the individual exercises
- The individual's motives to exercise
- The type of exercise the individual participates in
- The characteristics of the exercise leader and the exercise class
- Whether exercise is central to the individual's lifestyle or occupation

WHERE THE INDIVIDUAL EXERCISES

Location and type of exercise:

Prichard and Tiggemann (2008). Questionnaires to assess exercise variables in women aged 18-71 years.

Exercise motives, type of exercise, location most often exercised in.

The more time spent exercising in a fitness centre compared to other environments = lower body esteem.

Type of exercise was also linked to body esteem.

The more CV activities (e.g. treadmill) = lower levels of body esteem.

Why? What do you think the explanations for this could be?

SUGGESTIONS TO EXPLAIN FINDINGS...

1. number of mirrors
2. emphasis placed on weight loss at fitness centres
3. presence of more fit / toned individuals – other exercisers and instructors
4. CV based activities – associated with weight and appearance related motives

What is the relationship?

Does the environment cause the increase in Body Dissatisfaction (BD)

- OR...

Does increased BD leads women to exercise in a fitness centre?

THE INDIVIDUAL'S MOTIVES TO EXERCISE

Exercising to control weight or improve body tone was associated with lower levels of body satisfaction (Tiggeman and Williamson, 2000).

WC motives stronger in women than men.

Strelan and Hargreaves (2005) examined the role of self-objectification (focus on external appearance and evaluation by others).

Sample of women aged 16-25 years – those scoring high on self objectification more dissatisfied with their bodies if reported weight / appearance related motives for exercising.

Impact of exercising for purely body-related reasons...

Heightens the negative influence that self-objectification has on body esteem.

THE CHARACTERISTICS OF THE EXERCISE LEADER AND THE EXERCISE CLASS

What do we know in relation to the role of the exercise leader?

Clothing / attitude / social environment?

Ginis et al. (2008) – women exercised to one of two 30 minute exercise videos.

The first – instructor with lean and toned physique – wearing tight fitting clothing emphasising physique

The second - instructor with lean and toned physique – wearing baggy clothing hiding physique

What do you suggest was the outcome in terms of body dissatisfaction?

Participants – showed greater body dissatisfaction after the first video!

WHETHER EXERCISE IS CENTRAL TO THE INDIVIDUAL'S LIFESTYLE OR OCCUPATION

Being an exercise leader may lead to body dissatisfaction...

Aerobic instructors who were motivated to exercise due to internal pressure to develop 'ideal' body type – more likely to have higher levels of BD (Thogersen-Ntoumani and Ntoumanis, 2007).

Yager and O'Dea (2009) researched trainee teachers (health and PE teachers / other subjects) and found higher BD in those training to teach health and PE!

What are the practical implications of this?

WEIGHT OF EVIDENCE OF THE POSITIVE EFFECTS OF EXERCISE...

Studies...

We will discuss some of this research during Thursday's online session.

NEGATIVE EFFECT AND EXERCISE

We know that exercise offers a number of psychological, social and physical benefits...

There is evidence that exercise can cause negative effect.

Why are more people not active? Why have we come to the simplistic conclusion that exercise makes us feel better?

According to Backhouse et al. (2007), several reasons exist:

- Tendency to ignore findings that conflict with positive conclusions
- Participants are generally healthy college students
- Measured affect before and after – rather than during.
- Grouped responses – average of responses. $\frac{1}{2}$ positive / $\frac{1}{2}$ negative effect cancel each other out. What about individual responses.

SUGGESTED THAT A GENERAL RESPONSE TO EXERCISE DOES NOT EXIST!

Instead it is an interaction between:

Exercise factors – Intensity / Mode

Person factors – Fitness / Training Status / Self-efficacy / Personality

Environmental factors – Leadership Style / Mirrored Environments

EXERCISE FACTORS – INTENSITY / MODE

Intensity...

Rose and Parfitt (2007) / kilpatrick et al. (2007) found positive affect significantly lower at high compared to low intensities.

Less positive affect during hard short bout of exercise as opposed to longer moderate intensity bout.

Decrease not maintained afterwards...Why?

Inter-individual variability of responses.

Unique affective experience – lost in group data?

MODE

Choose a preferred activity.

