GETTING THE MESSAGE HOME AND THE CHILDREN OUTDOORS: PARENTS' PERCEPTIONS OF BARRIERS AND FACILITATORS TO ENROLLING THEIR CHILDREN IN A SUMMER OUTDOOR ACTIVITY PROGRAM

by

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Abstract

Background The decrease in children’s outdoor activity and its associated health impacts form the basis for health promotion initiatives to encourage children's outdoor activity. As gatekeepers to their children’s participation in registered programs, parents must be convinced that the benefits of enrollment in such programs outweigh the costs. A guiding framework is thus needed to help recreation providers identify critical program components and effective messages to attract parents. Purpose The main purpose of this study was to gain insight into parental perceptions of barriers and facilitators to enrolling their children in an outdoor activity program in order to inform the development of an action planning framework for recreation providers. A secondary purpose was to apply the framework to an existing summer activity program implemented by the City of Kingston department of recreation. Methods This qualitative study was guided by Social Marketing principles (i.e., the “4 P’s”: Product, Price, Promotion, Place). Key informants, 18 parents of children 4 to 12 years old from 16 different neighbourhoods located in a mid-size Canadian city, participated in 4 focus groups and 7 interviews. Sessions were audio recorded and transcribed verbatim. Data analysis involved both deductive and inductive content analysis. Results Parental intentions to enrol their children in an outdoor activity program were shown to be influenced by barriers and facilitators, related to Product and Price, contained within the following themes, ranked from most to least influential: program safety, program social environment, program structure, child preferences, cost and convenience, skills development, variety of activities, community, the local level, and, staff engagement. The influence of these themes on parental intentions seems to be moderated by the theme of Information transfer, related to Promotion. Place was not found to influence intentions. For each theme, a continuum emerged, encompassing both positive and negative influences (e.g. 
high program safety to lack of program safety) upon parents’ intentions to enrol their children in an outdoor activity program. **Conclusions** The Social Marketing Framework is useful to inform the development of an action planning framework for recreation providers seeking to enhance enrollment in their outdoor activity programs.
Co - Authorship

The co-author of the manuscript presented here is Dr. Lucie Lévesque.

Manuscript: Parents' Perceptions of Barriers and Facilitators to Enrolling their Children in an Outdoor Activity Program. This manuscript will be submitted for publication in Health Promotion Practice. Danai Kapsokefalou was responsible for conducting background research, contributing to the design of the study, coordinating the study, conducting the data collection and data analysis and writing the manuscript. Dr. Lucie Lévesque proposed the idea the development of an action planning framework based on social marketing, and she provided guidance on the intellectual content of the manuscript, as well as editorial assistance during the writing process.
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Prologue

The present research involved an introductory phase that originated from a partnership with the City of Kingston’s Recreation Department. During the fall of 2012, I was working as a volunteer for the Assistant Supervisor for the City of Kingston’s Recreation Programs to determine the best locations for delivering a summer park program. This phase provided me with background information on the program's context from the perspective of the community's organisational representatives and allowed me to develop the project into a course-based study in winter 2013. As the project evolved, I expressed an interest in helping to promote the park program and in collaboration with the Recreation Department’s stakeholders, developed a plan to inform a promotional campaign for the park program. It quickly became apparent that the scope of the data collection (conducted in spring 2013) and the richness of the data would require a greater investment of time and analysis. Thus, the decision was made to make this project the focus of my Master’s thesis.

My interest in this study did not derive only from my perspective as a health promotion researcher, but also from my personal experience of being a parent of an 8 year old boy. In contrast to older times, today, children’s outdoor activity is not naturally part of children's everyday life, but instead part of parents' effortful planning. My experience so far has suggested that in order for my son to socialize, be physically active, and spend time outdoors, I need to make a plan, perhaps coordinate with other parents' busy schedules, transfer my son to the "activity" location, pay for the activity when it comes in the form of a program, and oftentimes wait until this activity is over in order to transfer him back home. Children’s outdoor activity is not easily accessible for most of the families I know. Thus, finding ways, through health
promotion initiatives, to reintegrate outdoor activity into children's everyday life is an idea that I defend both as a parent and as a health promotion researcher.

My experience as a parent provided me with an additional motive to conduct this study, but my approach as a researcher focused on letting the experiences of the participants’ shape the study’s findings, and not my preconceived ideas on this subject. Despite the fact that the methods used in this project do not clearly indicate a phenomenological approach, my view as a researcher during the data collection and data analysis entailed an existential phenomenology perspective. Existential-phenomenology is defined as a paradigm blending the philosophy of existentialism with the methods of phenomenology (Valle & King, 1978). This perspective resulted in a research approach where participants' individual experience was perceived in a dynamic relationship with its context (May & Yalom, 1984). Aspects assessed in this study were not divided and objectified according to a positivist Cartesian paradigm (Thompson, Locander & Pollio, 1989). In order to capture parents’ experiences relative to the barriers and facilitators they face in enrolling their children in an outdoor activity program, recorded interviews were accompanied by observational notes.
Chapter 1: Introduction

1.1 General Introduction

Children’s outdoor activity in Canada has dropped 14% over the last decade (Physical Activity Monitor, Canadian Fitness & Lifestyle Research Institute, 2010; Active Healthy Kids Canada, 2012). According to the 2007-2009 Canadian Health Measures Survey, 62% of children and youth’s waking hours consist of sedentary time, whereas only 7% of children and adolescents attain the recommended activity level (Colley et al., 2011). The prevalence of sedentary indoor lifestyles in western societies has been shown to be related to serious health consequences. This generation might be the first generation to have shorter lifespan than their parents (Ludwig, 2007).

Evidence attests to significant health benefits from both children’s exposure to nature and physical activity (McCurdy, Winterbottom & Mehta, 2010). Prior research shows that being active outdoors results in more positive effects on mental wellbeing than any indoor physical activity (Coon, 2011), while overweight rates are 27-41% lower among children spending more time outdoors (Cleland, Crawford, Baur & Hume 2008). Such evidence has formed the basis of an emerging critical dialogue among public health stakeholders regarding the promotion of children’s outdoor activity as a health promotion strategy (AAP, 2006; CFLRI & ParticipACTION, 2010; Clements, 2000; Perrin, Bloom & Gortmaker, 2007; Coon, 2011; McCurdy, Winterbottom & Mehta, 2010; Mithal et al., 2009; Pica, 2003).

The City of Kingston, Ontario offers a free outdoor recreational summer program for children between the ages of 4 and 12 years old, at 14 park locations throughout the city. This program has been operating for the past 50 years, but participation rates have been below
expectations of approximately 20 children per park, per day based a child to staff ratio of eight to one (e.g., there were two staff per location and some locations reported fewer than ten children per day).

Contextualized in the City of Kingston, this study takes a Community Based Participatory Research approach and draws on a social marketing framework to understand the barriers and facilitators influencing parental decision making regarding registration of their children in the outdoor activity program in Kingston specifically, and in children’s outdoor physical activity in general.

1.2 Purpose of the Thesis

The main purpose of this study was to gain insight into parental perceptions of barriers and facilitators to enrolling their children in an outdoor activity program in order to inform the development of an action planning framework for recreation providers. A secondary purpose was to apply the framework to an existing summer activity program implemented by the City of Kingston department of recreation. The action planning framework is intended to be used by recreation providers as a resource for planning children’s programs and developing relevant messages to encourage parents to enroll their children in outdoor activity programming. Application of the framework to the Kingston outdoor activity program is meant to inform the refinement and promotion of the City of Kingston summer outdoor activity program.

Considering that parents play a determining role in their children’s outdoor activity (Davison, 2004; DuBois, 2010; McGuire, Hannan, Newmark-Sztainer, Falkner & Story, 2002; Wang, Chatzisarantis, Spray & Biddle, 2002; Ward, Saunder & Pate, 2007;), we identify parents as being the appropriate target population for messages promoting outdoor activity programs for children. Despite the pressing importance of promoting children’s outdoor activity, to our
knowledge, there is no prior research providing a guiding framework to inform practical communication approaches that best motivate registration in outdoor activity programs for children. A guiding framework is needed for recreation providers seeking to align program content and promotion with parental requirements and preferences. This framework may enable more effective resource allocation and better program uptake by families.

1.3 Thesis Organization

The current thesis was developed in accordance with requirements of Queen's University School of Kinesiology and Health Studies. Chapter 2 contains an examination of the literature focusing on outdoor recreation and health, outdoor activity and children's health, physical activity recommendations and how they relate to outdoor activity, barriers to children’s outdoor activity, the role of parents in their children’s enrollment in outdoor activity programs, the development of health promotion interventions for children, health message development, the background of the City of Kingston summer outdoor activity program for children, Community Based Participatory Research, and Social Marketing and the 4Ps. This chapter culminates with the study purpose. Chapter 3 presents a manuscript embodying the core of this research study, which assessed parental perceptions guiding intentions to enroll their children in an outdoor activity programs in general, and in the City of Kingston program in particular. Chapter 4 expands on the study's theoretical and practical implications and contribution of the findings for the health promotion domain.
1.4 References


Chapter 2: Literature Review

Evidence suggests a decreasing tendency for children to engage in outdoor activities. Only 10% of children walk or cycle to school or other destinations on a regular basis (AHKC, 2009), and screen time among children and teenagers has reached six hours a day (AHKC, 2010). It is estimated that during the past three decades, children’s play time has dropped 25% while unstructured outdoor activity has decreased by 50%. Inactive time increases with age, surpassing nine hours a day for adolescents aged 15-19 years (Colley et al., 2011). In a study conducted by Clements (2004), investigating the status of outdoor play, 70% of mothers reported playing outdoors every day when they were children whereas only 31% of children from this sample of mothers were reported to play outdoors daily. This decrease in outdoor play and overall physical activity is related to increasing rates of childhood obesity in developed countries. It is estimated, that over the past 30 years, childhood obesity in Canada has tripled (Colley et al., 2011; Health Canada, 2013).

