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Understanding parental physical activity: meanings, habits, and social role influence

Keywords: physical activity, parenthood, fathers, mothers, social roles, social constructionism

Abstract

Objectives: The research aimed to explore parents' understandings of physical activity (PA), patterns of PA-related behaviour, and how constructions of social role expectations might influence their PA behaviour.

Design and Method: Using a qualitative descriptive design and adopting a social constructionism approach to broaden interpretations of parents' understandings, 40 adults (21 mothers, 19 fathers; aged 23 to 49 years) living in South East Queensland, Australia participated in semi-structured individual and group interviews. The interviews were analysed using thematic analysis.

Results: Parents had clear understandings of what constitutes PA and engaged in various activities which were integrated with or independent of the children. Being active with children, however, was not always constructed favourably in which many parents described the difficulties of being active with their children. All individuals experienced changes in their PA behaviours after having children. For most, a decline in PA level, intensity, and structure was experienced; however, some did experience parenthood as a time to be active. A level of acceptance for the lack of activity performed was also expressed as were feelings of resentment and envy for those who maintained previous activity habits. Parenting and partner roles were considered most influential on PA-related behaviour and were constructed in ways that had both positive and negative influences on activity performance. Parents, however, were empowered to construct strategies to resolve conflicts between social role performance and being active.

Conclusion: Results show that parents experience unique difficulties that intervention work should consider when designing programs aimed at increasing parental PA.

Despite the benefits of performing regular moderate physical activity (PA) (see United States Department of Health and Human Services, 1996; Warburton, Nicol, & Bredin, 2006), many individuals lead sedentary lifestyles. For example, according to the Australian Bureau of Statistics (2006) 70% of Australians aged over 15 years are classified as sedentary or having low exercise levels. Of concern, though, is research indicating that certain population groups are less likely to be active. Studies have repeatedly shown physical inactivity to be higher in woman, the elderly, and the socio-economically disadvantaged (Bauman, Bellow, Vita, Brown, & Owen, 2002). Recent research also suggests that parents with dependent children are less active than adults who do not have the responsibility of caring for a child (Bellows-Riecken & Rhodes, 2008). This risk of inactivity in parenthood has been evidenced across both mothers' (Bell & Lee, 2005; McIntyre & Rhodes, 2009) and fathers' (Burton & Turrell, 2000; Hull, Aaron, David, Nagle, & Robertson, 2007) PA-related behaviours, although the research is somewhat limited.

While inactivity is a risk for both mothers and fathers, the literature is unclear about the specific ways in which parenthood affects PA-related behaviours. Questions have been raised as to whether parenthood does, in fact, affect peoples' PA or whether it is simply a methodological issue in the way PA is being measured in which many self-report instruments do not assess household, childcare, and occupational activities inclusively (Phongsavan, Merom, Marshall, & Bauman, 2004; Sallis & Saelens, 2000). Many of the previous studies examining parental PA have employed quantitative self-report measures to identify differences in peoples' PA-related behaviour (e.g., McIntyre & Rhodes, 2009; Nomaguchi & Bianchi, 2004). While these studies provide important information of the negative association between parenthood and PA, specifically, declines in amount of activity, they may potentially obscure valuable associations and insights into this lack of activity which is important given our limited understanding of this

complex behaviour within this population group. A few studies have explored qualitatively the influences and barriers on mothers' PA-related behaviour (e.g., Jenkins, Handcock, Burrows, & Hodge, 2006; Lewis & Ridge, 2005); however, research that qualitatively examines how both mothers' and fathers' PA habits are affected by parenthood is scarce. Considering both mothers and fathers are at risk for inactivity, having a rich understanding of how parents understand what constitutes PA and how this understanding can affect PA-related behaviour for members of both sex will give researchers a better understanding of the depth of the problem.

During the years of establishing a young family, parents are often faced with additional constraints (e.g., time issues due to fulfilling childcare commitments) that may influence their interest and ability to be involved in regular PA. Many external influences (e.g., availability of social support for childcare, access to facilities that offer integrative child/parent programs) can also serve to facilitate or hinder this interest. The day-to-day life-world of a parent, therefore, is fraught with many challenges that might make integrating PA into their lives difficult, and these situations do not go unacknowledged. However, to understand better parental PA it is important to consider also how meanings of the parenting role, and perhaps other important social roles in relation to PA performance, influence parents' behaviour. Gaining an in-depth knowledge of how social role expectations are understood by parents to influence their PA-related behaviour may provide new insights into why parents think, feel, and act the way they do about PA participation.

Derived from a social psychological framework termed structural symbolic interactionism which emphasises that social networks affect self and self impacts social behaviour, Stryker (1968, 1987) hypothesised that our self is composed of a collection of identities that reflect the roles (i.e., behavioural expectations attached to positions held in

networks of social relationships; Stryker, 2007) the individual may fulfil in a social context. These multifaceted parts of self may be independent or interdependent of one another, mutually reinforcing or conflicting (Stryker & Burke, 2000). Identities, then, can be considered a reflection of the influence of society on the individual to the extent that the individual has internalised socially prescribed roles; for example, the familial roles of mother, father, or the recreational role of active person (Stryker, 1968, 2007). These multiple identities that comprise an individual's self-concept are organised into a hierarchy according to the most valued and, the more salient the self-identity, the more likely the individual will behave in accordance with the identity (Stryker, 1968, 1987). Furthermore, it is suggested that the extent to which one is dependent on others to fulfil particular social roles in a given social context will affect one's commitment to perform these roles (i.e., be a particular kind of person). This commitment is suggested to be the source of importance that one attaches to given identities which, in turn, affects role choice behaviour (Stryker, 2007). Research in the PA domain supports the position that PA performance is affected by the level of personal value one places on the role of being an active person (e.g., Hamilton & White, 2008).

