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MERIKARVIA LIIKKUU- EVENT

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The purpose of this thesis was to organize event called Merikarvia liikkuu, which promotes different kinds of leisure time activity possibilities in Merikarvia municipality. By promoting these activities, the aim was to get more people to be interested of physical activity and increase their knowledge of importance of physical activity. The event was primarily aimed for families, who live in Merikarvia. Merikarvia liikkuu -event was created together with Merikarvia municipality. The Merikarvia liikkuu -event was held on the 20th of August 2016.

On the day the participants organized different kind of games and activities, like disc golf and stick horse obstacle course. The day was free for the families and lasted about three hours, people were free to explore the activities on their own pace. The event offered opportunity for the children and adolescent to try these activities, and maybe find out new interesting hobbies. The only timed activity was the ringette school for the children.

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1 INTRODUCTION

Physical inactivity is causing an estimated 3.2 million (6%) deaths in the world and is the fourth biggest risk factor for mortality. Physical inactivity is a global problem so it is not just individual challenge. Thus, improving physical activity needs multi-professional co-operation, which takes into consideration personal and cultural differences. (World Health Organization [www-pages](#) 2015)

Physical activity has been found to reduce the risk of for example cardiovascular diseases, diabetes, colon and breast cancer, and depression. Physical inactivity is estimated to cause 21-25% of the breast and colon cancers, 27% of diabetes and about 30% of the heart diseases. Physical activity also decreases the risk of a hip or vertebral fractures and helps control weight when done enough. (World Health Organization [www-pages](#) 2015)

The obesity epidemic is a global trend and it is especially affecting the children. The severity of the current situation in the recent reports has been suggested by “today’s generation of children will be the first for over a century from whom life expectancy falls.” Now a day the environment is enforcing the inactive lifestyle and it is likely to be seen as a positive energy balance and as a childhood obesity. The evidence is showing that children’s or adolescent’s physical activity is conducive to a healthy lifestyle and prevention of diseases. The greatest impact on mortality and longevity may come when physical activity is learned during childhood and it comes habitual. (Hills, A. P., King, N. A. 2007, 533)

2 PURPOSE OF THE THESIS

Purpose of this thesis was to organize an event called Merikarvia liikkuu which was held in August 2016 in the municipality of Merikarvia. Merikarvia liikkuu events main idea was to increase the awareness of the importance of the physical activity in children and adolescent, inspire to move and to introduce variety of recreational opportunities

and wellness companies in Merikarvia municipality to local families. Merikarvia liikkuu event did show the different activity opportunities that municipality is offering and hopefully that way encouraged children and adolescent to try sports and maybe find new interesting activities. Event was cost free family happening, and hopefully that way did not limit the participation of the families.

3 PHYSICAL ACTIVITY

World's health organization defines physical activity as any bodily movement which is produced by skeletal muscles that requires energy expenditure. (World Health Organization [www-pages 2015](#)). Physical activity includes exercises as well as other activities and it should not be mistaken with the term "exercise". Physical activity means bodily movements which are done as part of playing, working, active transportation, house chores and recreational activities and the term "exercise" is subcategory of physical activity. Exercise means more purposeful movements, which are planned, structured and repetitive and are aiming to improve or maintain one or more components of physical fitness. (World Health Organization [www-pages 2015](#).) So when said simplified, although all exercise is physical activity, not all physical activity is exercise. (ODPHP [www-page 2015](#)).

Bodily movements can be divided in to two categories, which are baseline activity and health-enhancing activity. The Baseline activity refers to types of activities like standing, walking slowly, and lifting lightweight objects. The amount how much people do this kind of light-intensity activity vary. When doing only baseline activities, it's not enough to meet the recommendations of The Physical Activity Guidelines for Americans (PAG), and thus these people are referred as an inactive. Inactive people may do some short lasting episodes of moderate- or vigorous-intensity, for example climbing a few flights of stairs, but it's not enough to increase the overall activity level to meet the guidelines. (ODPHP [www-page 2015](#).) When the physical activity is done right, it has big impact to the children's and adolescent's health and promoting well-being.

These recommendations offer clear guidelines to the people who are working with children and adolescent. (Ahonen, T. et.al. 2008.)

