



Yang, X., Jago, R., Zhai, Y., Yang, Z. Y., Wang, Y. Y., Si, X., Wang, J., Gao, J. F., Chen, J. R., Yu, Y. J., & Zhao, W. H. (2019). Validity and Reliability of Chinese Physical Activity Questionnaire for Children Aged 10-17 Years. *Biomedical and Environmental Sciences*, 32(9), 647-658. <https://doi.org/10.3967/bes2019.084>

Peer reviewed version

License (if available):  
CC BY-NC-ND

Link to published version (if available):  
[10.3967/bes2019.084](https://doi.org/10.3967/bes2019.084)

[Link to publication record in Explore Bristol Research](#)  
PDF-document

This is the author accepted manuscript (AAM). The final published version (version of record) is available online via Elsevier at <http://www.besjournal.com/en/article/doi/10.3967/bes2019.084> . Please refer to any applicable terms of use of the publisher.

## University of Bristol - Explore Bristol Research

### General rights

This document is made available in accordance with publisher policies. Please cite only the published version using the reference above. Full terms of use are available:  
<http://www.bristol.ac.uk/red/research-policy/pure/user-guides/ebr-terms/>

## Validity and Reliability of Chinese Physical Activity Questionnaire for Children aged 10-17 years\*

YANG Xi<sup>1,2</sup>, JAGO Russell<sup>3</sup>, ZHAI Yi<sup>4</sup>, YANG Zhenyu<sup>1</sup>, WANG Yuying<sup>2</sup>, SI Xiang<sup>2</sup>, WANG Jun<sup>5</sup>,  
GAO Jianfen<sup>6</sup>, CHEN Jingron<sup>7</sup>, YU Yingjie<sup>8</sup>, and ZHAO Wenhua<sup>1#</sup>

1. National Institute for Nutrition and Health, Chinese Center for Disease Control and Prevention, Beijing, 100050, China; 2. Chinese Center for Disease Control and Prevention, Beijing, 102206, China; 3. Center for Exercise, Nutrition and Health Sciences, School for Policy Studies, University of Bristol, Bristol, BS8 1TZ, UK; 4. Beijing Tian Tan Hospital, Capital Medical University, Beijing, 100050, China; 5. Wanzhou Center for Disease Control and Prevention, Wanzhou, 404000, Chongqing, China; 6. Yanqing Center for Disease Control and Prevention, Yanqing, 102100, Beijing, China; 7. Chongqing Center for Disease Control and Prevention, Chongqing, 400042, China; 8. Beijing Center for Disease Prevention and Control, Beijing, 100013, China

### Abstract

**Objective** This study is aimed to report the development, the reliability and validity of the Chinese Children Physical Activity Questionnaire (CCPAQ) which was designed to assess physical activity pattern in young population.

**Methods** The CCPAQ was administered two times in 119 children (mean age years 13.1,  $s$  2.4; boys 47%) to examine reliability by using intraclass correlation coefficients. Validity was determined in 106 participants by agreement with the CCPAQ measures and the objective method, the ActiGraph accelerometer. Data on physical activity pattern including time spent in different intensities and total physical activity, sedentary behavior as well as physical activity energy expenditure were used to assess the validity with Spearman's correlation coefficient and the Bland-Altman plots.

**Results** The reliability of the CCPAQ ranged from 0.63-0.93 (Intraclass correlation coefficient). Spearman's correlation coefficient for validity of time spent in total physical activity and sedentary behavior both were 0.32 ( $P < 0.001$ ), and for physical activity energy expenditure was 0.58 ( $P < 0.001$ ). Time spent in moderate-to-vigorous physical activity and light physical activity showed a relatively low correlation with the accelerometer ( $\rho = 0.20$ ,  $P = 0.040$ ;  $\rho = 0.19$ ,  $P = 0.054$ ).

**Conclusions** The CCPAQ appears promising as a feasible methodology to assess physical activity pattern in Chinese children.

**Keywords:** Physical activity; Sedentary behavior; Child; Questionnaire; Validity and reliability

---

\* This work was funded by National Scientific and Technological Basic Resources Investigation Program "Research and application of nutrition and health system for children aged 0-18 years in China" (2017FY101100).

#Corresponding author: Prof. ZHAO Wen Hua, PhD, Tel: 86-10-66237006, E-mail: zhaowh@chinacdc.cn  
Biographical note of the first author: YANG Xi, female, born in 1989, PhD candidate, majoring in epidemiology, health statistics and disease prevention and control.

## INTRODCUTION

Physical activity is important for physical, psychological and cognitive health in children<sup>[1]</sup>. Systematic reviews reinforce global public health concerns that physical inactivity and sedentary behavior are associated with adiposity, cardiovascular disease, cognitive decline and social behavioral problems <sup>[2, 3]</sup>. Recent findings suggested that there are likely to be synergistic health benefits by obtaining optimal combinations of movement behaviors (e.g. high physical activity, low sedentary behavior and high sleep) <sup>[4, 5]</sup>. With more than 316 million children and adolescent classified as overweight or obese globally<sup>[6]</sup>, strategies for increasing daily physical activity and minimizing time spent sedentary, and promote positive lifestyle behaviors that will track into adulthood, is a public health priority.

Physical activity pattern is a multi-dimensional construct and represents the combined effects of the frequency, intensity, time, type and context of physical activity and sedentary behavior. Recent literature suggests that the description of physical activity should be reframed as a pattern comprising multiple domains, dimensions, or correlates<sup>[7]</sup>. For children, the nature of physical behaviors (such as short and intermittent bouts of activities), the characteristics of patterns (such as various types of activities) and their cognitive capacity (such as difficulty in performing detail) make it challenging to measure physical activity pattern<sup>[8]</sup>.

Accurate physical activity surveillance measures are essential for public health research, policy and practice<sup>[9]</sup>. Technological developments have produced a variety of devices such as pedometers, multi-sensors, and smart watches that assess human physical activity effectively<sup>[10]</sup>. However, they provide less information on the type of activity behaviors or where and in what context the physical activity was performed, which is critical for understanding the underlying modifiable factors promoting behaviors. In addition, self-report methods might be more feasible to estimate physical activity level in large surveys due to their cost effective and easy distribution. Questionnaires are important in assessing the mode and domain of physical activity that are not available to be measured objectively, and make physical activity pattern assessment possible <sup>[11, 12]</sup>. In order to maximize utility questionnaires need to fit the needs of the country in which they are based.

Numerous physical activity questionnaires have been developed especially for Caucasian youth, with variation in measurement protocol, physical activity dimensions assessed, recall period and other aspects<sup>[13]</sup>. A paucity of studies applied the commonly used physical activity questionnaires into the Chinses counterparts and found that the translation of available questionnaires performed less well in Chinese youth<sup>[14, 15]</sup>. It is noticeable, reliable and validated physical activity questionnaire for use in Chinese young population are limited<sup>[16]</sup>. This is a major omission from the literature as China is currently under-going an extensive economic development and rapid urbanization. As such, there is a growing need to develop a new questionnaire for Chinese children in assessing physical activity patterns across a whole day, providing the basis for children's 24-hour movement measurement and its related health effect research. Understanding how it changes as a result of development is a research gap that urgently needs to be addressed.