Although role identity acknowledges that self is shaped in interaction with others, there remains an element of individualism in that the personal value placed on being a certain kind of person (i.e., a mother, an active person) is viewed as a cognitive process derived from the individual's internalised meanings and expectations attached to a role (Stryker & Burke, 2000). Taking a more emancipatory position and acknowledging the subjective, a social constructionism perspective suggests that people's understandings of the world in which they live are socially constructed and, thus, believes that reality is a creation of social interchange (Gergen, 1985, 1999). Taken-for-granted facts of social reality (or objective truths), then, are challenged against

the assumption that people's ways of knowing may differ as their knowledge emerges from interactions within social groups at a particular time and in a particular place (Burr, 2003). Thus, it is acceptable that multiple constructions of meanings (or multiple perspectives of some phenomena) are possible among people and that people's identities are constructed out of discourses that are historically situated. Behavioural performance (e.g., role performance), therefore, can be thought of as a reflection of these different discourses (i.e., the way events are described and interpreted; Burr, 2003) and changing patterns of action is through altering these various forms of discourse. Social constructionists have helped in our understanding of many social (e.g., Burdige, 2007; Lindgren, 2005) and health phenomena (e.g., Encandela, 1997; Flick, 1998). Adopting a social constructionism epistemological position, therefore, might help further illustrate the ways in which parents, who are intertwined within social networks, come to know and create what is real about PA participation and, thus, extend and enrich our understanding of parenthood and PA behaviour.

Overall, there is currently a paucity of studies exploring how both mothers and fathers make sense of the important roles they fulfil as influencing their PA performance. Research suggests that PA performance is affected by the demands of fulfilling multiple social role obligations (Nomaguchi & Bianchi, 2004) and parenthood, in particular, is viewed as a salient time where commitments to the parenting role are seen as barriers to performing PA (Jenkins et al., 2006; Miller & Brown, 2005). What is not understood, however, is how parents account for the ways in which PA-related behaviour are socially constructed within the important roles they perform. Exploring parents' descriptions of how social role expectations influence activity behaviour might bring forth new insights into why parents chose to engage or not to engage in regular PA. Furthermore, exploring the influence of important social roles on PA from the

perspective of both sexes may help elicit the underlying issues surrounding the gender discrepancy that is currently evident in the literature in which mothers' activity levels, rather than fathers' activity levels, are suggested to be affected more as a result of having children (Bellows-Riecken & Rhodes, 2008).

Purpose of the Study

Although the current literature suggests some understanding of the effect of children on parents' activity, the research suffers from numerous limitations such as the focus solely on mothers' activity habits and the use of quantitative methods. Therefore, gaps remain in the literature including understanding fatherhood and PA and using qualitative methodologies, which have the potential of gaining new insights into complex behaviours that include decision-making related to PA. Additionally, there is a need for research to understand the roles people perform in the context of parenthood and how these roles affect PA habits. This understanding is important given that social roles continue to evolve, especially in many Westernised countries and research, therefore, needs to establish the role delineations that are operating in and relevant to, the current context of parenting which, in turn, may help our understanding of the PA gender discrepancy. Thus, the study aimed to give both mothers' and fathers' a voice on the topic and through their descriptions gain knowledge of parents' understandings of PA-related behaviour. The study aimed to explore, via adopting a social constructionism epistemological position (Gergen, 1985, 1999) and the theoretical perspective of role identity (Stryker, 1968, 1987), the ways in which parents make sense of their engagement in regular PA within the important social roles they perform. Specifically, this study aimed to explore parents' understandings of PA, patterns of PA-related behaviour, and how constructions of social role expectations might influence PA behaviour.

Method

The research was carried out between September 2008 and March 2009 in South East Queensland, Australia. The study was approved ethical clearance by the University Human Research Ethics Committee (reference number 0800000516).

Participants

A purposeful sampling method (Patton, 2002) was used to recruit adult parents of young children. Parents were eligible to participate if they were aged 18 years and over and had at least one child younger than 5 years of age who usually resided in the same household as the parent. Any mother who was currently pregnant was not eligible to participate in the interviews nor were individuals who had a medical condition that prevents them performing PA at the recommended levels. This study aimed to ensure that a broad range of different experiences and perceptions was identified; as such, consideration was given to the inclusion of information rich cases that reflect the population diversity. Maximum variation sampling (Patton, 2002), therefore, was used to ensure respondents ranged in age, gender, number of dependents, marital status, education level, employment status, and level of physical activity. Participants were recruited via snowball sampling (Patton, 2002), with sample size being dependent on theoretical saturation (Strauss, 1987).

The sample ($N = 40$) included both females ($n = 21$) and males ($n = 19$) who were all independent of each other (i.e., participants were not in a couple relationship). The parents were all Caucasian and ranged in age from 23 to 49 years of age, with an average age of 35 years. Most of the participants were in a partnered relationship ($n = 34$). The level of education varied among the parents in which 6 had no high school diploma, 8 had a high school diploma, 6 had a trade/diploma certificate, 16 had an undergraduate degree, and 4 of the parents had postgraduate

qualifications. Seventeen out of the 19 fathers were in full-time paid work, with 1 being in casual paid employment and 1 occupying home duties. Work status varied more among the mothers in which 3 engaged in full-time work, 6 engaged in part-time work, 3 were casually employed, 8 occupied home duties, and 1 of the mothers was a student. Among the parents, 16 had one child, 14 had two children, 3 had three children, and 7 of the parents had four children. To determine that characteristics of the sample varied somewhat in levels of PA, parents were asked to indicate their current level of PA on a single-item rating scale ranging from 'I never engage in PA' to 'I regularly engage in PA'. Just under half of the parents (17 out of 40) indicated that they were regularly active whereas the remaining 23 parents indicated they either sometimes engaged in PA (17 out of 40), rarely engaged in PA (5 out of 40), or never engage in PA (1 out of 40).

Design and Procedure

The study adopted a social constructionism epistemological position (Gergen, 1985, 1999), with an emphasis placed on using an inductive interpretative approach to learn about and understand how parents ascribe meanings to PA-related behaviour within the social roles they perform. The study initially sought to employ focus group methodology given that an individual's beliefs are formed socially rather than in a vacuum (Morgan, 1998) and that decision-making processes in relation to engaging in health behaviours, including PA, might be socially orientated. However, to avoid any issues with sampling bias, interviews were conducted with those individuals who wished to participate but who could not attend a focus group session or for those individuals who were the sole participant of an arranged focus group session. We believe the use of both individual and group interviews offered a way of strengthening the study design by providing a means of triangulating material obtained via the different interview methods (Patton, 2002). For example, the group interviews provided a means of gathering rich

information as a result of the synergy that occurred between members and from members qualifying others' responses whereas the interviews provided a way of gathering rich information about the respective individual who may otherwise have remained silent within the group situation (Barbour & Kitzinger, 1999). The study comprised of a total of 27 interviews including eight focus groups and nineteen interviews with the size of the group interviews ranging from two to four participants. As some gender differences in PA beliefs have been found (Rhodes, Blanchard, & Blacklock, 2008) and to eliminate gender differences influencing sharing within the group, homogenous groups in relation to gender were formed.