When physical activity level is beyond baseline, but fewer than 150 minutes of moderate-intensity a week or the equivalent amount of vigorous-intensity, which is 75 minutes a week, it is called Low activity level. Medium activity is level of physical activity when the activity amount is 150 minutes up to 300 minutes of moderate-intensity a week or 75 minutes up to 150 minutes of vigorous-intensity a week. When physical activity level is more than the equivalent of 300 minutes of moderate-intensity a week it is referred as high activity level. (ODPHP www-page 2015.)

The health-enhancing activity refers to the activities which produces health benefits. This kind of activities are added to the baseline activities and are for example climbing, brisk walking, jumping rope and lifting weights. There are three main types of physical activity, which all are beneficial for health, and these are aerobic, muscle-strengthening and bone-strengthening activity. Aerobic activity, which is also sometimes called endurance activity or cardio activity, is type of a physical activity where the large muscles move in a rhythmic way for a sustained period of time. Aerobic activity increases the heart beat rate. This kind of activities are for example, running, bicycling, swimming and brisk walking. Aerobic activity includes three kinds of components, which are intensity (how hard), frequency (how often), and duration (how long). Intensity is usually described by moderate, which means effort of brisk walking, and vigorous, which is equivalent to the effort used in running. (ODPHP www-page 2015.)

Muscle-strengthening activity causes the muscles to work or hold against force or weight. It is important to train all the big muscle groups in the body, meaning the legs, hips, back, abdomen, chest, shoulders, and arms. Muscle-strengthening includes resistance training and lifting weights. Usually muscle-strengthening activity is done by lifting weights, using elastic bands or using body weight (push-ups, pull-ups for example). Muscle-strengthening activity includes also three components, intensity, frequency and repetitions. Intensity, means how much weight or force is used when com-

pared to the person's capability. Frequency, how often this kind of muscle strengthening activity is performed. Repetitions, means how many times the person is capable to lift the weight. (ODPHP www-page 2015.)

In bone-strengthening activity, also sometimes called weight-bearing or weight-loading, force is created, usually by the impact with the ground, to promote the bone growth and strength. Bone-strengthening activities can be either aerobic or muscle strengthening. This kind of activities where the force is commonly produced are jumping, running, brisk walking, and weight-lifting exercises. (ODPHP www-page 2015.)

These are the components in the physical activity profile. Research has shown that for achieving health benefits, the most important part is the total amount of physical activity. This means that the minutes of moderate or vigorous physical activity are more important than any other component. It is important that the physical activities are appropriate for the age, and offer variety, also important is that young people enjoy the activities and are encouraged to do them. (ODPHP www-page 2015.)

3.1 Health benefits of physical activity

Being physically active is always better than being inactive, and it is the leading example of how lifestyle choices affect to the health. (ODPHP www-page 2015.) When done regularly in moderate intensity, physical activity, including activities like walking, cycling and participating in sports, has significant health benefits. (World Health Organization www-pages 2015.) When increasing the physical activity level through the intensity, frequency, and/or duration it gives, in most cases, additional health benefits. Health benefits are seen in all ages, children and adolescent, young and middle-aged and older adults and the benefits outweigh the possible adverse outcomes. (ODPHP www-page 2015.)

When your body is used to the physical exertion, physical activity should happen 3-4 times a week so that it is loading to all the major muscle groups and it is continuous

and rhythmical. This type of physical activity is called basic aerobic exercises. Basic aerobic exercise means the body's ability to work in a level where its supply of oxygen and oxygen consumption are in balance. It tells about the body's ability to maintain the performance level several hours during physical activity. Most of the physical health effects, for example drop in blood pressure can be achieved by doing physical activity in this very training area. When overall physical health is in lower level this kind of aerobic exercise also develops cardiac output. Training in this level is repairing your body, restoring it and it is eliminating fatigue and exhilarating. The effort level of this kind of exercises is 50-70% from maximum heart rate. (Kantanava, M. 2011). Being physically active also gives other benefits. To people, it is also one way to have fun, be social, enjoy the nature and improve their personal appearance. (ODPHP www-page 2015.)

Children and adolescent who are physically active when they are young have better chance to be healthy in the future. There is strong evidence that physically active children and adolescent have improved cardiorespiratory and muscular fitness, improved bone health, improved cardiovascular and metabolic biomarkers and favourable body composition. There is also moderate evidence that physical activity reduces symptoms of depression. Studies has shown that when participating at least 3 days of vigorous aerobic activity a week improves metabolic health. When comparing to those who are physically inactive, physically active children and adolescent have also typically lower body fatness. Studies which are done with overweight and obese youth have shown that participating in at least moderate intensity physical activity 3 to 5 days a week, for 30 to 60 minutes each time, helps reduce body fatness. Risk factors for diseases like, hypertension, type 2 diabetes, heart disease or osteoporosis, can begin to develop in childhood. (ODPHP www-page 2015.)