The Chinese Children Physical Activity Questionnaire (CCPAQ) was designed to address the full complements of physical activity pattern across 24-hour period and provide the estimation of physical activity energy expenditure in Chinese children. The aims of the current study were to report on the development of the CCPAQ and to evaluate its validity as well as the test-re-test reliability in children aged 10-17 years.

## METHODS

#### 45 **Physical activity questionnaire**

46 The CCPAQ was developed in five stages: 1) review of the literature to identify key elements of self-  
47 report measures; 2) assessment of reliability and validity study of the existing questionnaires; 3)  
48 designing the questionnaire format, content and flow; 4) consulting epidemiology, physical activity and  
49 other related fields experts and then revising the questionnaire; and 5) pilot testing.

50 The CCPAQ is a 7-day recall physical activity questionnaire for children and collects information on  
51 physical activity pattern comprising of 23 questions (see “CCPAQ Guide” in *Additional file 1*). It uses a  
52 time-based structure which has been used in other surveys such as the PAQ-C (Physical Activity for Older  
53 Children)<sup>[17]</sup> and a checklist of responses that is comparable to the SAPAC (Self-Administered Physical  
54 Activity Checklist)<sup>[18]</sup>. In CCPAQ activities are recalled sequentially across an entire day in the past week  
55 dividing into the weekday and the weekend. The codes table of children’s physical activity types was  
56 made based on Chinese children’s activity, which is a list of 32 activity codes in 3 categories. Physical  
57 activity pattern was evaluated by asking the students to select the kind of activities from the codes table,  
58 report the intensity of the physical activity according to the revised Rate of Perceived Exertion Scale for  
59 Exercise<sup>[19]</sup>, and to best approximate the frequency and the amount of time spent in that activity last  
60 week. The energy expenditure of each activity was then estimated based on the latest Youth  
61 Compendium of Physical Activity (Activity Codes and Metabolic Intensity, 2017)<sup>[20]</sup>. Finally, the number  
62 of days per week that the students engaged in moderate-to-vigorous physical activity (MVPA)  
63 accumulated for at least 60 minutes a day was asked. The CCPAQ takes on average 12-15 minutes to  
64 complete.

#### 65 **Accelerometer data management**

66 Physical activity was assessed using ActiGraph wGT3X-BT accelerometer (ActiGraph, LLC, Pensacola,  
67 Florida, USA) as the criterion method on the basis of its established reliability and accuracy<sup>[21]</sup>. For this  
68 study, the accelerometer was set to record data at a sampling rate of 30 Hertz. ActiGraph files were  
69 downloaded and then transformed into 10s epoch files in the commercial software (Acti life 13.3), using  
70 standard procedures for identifying non-wear time periods and interpolating gaps with missing data.  
71 The sleeping time of each individual was marked as non-wear time. The minimum wear-time for  
72 inclusion in the analysis was at least 8 hours per day for a minimum of 5 days (including at least 3  
73 weekdays and 1 weekend). The reason is that 4-5 days and 8 hours daily of monitoring have been shown  
74 to achieve reliable activity data in a week<sup>[22]</sup>.

75 The intensity of physical activity was defined using the cut points derived by Vanhelst et al.(2011)<sup>[23]</sup>,  
76 with sedentary behavior below 400 counts/min, light physical activity (LPA) between 401 and 1900  
77 counts/min, moderate physical activity (MPA) between 1901 and 3918 counts/min, vigorous physical  
78 activity (VPA) greater than 3919 counts/min. The Vanhelst et al. threshold were chosen for this study as  
79 it has been shown have good classification accuracy in Chinese children<sup>[24]</sup>. In addition, accelerometer-  
80 measured energy expenditure was calculated using the equation of Freedson VM3 Combination  
81 (2011)<sup>[25]</sup>.

#### 82 **Sample and participants**

83 In the spring and summer of 2018, 20 children in each grades 4, 7, 10 from schools (one elementary  
84 school and one middle school) in two districts were recruited by the Center for Disease Control and  
85 Prevention in China. The two districts are Yanqing District, Beijing city (the north of China) and Wanzhou  
86 District, Chongqing city (the south of China). The children were excluded from this study if they were  
87 taking medications or had medical illness affecting growth, injured or had other conditions limiting  
88 participation in physical activity, or had problems reducing adherence to the study protocol.

89 Participants were recruited through a brief presentation and instruction given during a parents  
90 meeting. The parents of all interested individuals received written and oral information. Written  
91 informed parental consent was obtained for all participants. The content and procedures of this study  
92 were designed according to the Helsinki Declaration and approved by National Institute of Nutrition and  
93 Health, Chinese Center for Disease Control and Prevention (Ethic committee approval code: 2013-018).

#### 94 **Study design**

95 Participants' involvement was over 10 days as shown in Figure 1. Participants were asked to wear  
96 an ActiGraph accelerometer for 7 consecutive days during May in 2018. The participants received the  
97 accelerometer at the first visit and were required to engage in their normal activities. Participants were  
98 instructed to wear the accelerometer on the right side of the body at hip level. The wear time of the  
99 accelerometer was 24 hours (h) for 7 days. During the monitoring time period, investigators contacted  
100 the participants' parents by phone to remind of wearing and checking on compliance with the  
101 accelerometer, and to answer any questions about the study. Participants were advised to only remove  
102 the monitor for swimming or bathing and to keep a log in which they recorded non-wear time and  
103 reasons for removal. At the end of the 7-day monitoring period, the participants returned the  
104 accelerometer to school. In the meantime, the first-time CCPAQ questionnaire (CCPAQ 1) was  
105 administrated in the form of face-to-face interview by trained observers during a class. A day later, the  
106 participants were asked to complete the CCPAQ questionnaire (CCPAQ 2) again at school with data  
107 collected by the same interviewers. Anthropometric measures including height and weight using an  
108 electronic stadiometer (Hochoice, EF07) were collected from all participants. The COSMIN (COnsensus-  
109 based Standards for the selection of health status Measurement INstruments) Checklist was adopted  
110 as a guidance for the design of CCPAQ and the implementation of this study<sup>[26]</sup>.

#### 111 **Statistical analysis**

112 Descriptive analyses included calculating the median and standard deviation, quartiles or  
113 percentages for all variables. Univariate ANOVA procedures or  $\chi^2$  test were used to examine differences  
114 in the characteristic of the sample. The physical activity variables for the evaluation of reliability and  
115 validity of the CCPAQ were total time spent in physical activity, in sedentary behavior, and in two  
116 intensities levels namely MVPA and LPA, as well as physical activity energy expenditure. Statistical  
117 analyses were performed in SAS 9.4 (SAS Institute Inc., Cary, NC, USA).