In addition to childhood obesity and related diseases, today's children are more vulnerable to asthma, attention deficit hyperactivity disorder (ADHD), and vitamin D deficiency (Mithal et al., 2009; Perrin, Bloom & Gortmaker, 2007). These conditions can be linked to lower activity levels and to more time spent indoors. Louv (2005) coined the term “nature deficit disorder” to reflect the consequences of lacking exposure to natural environments. Nature deficit disorder may be responsible for attention difficulties, decreased use of human senses, and higher rates of physical and emotional illnesses (Louv, 2005).

Concerns regarding the health impacts of indoor based lifestyles have been expressed since the 19th century; it is at this time that parks and outdoor recreation areas started developing with an aim to achieve public health benefits (Godbay, 2009). Increased exposure to artificial
environments has been shown to lead to feelings of exhaustion and a diminished sense of vitality and health (Katcher & Beck 1987; Stilgoe 2001). Indoor environments contain 25 to 60 percent more air pollutants compared to outdoor environments (California Air Resources Board, 2009). Spending time indoors encourages inactive behaviours (e.g., TV viewing; Godbey, 2009) and consumption of calorie dense food (Thomson, Locander & Pollio, 2008).

In contrast, natural surroundings ranging from wilderness (Hartig, Mang, & Evans, 2001; Kaplan, 1984) to countryside (Miles, Sullivan & Kuo, 1998), to city parks (Cimprich, 1993), to rooms with houseplants (Lohr, Pearson-Mims & Goodwin, 1996) have been associated with an increased sense of wellbeing and health (Godbey, 2009). Evidence associates natural surroundings with calming effects on individuals experiencing stress, more rapid recovery of injured individuals, and decreased illness symptoms among prisoners whose cell windows face nature (Godbey, 2009; Frumkin, 2001; Moore, 1981; Parsons, Tassinary, Ulrich, Hebl, & M. Grossman-Alexander, 1998; Ulrich, 1984). Finally, there is an abundance of evidence supporting the relationship between outdoor environments and reductions in obesity related and mental health diseases (e.g., Driver & Knopf, 1976; Driver & Cooksey, 1977; Driver, 1985; Godbey, Graefe & James, 1992; Kaczynski & Henderson, 2007; Godbey, 2009, McCurdy, Winterbottom & Mehta, 2010; Tinsley, Tinsley, & Croskeys, 2002).

2.1 Outdoor recreation and health

2.1.1 An overview of outdoor recreation and health

Outdoor activity and recreation contribute to health in a holistic manner, which is consistent with the World Health Organization (2003) definition. That is, a state of wellbeing, characterized by optimal physical, mental and social wellness, rather than only the absence of
disease. Outdoor activity may yield not only physical health benefits, but also positive mental and emotional outcomes. Being active and exercising outdoors results in more positive effects on mental wellbeing than any indoor physical activity (Coon, 2011). It has been found that even showing nature pictures to people who are exercising indoors can lead to a significant reduction in blood pressure and a more positive effect on mood than exercise alone (Pretty, Peacock, Sellens & Griffin, 2005).

Prior research demonstrates that spending time outdoors has a positive impact on blood pressure, obesity and obesity related diseases, as well as specific behavioural problems. (e.g. Frumkin, 2001; Godbey, 2009; Hartig, Mang, & Evans, 2001; Kaplan & Kaplan 1989; Kaplan 1995; Leather, Pyrgas, Beale & Lawrence. 1998; McCurdy, Winterbottom & Mehta, 2010; Moore 1981; Parsons, Tassinary, Rohde & Kendle 1997; Ulrich, Hebl, & Grossman-Alexander, 1998). Increased exposure of children to natural environments has been found to decrease stress levels and to result in positive self-worth (Wells & Evans, 2003).

2.1.2 Outdoor activity and children's health today

Play time in natural settings contributes significantly to children’s healthy development in many ways. Vigorous play activities enhance muscle and bone strength and support the growth of the child’s heart and lungs, as well as other vital organs essential for normal physical development (Clements, 2000; Pica, 2003). Research findings reveal that children living within 1 km of a park with a playground are five times more likely to have a healthy weight (Potwarka, Kaczynski & Flack, 2008) and overweight rates are 27-41% lower among children spending more time outdoors (Cleland, Crawford, Baur & Hume, 2008). In addition, evidence suggests that vigorous outdoor play activities increase the development of the fundamental nervous
centers in the brain, enabling clarity of thought as well as learning abilities (Clements, 1998; Gabbard, 1998; Hannaford, 1995; Jenson, 2000). Being physically active in nature can also be used as a coping tool for children with ADHD as it has been found to reduce inattentive symptoms (Taylor & Kuo, 2009). Finally, outdoor play activities offer children the opportunity to develop a range of skills necessary for adult life, such as social competence, creative thinking, and problem solving (Miller, 1989; Moore, 2010; Rivkin, 1995).

2.2 Physical activity recommendations

Canadian guidelines recommend that children and adolescents aged 5 to 17 years accumulate 60 minutes of moderate-to-vigorous physical activity (MVPA) each day to achieve health benefits (CSEP, 2013). More specifically, children should engage in vigorous physical activity at least 3 days a week (CSEP, 2013; Shields, 2005; USDHHS, 2008). By the term physical activity, the guidelines refer to three types of activity: aerobic, muscle-strengthening and bone-strengthening, and activities increasing flexibility (CPS, 2012). Examples of aerobic activities include running, hopping, skipping, jumping rope, swimming, dancing, and bicycling (CPS, 2012; USDHHS, 2008). Muscle-strengthening activities include playing on playground equipment, climbing trees, and playing tug-of-war while bone-strengthening activities involve running, jumping rope, and basketball. Flexibility increases can be achieved to different degrees by engaging in any of the above mentioned activity examples, both aerobic and anaerobic (CPS, 2012; USDHHS, 2008).

Children spending time outdoors are more likely to meet the national physical activity recommendations (AHKC, 2012). So far, national recommendations do not directly place a specific percentage of recommended physical activity in an outdoor context. However, the Canadian Sedentary Behaviour Guidelines for Children and Youth (CSEP, 2011) do recommend
outdoor activity by encouraging active play time outdoors. At the same time, the U.S. National Environmental Education Foundation acknowledging the importance of outdoor activity in natural environments, is working on integrating outdoor activity into pediatric care in the form of medical prescriptions (NEEF, 2013). Finally, research studies recommend that parents should encourage children to play outside as much as possible, while infants and toddlers should be allowed to engage in outdoor physical activity, unstructured free play and exploration (AAP, 2006; CFLRI & ParticipACTION, 2010; McCurdy, Winterbottom & Mehta, 2010).

2.3 Barriers to children’s outdoor activity

Despite the benefits of outdoor activity, the physical and social context shaping modern lifestyles, especially those in urbanized environments, may impede play-oriented, unstructured childhood activities (Gray, 2011). For example, the dominant residential design of suburbs in North America, using single zoning has been accused of removing physical activity from people's daily life (Godbey, 2009). Other built environment features that can limit active commuting and recreational outdoor activity include sidewalks that are not connected, and a lack of recreational facilities, playgrounds, and cul de sacs (CDCP, 2012; Godbey, 2009). The built environment infrastructure, overly organized lifestyles, and the emerging parenting style, which values primarily academic oriented activities (including organized sports) and a closely supervised childhood upbringing, direct today's children towards indoor based sedentary activities (Godbey, 2009, Luv, 2005; McCurdy, Winterbottom & Mehta, 2010).

Additional barriers to children’s outdoor activity include a large dependency on electronic media and parental concerns about neighbourhood crime and safety (AHKC, 2012; Farley 2007; Karsten 2005; Lumeng, Appugliese, Cabral, Bradley & Zuckerman, 2006; Mullan, 2003). In a survey of 830 mothers of 3-12 year old children, 85% of mothers identified e-media as the
number one cause for children not engaging in outdoor activity, while 82% reported crime and safety as factors preventing their children from playing outdoors (Clements, 2004). E-media seem to dominate children's free time not only due to children's preference of e-media over other activities, but also due to the parents' perception that e-media constitute an easy, cost-free and safe child care method. The majority of parents don't have enough time to spend outdoors with their children, and unsupervised outdoor play is often perceived as being unsafe (Clements, 2004). Children whose parents perceived their neighbourhood as being unsafe were four times more likely to be overweight in the first grade (Lumeng, Appugliese, Cabral, Bradley & Zuckerman, 2006). Such evidence indicates the necessity for interventions that educate parents about safe outdoor environments (Seybold, 2006, p.32).

Prior qualitative research, focusing on parental decision making about afterschool time, appears in accordance with this description of a modern control-oriented parenting style. Parental decision making appears to prioritize safety, academic reinforcement, and organized sports (rather than unstructured play; Coe, 2013; USDHHS, 2003).

2.4 The role of parents

The parental role is considered to be a key determinant of health promoting activities among children and youth (Davison, 2004; DuBois, 2010; McGuire, Hannan, Newmark-Sztainer, Falkner & Story, 2002; Wang, Chatzisarantis, Spray & Biddle, 2002; Ward, Saunders & Pate 2007). Children tend to be more active when their parents encourage them to be active (McGuire, Hannan, Newmark-Sztainer, Falkner & Story, 2002) while parent-child interactions, as well as the general home environment, may influence the sedentary behaviours of children (DuBois, 2010). For example, some homes can be described as “constant television households” (Seybold, 2006) as they have the television on at all times. Television viewing has become a
standard daily routine for many families and along with parent-provided computer and video game equipment, can replace active play.

A parent can encourage sedentary or active lifestyle behaviours by being a role model, or by actively supporting certain behaviours on both instrumental and emotional levels. Supporting an active lifestyle might include enrolling children in physical activity programs, encouraging children to engage in physically active games, and providing adequate transportation and physical activity equipment for play (Davison, 2004; Dunton, Jamner & Cooper, 2003; Hoefer, McKenzie, Sallis, Marshall & Conway, 2001; McGuire, Hannan, Newmark-Sztainer, Falkner & Story, 2002; Trost et al., 2003). Parents might also encourage active behaviours by simply setting house rules that control inactive behaviours such as e-media engagement (Ward, Saunder & Pate 2007). Finally, parental support includes educating children about the benefits of active play and helping them to build self-efficacy in relation to physical activity skills (Trost et al., 2003).