To guide the interviews, a semi-structured interview guide was developed (see e.g., Krueger, 1998). The interview guide comprised of open-ended questions that were based on the research questions; however, the sessions were flexible to allow refinement of questions based on emerging concepts and to improve the interviewer's understanding of points raised (Krueger & Casey, 2000). The interview guide was piloted tested on a sample similar to the target group ($n = 3$) and interview questions were revised according to the feedback received.

The interview guide consisted of three main discussion sections. The first section explored parents' understanding of moderate PA (e.g., When I say 'moderate PA', what does it mean to you? What examples would you use to describe moderate PA?) The second section examined parental PA patterns (e.g., Can you tell me about your current PA habits? Do you see a difference in your current PA and your PA habits prior to having children?). The third section explored the influence of social role identities on PA performance (e.g., Think about the various roles you perform, which to you are the most important to your sense of self? Which of these important roles do you think influence your PA? How would you resolve any conflicts that arise between fulfilling these important roles and being an active person?). The question of resolving

conflicts was an attempt to empower parents to construct ways to improve their perspective about PA performance and, thus, engage participants in a form of action research (see Reason & Bradbury, 2006). The first author conducted all interviews which averaged 1-hour in length, and all discussions were audiotaped. For the duration of the study, a reflexive journal was kept in which the interviewer recorded first impressions about each interview, key ideas expressed, comparisons and contrasts among the interviews, and possible refinement of questions (Ahern, 1999; Lincoln & Guba, 1985).

Interview Analysis

The interviews were transcribed verbatim and any identifying information was removed from the transcripts and participants were assigned pseudonyms. The descriptive nature of the interviews allowed a thematic analytical method to interpret the interview material, as the purpose of this study was to allow themes to emerge from parents' descriptions (Braun & Clarke, 2006). Interview analysis started with the running of the first interview and continued concurrently with the interview material collection process (Miles & Huberman, 1994). All transcripts were reviewed several times to enhance familiarity with the interview material and to identify emerging codes and categories. The reflexive journal kept by the interviewer helped facilitate the interpretation of the interview material as well as helped the interviewer understand their potential influence in the interview process through the interactions experienced with participants (Ahern, 1999; Finlay, 2002).

Transcripts were coded line by line and any words or sentences that captured the key issues and perceptions expressed by the parents were highlighted. Highlighting the passages helped to break down the text and organize the interview material into categories. These categories were then transferred into tables constructed in MS Word. The tables provided a

visual representation of the interview material which enhanced discovery of patterns in parents' descriptions and identification of commonalities and differences among the categories (Miles & Huberman, 1994). This process led to the broad categories being refined into themes based on the connection of patterns in the interview material and from the concepts which frequently occurred across categories and sessions. These themes were then grouped according to the three main topic areas discussed (i.e., understandings of moderate PA, parental PA, and the influence of social roles). An iterative process was used with the interview material being coded and recoded to accommodate new emerging themes until theoretical saturation had been attained (i.e., relations among categories are well developed in regards to their properties, dimensions, and variations, and no new themes are emerging from the interview material; Corbin & Strauss, 2008; Strauss, 1987). Two final group interviews (one male and one female) were conducted to ensure that theoretical saturation had been attained (Miles & Huberman, 1994; Strauss, 1987) and, as such, these final interviews provided credibility to the findings as participants provided confirmatory feedback on previously emerging themes. Qualitative validation occurred via several processes, such as conducting confirming summaries throughout the interview discussions (credibility), using a community sample (transferability), and having disinterested peers participate in reducing the interview material (confirmability) (Lincoln & Guba, 1985). In addition, to help maintain trustworthiness of interpretations and authenticity of participants' perspectives (Fossey, Harvey, McDermott, & Davidson, 2002; Lincoln, 1995), the validation process focused on the assumption that knowledge is a process and, thus, open to infinite possibilities (see Koro-Ljungberg, 2008).

Results

The parents' descriptions have been organised around the three main topic areas that framed the discussion guide. The categories that emerged across the individual and group interviews were similar; thus, the most salient emerging themes within the category expressed across all participants are presented. There is evidence within the physical activity domain that combining material from both individual and group interviews is useful when the interview material being collected are the same (see e.g., Burgoyne, Woods, Coleman, & Perry, 2008; Crone, Smith, & Gough, 2005).

Understandings of Moderate Physical Activity

Requires effort. Moderate PA was typically described as any activity that “raises the heart rate” or “requires a bit of effort”. Parents also differentiated between moderate and mild forms of activity in which moderate PA was described as not just “playing on the floor with the kids”, “walking around the house” or “strolling down the street”. Thus, for parents, moderate PA seems to denote that some form of sustained effort is required.

Structured and incidental types. Parents were able to identify and describe a range of activities they thought fit with the term moderate PA. The activities mentioned included both structured (e.g., gym, sports) and unstructured activities (e.g., brisk walking) as well as incidental activities to do with work (e.g., stair climbing, manual lifting), household chores (e.g., mopping, vacuuming), and the children (e.g., running around kicking ball, chasing in the park). As one father explains, “Probably in one sense it’s about deliberate exercise, but it’s also probably less formal than that in a sense of going down to the park and running around with the kids.”

Parental Physical Activity Patterns: Current Habits

Grab it when you can. Although some parents described their PA habits as more regular in nature, for many parents, current PA habits were described as irregular and more of a hit and

miss, engaging it when ever they can. As one mother explains, “I think pretty much what we’ve been talking about its just grab it when you can.” These parents often described how infrequent opportunities arise that would enable them to engage in moderate PA.

Integration or independence. Parents engaged in a range of activities; however, an emerging theme from parents’ descriptions of their current PA habits was the notion of being active with or without the children. For some parents, moderate PA was performed in an unstructured way and centred on the children. It was believed that integrating their activity with their children’s activity was the only way they could be active at this point in their life. One father explains, “Well, we sort of walk the dogs. . . . We go down hills and up hills as well . . . That’s what we do at the moment, because you can take the kids and push them in the pram”. One mother also explains, “For me it’s primarily I guess things like walking . . . I’ve always walked which I’ve now integrated the children into . . . because I can incorporate that with the girls”.