118 **Reliability Analyses** To examine reliability, the single measure, parametric interclass  
119 correlation coefficients (ICC) with 95% confidence intervals (CI) were calculated to evaluate the extent  
120 of agreement of CCPAQ in the test-retest analysis. A priori we assumed than an  $ICC \geq 0.70$  would be  
121 indicative of acceptable reliability<sup>[27]</sup>.

122 **Validity Analyses** Validity concerns two types of measurement properties in this study:  
123 content validity and construct validity. The content validity of the CCPAQ was assessed by consulting  
124 experts in the field of sports, nutrition and related areas. For construct validity, non-parametric  
125 Spearman's rank correlation coefficient ( $\rho$ ) was used to examine the correlations between minutes  
126 per day in each intensity level and physical activity energy expenditure as kilocalorie per day from the  
127 CCPAQ data and similar data from the accelerometer. The answers from CCPAQ 1 were used in the  
128 validity analyses. Based on the COSMIN checklist,  $\rho \geq 0.50$  is considered validity acceptable. The Bland  
129 and Altman method was used to provide an indication of the heteroscedasticity and the systematic  
130 random error of the data with 95% limits of agreement (mean difference  $\pm 1.96$  standard deviation)  
131 between the CCPAQ and the accelerometer. The variables used for the Bland and Altman analysis were  
132 physical activity energy expenditure, time spent in total physical activity, MVPA and sedentary behavior.

133 **Sensitivity Analyses** We recognize that there is debate within the field of accelerometer-  
134 measured physical activity on which intensity threshold to use<sup>[28]</sup>. To test the robustness of different  
135 cut-points of physical activity intensity for validity study, we made a number of sensitivity analyses  
136 repeating the main analyses based on other 3 different intensity thresholds (Evenson et al. cut-off<sup>[29]</sup>,  
137 Puyan et al cut-off<sup>[30]</sup>, Freedson et al cut-off<sup>[31]</sup>). The Evenson et al. (2008) cut-off has been widely used  
138 in Western country. Puyan et al cut-off (2002) is one of the highest intensity thresholds of physical  
139 activity, while Freedson et al (1998) has a low intensity threshold for MVPA. As these three thresholds  
140 were conducted with Western samples it is unclear whether they would be applicable for Chinese  
141 children.

## 142 RESULTS

### 143 **Characteristics**

144 120 participants were enrolled in the study. The final dataset included 119 participants (99% of  
145 sample) for the reliability analysis, 106 participants (88% of sample) for analysis of criterion validity (see  
146 “Flow diagram” in *Additional file 2*). Characteristics of the sample in reliability study and validity study  
147 stratified by sex are shown in Table 1. Boys spent more time in MVPA per day and more physical activity  
148 energy expenditure than girls. Physical activity energy expenditure and daily time spent in total physical  
149 activity, MVPA and sedentary behaviors were greater on weekday than on weekend (see *Additional file*  
150 *3*).

### 151 **Reliability**

152 Reliability for time spent in total physical activity, MVPA, sedentary behavior and sleeping time  
153 ranged from 0.7 to 0.9, while a little lower for LPA and screen time (0.4 to 0.7) (Table 2). Overall,  
154 reliability was higher for physical behavior variables on weekday than on weekend. Similarly,  
155 reproducibility seemed to be higher for variables on boys than girls. The reliability for types of physical  
156 activity ranged from 0.57 to 0.88 (Table 3).

### 157 **Validity**

158 **Content Validity** The CCPAQ exhibits content validity as it provides information on the natural  
159 and intuitive of physical activity pattern, especially different intensity and types of physical activities as  
160 well as sedentary behaviors and sleep time across a whole day in the past week. Furthermore, the  
161 CCPAQ is capable of investigating other subset of activity, such as screen-based activities, activities in  
162 the school, out of school, households and during transportation.

163 **Criterion Validity** Physical activity energy expenditure displayed moderate validity on a week  
164 ( $\rho=0.58$ ,  $P<0.001$ ) or on the weekday ( $\rho=0.57$ ,  $P<0.001$ ). Correlations between the CCPAQ and the  
165 accelerometer tended to be higher for total time in physical activity and sedentary behaviors compared  
166 to correlations for MVPA and LPA. Stronger correlations were evident for boys than for girls, except daily  
167 time spent in MVPA and sedentary behavior during the weekend. Mean differences for time spent in all  
168 activity variables were negative that on average CCPAQ values were lower than accelerometer-  
169 measured values. There was no correlation between the two methods for the average days that  
170 accumulated a minimum of 60 minutes of MVPA in the last week (see Table 4).

171 Bland-Altman plots showed the degree of error in CCPAQ depended on the level of physical activity  
172 energy expenditure, MVPA or sedentary behaviors (Figure 2). Higher level of energy expenditure and  
173 MVPA were more likely to overestimate and the differences between both methods are much higher,  
174 whereas more time spent in sedentary behaviors was more likely to underestimate and the differences  
175 between both methods are much lower.

### 176 **Sensitivity analyses**

177 Using the cut-point of Evenson et al., similar validity correlations of physical activity variables  
178 between the CCPAQ and the accelerometer were found. Accelerometer data were re-categorized using  
179 0-799 counts as the threshold for sedentary behavior in Puyan et al., and then the correlation was only  
180 0.14 and insignificant ( $P=0.163$ ). With the Freedson et al. cut-point, lower than the Vanhelst et al. cut  
181 point, there are no significant correlations in any physical activity variables (see Table 5).

## 182 DISCUSSION

183 This study demonstrates that estimates of daily physical activity energy expenditure, time spent in  
184 physical activity and sedentary behaviors from the CCPAQ in 10-to-17-year-old children are highly  
185 reliable and have moderate validity. Boys spent more time in high-intensity activities and had higher  
186 energy expenditure than girls in this study consistent with numerous investigations<sup>[32, 33]</sup>. Physical  
187 activity level tend to be higher on weekday than on weekend, similar to other study<sup>[34]</sup>, which indicates  
188 that it will be more feasible for self-report instrument to separate a week into weekday and weekend  
189 to collect physical activity data.

190 The overall reliability of CCPAQ was in the strong range at 0.70 to 0.92. A systematic review  
191 illustrated that the median reliability correlation for newly developed questionnaires in youth was 0.68  
192 (ICC) and for existing questionnaires was 0.64 (ICC)<sup>[35]</sup>. We found better agreement in CCPAQ than the  
193 average of other questionnaires. It is might due to the 1-day interval between the two administrations  
194 of CCPAQ, as previous studies examining questionnaire for measuring physical activity during the past  
195 week usually used a time interval of 1 day to 3 months. The CCPAQ can also provide the information on  
196 the types of physical activity and showed good reliability. Reproducibility was higher for in-school  
197 activity than sports/exercise outside school and household activity. Few studies have examined the  
198 reliability for the types of children's physical activity.