Research findings indicate that parental role factors should be considered when planning child health promotion interventions, and that parents are able to play an extremely important role in needs assessment data collection used to inform health promotion interventions (Trost et al., 2003). It has been suggested that the formative research stage of intervention planning "must address the demands of families’ schedules..." and should facilitate “parental involvement in community advocacy related to their perceived need for changes." (DuBois, 2010, p.4).

2.5 Health promotion and children

Leading an active lifestyle appears more challenging for today’s generation of children and their families than it was for previous generations (Clements, 2004). In response to this inactivity trend and its associated health impacts, public health stakeholders have developed health
promotion interventions aiming to promote physical activity in children. Health promotion interventions addressing children, youth and their families typically involve health communication campaigns, community based programs or school-based interventions (Kellou, Sandalinas, Copin & Simon, 2014; Morgan et al., 2014; Vaughn, Wagner & Jacquez, 2013).

Communication campaigns are typically organised communication activities targeting a large group of a given population to achieve a particular health goal (Rogers & Storey, 1987; Snyder, 2001). Appropriate matching of message components (e.g., message frame) is anticipated to result in a message processing style that positively influences recipients' evaluations (Lee and Aaker 2004; Lee and Labroo 2004), intentions (Kim, Rao and Lee, 2009; Labroo and Lee 2006; White, MacDonnell, and Dahl, 2011), and choices (Novemsky, Dhar, and Schwarz, 2007). Community-based approaches often involve the development of programs or interventions to indirectly target the advocated health behaviour, as happens in the case of urban design enabling an activity friendly built environment; the advocated behaviour might also be directly targeted within an organizational/institutional (e.g., school) or community context (e.g., parks, community centers). School as a health promotion setting has been extensively explored in health promotion research and practice (Komro, 2014). The school setting through policy, role modeling dynamics, and administrative engagement may facilitate the strategic delivery of children’s health promotion interventions. In terms of outdoor activity, literature suggests that schools are well-positioned for teaching outdoor skills and appreciation (Godbey, 2009). In contrast to school-based interventions, community based interventions programs are usually attended on a voluntary basis (Ward, Saunders and Pate, 2007). This may translate into participants who are more motivated, but also, oftentimes into low participation.
Although park areas are commonly used to host community based interventions, evidence based evaluations of such programs are limited. According to existing literature, park activity programs have been shown to increase physical activity levels (Parra et al, 2010). However, it is not clear whether park programs attract non park users, and thus increase the community 's physical activity levels, or appeal to park users only (Hamilton, 2011).

2.6 The City of Kingston summer outdoor activity program for children

2.6.1 Program Overview

The City of Kingston, Ontario offers a free outdoor recreational summer program for children between the ages of 4 and 12 years that “provides an accessible, safe, healthy, and active outdoor recreational opportunity to the entire community of Kingston families” (As described by the Assistant Supervisor for the City of Kingston’s Recreation Programs). The program is currently offered at 14 strategic park locations throughout Kingston in order to enable accessibility and to encourage active commuting to program locations (i.e., provide sites at a walking distance from most Kingston homes). Program locations have been changing through the years according to participation and available infrastructure re-assessment. The program content constitutes a balanced blend of vigorous and quiet play oriented outdoor activities following a predetermined list of activities. The exact order of the activities is determined by the program facilitator's evaluation of encountered circumstances (e.g., intense sun, children getting tired). Parents are welcome to stay during the program and to participate in the activities. The ideological underpinnings of the program are promotion of children's health and positive relationships. Some locations offer a full-day schedule (9am-12pm and 1pm-4pm) while others a half day (9am-12pm or 1pm-4pm). Supervision is not provided during lunch hours, and as some of the park areas lack washroom facilities, access to children's homes is advised. Until 2013, the
program did not have a name or branding and its only communication strategy was a mention in the City of Kingston leisure guide, described it as a neighbourhood park program. This program has been operating for the past 50 years, but participation rates during the last four years have been consistently below expectations. Attempts for relocations throughout city parks and alterations to operating hours did not effectively increase participation. Similarly, unsystematic program evaluation strategies (i.e., short questionnaires asking children whether they enjoyed the program) did not provide usable information.

2.6.2 Forming a partnership for program promotion

In the fall of 2012, the City of Kingston’s Recreation Department for the first time in the program's 50 years decided to conduct a systematic program evaluation in order to inform operational program modifications, if necessary, and a program communication plan. This decision initiated the introductory phase of the current study where a partnership between the Assistant Supervisor for the City of Kingston’s Recreation Programs and I originated.

The first stage of this partnership assessed potential needs for program relocation, based on an analysis of demographic characteristics of the Kingston population living near parks where the program was running, and the identification of potentially competitive children programs running in proximity of certain city parks (e.g., Boys and Girls Club of Kingston summer camp). During this phase, I was provided with background information on the program's context from the perspective of the community’s organizational representatives. This information included program attendance numbers in prior years, informal descriptions of child and parent perceptions of the program thus far, as well as challenges the City of Kingston Recreation Department had faced previously with respect to program planning.
At the second stage, in collaboration with the City of Kingston Recreation Department stakeholders, we developed a plan to inform a communication strategy for promoting the outdoor activity program. The core part of this plan was a qualitative research design enabling the understanding of barriers and facilitators to participation in the program from the perspective of the Kingston parental community. In addition to contributing to the development of the research protocol, the city of Kingston facilitated the data collection process by providing light drinks and snacks to the participants.

2.6.3 Towards understanding the perceptions of the Kingston parental community

2.6.3a Community Based Participatory Research

Community Based Participatory Research (CBPR) has been gradually established as a critical methodological approach in the health promotion research domain (Horowitz, Robinson & Seifer, 2009; Israel et al., 1998; Minkler, Backwell, Thompson & Tamir, 2003). CBPR involves in an equitable, synergistic relationship multiple community stakeholders who affect and are affected by a research defined concern. Research within this framework introduces a subject of shared interest among the study participants seeking to incorporate in the emerging knowledge the voice of the population experiencing the issue under study. The resulting embodied voice and insight of the community motivates initiatives enabling sustainable health promotion results (Mensah, 2005). CBPR, typically uses a social justice agenda to build on local resources and to create community capacity (Chaskin, 1997; Jones & Wells, 2007; Roussos & Fawcett, 2000), allowing for long term solutions to local issues.

Public health stakeholders and researchers have come to understand that health determinants are shaped outside of the health care oriented context, and therefore need to be
assessed within the context of their origin (e.g., the community setting). In order to be accurate, the assessment of such information needs to come from inside experts (i.e., community stakeholders). Scientific objectivity and the researcher's distance from the topic under study, in this case, are considered not to lead to an increase of research validity, but to a decrease.

This research study used a Community Based Participatory Research approach which provides a qualitative methodological framework involving the sharing of expertise between the researcher, local organizational representatives and community members within a partnership that aims for the community's health enhancement and wellbeing (Israel, Schulz, Parker & Becker, 2001).

2.6.3b Social Marketing and the 4Ps

Social marketing employs commercial marketing concepts and techniques in order to induce behavioural change aiming for social welfare instead of financial gains. Social Marketing can be distinguished from other public health planning frameworks by the following elements: 1) Audience Orientation, meaning that planning decisions are made with the audience's perspective in mind, 2) Audience Segmentation, referring to intervention tailoring based on the target community, 3) Influencing behaviour, and not just raising awareness, 4) Competition, referring to acknowledging and addressing audience behaviours that compete with the advocated health behaviour, 5) Exchange, involving the costs and the benefits entailed in adopting the advocated behaviour, and 6) the Marketing Mix, which captures the processes of Exchange (Andreasen, 1995). Social marketing draws on the domains of persuasion psychology, behavioural theories, and marketing science in terms of tested conceptual constructs leading to increased message persuasion effects.
Social marketing has been most extensively applied and explored within the realm of public health. Health communication research examines factors and constructs triggering a message appraisal processing mechanism enhancing message receptivity leading to a health oriented behaviour change. Consistent to the element of Audience Orientation, the formative phase of social marketing seeks to understand the perceptions of an identified target audience in order to inform the development of a campaign that can reduce barriers to change in a way that is meant to benefit the target audience (Andreasen, 1995). Given that the CBPR methodological framework guiding the study seeks to explore, understand, and remove barriers to benefit social change (Andreasen, 1995), and given that a health communication plan will be developed for removing the identified barriers, a social marketing approach was deemed relevant for informing the stages of data collection and analysis of the current project. Specifically, the data collection protocol was developed around the *marketing mix of the 4Ps* (Borden, 1964; Lefebvre & Flora, 1988).

The marketing mix is considered one of the eight essential components of social marketing as it applies to health intervention planning and promotion (Lefebvre & Flora, 1988). The marketing mix consists of the 4 Ps, described below.

1. **Product** is the first P of the marketing mix. The "actual product" is considered to be the desired behaviour, (i.e. participation to the program in this study) and the "core product" is considered to be the benefit of adopting that behaviour (i.e. a free healthy summer program for children by the City of Kingston; Kotler, Roberto, & Lee, 2002).
2. **Price** refers to the actual or perceived costs associated with the desired behaviour. Price is related to the barriers that must be overcome to engage in the desired behaviour (Kotler & Lee, 2008).

3. **Place** is “where and when the target market will perform the desired behaviour” (Kotler & Lee, 2008, p. 247) and is also used to identify where messages regarding the desired behaviour should be displayed (Bryant et al., 2000).

4. **Promotion** is associated with getting the appropriate message to the intended audience at a time when they are likely to be receptive (Kotler & Lee, 2008).

Social marketing has been widely used within the context of health promotion interventions targeting children’s health behaviours. Major social marketing research based campaigns of this type include the 5-4-3-2-1 Go! (experimental design research) aiming to enhance nutrition and physical activity among parents and families (Evans, 2008) VERB (Quasi experimental and qualitative research methods) promoting physical activity among pre-adolescent children (Evans, 2008; Huhman et al., 2005) 5-A-Day (observational research methods) promoting fruit and vegetable consumption among parents, families, and adults (Evans, 2008), and other similar campaigns targeting also tobacco use (Truth Campaign; Evans, 2008; Ferrelly, Davis, Haviland, Messeri & Healton, 2005), HIV awareness and prevention, children's media use and other youth health behaviours. Social marketing interventions promote social images of health behaviours in an attempt to compete with both commercial marketing influences (e.g. video games) and social norms encouraging sedentary behaviours. The VERB campaign for example, branded children's physically active behaviours as cool and socially desirable (Evans, 2008; Huhman et al., 2005). Among these examples, the VERB campaign
(Huhman et al., 2005) followed by the Truth antismoking campaign (Ferrelly, Davis, Haviland, Messeri & Healton, 2005) have been shown to have the largest effect on youth health behaviour change.