Physical activity is especially important to the overall development of the brain's neural networks and the result from the physical activity is that children learn how to control the movement and the movement of the muscles, nervous system and senses joint activity. (Vuori, Taimela & Kujala 2005, 145) Getting the best result out of physical activity requires that the children and adolescents have healthy nutrition and get enough sleep. It is recommended that children and adolescent eat five meals a day and the meals include half kilograms of vegetables. Adequate sleep is important to the

growth, learning and to the recovery. It is important that the sleep rhythm is regular and adequate. Children need sleep from nine to ten hours per day and adolescents eight hours a day. Strenuous exercise should be avoided before bedtime, because it may interfere the sleep. This should be taken into consideration when planning physical activities for children and adolescents. (Ahonen, T. et.al. 2008.)

3.2 Physiological effect of exercise

Mainly the healthy aspects of physical activity are based on the changes happening in the metabolic and bodily functions. The need of physical activity is considered to base on the genetic adaptation. The survivor of human race and the ability of the reproduction has required the ability to do physical work and activity. Genetic control is adapted to require the stimulus of loading physical activity. Lack of physical activity causes deficits and changes in gene expression, and these can be seen as adverse changes in health and functional capacity. This is the base of the many health effects of physical activity. During the physical activity human body is working as a system where different parts have their own functions, these parts are linked to each other's and affecting to each other. The actual movement is produced by the kinetic chain of the neural system and the musculoskeletal system. (Vuori et al. 2005, 21-22)

Response to the exercise depends on the frequency, duration and intensity of the exercise and also the environmental conditions are effecting. Requirements of the oxygen intake increases as well as the removal of the carbon dioxide and metabolites. To meet these demands chemical, thermal and metabolic stimulates are affecting to the metabolic, ventilatory and cardiovascular functions. The main energy source for all forms of biological work is Adenosine triphosphate (ATP), it enables muscle contraction. ATP and phosphocreatine are the immediate energy sources before other aspect of metabolism (glycogen, fat) are activated. (Burton, Stokes & Hall. 2004. 185) Increased energy production in the muscles, liver and fat tissues cause a one-time effect and training effects, some changes are measurable in blood sugar, lipids, enzymes, and hormone levels. When physical activity is repeated vigorously, long, repeatedly and continuously enough occurs one-time effects and training effects also in energy stocks

and also in excretory and digestive system, autonomic nervous system, hormonal and immune system functions. All these effects may have significance to the functionality or to the health, and many of them can be either advantageous or adverse. Most of these effects which occur in metabolic and regulatory functions are short-term, from few minutes to few days. (Vuori et al. 2005, 23) Person who has been physically active has 7-8% bigger bone mass and the bones are bigger than person who has been physically passive. The effects of loading to the bone mass and size are only effecting especially to the loaded parts of the bone. Most effective forms of physical activity are the ones where is diverse activity, quick and powerful impacts, jolts, torques and rotations. (Vuori et al. 2005, 149)

During exercise ventilation increases linearly, as well as oxygen consumption. The increases in tidal volume and respiratory rate are increasing the pulmonary ventilation and these match to the increase in oxygen uptake and carbon dioxide output. The breathing capacity does not limit the oxygen delivery to the muscles, because even during strenuous exercise it does not reach its maximum potential. Limiting factor to the oxygen delivery to the muscles is the cardiovascular function. Muscle and coronary blood flow increases during physical activity, this requires an increase in the cardiac output, which is increased by both stroke volume and heart rate. During strenuous exercise stroke volume and heart rate increases to about 90% of their maximum values. Body temperature increases during exercise because not all the energy is used to the muscle work. To get rid of the extra heat energy metabolism increases. Two main ways to do this are increase the blood supply to the skin and the evaporation of the sweat. (Burton, Stokes & Hall. 2004. 185)

3.3 Recommendations of physical activity for children and adolescent

The Physical Activity Guidelines for Americans (PAG) recommend that children and adolescent should get physical activity 60 minutes or more every day. PAG recommendations are aimed for children and adolescent from 6 to 17 years old. (ODPHP www-page 2015.) Nuori Suomi ry children's and adolescent's physical activity expert group recommends for one to two hours of physical activity per day. This is general recommendation for children and adolescent from 7 to 18 years old, including the ones who are physically active but also disabled children. Children in the age of 7 should get at least two hours of physical activity in a day and adolescent of 18 years old should get at least one hour of physical activity in a day, to decrease the adverse effects of inactivity. (Ahonen, T. et.al. 2008.) Finland's Ministry of education and Culture recommends 3 hours per day physical activity to under 8 years old children, these recommendations are based on the United Nations guidelines. (Opetus- ja kulttuuriministeriö, www-pages 2016.)