Some parents, however, engaged in more structured and deliberate forms of PA that was purposefully done away from the children. For these parents, engaging in PA independent of their children was a way of getting some time out, a time that could be spent stress free of the children, which many described as a luxury not often afforded to parents. One father explains,

Before all you had to think about was yourself . . . Then we had the kids . . . now we have to think about what they want to do. And it’s just great to be able to have some time out from the kids . . . to go to the gym and spend an hour there without them.

It’s difficult to be active with children. A theme of it being difficult to be active with children emerged in which many parents described the difficulties that arise from engaging in moderate PA with the children or while the children are present and may be related to why

parents (to gain the necessary health benefits) talk about engaging in more independent as opposed to integrative activity. Such descriptions included: the activity tends to lack the intensity and amount of which is required for an adult to keep fit and healthy; the activity performed does not keep multiple children happy; the activity is often disrupted from the need to attend to the children, and the activity is not stimulating, challenging, or relaxing enough for an adult. One mother explains, “I did go for a walk with the kids the other day. I thought, oh I’ll go for a thirty minute walk. But to be honest it was just more stressful. I didn’t feel I got any benefit out of it.”

Active child over active parent. A theme of active child over active parent also emerged from the interview material in which some parents described their current PA habits as being less important than the PA habits of their children. These parents expressed a strong belief that it is important for their children, and not necessarily themselves, to be active in as many ways as they can and, as a parent, will develop and foster that process in their children. One mother explains, “It’s important to me to get the kids into activity . . . exposing them to many different activities as well . . . but as for me, ever heard the saying do as I say not as I do.” In trying to understand this theme further, it is possible that preference for a child’s activity is created from previous representations of parental PA being difficult to achieve, so energy is focused on achieving the child’s PA. The construction of children’s activity being more important could also emerge from traditional social constructions of parenting roles where parents’ activities are given less value.

Supervision over interaction. In a similar vein to the active child over active parent theme, some parents described their current PA habits being more of a supervisory role of their children’s PA. Rather than getting involved with their children, these parents described how they tend to sit back and watch their children play. One mother explains, “Generally at the moment I see the kids doing a lot of riding bikes in the street and the parents and myself would be sitting in

the gutter watching them instead of joining them, supervising them and stuff.” One of the fathers also explains, “You know the kids are going to little athletics this year and they’re getting good exercise out of it and I get to stand in the sun getting sun burned and walk around with bloody water bottles all day.”

Parental Physical Activity Patterns: Changes in Habits

Declining physical activity. All parents reported a change in their PA habits as a result of having children. Although, for some parents, no change occurred in the amount of PA they performed, for many parents, the presence of children resulted in a decline in their PA habits. One father explains, “We live about a half an hour walk from the train station and pre kids I used to walk to and from the train on a semi regular basis, or in fact before kids I used to do it every day. These days I haven’t done it for years.” For some parents, the decline in activity was exacerbated further with the presence of additional children, as one mother explains, “I was much more active with one . . . I was swimming twice a week . . . but since Simon [second child] it’s been really difficult.” Furthermore, it was found that regular activity performed pre children do not necessarily translate into PA being performed post children. One mother explains, “Mine’s stopped absolutely. I was at the gym minimum four days a week and I’d do pilates twice a week and having a great old time, pretty fit. And now nothing, I’ve gone from that to nothing”.

Decreasing intensity and structure. As a possible consequence of parents’ descriptions of declining PA habits, the presence of children often resulted in a change in the intensity level of PA performed (i.e., the activities became less high intensity and became more moderate-to-lower intensity). Parents provided a variety of reasons for this change in intensity level including: not wanting to be so worn out that they cannot perform their other duties, are now being active with the children so the intensity level is not as it was before, and are now more prone to injury so

keep the intensity level down to avoid sustaining an injury. In keeping with this decrease in intensity levels, the presence of children often resulted in a change to the type of activity performed (i.e., the activities became less organised sports and became more unstructured, incidental, and centred on the children). One mother explains, “I guess it’s gone from an organised team sport of atmosphere to something a lot more solitary and which usually involves the girls as well. So, less high level, well no high level, and much less variety.”

Envy and Resentment. Emerging from the conversations on parents changes in their PA habits were the themes of envy and resentment. For some parents, the change in their activity resulted in feelings of envy toward other people (in particular husbands and friends) who were able to continue doing the activities they themselves would still like to be doing. One father explains, “In some ways I’m a little bit envious that they [friends] can find the time and make the commitment.” One mother also explains, “My husband runs . . . And I get a bit cut, I think that’s nice you get to run along the river and go to work and have a shower and don’t have to worry about a child climbing up your leg while you’re trying to have a shower.” Additionally, a few fathers described that their partners may become resentful or jealous if they continued doing the activities they were previously doing, which were more independent in nature. So, to avoid any feelings of resentment, these fathers replaced their more independent type activities with more family orientated type activities. As one father explains,

I think it’s hard if you’ve got a partner or your wife or whatever. You know you go out to do your physical activity or whatever and then she’s stuck at home with the kids. I think there becomes a bit of resentment if it keeps on going too much. You know that’s just the nature of it. So, but that’s why you sort of you either both do it and get the kids minded, or don’t do it, or you just do stuff together with the kids as much as you can.

Acceptance and later opportunity. The themes of acceptance and later opportunity also emerged from parents' descriptions of the changes in their PA. Some parents described and acknowledged a level of acceptance within themselves for the lack of PA they currently performed and, for a few parents, this theme replaced the themes of envy and resentment. As one mother explains, "I appreciate my level of activity is not like it once was. You know it's a bit of a blip whilst bringing up littlies. . . . I think that its part of the journey isn't it. I accept it, I don't resent it. I do what I can when I can." For many parents, though, the theme of later opportunities was salient (which, for some parents, provided a justification for the acceptance of their lack of PA). These parents often described that, with passing time and aging children, there will be more opportunities to be active later. One mother explains, "Just keep hanging out to the kids get older and they're at school and time becomes a bit more available, or the level of activity they do then starts to match something that gives you a thirty minute exercise as well." One father explains, "I'm just waiting a bit for the boys to be a bit older. . . . I can't wait for that day when I can take them to do whatever and we can both enjoy it. . . . because my activity will certainly increase."

Opportunistic parent. In spite of the strong descriptions for the negative changes in one's PA habits, a theme of opportunistic parent also emerged from the interview material where, for some parents, the experience of parenthood was viewed as an opportunity to be active and is a time in life where becoming active or becoming more active is possible. As one father explains,

Before having kids I was like a couch potato . . . basically my form of physical activity would be going to the fridge to grab a snack Now I do try to go to the gym two three times a week . . . pump a few weights. We'll go for walks and take the kids to the park for a run around, kick a football and all that.