2.7 The study purpose

The main purpose of this study is to gain insight into parental perceptions of barriers and facilitators to enrolling their children in an outdoor activity program in order to inform the development of an action planning framework for recreation providers. A secondary purpose is to apply the framework to an existing summer activity program implemented by the City of Kingston department of recreation. The following question will be answered to address this purpose: *What are the perceived barriers and facilitators informing parents’ intentions to enrol their child in a supervised outdoor activity program?*
2.8 References


Effects of a mass media campaign to increase physical activity among children: Year 1

research: Policy recommendations for promoting a partnership approach in health research.
Education for Health, 14, 182-197.

research: Assessing partnership approaches to improve public health. Annual Review of

‘Critical issues in developing and following community – based participatory research
principals. In Minkler, M., & T. Hancock (Eds.). Community Based Participatory

Jenson, E. (2000). Learning with the body in mind. Alexandria: Association for Supervision and
Curriculum Development.

participatory partnered research. The journal of the American medical association, 297,
407-410.


York: Cambridge University Press.


Mullan, E. (2003). Do you think that your local area is a good place for young people to grow up? The effects of traffic and car parking on your people’s views. *Health and Place, 4*, 351-360.


Chapter 3: Manuscript

Parents' Perceptions of Barriers and Facilitators to Enrolling their Children in an Outdoor Activity Program

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Abstract

**Background** The decrease in children’s outdoor activity and its associated health impacts form the basis for health promotion initiatives to encourage children's outdoor activity. As gatekeepers to their children’s participation in registered programs, parents must be convinced that the benefits of enrollment in such programs outweigh the costs. A guiding framework is thus needed to help recreation providers identify critical program components and effective messages to attract parents. **Purpose** The main purpose of this study was to gain insight into parental perceptions of barriers and facilitators to enrolling their children in an outdoor activity program in order to inform the development of an action planning framework for recreation providers.

**Methods** This qualitative study was guided by Social Marketing principles (i.e., the “4 P’s”: Product, Price, Promotion, Place). Key informants, 18 parents of children 4 to 12 years old from 16 different neighbourhoods located in a mid-size Canadian city, participated in 4 focus groups and 7 interviews. Sessions were audio recorded and transcribed verbatim. Data analysis involved both deductive and inductive content analysis. **Results** Parental intentions to enrol their children in an outdoor activity program were shown to be influenced by barriers and facilitators, related to Product and Price, contained within the following themes, ranked from most to least influential: *program safety, program social environment, program structure, child preferences, cost and convenience, skills development, variety of activities, community, the local level, and, staff engagement*. The influence of these themes on parental intentions seems to be moderated by the theme of *Information transfer*, related to Promotion. Place was not found to influence intentions. For each theme, a continuum emerged, encompassing both positive and negative influences (e.g. high program safety to lack of program safety) upon parents’ intentions to enrol their children in an outdoor activity program. **Conclusions** The Social Marketing Framework is useful to inform
the development of an action planning framework for recreation providers seeking to enhance enrollment in their outdoor activity programs.
3.1 Introduction

Children's outdoor activity in Canada has dropped 14% over the last decade (Active Healthy Kids Canada, 2012; Canadian Fitness & Lifestyle Research Institute, 2010). Only 10% of children walk or cycle to school or destinations on a regular basis (AHKC, 2009) and screen time among children and teenagers has reached six hours a day (AHKC, 2010). The prevalence of sedentary indoor lifestyles in western societies has been proven to be related to serious health consequences. This generation might be the first generation to have shorter lifespan than their parents (Ludwig, 2007). At the same time, there is a growing body of evidence attributing significant health benefits to both children’s exposure to nature and physical activity (McCurdy, Winterbottom & Mehta, 2010). Being active outdoors results in more positive effects on mental wellbeing than any indoor physical activity (Coon, 2011), while overweight rates are 27-41% lower among children spending more time outdoors (Cleland, Crawford, Baur & Hume, 2008). Increased exposure of children to natural environments results in decreased stress levels and positive self-worth (Wells & Evans, 2003) and vigorous outdoor play activities enhance the development of the fundamental nervous centers in the brain, enabling clarity of thought as well as child learning abilities (Clements, 1998; Gabbard, 1998; Hannaford, 1995; Jenson, 2000), which may reduce ADHD symptoms (Taylor & Kuo, 2009). Finally, children playing outdoors are provided with the opportunity to develop a range of skills necessary for the adult life, such as social competence, creative thinking, and problem solving (Miller, 1989; Moore, 2010; Rivkin, 1995).

Yet, despite the benefits of outdoor activity, the developing social context shaping modern lifestyles impedes play-oriented, unstructured child activities (Gray, 2011), especially when these activities take place outdoors, where adult control of the environment may be
challenged. Moreover, although a majority of mothers in Canada rank physical activity as a priority in comparison to other leisure activities that their children can do (Rhodes et al., 2013), 62% of children and youth’s waking hours consist of sedentary time while only 7% of children and adolescents attain the recommended activity level (Colley et al., 2011). These findings are consistent with recent research results revealing an increasing trend in childhood obesity (Blair, Clark, Cureton & Powell, 1989; Colley et al., 2011; Dietz, 1998; Ebbeling, Pawlak & Ludwig, 2002; Golan, Weizman, Apter & Fainaru, 1998; Gordon-Larsen, Nelson, Page & Popkin, 2006; Loewy, 1998; Pica, 2003). These numbers are somewhat surprising given that over 90% of Canadian children and their parents have physical activity programs and spaces available to them in their community (AHKC, 2013).

There is a recognized need to understand why families are not accessing facilities, programs, parks and playgrounds despite identifying that the spaces are available (CFLRI, 2010). Previous studies suggest that the parental role is a key determinant of children’s health promoting behaviours (Davison, 2004; DuBois, 2010; McGuire, Hannan, Newmark-Sztainer, Falkner & Story, 2002; Wang, Chatzisarantis, Spray & Biddle, 2002; Ward, Sauner & Pate 2007). Parental concerns with respect to neighbourhood crime and safety, coupled with the appeal of electronic media are considered to be significant barriers to outdoor physical activity in children (AHKC, 2012; Farley 2007; Karsten 2005; Lumeng, Appugliese, Cabral, Bradley & Zuckermand, 2006; Mullan, 2003) and may help explain why spaces and programs are underutilised.

Leading an active lifestyle seems to be more challenging for today’s generation of children and their families (Clements, 2004). The City of Kingston in Ontario, Canada (population: 125,000) offers a free, supervised, outdoor recreational summer program for children aged 4 to
12 years, providing an accessible, safe, healthy, and active outdoor opportunity. This program has been operating for the past 50 years, however, participation rates have been below expectations for the past several years. Attempts to relocate the program throughout city parks and to adjust operating hours have not been effective in increasing program participation.

Municipalities are encouraged to develop and implement comprehensive physical activity plans that include programming and appropriate social marketing initiatives (AHKC, 2013). A guiding framework is needed for recreation providers seeking to align program content and promotion with parental requirements and preferences.

The main purpose of this study was to gain insight into parental perceptions of barriers and facilitators to enrolling their children in an outdoor activity program in order to inform the development of an action planning framework for recreation providers. A secondary purpose was to apply the framework to an existing summer activity program implemented by the City of Kingston department of recreation. Considering that parents play a determining role in their children’s outdoor activity (Davison, 2004; DuBois, 2010; McGuire, Hannan, Newmark-Sztainer, Falkner & Story, 2002; Wang, Chatzisarantis, Spray & Biddle, 2002; Ward, Sauder & Pate 2007), we identified parents as the appropriate target population to receive messages promoting outdoor activity programs for children. Despite the pressing importance of promoting children’s outdoor activity, to our knowledge, there is no prior research providing a guiding framework to inform program content and practical communication approaches that best motivate registration in outdoor activity programs for children.
3.2 Methods

Contextualized in the City of Kingston, this study takes a Community Based Participatory Research Approach (Israel, Schulz, Parker & Becker, 2001) guided by a social marketing framework (Andreasen 1995) to understand the barriers and facilitators influencing parental intentions with respect to enrolling their children in an outdoor activity program. Data collection was guided by the "marketing mix" of Product, Price, Place, and Promotion (4Ps; McCarthy, 1964). Ethics clearance was provided by the Queen's General Research Ethics Board.

Summer Outdoor Activity Program

A summer program, offered every weekday during July and August at 14 park locations strategically located throughout a mid-size Canadian city (i.e., Kingston, Canada) so as to enable accessibility and active commuting (i.e., walking) to program locations, was studied. The program constitutes a blend of facilitator-led vigorous and quiet play activities and, depending on location, follows either a half day (9am-12pm or 1pm-4pm) or a full day schedule (9am-12pm and 1pm-4pm). Supervision is not provided during lunch hours, and some of the park areas lack washroom facilities.

Sampling and Recruiting

Participants were 18 parents (mean age = 40 years, 13 women) of children aged 4 to 12 years (mean age =8 years) from 16 different neighbourhoods (i.e. 16 postal codes) in the Kingston, Canada area who met the eligibility criteria of having children between the age of 4 and 12 years, and living in the City of Kingston. Parents were recruited through purposive typical case sampling which uses cases that are "not unusual in any way" and therefore can provide a typical local profile (Given, 2008). Ethnic and socioeconomic diversity were sought in
order to ensure that participants were representative of the general Kingston parent community population. As a parent whose child attends after school programming in the community, the researcher contacted other parents and personally invited them to participate according to a pre-determined research protocol (see Appendix A). This initial recruitment was complemented by a snowball sampling technique where contacts were asked to share the study details and the researcher’s contact information with other parents. The sample represented four different ethnic groups, an annual family income ranging between 20,000$ and 200,000$, and parents who were born and raised in Canada or who immigrated to Canada during the previous decade.