Parfitt and Gledhill (2004) – greater psychological distress when low active adults performed their non preferred mode of exercise.

Daley and Maynard (2003) – active males – greater negative affect during and after exercise which they had not chosen to do compared with when had choice.

Also greater increase in negative affect following non preferred exercise compared to watching TV.

Physical benefits – non preferred exercise

For increased feeling state – better off watching TV.

PERSON FACTORS — FITNESS / TRAINING STATUS / SELF-EFFICACY

Fitness / Training Status

Backhouse et al. (2007) – less fit / untrained report more negative affect to exercise than trained.

Intensity – light / mod / hard – trained much more positive affect in relation to pre- exercise level than untrained.

Blanchard (2001) – similar results for a cycle ergometer session with unfit and highly fit females.

Moderate intensity exercise fine – high intensity exercise caused negative affect for unfit females.

Q. What are the practical implications so far?

SELF EFFICACY

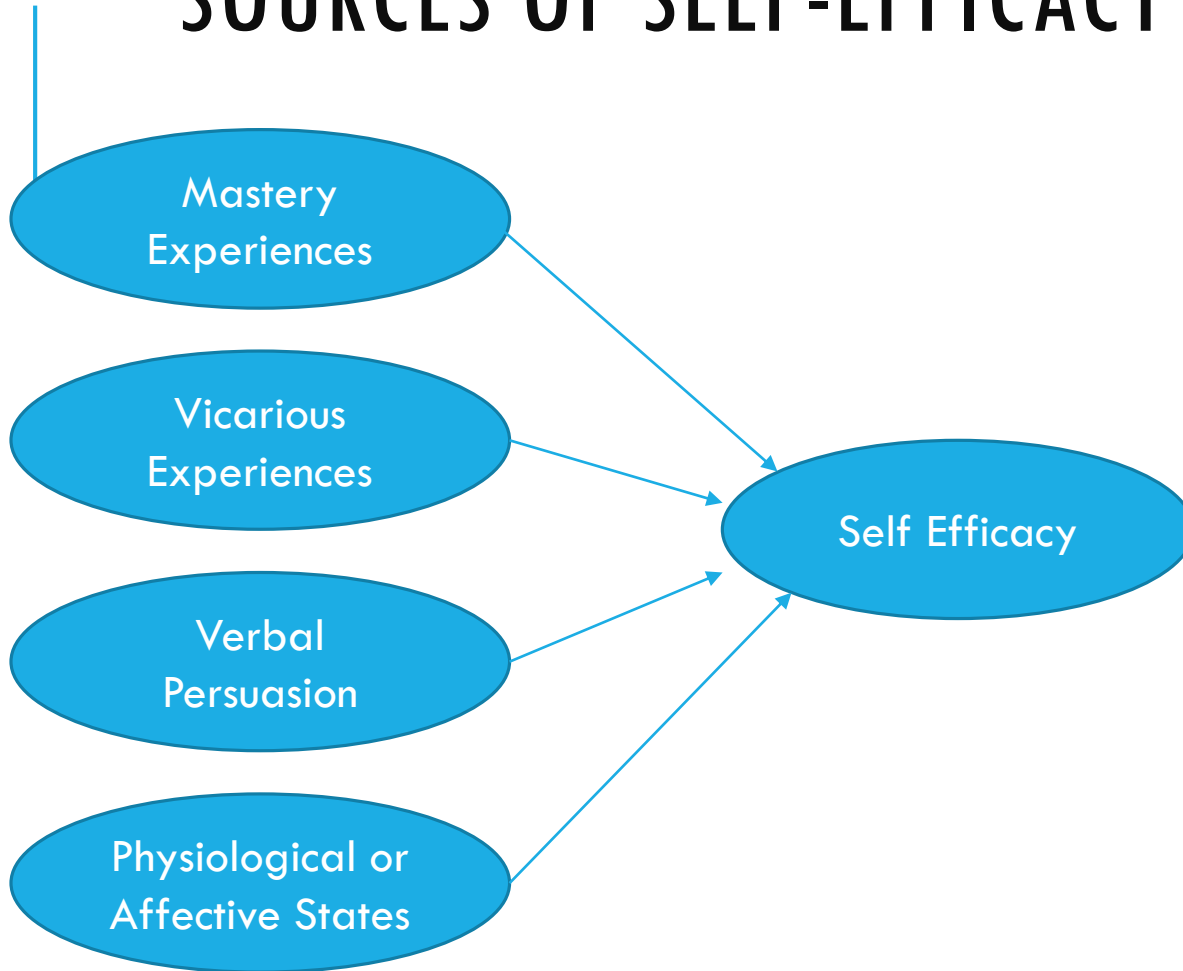
Manipulated low self efficacy (told performance poor) = higher levels of distress and fatigue following information and additional stepping task (Mc Auley et al. 1999).