These parents often talked about the ways in which they now actively seek out opportunities to be active, such as accessing facilities for integrative activity (e.g., walking tracks and parks), sourcing support for independent activity (e.g., gyms and swimming pools with childcare, family support), and implementing goals and plans for regular PA participation.

Active older parent. In further exploration of the opportunistic parent theme, it was found that older parents (i.e., those over 40 years of age), in particular, saw parenthood as a time when they must participate in regular PA, represented by the theme of active older parent. These parents viewed regular activity as a way of ensuring they can keep up with their children. As one mother explains, “I’m really on a path to increase my fitness, and a lot of that’s because I’m an older mum. . . . I was concerned with not being able to keep up with the kids and run around with them, so yeah I took on a new program.”

The Influence of Social Roles: The Parenting Role

Parents describe a range of roles they thought were important to their self-concept. These roles included: parent, partner, worker, daughter/son, and friend. For the majority of parents, however, it was the parenting role that was believed to influence PA participation, and this role was described in ways that represented both positive and negative discourses toward activity performance. Four main themes were identified in relation to the positive representation of the parenting role on one’s activity performance, and three main themes were identified in relation to its negative reflection, as described below.

Creating an active family culture. In a positive sense, parents described their participation in PA as helping to create an active family culture for their children. Many parents talked about the importance of “modelling behaviour” and “setting an example” and described how their own PA participation would influence and shape their children’s PA behaviours. Some parents also

described how they are key figures in the socialisation process of their children's behaviours, and that part of their role as a parent is to instil in their children an enjoyment for PA and a lifelong commitment to being a physically active person:

It kind of says, "Oh you've been to the gym mummy, gee your stinky," just something ridiculous. But I think in years to come he'll know that mum tried to look after herself, she tried to keep herself healthy and fit. And he will look at exercise in a positive light.
[Mother]

Being a father to my son that's my most important role at the moment. . . . Like I definitely want to be a role model for my son, I want to show him like being fit is a better thing than being a fat slob. . . . to show my son and myself that I can do it, and that this is the better way of life like then to not do anything and sit around and do nothing. [Father]

Happy and connected family unit. Parental PA was seen also to help create a happy and connected family unit in which some parents described how being active keeps them happy and, therefore, the rest of the family happy. As one mother explains, "Well happiness is a big part of it; a happy mum is a happy home isn't it. If mum's happy nice dinners are made, if mum's happy you get more creative with what you're doing with the kids." Other parents elaborated on this notion of happiness describing how being an active parent affects the overall family's connectedness and that being active as a family, in particular, is one way to ensure that the family unit stays together, as one father explains, "A family that plays together stays together that sort of thing. I really think that actually doing active stuff together is important."

Active person helps to be best parent. For some parents, being an active person was described as helping to create a best standard practice in their parenting role. As one mother explains, "I got over the whole mother guilt thing and said right if I'm going to be a better mum

for him I need to start swimming again.” One father also explains, “I try and be active just from trying to be a good dad sort of thing.” These parents talked about the desire to be the best parent they possibly could and to do that they needed to keep physically active as this fitness, then, would give them the added energy and confidence to fulfil their role as a parent.

Staying fit for the kids. There was also a strong desire from the majority of parents to be around as long as possible for the children and being physically active was described as one way of attaining this desire. As one father explains, “I’ve got to start looking after myself so I can live a longer life, so I can see him grow up and all that sort of stuff.”

Guilt and selfishness. In a negative sense, parents described their participation in PA as instilling feelings of guilt and selfishness. Many mothers and a few fathers described feelings of guilt over taking the time to be active. Many mothers also described feelings of selfishness in doing PA as potentially precious time with the children or time for doing household chores would be lost. Some of these mothers described themselves as having a “supermum complex” in which they needed to keep up a certain standard in the house, believed that they had to do everything themselves, and perceived that asking for help would be considered as not coping as a mum. Thus, many mothers and a few fathers, in describing their role as a parent, felt an overwhelming sense of guilt in performing PA as this, then, would lessen their ability to fulfil the parenting role. As one mother explains,

I guess emotionally I would feel guilty if I was at a gym when I could have been home helping the kids with their study, homework, or spending time with them. . . . I’d feel selfish if I was to take my time when I could have been there supporting them.

Trade off for the parenting role. Performing PA was also described by many mothers and a few fathers as the trade off for the duties that need to be performed to fulfil the parenting role.

As one father explains, “But it’s the trade off, you know the time for kids that I would have been spending exercising.”

Self-sacrifice and loss of own identity. Similarly, the themes of self-sacrifice and loss of own identity emerged from the interview material in which many mothers and a few fathers talked about how, as a parent, you learn to make much self-sacrifice. In this sense, PA was described as just one of the many losses that as a parent you come to accept. As one father explains,

I think everyone has given up some kind of activity to be a parent. . . . I’m sure probably seventy percent of the males would have given up something to have kids. I’d say it sounds a bit harsh but you know what I mean, like let it slide a bit or let it go to have kids. It’s just the way it is.

Some mothers elaborated on how this process of self-sacrifice, which is created as a result of fulfilling the mother role, has the consequence of losing one’s own self-identity. These mothers described how they continually “put themselves last” and how they now believe others view them as “Lisa, Rebecca’s mother” not as “Lisa, an individual”. As one mother explains, “You put everyone and everybody first. You just lose yourself in your job of being a mother. And I think it’s different for women than it is for men, because men still find time to do their selfish things.”

The Influence of Social Roles: The Partner Role

In addition to the parenting role, for some parents, the partner role was described as having an influence over their PA-related behaviour. One main theme emerged in relation to the positive influence of the partner role on one’s activity performance, and two main themes were identified in relation to its negative influence.

Sexy wife. In a positive sense, for a few mothers, engaging in PA was viewed as a way of staying fit and attractive for their husband, reflected in the theme sexy wife. These mothers described the personal and intimate feelings they experienced with their husbands as a result of keeping themselves active. They talked about how, because they were active women, the confidence in their self image improved and this, then, made them become more receptive and giving to the intimate needs of their husbands. In a group interview the mothers explain,

I think, and this is getting a bit private as well, but I think it helps with your relationship. When you're feeling better you're more giving of yourself to your partner. I think you know in more ways than one. But I just think that is really important as well. . . . I definitely think you become more giving to your partner, like you just feel . . .