Physical activity can be done in smaller periods throughout the day. (ODPHP www-page 2015.) Although these smaller periods should be at least 10 minutes long. (Ahonen, T. et.al. 2008.) Activities should include aerobic activities, but also age appropriate activities which strengthen the bones and muscles. Activities which strengthen the bone mass by increasing the bone-mineral content and bone density, are especially important during the years just before and during puberty, because that is the phase when the greatest gain in bone mass occurs. (ODPHP www-page 2015.) This kind of activities should be done several time per week. Along with the bone strengthening activities, healthy diet is important part of the bone growth, and it should include adequate amount of calcium and vitamin D. (ODPHP www-page 2015.) Daily physical activity should include periods of vigorous activity, when children and adolescent feel out of breath and heart rate increases. Physical activity done in vigorous intensity generates more beneficial health changes in the body, and also improves endurance, than activities done in light -or moderate -intensity. (Ahonen, T. et.al. 2008.)

Most of the recommended 60 minutes of physical activity should be aerobic activities. The aerobic physical activity should be done in the level of moderate -and vigorous- intensity. (ODPHP www-page 2015.)_Aerobic capacity is an important determinant of the sustainability performance. The main factors affecting to this are the respiratory, cardiovascular and heart circulatory function and also muscle aerobic metabolism. Hereditary factors affect greatly to the aerobic capacity, to the physiological functions which are determining it and to the capacity how it can be improved. (Vuori et al. 2005, 150)

Activities which are performed in the level of vigorous, should be performed at least three days a week. Muscle -and bone -strengthening activities should be performed at least on 3 days a week. (ODPHP www-page 2015.) The muscle mass growth, from the childhood to the adolescent is with boys from the 40% to the 53%, but with girl it stays somewhat at the same level, 40-46%. The Muscle mass grows linearly before the puberty and doubles in boys between ages 7 to 12. It is then somewhat higher than in girls. During puberty boys muscle mass keeps growing and intensifies because of the effect of androgens the next 2 to 4 years, but girl's muscle mass growth is slower. Biggest differences between boys and girls can be seen in the upper body strength. (Vuori et al. 2005, 148) Children should meet these guidelines by doing age appropriate activities. (ODPHP www-page 2015.)

Children have different movement patterns than adolescent or adults. Children are naturally active, during the games they develop movement pattern's and skills by using basic aerobic and bone-strengthening activities, like running, skipping and jumping. Any episode of physical activity done in moderate or vigorous- intensity is counted to meet the PGA guidelines. Usually children vary the intensity, with brief periods of rest. Children do not usually need structured muscle-strengthening programs, they increase muscle strength by doing unstructured activities that involve lifting or moving their body weight or working against resistance. (ODPHP www-page 2015.) Too similar and too arduous physical activity can come health risk to the children. Recovery and sleep time must be taken into consideration, when planning children's physical activity. (Ahonen, T. et.al. 2008.)

As children grow into adolescent, the way how they do physical activity changes on the way as they grow up. The physical activity guidelines are met by doing free play but also structured activities, like playing organized games and sports, and also they are able to do longer periods of activity. Structured activities should include both, aerobic and muscle-strengthening activities. Examples of this kind of activities are playing sports and lifting weights. Muscle- strengthening activities should be done so that they involve a moderate to high level of effort and all the biggest muscle groups, legs, arms, shoulders, hips, back, chest and abdomen are involved. Still most of the activity is intermittent, and all the periods of physical activity is counted to meet the guidelines of PGA. (ODPHP www-page 2015.) Adolescents everyday activities rarely contains physical activities where they feel out of breath and heart rate increases, so it is very important that they find sport activity which are done in vigorous intensity. (Ahonen, T. et.al. 2008.)