199 For physical activity energy expenditure and time spent in total physical activity, we found that the  
200 CCPAQ tended to be more reliable for boys and on weekday. A reliability study by Rangul et al.<sup>[37]</sup> found  
201 the WHO HBSC questionnaire more reliable for girls, and another study by Treuth et al. showed no sex  
202 differences<sup>[38]</sup>. The sex differences in our study might be due to that boys had a higher intensity of  
203 activity and spent more time engaged in competitive sports than girls and as such findings may be a  
204 function of the questions that were asked. High-intensity exercises tend to be more structured and  
205 memorable. The organized activity in physical education on weekday has also been found to be easier  
206 to recall and has higher repeatability than free-living activity on weekend.

207 Validity correlations between the CCPAQ and the accelerometer for time spent in total physical  
208 activity, energy expenditure and sedentary behaviors were generally moderate in magnitude ( $\rho=0.32$ ,  
209  $\rho=0.58$  and  $\rho=0.32$ ). Systematic review evidence has shown that the median validity correlations of  
210 physical activity for youth was 0.22 ( $\rho$ ) and none of physical activity questionnaires for children show  
211 high validity<sup>[35]</sup>. The CCPAQ has been shown to be higher validity than other 7 day self-report  
212 questionnaires. One explanation that the CCPAQ differs from other questionnaires might be to set the  
213 recall period in a day sequence and clarify physical activity types into categories. However, using one  
214 question to compare behavior to physical activity guidelines of 60-minute MVPA per day in this study is  
215 likely to be inaccuracy. Conversely, Single-item Physical Activity Measure to this guidelines was found to  
216 have moderate validity ( $\rho=0.44$ )<sup>[39]</sup>. Moreover, the CCPAQ seemed to be more valid for boys than girls,  
217 which is the same in terms of sex difference with SAPAC measure<sup>[18]</sup>.

218 Previous validation study of PAQ-C in Chinese, on which informed the development of the CCPAQ  
219 suggested limited validity for MVPA when compared with accelerometer data ( $\rho=0.24$ ,  $P<0.01$ )<sup>[14]</sup>.  
220 This is similar to our results for time spent in MVPA ( $\rho=0.20$ ,  $P=0.040$ ). Time spent in MVPA and LPA

221 showed lower agreement with accelerometer than total physical activity. This may due to a lack of  
222 consensus on homogenizing cut-off points when translating accelerometer intensity into physiologic  
223 intensity. The accelerometer cut points for the intensity of physical activity and sedentary behavior  
224 among children in the previous studies varied differently, leading to different estimates of activity  
225 intensity<sup>[28]</sup>. In this study we used an accelerometer threshold that was most appropriate for Chinese  
226 youth but it is broadly in agreement with other thresholds that have been used<sup>[40]</sup>. As the threshold for  
227 when accelerometer data are used to indicate MVPA increases (i.e. a higher cut-point) the number of  
228 participants that underreported time spent in physical activity by CCPAQ declined but the validity  
229 correlation seemed to be lower. Using of the lowest cut points (Freedson et al)<sup>[41]</sup> would have resulted  
230 in overestimates of accumulated MVPA, which showed no criterion validity in the CCPAQ compared with  
231 the accelerometer. As such, it appears that the threshold used in this study provided a good  
232 approximation of physical activity in Chinese youth.

233 Bland-Altman analyses revealed relatively wide variation in limits of agreement, suggesting that  
234 the CCPAQ is more reliable for group physical activity estimates than individual investigations and  
235 therefore may be particular use as surveillance measure. Compared with the accelerometer data, we  
236 also found that the CCPAQ underestimated all the physical activity variables besides physical activity  
237 energy expenditure. The mean differences between the two measures were -78.0 min/day for total  
238 physical activity, -127.7 min/day for sedentary behavior, and 226.8 kcal/day for physical activity energy  
239 expenditure. These differences could be caused by recall bias, especially recalling in a whole day, which  
240 may influence the retrospective response. Unlike the other studies which over-report physical activity  
241 levels, our study seemed less likely to record the time spent in LPA. The amount of LPA that children  
242 participate in represents a very large and trivial fraction of their overall activity, which may be difficult  
243 to recall completely and limits the validity of subjective instrument.

244 Responses to the CCPAQ were compared by sex to determine if the measure captured sex-based  
245 differences in physical activity and if the reliability and validity differed by sex. Although sample size  
246 decreased due to the stratification analyses, recent study shows that 50 to 99 participants could provide  
247 stable agreement estimates between subjective and objective measurement of physical activity<sup>[42]</sup>.  
248 Besides, the response rate in this study was high (88% for validity study) and the general wear time of  
249 accelerometer was long due to the effective study management and implementation using the COSMIN  
250 checklist as a standardized tool for research. Thus, this study could provide support for investigating  
251 reliability and validity coefficient of the CCPAQ in different sex.

252 A feature of the CCPAQ is the integration of a compendium of energy costs designed for the specific  
253 types and intensity of physical activities in children. Since youth's basal metabolic rates decline gradually  
254 as they grow and become mature, the CCPAQ converts reported physical activity data to energy  
255 expenditure using determinate Metabolic Equivalent (METs) in different age groups. Previous studies  
256 examining the validity of energy costs in young people suggested limited validity when compared with  
257 accelerometer data<sup>[43, 44]</sup>. The higher correlation coefficients found in this study may be due to the use  
258 of youth-derived standard METs of specific activities. To our knowledge, this is the first study based on  
259 standardized METs reference in children to assess the validity of estimated physical activity energy  
260 expenditure from questionnaire against the accelerometer. Assessment of physical activity and  
261 estimation of its energy costs on a large scale has many implications for public health, applied research  
262 and clinical practice in young population.

263 The twice administrations of the CCPAQ were completed in reference to the same 7-day recall so  
264 that the differences between the two administrations only consist of reporting error with no variation



265 due to the real activity differences over time. However, the short time interval between two  
266 administrations in the reliability analyses is a potential limitation as it is possible that the participants  
267 may have a memory of their answers from the first administration. For measuring physical activity  
268 during the past week, a time interval of 1 day to two weeks may be considered appropriate and if more  
269 questions (e.g. more than 25 questions) and more difficult the questionnaires are, the time interval  
270 could be shorten<sup>[45]</sup>. It is also important to recognize that data were collected in two Chinese areas and  
271 the results may not generalize to other areas of China and other settings.

#### 272 **CONCLUSION**

273 The CCPAQ is a unique questionnaire that was developed to focus on physical activity pattern and  
274 energy expenditure measurements across the whole day during last week for Chinese children. The  
275 CCPAQ has been found to be a reliable instrument that exhibits acceptable content and construct  
276 validity of physical activity pattern. It might be an easy and feasible instrument in children with the  
277 highlight of the importance of 24-hour movement behaviors and thus could be particular useful for  
278 large scale surveys and surveillance measures. This study provides insight into a surveillance method  
279 for physical activity pattern, filling the gaps in the developing country. Future research needs to focus  
280 on activity components and context to promote physical activity.