Robbins et al. (2004) – adolescents with low self efficacy (not manipulated) associated with feeling worse during exercise.

Effects of maturation – early stages of puberty felt worse than those at the later stages.

Practical implications of self efficacy?

SOURCES OF SELF-EFFICACY



ENVIRONMENTAL FACTORS — LEADERSHIP STYLE / MIRRORED ENVIRONMENTS

What was identified about this earlier on?

Increased levels of perceived physical exhaustion when cycling with others in front of a mirror / rather than alone.

Social comparisons — perception of evaluation

Practical implications — increase SE (how?) / choice of environment — avoid mirrored.

TASK: EXERCISE DEPENDENCE

Article 1 (Moodle): Primary and Secondary Exercise Dependence in a Community-Based Sample of Road Race Runners

1. What is exercise dependence and what are the differences between primary and secondary exercise dependence? p.464
2. What does the 'Exercise Dependence Scale' measure? p.465

Hausenblas & Symons Downs, 2002

What are the potential problems of a combination of body image disturbance and exercise dependence?

- For men
- For women

WHAT ARE THE DIAGNOSTIC CRITERIA FOR EXERCISE DEPENDENCE...ARTICLE 2.

What are the Diagnostic criteria for exercise dependence?

When does this become a problem?

Table 1 Proposed diagnostic criteria for primary and secondary exercise dependence^{4,8}

Primary exercise dependence

1. Preoccupation with exercise which has become stereotyped and routine
2. Significant withdrawal symptoms in the absence of exercise (e.g. mood swings, irritability, insomnia)
3. The preoccupation causes clinically significant distress or impairment in their physical, social, occupational, or other important areas of functioning
4. The preoccupation with exercise is not better accounted for by another mental disorder (e.g. as a means of losing weight or controlling calorie intake as in an eating disorder)

Secondary exercise dependence

1. Narrowing of repertoire leading to stereotyped pattern of exercise with a regular schedule once or more daily
2. Salience with the individual giving increasing priority over other activities to maintaining the pattern of exercise
3. Increased tolerance to the amount of exercise performed over the years
4. Withdrawal symptoms related to disorder of mood after cessation of exercise schedule
5. Relief or avoidance of withdrawal symptoms by further exercise
6. Subjective awareness of a compulsion to exercise
7. Rapid reinstatement of the previous pattern of exercise and withdrawal symptoms after a period of abstinence

Associated features

1. Either the individual continues to exercise despite a serious physical disorder known to be caused, aggravated, or prolonged by exercise and is advised as such by a health professional, or the individual has arguments or difficulties with his/her partner, family, friends, or occupation
2. Self inflicted loss of weight by dieting as a means towards improving performance

ARTICLE 3.

READ THE 'IT'S EXERCISE OR NOTHING': A QUALITATIVE ANALYSIS OF EXERCISE DEPENDENCE ARTICLE.

1. WHAT ARE THE DIFFERENCES BETWEEN THE ATTITUDE TO EXERCISE OF THE CONTROL GROUP IN COMPARISON TO THE OTHER GROUPS?

Discussion of Method – Motivation and Barriers
coursework.

Questions to Answer (Article 3).

1. Read the introduction to the article. What is the aim of the study? Why has 'exercise addiction' been deemed worthy of investigation (rationale for the study)? p.423-424
2. What are the reasons given (rationale) for using interviews (qualitative approach) as a method for the study? p.424
3. Read through the method section and make note of anything that is relevant to your interview coursework. p.424-425.
4. What did the authors identify as the limitations and future research directions of the study? p.429-430.

COURSEWORK (ESSAY) DISCUSSION...

Any issues / questions etc?