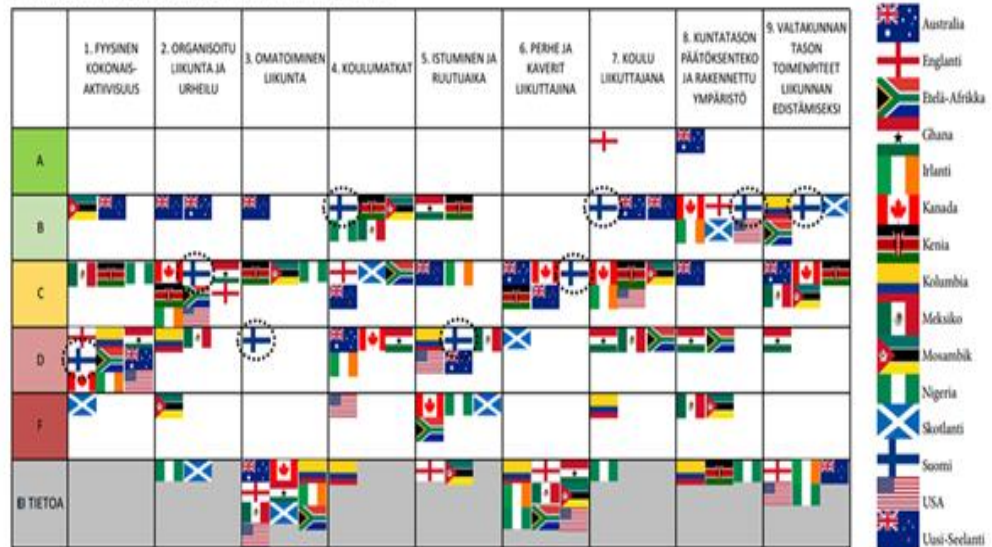
3.4 International comparison of physical activity in children and adolescent

The report published in the international children´s physical activity conference in Toronto, Canada (2014), 15 publications from different countries were published about the children´s and adolescent´s physical activity progress. In these national reports children´s and adolescent´s physical activity level was divided into 9 sections, each section was given grade on the basis of existing research. The comparison of the 15 countries is presented in the Table 1. (Aira, A. et.al. 2014)

Table 1. Children´s and adolescent´s physical activity an international comparison chart. (Aira, A. et.al. 2014)

A 81–100 %	B 61–80 %	C 41–60 %	D 21–40 %	F 0–20%
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Taulukko 1 Lasten nuorten ikäryhmän osa-alueiden kansainvälinen vertailu.



The report assesses children's and adolescent's physical activity in nine sub-areas, 5 step scale was used, according the Canadian model (A= Best... F=weakest). The letter A means that the recommendation is almost completely reached (81-100%) and the F means that the recommendation is met only one of the fifth child or adolescent (0-20%). Finland is according to the comparison fairly typical developed Western country. Our strengths are versatile exercise programs and easy access playgrounds and also variety of activity possibilities in schools (grade B). Comparing to the other western countries also school commuting by bike or walking is in good level internationally (grade B). The Finnish children and adolescents are together with Kenyans, Mozambicans and Nigeriens the most active cyclist and walkers. In the area of overall physical activity, we have most to improve (grade D). (Aira, A. et.al. 2014)

4 HEALTH PROMOTION

Children's and adolescent's physical activity promoting is based on the understanding of factors affecting physical activity. These factors can be divided into demographic (age, gender, education of parents and etc), psychological, behavioral, social, cultural and environmental factors. (Fogelholm & Vuori 2005, 164) The information about the health benefits of physical activity, may not be enough to encourage children to move. The most important thing is that children would enjoy the physical activity, and it would be age suitable. (Ahonen, T. et.al. 2008.) Adopting physically active life style is multistage and long process, which includes receiving information and starting to be more interested on the importance of physical activity, motivation, starting to be positive towards sports, learning the skills needed in sports, trying different sports, the social effect, participating in sports and in the end permanent adaption of the hobby. (Ahonen, T. et.al. 2008.) New strategies which promote physical activity should take into consideration cultural, societal and personal factors. These factors are affecting to the development, and maintenance of physical activity in long term. (Sothorn, M.S. et. al. 1999, 158)

Physical activity level decreases with age. Children are more physically active than adolescent. How much physical activity you have done in your childhood, predicts your physical activity level in future. Boys are participating more in instructed and intensive sports and they are using more time in physical activities than girls. The sex difference between boys and girls decreases with ageing, and according to some researches it does not exist in the end. (Ahonen, T. et.al. 2008.)