#### 281 **AUTHORS' CONTRIBUTIONS**

282 All authors were involved in the conception of the review and the revision of the manuscript. Prof.  
283 ZHAO Wenhua directed all aspects of the study, including the design of the study protocol,  
284 administration of the research and interpretation of the results. Ms. YANG Xi contributed to the  
285 conception, design, acquisition, analysis and interpretation of data. Prof. JAGO Russell contributed  
286 intellectual input into the main ideas of this paper and assisted with writing of the manuscript. Dr. ZHAI  
287 Yi and Dr. YANG Zhenyu contributed to study design and assisted with writing of the manuscript. Dr.  
288 WANG Yuying and Ms. Si Xiang contributed to study design. WANG Jun, GAO Jianfen, CHEN Jingron and  
289 YU Yingjie coordinated the data-collection. All authors read and approved the final manuscript.

#### 290 **ACKNOWLEDGEMENTS**

291 All authors would like to thank all the student, parents, teachers and schools that made this study  
292 possible. The authors gratefully acknowledge the contribution of all project staff from National Institute  
293 for Nutrition and Health, Chinese Center for Disease Control and Prevention, Center for Disease Control  
294 and Prevention of Beijing city, Chongqing city, Yanqing District and Wanzhou District, especially Dr.  
295 ZHANG Qian, Dr. ZHANG Jian, Ms. Liu Dang, Ms. JU Lahong, Mr. YU Wentao for the collection of data,  
296 and Dr. QIU Junqiang from Department of Sports Biochemistry, Beijing Sport University for the loan and  
297 help with the accelerometers for data collection.

#### 298 **CONFLICTS OF INTEREST STATEMENT**

299 The authors declare that they have no competing interests.

## REFERENCES

1. Poitras VJ, Gray CE, Borghese MM, et al. Systematic review of the relationships between objectively measured physical activity and health indicators in school-aged children and youth. *Applied Physiology, Nutrition, and Metabolism*. 2016; 41, S197-S239.
2. Poitras VJ, Gray CE, Janssen X, et al. Systematic review of the relationships between sedentary behaviour and health indicators in the early years (0–4 years). *BMC Public Health*. 2017; 17, 868-92.
3. Carson V, Kuzik N, Hunter S, et al. Systematic review of sedentary behavior and cognitive development in early childhood. *Prev Med*. 2015; 78, 115-22.
4. Faught EL, Ekwaru JP, Gleddie D, et al. The combined impact of diet, physical activity, sleep and screen time on academic achievement: a prospective study of elementary school students in Nova Scotia, Canada. *Int J Behav Nutr Phys Act*. 2017; 14, 29-41.
5. Saunders TJ, Gray CE, Poitras VJ, et al. Combinations of physical activity, sedentary behaviour and sleep: relationships with health indicators in school-aged children and youth. *Appl Physiol Nutr Me*. 2016; 41, S283-S93.
6. Abarca-Gómez L, Abdeen ZA, Hamid ZA, et al. Worldwide trends in body-mass index, underweight, overweight, and obesity from 1975 to 2016: a pooled analysis of 2416 population-based measurement studies in 128.9 million children, adolescents, and adults. *Lancet*. 2017; 390, 2627-42.
7. Kelly P, Fitzsimons C, Baker G. Should we reframe how we think about physical activity and sedentary behaviour measurement? Validity and reliability reconsidered. *Int J Behav Nutr Phys Act*. 2016; 13, 32-41.
8. Kang M, Mahar MT, Morrow JR. Issues in the Assessment of Physical Activity in Children. *J Phys Edu, Recreation & Dance*. 2016; 87, 35-43.
9. Okely AD, Tremblay MS, Reilly JJ, et al. Physical activity, sedentary behaviour, and sleep: movement behaviours in early life. *The Lancet Child & Adolescent Health*. 2018; 2, 233-5.
10. Qun Z, Xi Y, Dan L, et al. Measurement and Assessment of Physical Activity by Information and Communication Technology. *Biomed Environ Sci*. 2017; 30, 465-72.
11. Kirsten C, Ulf E, Steele RM, et al. Assessment of physical activity in youth. *J Appl Physiol*. 2008; 105, 977-87.
12. Kohl HW, Fulton JE, Caspersen CJ. Assessment of Physical Activity among Children and Adolescents: A Review and Synthesis. *Prev Med*. 2000; 31, S54-S76.
13. Hidding LM, Chinapaw MJM, Poppel MNM, et al. An Updated Systematic Review of Childhood Physical Activity Questionnaires. *Sports Med*. 2018; 48, 2797-842.
14. Wang J, Baranowski T, Lau W, et al. Validation of the Physical Activity Questionnaire for Older Children (PAQ-C) among Chinese Children. *Biomed Environ Sci*. 2016; 29, 177-86.
15. Wang C, Chen P, Zhuang J. Validity and Reliability of International Physical Activity Questionnaire-Short Form in Chinese Youth. 2013; 84 Suppl 2, S80-6.
16. Liu AL, Guan-Sheng MA, Qian Z. Reliability and validity of a 7-day physical activity questionnaire for elementary students. *Chin J Epidemiol*. 2003; 24, 901-04. (In Chinese)
17. Janz KF, Lutuchy EM, Wenhe P, et al. Measuring activity in children and adolescents using self-report: PAQ-C and PAQ-A. *Med Sci Sports Exerc*. 2008; 40, 767-72.
18. Gioxari A, Kavouras SA, Tambalis KD, et al. Reliability and criterion validity of the Self-Administered Physical Activity Checklist in Greek children. *Eur J Sport Sci*. 2013; 13, 105-11.
19. Scherr J, Wolfarth B, Christle JW, et al. Associations between Borg's rating of perceived exertion and physiological measures of exercise intensity. *Eur J Appl Physiol*. 2013; 113, 147-55.
20. Butte NF, Watson KB, Ridley K, et al. A Youth Compendium of Physical Activities: Activity Codes and Metabolic Intensities. *Med Sci Sports Exerc*. 2018; 50, 246-56.
21. Janssen X, Cliff D, Reilly J, et al. Evaluation of Actical equations and thresholds to predict physical activity intensity in young children. *J Sports Sci*. 2015; 33, 498-506.