Data collection

Four focus group (with a range of 2-4 participants) and seven individual interview sessions were conducted by a trained female interviewer and took place at mutually convenient locations throughout Kingston in May 2013. Consent ing participants were asked to provide information about their own and their child(ren)'s age and gender, number of children, and postal code. They were also asked not to use names of people or places in order to preserve anonymity. Each session was audio recorded and transcribed verbatim. The interviewer kept observational notes to capture participant voice intonation, body language, facial expressions, gestures, and general observed behaviours.

A Semi-structured interview script was used to collect parent opinions about child participation in an outdoor activity program, in both general terms and specific to the Kingston program. Questions were framed according to the 4P’s (see Appendix B); for example, parents were asked "What do you look for in a children's summer program?" ("Product"), "What might make parents reluctant to participate in a children's summer program? ("Price"), "Where in the
city do your children usually spend their time during the summer holidays?" ("Place") or "What or who would motivate you in order to make a decision related to your child?" ("Promotion). In addition, participants were encouraged to share more general opinions and ideas about children’s outdoor activity programs park use, and effective promotion approaches relevant to parents. No compensation was provided for their participation.

Data Analysis

Data analysis involved both deductive and inductive thematic content analysis in order to identify core consistencies and meanings (Patton, 2002). Analysis sought key concepts cited by participants to determine parental perceptions, values, opinions, awareness and factors of influence regarding their child’s participation in outdoor activity programs, in both general terms and specific to the Kingston program. Transcripts were read line by line by the first author and the content of each response was coded into meaning units (Creswell, 2007). During the deductive data analysis, meanings units were categorised under Product, Price, Place and Promotion categories according to the 4Ps framework. In a second step, all transcripts were re-examined to inductively enable the emergence of themes missed during the deductive analysis (Patton, 2002). Transcripts were reviewed until new themes ceased to emerge. Observational notes taken by the interviewer were matched to the themes in order to enrich and clarify the theme meanings.

The themes (see Appendix C) and their conceptual integration were then validated by a second researcher through an independent coding of a subsample of the data (i.e., 40%). Summaries were provided to five interviewees to allow member checking (Lincoln and Guba, 1985), to validate the analysis and interpretation of results, and shape the final meanings of themes (e.g., the theme of variety was renamed as variety of activities based on interviewee
feedback) and the final conceptual integration of themes (e.g., Information transfer was given a distinct role). Preliminary results were discussed with the Assistant Supervisor for the City of Kingston’s Recreation Programs.

Study accuracy and rigour was further increased by the use of peer debriefing, inquiry and confirmability audit, and reflexivity. Peer debriefing involved reviewing the analysis process and interpretation of results with a similar status colleague, inquiry and confirmability auditing included a single audit with a researcher not involved in the study who examined both the process and the outcome of the research study. Finally, reflexivity was ensured by the first author keeping a reflexive journal during data analysis to track ideas in both written form as well as in the form of graphs and conceptual maps. Each entry recorded methodological decisions and the logic behind them.

3.3 Results

Place did not emerge as influencing parents’ intentions to enrol their children in a free outdoor activity program. Thus, data collected about Place is presented descriptively. Place was defined in terms of physical and spatial characteristics. Place, in terms of where children are most likely to engage in recreational activities, include parks, camps, provincial recreational sites, and friends' and family homes and cottages. Place, in terms of where parents spend most of their non-working hours, which are potential locations for message placement, include grocery stores and children’s afterschool program settings. Any conceptual characteristics of Place (e.g., the school as a source of information, or the notion of community) were considered within the Promotion and Product categories. A range of perceived influences on parents’ intentions to enrol their children in an outdoor activity program emerged. Ten themes were related to Product
and Price. These themes, from most to least mentioned, were: *program safety*, *program social environment*, *program structure*, *child preferences*, *cost and convenience*, *skill development*, *variety of activities*, *community*, *the local level*, *staff engagement*. Each theme was situated on a continuum (e.g. high program safety to lack of program safety) encompassing both positive and negative perceptions which form accordingly, either facilitators or barriers to enrollment. *Information transfer* was also considered to influence parental intentions to enrol their children in an outdoor activity program, but not in a similar way to the other themes. *Information transfer* was seen as a force regulating the influential power of the rest of the themes by having the ability to either reinforce or cancel out the perception of barriers and facilitators these themes entailed. For example, while the Kingston program offered a *program structure* with specified day to day activities, the lack of *information transfer* to parents cancelled out this facilitator by letting parents believe that the Kingston program lacked structured content.

Themes are described below and verbatim quotes are labelled by type of data collection session (INT=Individual Interview, FG= Focus Group), gender (M=Male, F=Female), and participant code (1-18). Theme descriptions encompass the range of the continuum and each may constitute either a barrier or facilitators to program enrollment.

*Program Safety* Program Safety was the most commonly mentioned factor influencing parents’ intentions to enrol their child in an outdoor activity program. Parental concerns referred primarily to infrastructure features of the program location and to program staff and supervision. Infrastructure safety was considered in terms of both the natural (e.g., trees for shade) and built environment (e.g., availability of washrooms). Concerns regarding staff involved supervision style (e.g., ambivalent vs. engaged) and child per staff ratio.
FG1F2: "I would want to make sure that there were ah. boundaries put on the other children go to play, being very mindful of who is in the park at the time, making sure that there is for every five children an adult..."

INT3F14: I notice with outdoor summer play, sometimes it gets too hot, and if there is no shade um, the kids get very tired, so that's a problem.. there is no shade or..of course if it rains...

FG2F5 " but with outdoor programs, especially, you really have to have enough staff on hand ..., make sure that it is a safe environment"

Program Social Environment This theme refers to the type of social interactions the program environment encourages, as well as to the opportunities offered for children’s social skills development. Parents valued significantly child social skills development and a child-based environment fostering positive, enjoyable and healthy relationships. Some parents even saw in the program the opportunity for community members’ social bonding, or child - parent bonding in the cases that parents were able to participate in the program.

FG1F1 : “ I do know some who took their child to this (program) ...and the reason that she did it ... was because her child did need to socialize, he needed to interact with other kids “

INT4F15: “ I know many parents who are not comfortable having their kids socialize with some other kids because they hear or see that these other kids are just a bad influence...so they prefer their kids be home or ... involved in another program ... where they are away from certain kids”

FG4F10: I think..um.. the program should be focused on..children's social..social .. skills... And how to play with each other.
**Program Structure.** Program structure is defined as a preplanned, organized program content and program delivery entailing a time framed schedule, and staff able to implement the program as intended. Parents favoured the idea of structure, which was also described as organization, or emerged through descriptions of preplanned activities parents expected to see in a program. Parents expected program structure to underlie a program's content and delivery and, moreover, be present in any promotional material allowing for parents to trust the program, and to help them decide if the program matched their needs. Specific to program operation, the program structure is expected to be age- and ability- appropriate and to be delivered by the staff as advertised.

FG1M4: "(I would not participate because of ) lack of structure...I’ve run into previous times where this sort of, you you ‘d go and say you know, what did you do today, oh I don’t know we are sort of make stuff up as went along"

FG3F8: "we’ve been signing up our children to X for the past three years now and we’ve been very happy so...and we know because the programs are well organized...so...we’ve been very happy as far as organization"

FG1F2: "structured format...organised cause it’s really important to a parent to say that you need to know what to pack how long to pack it for"

**Child Preferences** refers to the child's desire to participate in a certain program. Child's preferences may constitute peer influence, child's beliefs that a program is generally enjoyable, aligned to their interests, and provides a desirable social environment.
INT2F13: "Child's opinion is important because something may look good but the children wouldn't like it...so it may look good on paper but it may not actually be comfortable for the children..."

FG2F6: "...and if they're into it, it doesn't matter what my schedule is, what I want, if they are happy..."

FG1M4: "...and their comfort level also while there, because I had my kids come back and say oh you know, I don’t like some of the kids they are bugging me and counselors don’t seem to know what they are doing kind of thing"

Cost and Convenience theme refers to parents' perceptions of the program being compatible to their lifestyle (e.g. commuting by bus, tend to spend time in parks) family schedule, and budget.

INT2F13: "the family's schedule, my work hours, um, whether or not they can you know, do an alternative activity that is cheaper or..you know more enjoyable to them...

INT1F12: " Ah, distance, is one, convenience is another, so, time, like making sure that they are not run through times that people can't get to these, and cost"

INT3F14: "the hours. I mean for working parents obviously, hours are important, if there is a stay-at-home mom this is not so"

Skills development theme refers to the learning opportunities the program is perceived to offer. Skills were described mostly in terms outside of the academic curriculum and involved creativity, music, baking, crafts etc., as well as learning from nature.
INT4F15: "doing activities that help their learning, and skills... like learning, learning is a big thing... Learning an activity or learning a skill, learning a task, or learning an idea, yeah so..its about learning."

FG4F10: " Yes, yes, we are saying think about maybe.. that kids are play for fun, relaxing themselves, and at the same time they can learn something"

Variety of activities refers to the opportunities children have to engage in different activities while attending the program. Variety was desired for its ability to offer a balanced activity schedule between physical and mind engagement, for keeping the children interested, for providing new experiences, and for creating a program environment embracing a large range of abilities, interests, and personality traits (e.g. shy or team player).

FG1M4: " I think the idea I was gonna say is show up a variety of stuff so you get the parents thinking oh good that my kids are gonna have a bunch of different experiences"

FG4F10: "Different focuses and you can put focus on explore, exploring the nature and then some weeks you can put them under the..the..I mean..exercise "

INT3F14: "keep the kids entertained and um, so that they don't get bored so, there needs to be a variety in this...there should be a mix of more active play"

INT7F18: "I would look for some physical activity, and some more structured play, and maybe some quiet, like independent activities too"

Community involvement refers to the way the program relates to the community either by involving community members, being approved by the community, or by serving community aspects (e.g. community members bonding). The community theme was built on the reported
strength of word of mouth as the most credible source of information, descriptions of neighbours helping in child care, ideas regarding community members’ involvement to improve the program’s operational characteristics (e.g. supervision), or suggestions on how the program might enable community member bonding.