Being physically active is natural to the children, it comes through the playing and exploring the surroundings, they learn by trying, exploring and making mistakes. When the whole family is physically active, children learn that it is part of the normal everyday lifestyle. It is important that adults are encouraging children to move and are positive role models to the children. Positive experiences are building healthy relationship between adult and the child and also helps to create healthy self-image.

These are all important steps towards physically active and healthy life style. It is important to listen the children's wishes, include the children's opinions and thoughts to the plans and decision making. Children have the right to challenge them self and try out their limits, children learn best when they are playing together with other children, in different surroundings and in all seasons. It is not beneficial to be too strict with the safety issues and prohibitions. Children are enjoying trying out their skills and for that they should have enough time. If children are experiencing some difficulties, they have the right to get help and support. (Opetus- ja kulttuuriministeriö www-pages 2016) Physical activity can also be promoted in practical way, for example encourage children and adolescent to walk or bicycle to school instead of taking buss or car, when it is safe and appropriate. (ODPHP www-page 2015.)

Different kind of toys and sport equipment are encouraging children to move and are also making the experience more divers and at the same time enrich the child's bodily experiences and sensations. Children should have easy access to the toys and equipment which are encouraging children to be physically active. Instructed physical activity sessions in different kind of sport clubs and clubs are easy and safe way to get to try out and learn new skills. The instructed activities should be planned so that all children have the opportunity to participate, enjoy and learn individually as well as together with other children. Children are individuals and it should be taken into consideration so that the instructed activities are diverse. The genre, family, culture, language, health or any other equality matter should not limit child's opportunities to participate in the physical activities. (Opetus- ja kulttuuriministeriö www-pages 2016)

There is number of different approaches to the health promoting, five different approached will be discussed. Medical or preventive approach, which object is in the preventing the diseases. In behavior change approach, object is in the information so that people have the needed information to do healthier choices. In educational approach the objective is to help people to have the needed skills and confidence, so that they can affect more to their health. Empowerment approach is to affect to the

environment and policies so that these facilitate the healthy choices. The fifth approach is social change. These approaches have different points of view to the health promotion, like aims, methods and means of evaluation. (Naidoo & Wills 2009, 67)

The aims of the medical approach are focused to the activity, which is reducing morbidity and premature mortality. Target to this is the whole population or the high-risk groups. By increasing medical interventions this approach will prevent ill health and premature death. The medical approach is often described to have three levels of intervention. These three levels are, primary -, secondary - and tertiary prevention. The primary prevention aim is to prevent the onset of the disease, and this is done through the risk education. Secondary prevention aims to prevent the progressions of the disease and the tertiary prevention aims to prevent recurrence of an illness. The popularity of the medical approach bases to the use of scientific methods, which creating high status. Low costs, because in short-term it is cheaper to prevent and detect the disease early than treat people who are ill. The reinforcement of the professional, who has the expert knowledge to achieve the wanted results. And to the already seen successes, when it has been used in public health. Medical approach has been criticized not to promote the positive health and ignoring the social and environmental aspects. Medical approach methods, like immunization and screening, relies to the infrastructure, in order to deliver these programmes. The system needs professionals, equipment and facilities, it also needs information system, so that the people know who is eligible for example vaccination. This system can also be seen as a complex process, because it can be dependent on the establishments of national programmes or guidelines. (Naidoo & Wills 2009, 68-69)

The aims of the behavior change are to encourage people to adopt a healthier lifestyle. Adapting healthy behaviors is complex process and it relies on the individual's own activity. The popularity of the behavior change bases on the idea that it sees the health as a property of individuals. By making healthier lifestyle choices you can improve your own health, and vice versa if you don't take responsibility of your own health you are to blame for the consequences. The relationship between individual and our environment and social factors is complex. Behavior may be response to the

environmental things, and for these the individual has no control, like unemployment and property. This approach can be seen used in many campaigns which persuade individuals to quit smoking, undertake regular exercises and adopt healthy diet. It is usually targeted to individuals but to get the needed information to them it may use mass means of communication. The approach is usually experts lead and top-down. It divides the people to experts who know how to improve your health and to the general public who needs the help. This can be avoided by directing the intervention according to the clients stated need when these have been identified. Finding out what the consumers want using social marketing techniques and then providing these to the consumers. (Naidoo & Wills 2009, 70-71)