22. Trost SG, Pate RR, Freedson PS, et al. Using objective physical activity measures with youth: How many days of monitoring are needed? *Med Sci Sports Exerc.* 2000; 32, 426-31.
23. Vanhelst J, Béghin L, Turck D, et al. New validated thresholds for various intensities of physical activity in adolescents using the Actigraph accelerometer. *Int J Rehabil Res.* 2011; 34, 175-7.
24. Zhu Z, Chen P, Zhuang J. Intensity classification accuracy of accelerometer-measured physical activities in Chinese children and youth. *Res Q Exerc Sport.* 2013; 84, S4-S11.
25. Sasaki JE, John D, Freedson PS. Validation and comparison of ActiGraph activity monitors. *J Sci Med Sport.* 2011; 14, 411-6.
26. Mokkink LB, Terwee CB, Patrick DL, et al. The COSMIN checklist for assessing the methodological quality of studies on measurement properties of health status measurement instruments: an international Delphi study. *Qual Life Res.* 2010; 19, 539-49.
27. Chin A Paw M, Mokkink L, van Poppel M, et al. Physical Activity Questionnaires for Youth A Systematic Review of Measurement Properties. *Sports Med.* 2010; 40, 539-63.
28. Migueles JH, Cadenas-Sanchez C, Ekelund U, et al. Accelerometer Data Collection and Processing Criteria to Assess Physical Activity and Other Outcomes: A Systematic Review and Practical Considerations. *Sports Med.* 2017; 47, 1821-45.
29. Evenson KR, Catellier DJ, Gill K, et al. Calibration of two objective measures of physical activity for children. *J Sports Sci.* 2008; 26, 1557-65.
30. Puyau MR, Adolph AL, Vohra FA, et al. Validation and Calibration of Physical Activity Monitors in Children. *Obesity Research.* 2002; 10, 150-7.
31. Freedson PS, Melanson E, Sirard J. Calibration of the Computer Science and Applications, Inc. accelerometer. *Med Sci Sports Exerc.* 1998; 30, 777-81.
32. Cooper AR, Goodman A, Page AS, et al. Objectively measured physical activity and sedentary time in youth: the International children's accelerometry database (ICAD). *Int J Behav Nutr Phys Act.* 2015; 12, 113-22.
33. Dumith SC, Gigante DP, Domingues MR, et al. Physical activity change during adolescence: a systematic review and a pooled analysis. *Int J Epidemiol.* 2011; 40, 685-98.
34. Jago R, Solomon-Moore E, Macdonald-Wallis C, et al. Change in children's physical activity and sedentary time between Year 1 and Year 4 of primary school in the B-PROACT1V cohort. *Int J Behav Nutr Phys Act.* 2017; 14, 33-45.
35. Helmerhorst HJF, Brage S, Warren J, et al. A systematic review of reliability and objective criterion-related validity of physical activity questionnaires. *Int J Behav Nutr Phys Act.* 2012; 9,103-57.
36. Zook KA, Brown DD, Williams SM, et al. Contribution Of In-school Physical Activity To Daily Activity Patterns In 5th-grade Children. *Med Sci Sports Exerc.* 2015; 47, 917-44.
37. Rangul V, Holmen TL, Kurtze N, et al. Reliability and validity of two frequently used self-administered physical activity questionnaires in adolescents. *BMC Med Res Methodol.* 2008; 8, 47.
38. Treuth MS, Hou N, Young DR, et al. Validity and reliability of the Fels physical activity questionnaire for children. *Med Sci Sports Exerc.* 2005; 37, 488-95.
39. Scott JJ, Morgan PJ, Plotnikoff RC, et al. Reliability and validity of a single-item physical activity measure for adolescents. *J Paediatr Child H.* 2015; 51, 787-93.
40. Zhu Z, Chen P, Zhuang J. Intensity classification accuracy of accelerometer-measured physical activities in Chinese children and youth. *Res Q Exerc Sport.* 2013; 84 Suppl 2, S4-11.
41. Freedson PS, Melanson E, Sirard J. Calibration of the Computer Science and Applications, Inc. accelerometer. *Med Sci Sports Exerc.* 1998; 30, 777-81.
42. Nascimento-Ferreira MV, De Moraes ACF, Toazza Oliveira PV, et al. Assessment of physical activity intensity and duration in the paediatric population: evidence to support an a priori hypothesis and sample size in the agreement between subjective and objective methods. *Obes Rev.* 2018; 19, 810-24.
43. Corder K, van Sluijs EMF, Wright A, et al. Is it possible to assess free-living physical activity and energy expenditure in young

people by self-report? *Am J Clin Nutr.* 2009; 89, 862-70.

44. Telford A, Salmon J, Jolley D, et al. Reliability and Validity of Physical Activity Questionnaires for Children: The Children's Leisure Activities Study Survey (CLASS). *Pediatr Exerc Sci.* 2004; 16, 64-78.

45. Welk GJ, Corbin CB, Dale D. Measurement Issues in the Assessment of Physical Activity in Children. *Res Q Exerc Sport.* 2000; 71, 59-73.

**Table 1.** Participant characteristics by sex

	Reliability study				Validity study			
	Total	Boys	Girls	<i>P</i>	Total	Boys	Girls	<i>P</i>
Sample number	119/120 enrolled	56 (47%)	63 (53%)		106/120 enrolled	53 (50%)	53 (50%)	
Age <sup>1</sup>	13.1±2.4	13.3±2.5	13.0±2.4	0.590	13.1±2.5	13.3±2.5	12.8±2.4	0.279
Height(m) <sup>1</sup>	1.6±0.1	1.6±0.2	1.5±0.1	<0.001	1.6±0.1	1.6±0.2	1.5±0.1	<0.001
Weight(kg) <sup>1</sup>	50.2±16.4	55.7±19.0	45.4±11.9	0.001	50.1±16.9	56.0±19.2	44.2±11.5	<0.001
BMI (kg/m <sup>2</sup> ) <sup>1</sup>	20.1±4.2	21.0±5.1	19.3±3.1	0.036	20.1±4.4	21.1±5.2	19.2±3.2	0.023
Ethnicity <sup>2</sup>								
Majority	109 (91.6%)	52 (92.9%)	57 (90.5%)	0.448	98 (92.5%)	50 (94.3%)	48 (90.6%)	0.358
Minority	10 (8.4%)	4 (7.1%)	6 (9.5%)		8(7.5%)	3(5.7%)	5 (9.4%)	

**Note.** BMI=body mass index.

<sup>1</sup>described as Mean ± SD because of the normal distribution.

<sup>2</sup>described as absolute number (percentage) because of categorical data.