FG1F4: “...that’s why I am thinking about community and then working together in the community in order to provide (for our children)...”

FG4F10: “...community based...some activity to bring the children and parents in the park to get to know each other..."

FG2F5: "we have a very community based area so it would have worked that way"

The local level theme constitutes the immediate neighborhood context in terms of program proximity and program awareness. In contrast to community involvement, which represents a social construct of ideological/cultural aspects, the local level represents the practical aspects of the neighbourhood (e.g. local information circulation, proximity). Parents explained that they mainly make use of parks that are in close proximity to their homes, and that they are not aware of, or visit parks that are far from their immediate neighbourhood unless these parks offer special services (e.g. splash pads). Finally, school, included in the local level, was described as one of the most credible and motivational sources of locally-relevant information.

INT4F15: "because I don't drive, and my kids take the bus to go to places, so I want the locations as close as I live"

FG1M3: " people will stick to their neighbourhood that they're in..."
The *Staff engagement* theme refers to the type of involvement the program staff and developers exhibit towards children. This theme was built upon parental expectations with regard to staff’s genuine engagement and interest in children, rather than expectations about staff performance. Staff performance related issues, such as competency to deliver the program based on certain guidelines and ensuring a safe environment for children are encompassed in the themes of *Program Safety* and *Structure*. Parents explained that they expect program developers and staff to have and to demonstrate a genuine interest in working with children, and not to approach children’s programming as a business. Within this context, it was explained that staff function as role models for children, and that they should be active listeners and show enthusiasm in order to engage children. Overall, the program should be a result of a vision which is communicated by everyone and everything involved.

FG1F2: "is the enthusiasm of people involved not just getting a pay check from the government"

INT6F17: Staff must be not just the common teacher, that would have them strictly in a program,...play with them more..all the time, without feeling *not again*...annoyed.

FG3F8: "I enrolled my children somewhere else.. I wouldn't say where..where they were completely ..just..neglected..."

FG1F2: "...and the reason why I believe that after-4 program worked so well was because people donated into it and the teachers all volunteered to stay after school in rotation..."

*Information transfer* refers to the sources of information, content of information, and program awareness. *Information transfer* included two main sources of information: informers and motivators. E-media and print media were considered to be informers, i.e., they provide
information only. Parents explained that they use these sources to receive information (especially
the internet and local leisure guide) after having decided what type of children’s program they
are looking for. They explained that these sources rarely, if ever play motivational role in
intentions to enrolling their children in a program. In contrast, motivators for participating in an
outdoor children’s program were described as coming from the following sources, from most to
least mentioned: word of mouth, the school, any locally established credible organization (e.g.
YMCA, church), and their child. Additional motivators included certain program features
appearing on promotional material that conveyed information about program fit relative to
parents’ needs. Thus, the role of Information transfer as motivator is different than the role of the
ten themes related to Product and Price. Instead of having a direct influence on intentions,
Information transfer provides a lens through which the ten themes are filtered. Parents described
that they need to know the following information in order to decide to enrol their child in a
program: 1) program structure, in terms of content, schedule and trustworthiness, 2) social
opportunities for their children, in terms of a positive social environment and social skills
development, 3) learning skills opportunities, and 4) cost and location. Parents also stressed the
importance of program awareness and attributed a key role to Information transfer for the
formation of parental intentions to enrolling their children in an outdoor activity program.

FG2F5: "I would say school, one, the school that they are doing, and then honestly
friends... its word of mouth, it's one of my biggest things"

FG3M9: " people's word of mouth..had a good experience and they gonna tell other people
about it...but if the school is promoting it, then that's an even bigger plus.."

INT4F15: "I personally hear about most of the programs from work"
FG1M4: "as long as there is some sort of organization behind it, like she said, like the Y like the Boys and Girls club or churches, or synagogues"

As depicted in Figure 1, finalized results revealed that the conceptual relationships between barriers and facilitators and program enrollment are built around parental expectations with respect to the ten following themes: program safety, program social environment, program
structure, child preferences, cost and convenience, skills development, variety of activities, community, the local level, staff engagement. Parents’ intentions to enrol their child in an outdoor activity program involve the appraisal of the program in terms of the ten themes. When a theme is perceived to relate to the program in the expected way (e.g., the program fosters a positive social environment) a facilitator to enrollment is formed; when a theme is perceived to go against expectations (e.g., the program does not foster a positive social environment), a barrier to enrollment is formed. Final decision making is not only based on the resulting quantity of perceived facilitators and/or barriers, but also on the qualitative aspect of the themes, entailing different degrees of influence on the decision making process.

The way in which themes were apprehended by the parents during data collection discussions about outdoor activity programs in general can be categorized in three degrees of influence on enrollment intentions (i.e., high, medium, and low; see Figure 1). These degrees of influence were determined by the combination of frequency of mentions of a theme and the contextualisation of a meaning unit. Contextualisation was assessed on the basis of observed behaviour (recorded in researcher notes) and phrasing of a meaning, for example;

FG3W8: "I don't want something where I would drop off my kids and go; I drop my kids and leave in the camps where they are indoors" (Program Safety concerns here are phrased in a highly emotional manner)

INT7W18: "Well, safety is obviously a huge issue, so I mean knowing if the staff is trained, also the ratio of children to counselors" (Program Safety concerns here are phrased in a less emotional manner)
Program safety, program social environment, and program structure exert a high degree of influence on parental intentions. In terms of barriers, this means that unless expectations related to these themes are met, enrollment will not occur. In terms of facilitators, this means that when related expectations are met, enrollment will likely occur. Child preferences, cost and convenience, skills development, and variety of activities hold a medium degree of influence on parental intentions. These themes also involve highly valued expectations that if met, might translate into enrollment, depending on circumstances, and the way that the program relates to other themes. Finally, the themes having a low degree of influence on enrollment intention are community, the local level, and staff engagement. These themes, although valued by the participants, are not critical barriers or facilitators, especially if expectations regarding themes of higher influence are met satisfactorily.

Information transfer is a powerful moderator of parental perceptions and resulting intentions. Even if the program relates to the themes as desired by parents (e.g., the program has a solid program structure), effective facilitators to participation will not be formed unless information transfer to the parental community occurs. Adequate information transfer might reveal facilitators (or barriers) formed in relation to the key themes, while inadequate information transfer might hide them. Inadequate information transfer thus appears to have an effect similar to barriers; which is, that it leads to low enrollment intentions. Adequate information transfer not only creates awareness of facilitators to enrollment, but also prevents misinformation that could lead to perceptions of barriers.

To address the secondary purpose of this study, the action planning framework (Figure 1) was used to assess the goodness of fit between participant responses about the City of Kingston outdoor activity program for children and perceived parent barriers and facilitators to program
enrollment. Responses reflecting each of the themes were mapped onto the action planning framework to gauge the positioning of responses (i.e., barrier or facilitator) on each theme continuum (see Figure 2). Findings indicated that low enrollment in the City of Kingston outdoor activity program was most likely due to lack of program awareness or misinformation, and not due to program appraisal based action planning framework themes. All participants evaluated program information transfer as a critical component, and suggested that program promoters needed to "create the buzz", "get the word out so that people know..". Despite the fact that the program has been offered in Kingston for the past 50 years, most of the participants (14/18) were not aware of the program. In response to the program's description by the interviewer (description was based on information provided in the local leisure guide and by discussions with program staff), parents indicated a desire to learn more about the outdoor activity program. With respect to the action planning framework themes, parents seemed skeptical about the public park environment being able to provide an adequate degree of program safety and to offer the expected level of program content and delivery structure. Program accessibility (i.e. convenience) was also perceived to form a barrier to enrollment by working parents. At the same time, parents saw the program as being able to offer a variety of activities, facilitating a positive social environment, and being potentially in line with their child's preferences. With respect to the themes skills development, community, and staff engagement, participants held a neutral stance given that the majority of them were not familiar with the program. Lack of awareness also influenced the fit between the local level and the program as participants had never been referred to the program by any local institution or other parents in their neighbourhood. Participants living close to the parks hosting the program were more likely to
evaluate program locations as optimal, whereas those living a bit further were more likely to suggest program relocation.

Finally, two of the City of Kingston program’s main features, "drop in" and "free", coupled with poor information transfer seemed to be interpreted by the parents as incompatible to the dominant ideal of a structured, organized, highly supervised children activity, and even as features of a lower quality program not for those with the means to pay for program enrollment. Two interviewees of high income, before the interviews explained that although they would be happy to participate in this study, they believe that such a program is not meant for people like them, but for lower income people. Similarly, a mother of low income during the interview explained the following:

INT4F15: "In my view those programs are designed for people who don't have options, and there is times in my life where I didn't have options..so I used it"

This idea was also approached in words in the following focus group discussion:

FG1M2...emphasize (in the program's promotion) that it is organized and is not just…

FG1F1: "helter skelter"

FG1M2:" but is just that you know drop in, free, that’s great but some people might think well …why is it free? You know?"

FG1F1: " right, right...people might get suspicious"
Figure 2. City of Kingston Parents' Perceptions of Barriers and Facilitators to Enrolling their Children in the Kingston Outdoor Activity Program in Spring 2013
3.4 Discussion

Our findings show that parental perceptions of facilitators overall support a structured oriented parenting approach which is consistent to prior children health promotion literature (AHKC, 2012; Godbey, 2009; Gray, 2011; Luv, 2005; McCurdy, Winterbottom & Mehta, 2010). Structure, safety, and close supervision were perceived as highly influential program components, and children activities appearing in line with this perspective seemed to associate with positive parental intentions to enrolling their children in a program. Skill development as a perceived facilitator is also supportive of this perspective indicating that children’s activities are expected to be structured around a learning purpose. E-media, appearing in literature next to safety and supervision concerns as one of the greatest barriers to children physical and outdoor activity (Clements, 2004) did not emerge in our findings. What was instead highly regarded next to structure and safety, were social interaction opportunities provided in a children's program.

The parental role as a determinant of children’s health promoting activities (Davison, 2004; DuBois, 2010; McGuire, Hannan, Newmark-Sztainer, Falkner & Story, 2002; Wang, Chatzisarantis, Spray & Biddle, 2002 ; Ward, Saunder & Pate 2007) was confirmed by our findings, as all interviewees (except one) described children’s activities as, mediated by the parents’ disposition; less parental resources, or motivation meanst lower child activity.