In the educational approach the aim is to provide information, knowledge and skills so that people can change their health behavior. Difference between the educational - and behavior changes approach is that behavior approach does not set to motivate or persuade change in a particular direction. The wanted outcome is, that change is the client's voluntary choice, this may not be the same outcome as the health promotor prefers. Main idea behind the educational approach is the relationship between knowledge and behavior. This means that by increasing knowledge there will be change in attitude, and change in attitude may change the behavior. According to the psychological theories, learning involves three aspects. These are cognitive (information and understanding), affective (attitudes and feelings) and behavioral (skills). Information can be provided through visual display, booklets or one-to- one advice. Group discussions or one-to one- counseling may provide the opportunity to share and view clients own attitudes towards their own health. Education may also develop the clients own decisions-making skills. This can be practiced throughout role plays for example. (Naidoo & Wills 2009, 71-72)

Empowerment approach helps take responsibility of your own health by identifying problems, and by gaining the skills and confidence to act upon them. Empowerment is based on the "bottom-up" idea which means that it requires different kind of skills from the health promotor. Being facilitator, giving the kickstart and freeing up resources and then stepping to side. For the empowerment people need to recognize

and understand their powerlessness, feel strongly enough to want to change it and feeling that it is possible by having the needed information support and life skills. Self-care, advocacy or client centered approach are ways to use empowerment strategies. (Naidoo & Wills 2009, 71-73)

Social change also sometimes called radical health promotion, acknowledges the importance of the socioeconomic environment in determining health. The way social change tries to affect to the health promoting is through policy or environmental level. Aim is to change the physical, social and economical environment. The phrase “to make the healthy choice the easier choice” describes the main idea behind the social changes approach. The healthy choices are out there but to make them realistic choices they have to be reasonable in cost, availability and/or accessibility. Social change is “top- down” approach it targets groups and populations. The wanted changes are usually within organizations and needs commitment from the highest levels of the organization. The successful change also needs support from the public and this is achieved by social marketing, education and lobbying. The scope in this kind approach is more limited than in traditional medical or behavior change approaches to the health promoter. (Naidoo & Wills 2009, 74)

5 THESIS PROCESS

Following table shows the planned schedule to this thesis. Process started in the fall of 2015 and the graduation was set to the December of 2016. Throughout the thesis process contact between author and the supervising teacher was kept via individual meetings, group gatherings and emails. Thesis was done as a practical implementation, by organizing event and all the needed parts to it. Theoretical part was written to support the purpose of the event, tell the facts why it is important topic and to tell the theories behind it. Doing this kind of practice based thesis, you have to have clear plan what you want the end result to be, and preferably long distance plan how to execute it. Doing practice based thesis like this, you have to have back-up plans because so many things are depending on other people’s activity and commitment. Practice based thesis

is quite a big task to undertake, so it would maybe be more suitable as a pair work. Otherwise you learn quite much by doing this type of thesis, about the subject but also about the side of organizing and proper protocol when managing things. Also the responsibility is bigger in this kind of work, because you are not only accountable to yourself but also to other parties involved.

Table 2. Thesis process

October 2015	Finding a thesis topic based on interest of working in projects, Presenting thesis topic to the Sports Secretary of Merikarvia
November - December 2015	Study plan presentation by the opponent Silja Alantie, Writing theory, first calls to the sport clubs and companies
January- February 2016	Writing theory
March-April 2016	Second calls to the sport clubs and companies, Second phase presentation by the opponent Silja Alantie
May- June 2016	practical arrangements
July 2016	practical arrangements
Aguste 2016	MERIKARVIA liikkuu 20th of August 2016
September- November 2016	Finishing the thesis and presenting the thesis on the 18 th November

6 MERIKARVIA LIIKKUU- EVENT

Idea of the thesis Merikarvia liikkuu came in the end of the September 2015, after tutor discussion. Idea to do the thesis more as a project type came because that is something which would be interesting also in future. After the agreements with school were done, contact to the sport secretary of Merikarvia was done and agreements on how municipality of Merikarvia would be part of event, the date was set. Merikarvia liikkuu event was held on the 20th of August, in the municipality of Merikarvia. The event was placed on the surroundings of the Merikarvia's primary school, the sand court and school yard, also some of the program was held in Merikarvia's ice rink (Eumer arena).