**Table 2.** Test-retest reliability of CCPAQ stratified by sex with the use of Intraclass Correlation Coefficient

	Median (25 <sup>th</sup> percentile, 75 <sup>th</sup> percentile)		Total (n=119)		Boys (n=56)		Girls (n=63)	
	CCPAQ 1	CCPAQ 2	ICC(95%CI)	<i>P</i>	ICC(95%CI)	<i>P</i>	ICC(95%CI)	<i>P</i>
PAEE(kcal/day)								
Week	598.5(427.6,799.7)	534.6(377.7,814.7)	0.93(0.89,0.95)	<0.001	0.93(0.88,0.96)	<0.001	0.90(0.85,0.94)	<0.001
Weekday	681.2(463.2,887.7)	590.0(447.0,912.5)	0.91(0.87,0.93)	<0.001	0.90(0.83,0.94)	<0.001	0.91(0.85,0.94)	<0.001
Weekend	396.3(220.2,627.2)	332.7(192.2,558.1)	0.82(0.74,0.88)	<0.001	0.89(0.81,0.93)	<0.001	0.70(0.53,0.81)	<0.001
Total PA(min/day)								
Week	63.0(42.5,90.7)	66.4(43.4,94.4)	0.82(0.74,0.87)	<0.001	0.85(0.76,0.91)	<0.001	0.76(0.64,0.85)	<0.001
Weekday	69.4(47.7,98.0)	72.1(46.5,100.8)	0.80(0.73,0.86)	<0.001	0.85(0.76,0.91)	<0.001	0.72(0.57,0.82)	<0.001
Weekend	40.3(17.3,90.0)	42.5(18.8,80.0)	0.70(0.60,0.78)	<0.001	0.64(0.46,0.77)	<0.001	0.77(0.64,0.85)	<0.001
MVPA(min/day)								
Week	27.5(11.6,54.4)	28.2(10.7,50.0)	0.79(0.71,0.85)	<0.001	0.85(0.76,0.91)	<0.001	0.70(0.55,0.81)	<0.001
Weekday	30.8(14.3,56.9)	29.0(12.0,53.8)	0.73(0.63,0.80)	<0.001	0.83(0.72,0.90)	<0.001	0.58(0.38,0.72)	<0.001
Weekend	6.75(0,46.3)	5.5(0,59.0)	0.79(0.71,0.85)	<0.001	0.75(0.61,0.85)	<0.001	0.85(0.76,0.91)	<0.001
LPA(min/day)								
Week	29.6(18.1,49.1)	31.4(17.6,51.8)	0.63(0.51,0.73)	<0.001	0.57(0.37,0.73)	<0.001	0.69(0.54,0.80)	<0.001
Weekday	33.7(18.8,55.2)	37.5(17.1,60.0)	0.64(0.52,0.73)	<0.001	0.62(0.43,0.76)	<0.001	0.65(0.48,0.77)	<0.001
Weekend	15.3(5.0,35.0)	18.0(5.0,37.0)	0.43(0.27,0.56)	<0.001	0.55(0.35,0.70)	0.041	0.55(0.35,0.70)	<0.001

**Note.** CCPAQ=Chinese Children's Physical Activity Questionnaire; CCPAQ 1=the first-time CCPAQ questionnaire investigation; CCPAQ 2=the second-time CCPAQ questionnaire investigation; ICC=Intraclass Correlation Coefficients; PA=Physical Activity; PAEE=Physical Activity Energy Expenditure; MVPA=Moderate-to-Vigorous Physical Activity; LPA=Light Physical Activity.

**Table 2.** Test-retest reliability of CCPAQ stratified by sex with the use of Intraclass Correlation Coefficient (*continue*)

	Median (25 <sup>th</sup> percentile, 75 <sup>th</sup> percentile)		Total (n=119)		Boys (n=56)		Girls (n=63)	
	CCPAQ 1	CCPAQ 2	ICC(95%CI)	<i>P</i>	ICC(95%CI)	<i>P</i>	ICC(95%CI)	<i>P</i>
Sedentary behavior(min/day)								
Week	414.3(312.1,519.6)	390.0(289.6,472.9)	0.83(0.77,0.88)	<0.001	0.91(0.85,0.95)	<0.001	0.78(0.66,0.86)	<0.001
Weekday	467.0(355.0,552.0)	443.0(345.0,526.0)	0.85(0.79,0.89)	<0.001	0.88(0.80,0.93)	<0.001	0.83(0.74,0.90)	<0.001
Weekend	270.0(150.0,405.0)	251.3(133.8,337.5)	0.52(0.37,0.64)	<0.001	0.80(0.69,0.88)	<0.001	0.40(0.18,0.59)	<0.001
Screen time(min/day)								
Week	32.1(13.5,68.6)	25.7(10.0,57.1)	0.65(0.53,0.74)	<0.001	0.78(0.66,0.87)	<0.001	0.56(0.37,0.71)	<0.001
Weekday	10.0(0,36.0)	8.5(0,30.0)	0.69(0.58,0.77)	<0.001	0.69(0.53,0.84)	<0.001	0.68(0.52,0.80)	<0.001
Weekend	75.0(30.0,120.0)	60.0(22.5,120)	0.47(0.32,0.60)	<0.001	0.74(0.60,0.84)	<0.001	0.27(0.30,0.48)	0.016
Sleeping time(min/day)								
Week	520.0(460.0,570.0)	513.8(467.5,570.0)	0.86(0.81,0.90)	<0.001	0.94(0.91,0.97)	<0.001	0.80(0.68,0.87)	<0.001
Weekday	480.0(410.0,540.0)	480.0(405.0,540.0)	0.89(0.85,0.92)	<0.001	0.91(0.86,0.95)	<0.001	0.87(0.79,0.92)	<0.001
Weekend	560.0(480.0,600.0)	570.0(480.0,630.0)	0.70(0.59,0.77)	<0.001	0.88(0.81,0.93)	<0.001	0.57(0.37,0.71)	<0.001
Number of days spent time in MVPA ≥60min								
	1.8±1.8	1.6±1.7	0.86(0.80,0.90)	<0.001	0.84(0.73,0.90)		0.89(0.83,0.94)	<0.001

**Note.** CCPAQ=Chinese Children's Physical Activity Questionnaire; CCPAQ 1=the first-time CCPAQ questionnaire investigation; CCPAQ 2=the second-time CCPAQ questionnaire investigation; ICC=Intraclass Correlation Coefficients; PA=Physical Activity; PAEE=Physical Activity Energy Expenditure; MVPA=Moderate-to-Vigorous Physical Activity; LPA=Light Physical Activity.

**Table 3.** Test-retest reliability of different types of physical activity by CCPAQ with the use of Intraclass Correlation Coefficients