You feel sexy. Let's face it, when you feel sexy things happen right.

Dutiful and good wife. In a negative sense, though, some mothers presented a discourse of being a dutiful and good wife in which they were conscious of the need to spend time with their partner and of their role around the house. These mothers viewed their wife role and fulfilling the duties required of a wife as more important than their own needs to be active:

And another thing if you wanted to exercise in the afternoon say, I'd think, and even though my husband always says "Go have a good time I'll cook dinner" or whatever, I always go "No that's my job, you go to work I don't go to work." Even though that is the one time I can go out and do stuff when he's home. You still think that's my role I can't put that on him, even though he offers and he likes to cook.

Empathetic husband. A few fathers also described how their husband role influenced their activity levels. In this sense, a feeling of empathy for their wives' needs tended to override their desire to be active. These fathers described that they did not make the most of opportunities

to be active because of the need to give their wives a break from the children as well as the need to keep harmony with their wives by eliminating any jealousy or anger. As one father explains,

It's just you know I can't be selfish in doing what I'd like to be doing, so I just don't do it. So that's probably it you know, I'm aware if I do it, if I go out and do physical activity maybe my wife might be a bit angry or something, so you don't bother.

The Influence of Social Roles: Resolving the Conflicts

When parents were asked how they could resolve any of the conflicts that arise between fulfilling their important roles and being active, all offered suggestions of resolutions.

Assertive in asking for help. To resolve conflicts which arise between fulfilling important social roles and being an active person, some mothers generated a discussion around the need to be more assertive in asking for help. These mothers discussed that the help given would allow them the opportunity to engage in some form of PA. One mother explains, "I think it's just finding that you need to ask someone to do something for you. You know if any of you asked me to look after say Amy while you went to the gym I'd do it no worries."

Reframe beliefs about household chores. Additionally, some mothers and one father talked about how reframing beliefs held about household chores could help resolve the conflicts between fulfilling role obligations and being active. These parents described that more opportunities would arise, as more time would become available, if they could lower their standards in relation to household chores. As one mother explains,

So I guess I would have to lower my standards so that I could then say to Bill, rather than doing the housework on Saturday morning, I will go out and do some swimming or go to the gym or do what ever and fill that time with exercise.

A few mothers elaborated on this theme of reframing household beliefs and described ways of reconsidering how chores could be done so they could get their PA for the day, such as “clean more vigorously” or “put the radio up really loud and boogie around the house.”

Accepting and deserving of own needs. Some mothers, in these discussions of the resolutions to conflicts that arise between fulfilling important roles and being active, suggested that one should be more accepting of their own health needs and the need to have some self-time:

I think that I'd probably have to be more assertive in the family and just say this is important to me, I need to do it. I think perhaps somehow coming to terms with myself that it's ok to have timeout and be an individual and that it's important to have physical exercise and look after myself.

These mothers described the need to accept that one is deserving of and entitled to keeping oneself healthy through being active, and hold a belief that being active is ultimately making you a better person. One mother explains, “I think you need to start saying that this is going to make me a better person. So I don't feel guilty now putting her in crèche two hours a week to go to the gym.”. Another mother explains, “I need to think that even though I'm juggling being a mother and whatever else I'm juggling . . . that I'm important enough to be able to deserve the time, time to myself to keep myself fit and healthy.”

Readjust lifestyle and routines. A strong theme that emerged for both mothers and fathers was the notion of readjusting lifestyles and routines to accommodate PA. Parents discussed many ways in which they could readjust their lives to accommodate PA including: doing more activities on the weekend, organising family routines to include PA, integrating PA and the family, learning to replace unhealthy lifestyle patterns with PA, turning the mobile phone off, and learning new ways to be active. As one father explains, “I guess it's choosing to think

outside that perspective of ‘this constitutes physical activity’ . . . Ok it’s not what you’re use to, but let’s have a go at it because this fits within your time restraints, within your budget restraints, your responsibilities as a parent.”

Choices and priorities. Overall, though, it was acknowledged that parents do have choices and at this point, for many parents, priority to performing the other important roles over engaging in PA was often talked about. One father explains,

For me the issue really is about if I do exercise where do I take the time out of, and it is difficult. And again I need to take responsibility for it. I’ve chosen not to take the chunks out to devote it to exercise. So I define it as being time poor, although everyone has a choice. So ultimately it comes down to that I don’t prioritise it high enough.

It should be noted, however, that participating in the interview process and talking about PA forced parents to think about these choices and take a closer look at the priority given to their own health needs. As a result, some parents expressed how participating in the interview allowed this issue of choice and priority to be brought to the surface and, thus, making them reevaluate their life choices in which PA engagement was now described in a more positive light. As one father explains about the interview process, “It’s certainly very thorough and looks through those deeper issues. And even sitting here thinking about it stimulates my own thinking, okay there’s areas where I can do better and start to be a bit more deliberate [about PA participation]”. Other examples include,

Look, you’ve really opened up a new chapter for me. Like I don’t often sit and think about this sort of thing [PA engagement], so yeah. Like you get home from work and you get into your routine and doing exercise is just not that high on your list. It’s just a matter of breaking that, so yeah today’s been great. [Father]

Simply asking these questions really makes me think about what I do because it's something you don't think about. . . . I suppose we've started to think about how all those day-to-day things are bogging us down, so now we've gotta start thinking how can we manage our time a bit better so we can get the weekends, at least a little bit of it anyway, to do some exercise. So just taking that time to think about what we can do for ourselves, which will ultimately benefit the family anyway. [Mother]

Discussion

It is well established in the literature that underlying beliefs and perceptions play an important role in the decision-making processes of being physically active (Sallis & Owen, 1999), and parents are no exception (Jenkins et al., 2006; Lewis & Ridge, 2005; Miller & Brown, 2005). However, these accounts of PA behaviour ignore that people are embedded within social networks which are historically and culturally specific. What is important to consider, therefore, is that interactions with others (e.g., partners, friends, neighbours, community groups, and even the interview process) help to shape one's knowledge of the world and, thus, influence one's patterns of action. The experiences encountered with raising a young family are fraught with many challenges (e.g., financial issues due to decreasing work commitments in favour of childcare commitments, time issues due to contending with childcare needs) that were previously not present before parenthood. Additionally, parents are being shaped by the interactions they encounter with their children (e.g., sleepless nights due to childhood sickness, child feeding routines). Thus, in becoming a parent one is forced to reconstruct their position in life and previous ways of knowing and, therefore, behavioural patterns might be altered in this reconstruction process.