Increasing participation in an outdoor activity program for children seems to require that recreation providers follow a two staged process. The first stage should be used to carefully assess the way in which the program relates to each of the ten action planning framework themes to identify barriers and facilitators to parents’ intentions to enrolling their children in an outdoor activity program. Program developers should ensure that the program features align with the
facilitators of each theme as much as possible. Degree of influence of the themes forming perceptions of barriers and facilitators to participation should also be taken into account. While a neutral fit between program and theme might be acceptable for the themes holding a low degree of influence, and perhaps negotiable for the themes of a medium degree of influence, in the case of the highly influential theme, compromises are unlikely to be acceptable. Once the program developer creates an optimal program content, the second stage should focus on the development of a communication plan to effectively reach the intended parental community with adequate information transfer. Message content should highlight salient facilitators and inform parents about program structure, social and learning opportunities, as well as program hours, cost, and location. Message sources to motivate enrollment should include word of mouth, schools, and any local, established credible organization. Message format to enhance information transfer (though not necessarily motivate) should include the internet, print and other media.

Recommendations to enhance enrollment in the City of Kingston children’s outdoor activity program include creating awareness of the program among Kingston community of parents by developing promotional messages focusing on the program safety, program structure, and convenience which are currently perceived by the local community as barriers to enrollment. These messages should be disseminated through schools and other local credible organizations, as not only these settings are seen as credible and motivating sources, but also might facilitate information circulation through word of mouth. The internet and the City of Kingston leisure guide should also be considered, as parents in Kingston tend to consult these when seeking specific information.

The present study provides a unique contribution to both theoretical and applied children’s health promotion domains. The resulting action planning model was shown to be feasible in
application and potentially useful for future program planning and promotion. Some limitations were noted. A first limitation of this study is the low number of parents participating in focus group discussions, in contrast to initial research design expectations. Focus groups as a data collection method were intended to enable participant interactions as a way to expand on emergent ideas. A second limitation is that only 4 out of the 18 study participants had heard about the program, and thus most had to rely on the interviewer's description to comment on it, rather than through other sources or their own experience. Finally, although decision makers of each family were included, most of the study participants (13/18) were women.

Theoretical implications. This study is one of the first exploring theoretical relationships between perceived program barriers and facilitators and parental intentions within a health promotion context targeting parents to enrol their children in an outdoor activity program. Findings will also add to prior research on children health promotion interventions design by contributing to the theoretical understanding of parental perceptions, with respect to children programming, and the way that these perceptions may be used in favor of health promotion programs participation. For example, children outdoor activity interventions may form their brand identity around ideas shown to be valued and favoured by the parents (e.g. a positive social environment), and build program features around components perceived to create facilitators (e.g., skill development). Furthermore, this study shows how the social marketing framework and the 4Ps in particular, might be used to inform the development of an action planning framework for children’s health promotion interventions, which in turn might be applied to reinforce the impact of social marketing campaigns. Findings also contribute to the domain of health communication advocating children’s health promotion behaviors, by proposing message content (i.e. facilitators) leading to favorable parental attitudes.
Practical implications. This study illustrates practical communication solutions, readily adaptable by social marketing campaigns and health promotion initiatives supporting children’s outdoor activity programming. Results indicate key communication components for effectively informing and motivating parents regarding the enrollment of children in outdoor activity programs. We anticipate that the actionable implications of this project will contribute to increasing children outdoor activity time, and help proving Ludwig's prediction wrong about this generation being likely the first to have a shorter lifespan than their parents (Ludwig, 2007).

Future opportunities. Further research opportunities lie in exploring the persuasive impact of communication attempts adapting the proposed action planning framework to promote outdoor activity children programs in communities of a scale smaller, equal, or bigger than Kingston. Results from such attempts may allow for theoretical improvements leading to a conceptual model with stronger predictive power on parental intentions and eventually, program participation rates. Further insight may be gained by testing the persuasive effects of the proposed message content combined with message framing theory (Rothman & Salovey, 1997). Gain-framing, considered suitable for advocating health promotion behaviours, might reinforce the persuasive power of the proposed message content (Rothman & Salovey, 1997; Rothman, Martino, Bedell, Detweiler & Salovey, 1999; Latimer et al., 2008; Hevey et al., 2010).
3.5 References


Mullan, E. (2003). Do you think that your local area is a good place for young people to grow up? The effects of traffic and car parking on your people’s views. *Health and Place, 4*, 351-360.


Chapter 4: General Discussion

The current study provides insight on parental perspectives regarding the enrollment of children in an outdoor activity program and has both theoretical and practical implications in the health promotion domain. The resulting action planning framework provides guidance to recreation providers, health promotion practitioners and researchers regarding the development and evaluation of engaging outdoor activity programs for children. Specifically, findings may be used, tested, and expanded for children’s outdoor activity intervention development, intervention communication planning, as well as the creation of relevant health messages. A more detailed exploration of opportunities generated by the study's proposed action planning framework is provided below.

4.1 Enhancing child participation in outdoor activity programs

4.1.1 An opportunity to translate a children's program into a parent approved decision

Parental preferences regarding program content (e.g. program safety, program social environment, program structure) are consistent with a structured oriented parenting style ideal (AHKC, 2012; Godbey, 2009; Gray, 2011; Louv, 2005; McCurdy, Winterbottom & Mehta, 2010), which in the Kingston sample, seems to have taken the form of an established social norm among parents from diverse ethnic and socioeconomic backgrounds. Our findings show consistency with the health promotion literature regarding children and physical activity and parental favouring of highly structured, closely supervised, activities for their children (AHKC, 2013). Children’s programs that align with this ideal seem to yield positive parental opinions and intentions to enroll their children, whereas, programs perceived to diverge from this ideal appear to be seen as a compromise between parents' resources and costs (monetary and other). Given this parental perspective, the social marketing of children’s outdoor activity programs
should adopt communication tactics that present program components as structured, safe and socially engaging. Program advertising should emphasize these attributes and focus less on the fact that the program is free.

In fact, as noted in our findings, branding the program as free might stigmatize the program as lower quality and not for those with the means to pay for program enrollment. Two of the City of Kingston program’s main features, "drop in" and "free", coupled with inadequate advertising of the program, seemed to be interpreted by parents as incompatible to the dominant ideal of a structured, organized, highly supervised program, despite the fact that the program actually was structured and supervised. Recreation providers guided by the action planning framework program satisfying the above ideals of program content (i.e., program safety, program social environment, program structure) and avoiding negative branding might be “upgraded” in parents’ minds from a compromise to an attractive choice.

4.1.2 An opportunity to improve program content

Findings indicate that facilitators to parents' intentions to enrolling their children in an outdoor activity program are built either on themes referring to abstract constructs (e.g., program social environment, community etc.) or on themes referring to concrete program features (e.g. convenient program hours, variety of activities etc.). In the case of a limited budget, priority may be given to themes reflecting concrete program features as they have the ability to create immediate facilitators. While it might be difficult, and more time demanding to target parental intentions over an abstract construct such as program social environment, it may be easier to make concrete modifications to the program, such as providing a program structure or by accommodating parent work commitments (convenience). This suggestion does not imply that
themes reflecting more abstract constructs should not be taken into account, but rather suggests a prioritization of resources should when confronted with finite resources.

4.2 Implications

4.2.1 Contribution to theory

This study adds to prior research regarding children’s health promotion programs by exploring program structural and communication components influencing parental intentions based on a social marketing framework and Community Based Participatory Research principles. The blend of CBPR principles and the Social Marketing framework illustrates a synergistic relationship of the two approaches that adds to previous health promotion research employing a methodological framework constituted by the merging of the two frameworks. Specifically, this study showed how a research question formulated by the community’s organisational representatives (i.e. City of Kingston Recreation Department) was investigated by the researcher based on a Social Marketing Framework and yielded findings that were co-shaped by members of the target community through the member checking process. The current project demonstrates the synergy between CBPR involving the sharing of expertise between the researcher, local organisational representatives and community members within a partnership that aims for the community’s health enhancement and wellbeing (Israel, Schulz, Parker & Becker, 2001) and the Social Marketing Framework whereby social marketing principles are used to inform program analysis, planning, implementation, and evaluation. Through the complementarity of the two frameworks, this study extends the use of the application of social marketing as it is defined in the literature thus far, by presenting a way in which social marketing principles and tools (i.e. the 4Ps of the marketing mix) might be used to develop an action planning framework, which in
turn, might function to reinforce a social marketing intervention and community based health promotion programs.

Findings reveal a list of parental priorities informing intentions to enroll their child in an outdoor program, showing consistency with previous qualitative research findings (Coe, 2013; USDHHS, 2003: VERB) and expanding on the existing literature, by revealing the theoretical relationships of these components leading to program appraisal. Finally, the revealed facilitators to parents’ intentions to enrolling their children in an outdoor activity program might add to health communication theory by suggesting message content constructs leading to favourable parental attitudes towards children’s outdoor activity as a promoted health behavior.

4.2.2 Contribution to practice

The present study demonstrates a readily applicable practical guide on the development of children’s outdoor activity programs. Health promotion stakeholders (e.g., recreation providers) might adopt the proposed action planning framework to inform program features and relevant communication tactics shown to generate favourable parental intentions regarding the support of children’s outdoor activity. Being based on the 4Ps, this framework may also be easily adapted to children’s outdoor activity programs by using a social marketing approach informed by the action planning framework.

The action planning framework may be applied to inform program content (e.g. skill development), scheduling (e.g. convenient for working parents, structure), place and staff related decisions (e.g., neighbourhood based, engaged staff), brand identity (e.g. based on community ideals, positive social environment), message development (i.e based on facilitators), promotion settings, and media of information dissemination (e.g. schools). The proposed framework might
furthermore inform resource allocation when budgets are limited. The ranking of program facilitators enables program designers to select the most important (e.g. *program structure*, *social environment*), and most easily assessed facilitators deriving from concrete program features (e.g. *variety of activities*).