	Total (n=119)				Boys (n=56)				Girls (n=63)			
	Median (25 <sup>th</sup> percentile, 75 <sup>th</sup> percentile)		ICC(95%CI)	P	Median (25 <sup>th</sup> percentile, 75 <sup>th</sup> percentile)		ICC(95%CI)	P	Median (25 <sup>th</sup> percentile, 75 <sup>th</sup> percentile)		ICC(95%CI)	P
	CCPAQ 1	CCPAQ 2			CCPAQ 1	CCPAQ 2			CCPAQ 1	CCPAQ 2		
Transportation												
PAEE	38.3(4.3,86.7)	40.5(6.6,96.3)	0.73(0.63,0.80)	<0.001	41.2(3.9,97.5)	40.9(0.0,142.4)	0.70(0.54,0.81)	<0.001	33.7(4.3,79.1)	33.8(8.6,81.1)	0.79(0.68,0.87)	<0.001
TPA	20.0(9.2,33.8)	23.6(11.4,35.7)	0.65(0.54,0.75)	<0.001	21.1(10.0,35.4)	26.8(14.3,35.7)	0.57(0.36,0.72)	<0.001	20.0(8.6,31.5)	21.4(10.7,34.6)	0.70(0.55,0.81)	<0.001
Activity in School												
PAEE	90.5(51.2,162.9)	79.3(44.8,167.1)	0.84(0.78,0.89)	<0.001	106.8(62.2,183.8)	87.8(50.2,193.6)	0.82(0.71,0.89)	<0.001	83.7(40.0,155.6)	77.9(37.6,122.1)	0.86(0.77,0.91)	<0.001
TPA	23.9(13.6,36.6)	24.6(11.9,35.9)	0.86(0.80,0.90)	<0.001	24.9(13.4,36.5)	24.8(11.4,38.5)	0.88(0.81,0.93)	<0.001	23.0(13.6,37.1)	23.7(12.4,35.2)	0.80(0.69,0.87)	<0.001
Sports/exercise outside school												
PAEE	28.9(0.0,93.5)	13.2(0.0,71.5)	0.75(0.66,0.82)	<0.001	49.0(0.0,142.4)	32.1(0.0,99.9)	0.80(0.68,0.88)	<0.001	15.2(0.0,51.9)	7.4(0.0,37.6)	0.61(0.43,0.74)	<0.001
TPA	9.6(0.0,28.6)	7.1(0.0,23.0)	0.73(0.63,0.80)	<0.001	16.1(0.2,35.7)	10.0(0.0,28.3)	0.76(0.63,0.85)	<0.001	6.0(0.0,22.5)	4.3(0.0,17.7)	0.70(0.55,0.81)	<0.001
Household												
PAEE	3.0(0.0,11.0)	3.0(0.0,10.9)	0.70(0.60,0.78)	<0.001	5.3(0.0,16.2)	5.4(0.0,19.4)	0.70(0.53,0.81)	<0.001	1.7(0.0,9.1)	2.0(0.0,7.0)	0.68(0.52,0.79)	<0.001
TPA	2.9(0.0,7.1)	2.9(0.0,8.6)	0.84(0.77,0.88)	<0.001	3.2(0.4,7.1)	3.2(0.89,8.6)	0.86(0.78,0.92)	<0.001	2.9(0.0,7.5)	2.9(0.0,8.6)	0.80(0.69,0.88)	<0.001

**Note.** CCPAQ= Chinese Children's Physical Activity Questionnaire; CCPAQ 1=the first-time CCPAQ questionnaire investigation; CCPAQ 2=the second-time CCPAQ questionnaire investigation; ICC=Intraclass Correlation Coefficients; CI=Confidence Interval; TPA=Total physical activity (Unit: minutes/day); PAEE=physical activity energy expenditure (Unit: kcal/day).



**Table 4.** Validity coefficients for movement behaviors and energy expenditure comparing the CCPAQ and accelerometer measurement

	Spearman's correlation coefficient ( <i>P</i> value)			Comparison between two measures			
	Total (n=106)	Boys (n=53)	Girls (n=53)	Mean±SD	No. over	No. under	No. same
PA energy expenditure(kcal/day)							
Week	0.58(<0.001)	0.57(<0.001)	0.55(<0.001)	226.8±254.8	82	23	1
Weekday	0.57(<0.001)	0.58(<0.001)	0.45(<0.001)	315.3±303.2	96	10	0
Weekend	0.12(0.217)	0.08(0.601)	0.10(0.504)	139.3±396.1	65	41	0
Total PA(min/day)							
Week	0.32(<0.001)	0.39(0.004)	0.27(0.047)	-78.0±58.1	10	96	0
Weekday	0.34(<0.001)	0.38(0.005)	0.29(0.031)	-71.7±56.9	13	93	0
Weekend	0.22(0.021)	0.22(0.116)	0.22(0.107)	-79.2±81.5	15	91	0
MVPA(min/day)							
Week	0.20(0.040)	0.24(0.085)	0.14(0.330)	-19.4±36.4	26	80	0
Weekday	0.26(0.007)	0.28(0.046)	0.24(0.079)	-18.2±36.3	25	78	3
Weekend	0.23(0.017)	0.09(0.521)	0.34(0.011)	-17.6±45.7	26	79	1
LPA(min/day)							
Week	0.19(0.054)	0.28(0.045)	0.10(0.469)	-58.6±43.9	8	98	0
Weekday	0.22(0.021)	0.28(0.047)	0.18(0.200)	-53.5±43.9	10	94	2
Weekend	-0.08(0.423)	0.09(0.503)	-0.23(0.100)	-61.7±63.6	12	93	1
Sedentary behavior(min/day)							
Week	0.32(<0.001)	0.26(0.060)	0.39(0.003)	-127.7±213.3	24	82	0
Weekday	0.32(0.001)	0.35(0.011)	0.30(0.030)	-120.6±248.5	23	83	0
Weekend	0.33(<0.001)	0.30(0.030)	0.35(0.009)	-154.9±331.2	25	81	0
Number of days spent time in MVPA ≥60min							
	-0.15(0.130)	-0.29(0.041)	-0.04(0.789)	-2.8±2.9	18	78	10

**Note.** CCPAQ= Chinese Children's Physical Activity Questionnaire; PA=Physical Activity; MVPA=Moderate-to-Vigorous Physical Activity; LPA=Light Physical Activity

Mean±SD: Mean Difference between the CCPAQ and the accelerometer ± Standard Deviation of Mean Difference. No. over: number of participants that over-estimated; No. under: number of participants that under-estimated; No. same: number of participants that reported the same as the accelerometer-measured values.

**Table 5.** Spearman's validity coefficients for physical activity variables comparing the CCPAQ and accelerometer

## measurement using different cut points for physical activity intensity

Intensities of PA	Vanhelst et al.,2011			Evenson et al., 2008			Puyan et al., 2002			Freedson et al.,1998		
	Cut-points	<i>rho</i>	<i>P</i>	Cut-points	<i>rho</i>	<i>P</i>	Cut-points	<i>rho</i>	<i>P</i>	Cut-points	<i>rho</i>	<i>P</i>
Total activity	≥401	0.32	0.001	≥101	0.33	0.001	≥800	0.39	<0.001	≥150	0.13	0.172
MVPA	≥1901	0.20	0.040	≥2096	0.24	0.016	≥3200	0.17	0.082	≥500	0.11	0.267
LPA	401-1900	0.19	0.054	101-2295	0.14	0.145	800-3199	0.20	0.043	150-499	0.15	0.043
Sedentary behavior	≤400	0.32	0.001	≤100	0.31	0.002	≤799	0.14	0.163	≤149	0.01	0.992

**Note.** CCPAQ=Children and Adolescents Movement Behaviors Questionnaire; PA=Physical Activity; MVPA=Moderate-to-Vigorous Physical Activity; VPA=Vigorous Physical Activity; MPA=Moderate Physical Activity; LPA=Light Physical Activity; rho=Spearman's correlation coefficient