Evidence suggests that gaining the perspective of specific groups is needed to ensure effective health promotion (Müller-Riemenschneiderl, Reinhold, Nocon, & Willich, 2008); thus, this study aimed to gain an understanding from both mothers' and fathers' perspectives of how parenthood is understood to affect PA performance. This aim is important given that parents of both sexes are at risk for inactivity (Bellows-Riecken & Rhodes, 2008). By exploring the perspectives of parents of both sexes, this study provides a unique contribution to the literature understanding PA behaviour by providing a balance of ideas within a defined at-risk population. Understandings of PA, patterns of PA behaviour, and the influence of social role identities were explored.

Understandings of Moderate Physical Activity

The findings from this study demonstrate that parents understand that moderate physical activities result in a rise to the heart rate and that some form of effort is required in the performance of such activities. Parents also recognise that PA extends beyond deliberate forms of exercise in which many of the parents described structured as well as incidental types of activity as falling within the classification parameters of moderate PA. Thus, parents' knowledge of what constitutes PA seems to align with what is presented in PA recommendation guidelines (Australian Government Department of Health and Aging, 2005).

Current Physical Activity Habits

In discussions of current PA habits, the identification of parents' irregular activity practices, placing less importance on their own activity in favour of their child's activity, and taking a more supervisory role of their children's PA endeavours supports the suggestion that parents of young children are a group at-risk for inactivity (Bellows-Riecken & Rhodes, 2008). Furthermore, parents' descriptions of current activity habits suggest that inactivity levels might

be attributable to how parents' construct being active with children in which these activities were represented in ways of not being relaxing, stimulating, or challenging enough for an adult. These descriptions might also contribute to the desire of some parents to be active independent of their children, which often stemmed from the need to have some parent timeout. These findings highlight the difficulties parents face when trying to be active with their children and might explain why previous intervention programs designed to integrate both parent and child into an activity have met with mixed success (see Rowley, Dixon, & Palk, 2007; Watson, Milat, Thomas, & Currie, 2005).

Changes in Physical Activity Habits

In support of the current literature (Bellows-Riecken & Rhodes, 2008), the individuals in this study described that, with the presence of children, parents do experience a change in their PA habits. For many parents, a decline in activity levels was experienced and this decline is often exacerbated with the presence of additional children. In addition, despite the habitual nature of PA, there was evidence to suggest that, for parents who engaged in regular activity pre-having children, their previous activity habits were not sufficient in helping them remain active post-having children. Furthermore, many parents experienced a decrease in the intensity level of the physical activities they engaged in, which was often described as resulting from the change in the types of activities they performed (i.e., the activities became less structured type activities to activities that were more incidental and focused around the children). Parenthood is a major life event with many lifestyle changes needed and it is suggested that lifestyle transitions may influence changes in an individual's health behaviours (Borgatta, Bulcroft, Montgomery, & Bulcroft, 1990). From the descriptions of the parents in this study, the proposition of lifestyle transitions affecting one's health behaviours seems to be supported in that parents' physical

activities declined in amount, type, and intensity and highlight once again the importance of this specific group being at risk for inactivity.

What is also acknowledged is that, despite the challenges faced by parents, parenthood does not make engaging in PA impossible but rather can create opportunities to be physically active (Jenkins et al., 2006; Lewis & Ridge, 2005). The voices of the participants in this study supplement the findings of these previous studies in which some parents, and in particular older parents, did experience parenthood as an opportunity to become active or to become more active. These parents often talked about how they seek opportunities to be active (e.g., accessing parks with walking/bike tracks, sourcing support from family members) that enables them to be active in the ways they wish. Given that, in this study, parents described how they come to accept the changes of their PA habits and construct an acceptance for the lack of PA they currently perform, it is important for researchers to promote emancipatory goals and engage parents in constructing more positive perspectives toward PA engagement, such as altering the discourse of parental PA from being difficult to achieve to the discourse of opportunistic parent where PA is achievable. Support for the value of positive interactions was evident in this study in which some of the parents, as a result of being involved in the interview process, started to reflect on their own PA involvement and reconstruct their knowledge about regular PA participation in ways that it can be achievable. This reconstruction is especially important given that, for some parents, envy and resentment can manifest from perceiving that other people have the ability to maintain previous activity levels.

The Influence of Social Roles

Identity theorists suggest that people's behaviour can be affected by the demands of fulfilling multiple role obligations (Stryker, 1968, 1987); however, the literature is limited in

exploring how social constructions of role expectations might influence patterns of action, in particular parental PA behaviour. This study sheds some light on this current gap in the literature. Specifically, parents discussed how being active is considered to be an important part of their own role as a parent as it helps to create an active family culture in which the children are shown, through example, the importance of being active. This finding points to an interesting phenomenon of the merging of two social roles, namely the mother/father and the PA role model. The experience of parenthood, therefore, can alter the meaning of PA participation in that the behaviour is constructed in ways of parental role modelling. Parents also expressed a desire to live longer and being active was described as a way to attain longevity so one can then live to see their children age as well as fulfil parenting duties. Thus, given the historical context of advanced medical practices that ensure longer living years of children, parents are constructing meanings about PA within this social context of prolonged life. Furthermore, in parents' descriptions of their parenting role, being active was constructed in ways that help to create a best standard in parenting practice and is believed to assist in maintaining a sense of family connectedness in which members feel happy about fulfilling role obligations and bring the family unit together through active play. These findings suggest that the meaning of PA may be altered through the experiences of parenthood in that PA participation is viewed within the social framework of parenting and the positive influence it has on the parenting role, not within the framework of the individual and the benefits the individual may obtain. This active role as an extension of the parenting role was considered with real importance for some parents and suggests that having an active role is often merged with the parental role.