### 4.3 Future opportunities

Future research opportunities lie in testing the proposed model's predictive power on parental intentions to enrolling their children in an outdoor activity program. Research might involve the assessment of diverse program configurations in several community settings regarding both program development and program communication planning. Testing the framework empirically would allow for core improvements to the framework and provide insight into key factors for successful adaptation and implementation in various community settings.

Additional research opportunities are revealed with respect to the health communication domain and health message development. Specifically, the proposed message content shows opportunities for experimental message manipulation of the content being matched with message framing, and being matched with temporal construal levels foci. Children’s outdoor activity is considered a health promotion behaviour. Given the evidence on the effectiveness of gain framed messages, when a health promotion behavior is advocated (Rothman & Salovey, 1997; Rothman, Martino, Bedell, Detweiler & Salovey, 1999; Latimer et al., 2008; Hevey et al., 2010) it is anticipated that the persuasive power of the study's proposed message content will be reinforced by the moderating use of gain framing.

This study hopes to contribute to the health promotion literature and practice knowledge and offer a series of testable social marketing and programming outputs to send effective
messages home and send more children outdoors. Until now, the current findings have contributed to program relocations for the summer of 2013, the production of a program name, logo, and other program branding material that were used in spring 2013.
4.4 References


Active Healthy Kids Canada. (2013). *Are we driving our kids to unhealthy habits? The Active Healthy Kids Canada report card on physical activity for children and youth 2013*. Retrieved from


Appendix A : Verbal recruitment script

Hi, my name is Danai and I am a student from Queen’s. Do you have five minutes to talk about your possible participation in a project related to the City of Kingston summer program for children?

If YES: Set time (now or later)

If NO: Thank you.

If YES proceed:

I am conducting a study about how to promote and improve the City of Kingston summer recreational program for children. We are inviting parents of children 4-12 years old living in the Kingston area to participate in focus groups where we will talk about children summer programs and related barriers and facilitators in participation. We would like to find out more about what the community of parents in Kingston values in a children summer program and be able to address these values more efficiently. Food, beverages and child minding will be provided. Would you be interested in participating?

- if yes, proceed

- if unsure, ask if they would like to hear more information about it

- if no, say thank you

Thank you. The focus group will be held at a mutually convenient location (e.g., local community centre) and will last approximately one hour. Onsite child care will be available. I would like to tell you that the focus groups are confidential, so we won’t record your name. The only information we will write down is your parental role (Mother/Father) and your children's age. Nobody outside the group will know what you’ve said. You will not need to answer any question that makes you feel uncomfortable and if you decide during the session that you don’t want to continue, you are free to leave. The session needs to be audio recorded for study purposes but no one will know who is talking on the tape. I will listen to the recordings and type up the focus group discussion so that it can be printed to paper. This will make it easier to study the information. Any recordings and the written copies of the discussion will be kept in a locked filing cabinet at Queen’s University. All electronic data will be saved on the computer in password protected files.

Do you have any questions? (Find out availability and decide when they will be attending)

Thank you very much. I will call the day before as a reminder. I look forward to meeting with you.
Appendix B : Focus group guide and questions

Welcome: Explain that the purpose of the research is to talk about views regarding children programs and outdoor activity and for developing ideas about promoting and improving the City of Kingston outdoor activity summer program for children. Explain that there aren't right or wrong answers and although it would be nice to hear everybody's thoughts nobody has to talk if doesn't feel like.

Describe the program: The City of Kingston offers a free summer recreational program for children up to 12 years of age. The program starts since the beginning of July and ends before the last week of August. The program is offered at 14 parks throughout Kingston intending to be at a walking distance from most Kingston homes. Some locations are full day and some are half day. The program consists of a balanced blend of physically active games and sports and quiet activities like arts and crafts. There are going to be special events and theme days. Program sites do not have access to water or washroom facilities and there is not lunch hour supervision; therefore, access to home is advised. Children under 6 may participate only when their parent/guardian participates with them.

Opening Question:

Please say your name and one thing you love about your kids!

[ASK PERMISSION TO START TAPING]
[TAPE-RECORDER ON]

Introductory Questions:

- What comes to mind when you think of a children’s program?

- What comes to mind when you think of outdoor play?

Key Questions:

Product

What do you look for in a children's summer program?

What do you think about the City of Kingston’s park program?
Probe: what do you like the most? what do you like the least?

What would make you more likely to enroll your child in this program?
Probe: what change in the program would make you change your mind and participate?
Price

What is least appealing to you about participating in the City of Kingston Summer program for children?

What might make parents reluctant to participate in a children's summer program?

What might compete with the parents' decision to participate in this summer program?
Probe: other programs in the city? child care option at home by family member? paid child care option at home? children staying home with parent watching tv or playing video games? commuting time? other?

Place

Where in the city do your children usually spend their time during the summer holidays?

Are you happy with the existing program locations? (show the program's location map)

Which sites are most appealing and why?

Where do you usually receive information about summer activities and programs for your children?
Probe: friends and family homes, school, afterschool programs? Leisure Showcase? other?

Where do you usually spend time when not at home or work?

Promotion:

What sources of information do you consider credible or influential regarding decisions about your children?
probe: internet? tv? friends and family? professionals as teachers, doctors etc.?other?

What or who would motivate you in order to make a decision related to your child?
probe: the educational aspect? saving time? your child's opinion? other parents opinion? cost? being healthy? the fun aspect?

In what format would you prefer to receive information about summer programs for children?
probe: school letters? posters? web sites? verbal communication? other?

Were you aware of the City of Kingston summer program before this meeting?

We are going to create material directed to parents and children for promoting the City of Kingston summer recreational program for children. We want to both inform and motivate. What advice do you have for us?
SUMMARIZE SESSION

Summary Question:
How well you think our conversation managed to capture the essence of summer children programs?

Final Question:
Have we missed anything?

END TAPE RECORDING
THANK PARTICIPANTS
## Appendix C: Themes organisation according to the 4Ps

### Product

<table>
<thead>
<tr>
<th>SOCIAL ENVIRONMENT OF PROGRAM</th>
<th>COMMUNITY</th>
<th>THE LOCAL LEVEL</th>
</tr>
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<tbody>
<tr>
<td>Program as a context for children developing friendships</td>
<td>Word of mouth</td>
<td>Parents usually do not go to parks or programmes far from their home</td>
</tr>
<tr>
<td>Program providing a positive-desirable social environment</td>
<td>Program as a context for enabling community members bonding</td>
<td>Parents are not aware of parks or programmes that are far from home unless they offer special services</td>
</tr>
<tr>
<td>Program as a context for learning to work within a team</td>
<td>Already used as a child care resource (neighbours and friends)</td>
<td>School is evaluated as the best location to receive information and guide decisions</td>
</tr>
<tr>
<td>Program as a context for enabling community members bonding</td>
<td>Community involvement for facilitating, strengthening program operation and help to overcome shortcomings</td>
<td></td>
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<tr>
<td>Program as a context for parent-child bonding</td>
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<tr>
<td>Learning and developing social skills</td>
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</table>

### Skills Development

- i.e. creativity, music, humanities, baking etc.
- Learning and developing social skills
- Learning from nature
- By being in nature

### PROGRAM SAFETY

- Staff should listen to children actively and solve any issues
- Adequate supervision and good staff/child ratio
- Appropriate infrastructure: proper washrooms, weather proof, safe environment

### VARIETY OF ACTIVITIES

- For programme being inclusive, in terms of child's abilities - interests character
- For offering a balanced schedule between physical and mental activity
- For keeping child interested
- For providing new experiences

### PROGRAM STRUCTURE

- Need for structure in programme operation
  - Structure in context:
    - Age/abilities appropriate
  - Structure in delivery:
    - Staff should be able to deliver the structured programme
    - Staff should be able to keep children in order
    - Staff should show enthusiasm to engage children
    - Staff should listen to children actively and solve any issues

### STAFF ENGAGEMENT

- Program staff is a role model for children
- Community involvement for facilitating, strengthening program operation and help to overcome shortcomings
- People involved should be genuinely interested and not because they are getting paid
  - Staff should listen to children actively and solve any issues
  - Staff should show enthusiasm to engage children
  - Programming should be a result of a vision which is communicated

### Need for structure in programme description and communication

- Parents need to know content analytically in order to decide
- Parents need to know content analytically in order to plan for dates and gear/accessories
- Parents need to see structure in order to trust the programme.
Price

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<tr>
<th>CHILD’S OPINION</th>
<th>COST AND CONVENIENCE</th>
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<tbody>
<tr>
<td>Word of mouth</td>
<td>Program Cost</td>
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<tr>
<td>Interests</td>
<td>Degree of accessibility in terms of proximity</td>
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<tr>
<td>enjoyment</td>
<td>Hours (program to be working parents inclusive)</td>
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<tr>
<td>Program providing a positive/desirable social environment</td>
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Promotion

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<tr>
<th>INFORMERS</th>
<th>MOTIVATORS</th>
<th>CHILD PREFERENCES</th>
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<tr>
<td>POSTERS / FLYERS</td>
<td>PLACE</td>
<td>Interests</td>
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<tr>
<td>INTERNET</td>
<td>School</td>
<td>Program providing a positive/desirable social environment</td>
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<tr>
<td>CITY LEISURE GUIDE - RADIO</td>
<td>Word of mouth</td>
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<td>PROGRAM STRUCTURE</td>
<td>Program as a context for children developing friendships</td>
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<td>Parents need to see structure in program's content</td>
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<td>Parents need to know analytically content in order to plan for dates and/or gear</td>
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Place

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<tr>
<th>PLACES PARENTS SPEND MOST OF THEIR FREE TIME</th>
<th>PLACES HOSTING CHILDREN SUMMER TIME</th>
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<tr>
<td>GROCERY STORE</td>
<td>SUMMER CAMPS</td>
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<td>NEIGHBOUR OR RELATIVES’ HOME</td>
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<td>LOCAL PARKS</td>
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<td>CITY SPECIAL PARKS</td>
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<td>FAMILY COTTAGE</td>
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<td>PROVINCIAL RECREATIONAL SITES</td>
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<td>AND INFORMER</td>
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<tr>
<td>PLACES PARENTS RECEIVE CHILDREN-RELATED INFORMATION SCHOOL</td>
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