Additional support for the merging of these two roles is evidenced in discussions of the negative descriptions of being an active parent. Specifically, having an active role was

considered as not important for some parents as the behaviours that are needed to be performed to fulfil the parenting role are given more value; thus, engaging in PA attaches feelings of guilt as time would be taken away from parenting commitments. Accordingly, PA is traded-off for the responsibilities of fulfilling the parenting role and becomes just one of the many losses that is accepted as part of being a parent. As young children require considerable care and attention, parents often find themselves competing against the demands of their family role obligations with their need to engage in health promoting behaviour, including PA (Nomaguchi & Bianchi, 2004). It is clear from the voices in this study that this assertion rings true for parents and that many tensions arise around the identity as a parent and being active. The overwhelming sense of an 'ethic of care' (Lewis & Ridge, 2005; Miller & Brown, 2005) makes it difficult, then, for parents to prioritise their own health needs over the needs of their parenting responsibilities. In this study, this notion of an ethic of care was especially heard in the voices of mothers and may be the result of ingrained socially constructed notions of motherhood (e.g., children's well-being before mother's well-being, time away from responsibilities is selfish time). Adhering to these traditional mother concepts, therefore, acts as a hindrance for engaging in regular PA as these women find it difficult to construct justifications for such behaviour to overcome notions of compromising family responsibilities. This ethic of care is further evidenced in discussions around being active in relation to the partner role in which some mothers (and a few fathers) felt a strong duty to their relationship and domestic responsibilities as this, then, makes them a 'good' and 'understanding' partner.

Overall, these positive and negative themes about being active that relate to relationship responsibilities and parent identities underpin parents' decision-making around PA. Consistent with identity theories (Stryker, 1968, 1987), valued perceptions of the parenting and partner roles

in relation to being active have a positive influence on one's activity habits, and negative perceptions have the reverse effect; although, it should be noted that the negative perceptions associated with the sense of an ethic of care is more often felt by mothers. This finding might help to explain the gender discrepancies in the literature in which mothers' activity, rather than fathers' activity, is suggested to be affected more from the presence of children (Bellows-Riecken & Rhodes, 2008). The suggested greater level of inactivity in mothers might be explained also by gender inequalities that still persist within society today in which women, despite taking on additional roles (e.g., worker role), spend more time fulfilling the traditional socially constructed role expectations of women (e.g., household chores, childcare responsibilities; Australian Bureau of Statistics, 2009), with recent research suggesting a gender gap increase with these more traditional role obligations with the transition to parenthood (Baxter, Hewitt, & Haynes, 2008). This uneven distribution of role obligations might, then, inhibit leisure-time activities (Bittman & Wajcman, 2000) including involvement in regular PA. Future research should continue to explore these deeper issues as potential barriers to PA participation, particularly for mothers, but also for fathers given that role delineations are historically placed and, therefore, continually evolving (see Baxter, 2002; Sullivan, 2000).

All parents were, however, able to identify ways to resolve these conflicts that arise between fulfilling their important role obligations and being an active person. For mothers, in particular, these resolutions included being assertive in asking for help and accepting of one's own health needs. Resolving these conflicts is considered a way of regaining a sense of self-identity and independence in which one can then feel deserving of attending to their own health needs. It was also suggested that one could reframe beliefs about household chores (i.e., reframe beliefs around maintaining high household standards to be more realistic) as well as reframe how

one performs those household duties (i.e., reframe them as fun). However, many mothers and fathers, to balance tensions between fulfilling multiple roles and being active, discussed ways to readjust lifestyles and routines to accommodate PA including doing more activities on the weekend and learning new ways to be active. Empowering parents to improve their perspectives about PA and taking a more action orientated perspective to research is important given that, in the present study, there was evidence to support that generating positive discussions around PA participation can alter one's constructions of PA.

Study Limitations

This study explored both mothers' and fathers' understandings about PA-related behaviour and, thus, has the major strengths of investigating a target group within the PA domain that is currently not well understood or researched. Furthermore, this study, as well as providing a balance of ideas, provides a unique perspective for understanding the underlying issues via adopting a social constructionism perspective, therefore enriching the study's conclusions. It is recognised, however, that this study is subject to several limitations. First, the snowball recruitment method might have resulted in a sample bias as participants might have similar perceptions to the individuals recruiting them (Brace-Govan, 2004). Second, descriptions of former PA are retrospective in nature and, therefore, parents may have overestimated (or underestimated) their previous PA habits. Third, the study participants were Caucasian. Much research within the PA domain has highlighted the importance of cultural beliefs about PA (e.g., Fahrenwald & Shangreaux, 2006; Harley et al., 2009). Given that, in an Australian context, Indigenous Australians are identified as a group at-risk for inactivity (Bauman et al., 2002), parents of dependent children within this population might be more at risk; thus, future research should investigate understandings about PA performance among this population. Finally, the

research focused on understanding PA from the perspective of the individual and, therefore, did not capitalize on natural interactions that occur within family units (i.e., the couple relationship) or across generations. The family represents one such naturally occurring multi-relational and multi-generational unit. However, while targeting the family in understanding PA seems opportune, research suggests that targeting the individual is beneficial in understanding PA behaviour (Kahn et al., 2002).

Conclusions

This research provides a better understanding of how parents make sense of their PA behaviour. It is clear that the parents of this study understand the meaning of moderate PA and are not victims of a lack of knowledge on the fundamental principles on what constitutes PA. Exploring the PA habits of these parents reinforces that parents of young children are a group at risk for inactivity. The study highlights that parents are not only at risk for declines in the amount of PA performed but are also at risk for declines in the intensity level of the activity performed. Some parents, however, construct parenthood as an opportunity to be active, reinforcing the suggestion that parenthood does not make being active impossible.

Although parents engage in a variety of activities, many parents highlight the difficulties in being active with children. This finding challenges researchers and those involved in health promotion when developing intervention programs aimed at increasing parental PA to consider strategies that are integrative as well as independent of the children (e.g., improving access to facilities with flexible childcare arrangements and providing opportunities for integrative child/parent programs). Additionally, given the influence of social role identities on parents' activity performance, the study highlights the importance of intervention action that is directed toward creating more supportive social contexts. Specially, contexts need to legitimise the

importance of asking for help to be active, emphasise the importance of being accepting and deserving of fulfilling one's own health needs, promote a reframing of beliefs around household responsibilities, and balance lifestyle routines in which PA is incorporated. Strategies to improve parents' conditions, therefore, should include challenging social constructions of traditional parenting concepts in ways that promote PA (e.g., active role model, best parenting) and promoting household chores as fun PA. Furthermore, employment organisations and community facilities should provide environments that are supportive of PA (e.g., shower, gym, and bike rack facilities in work places; exercise equipment, wide footpaths for prams, and walking/bike tracks in community places) to help parents balance their lifestyle routines. Effective promotion of PA in parents of young children is essential given the low rate of activity in this population. Results from this study highlight parents as an at-risk group of inactivity and provide a foundation on which to build effective intervention programs aimed at increasing parents' PA.

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