6.1 Notifications, arrangement and advertisement

Merikarvia liikkuu event was officially organized by the municipality of Merikarvia, thus, all the responsibilities, insurances and costs were managed by the Merikarvia municipality and the Merikarvia's recreational committee. Author of this theses worked as a project manager and was responsible of the organizing the event. More in detail it meant first to get sport organizations and private entrepreneurs to participate to the event. After that the agreements on the location and what areas out- and indoors were needed on the particular day, were agreed on. First contact to the sport clubs and to the wellness companies, was done in the week 47 (2015), via e-mail and phone. First sport clubs signed on to the project at the same week. After the first contact round only one association said no to the event because of the bad timing on their behalf. Otherwise all the responses were positive, some promised to be part of the event and some said that they will think about it. After securing these things the notification of the Notice of the public event was done to the Kankaanpää police department. To fill this notification, the need of the safety and rescue plan for the event had to be sorted out as well as the need of emergency staff on the location. Safety and rescue plan was agreed with the area fire chief. The need of emergency staff was agreed with Satakunta areas senior physician who is responsible of the primary care agreements.

Contact between the project manager and the participating parties was done mainly via e-mail and phone. Through these links everything was arranged, like basic information about the event, the ideas and the needs. From the bases of the information what kind of place they needed, map of the area was drawn and it was divided to the participants according to their safety, surface and space requirements. This map was send to the participants beforehand, so that when they came to the location they knew where they set up their stands.

The Merikarvia liikkuu- event advertisement was done through three different channels, social media, paper advertisement and by printed adds. In social media Facebook was used and also Merikarvia primary schools own communication site Helmi. In Facebook own site for the event was created, and people were invited through the site. Via Helmi, the advertisement was directly reaching the parents. Paper advertisement appeared in the local weekly newspaper called Merikarvian Lehti (Picture 1). Printed adds were put for example to the local stores and reactional places.

Picture 1. Printed advertisement in Merikarvian lehti (Tarkkio 2016)

Koko perheen ilmainen
Merikarvia Liikkuu tapahtuma
lauantaina 20.8 klo 10-14
Merikarvian alakoulun hiekkakentällä

Tapahtumassa mukana merikarvalaisia seuroja ja yksityisyrittäjiä. Tule kokeilemaan eri lajeja ja testaamaan taitoja leikkimielisissä kisoissa.

Tapahtumassa mukana myös suomen ringette maajoukkueen pelaaja, kaksinkertainen maailmanmestari Susanna Tapani. Susanna Tapani pitää lapsille n.7-10vuotiaille ilmaisen ringette koulun Merikarvian jäähallissa klo 10-11.

Ilmoitukset viimeistään perjantaina (19.8.) sähköpostiin maria.tarkkio@student.samk.fi

Merikarvian jäähalliin vapaa pääsy luistelemaan klo 11 jälkeen.

6.2 Sports clubs and private entrepreneurs

The participants on the day were Merikarvian Lukko, Merikarvian Lions Club, Merikarvian Seurakunta, Merikarvian koirapoppoo, Merikarvian ratsastajat ry/ Talli Pikkuhelmi, Merikarvian jääurheilijat and Waarin vossikka. Merikarvian Into had to cancel their participation few days before the event because of the overlapping schedules. Each of the participants decided them self, how they want to present their own activities. Only one guideline was given and it was that the activities must be free, so that the children's or adolescent's families' financial situation is not districting the participation. Few activities were arranged by the organization as well for the day. Susanna Tapani came to the event to keep ringette school for the children. Susanna Tapani plays in Finnish national team in both ringette and ice hockey. She has won two world championships in ringette and two bronze medals in ice hockey. The ringette school was one hour long happening in the Eumer arena. The sport clubs and private entrepreneurs arranged for example following activities, pony riding, Disc golf, floorball skill track, free skating time and hobby horse jumping track. Merikarvian Lehti made also article of the happening to the next week's paper, presenting the idea behind the event and telling about the participants and their activities.

7 DISCUSSION

The purpose of the thesis was to create an event which would promote children's and adolescent's physical activity as well present the physical activities which the municipality of Merikarvia has to offer. Idea to do this kind of more hands on thesis came to me during tutor meeting in a fall 2015. The idea and the topic came easily because children's and adolescent's physical activity has been "hot" topic both in Finland and internationally. The concern about that the children's and adolescent's physical activity level does not meet the guidelines, has inspired projects nationally as well internationally, for example PAKU- Liikuntaa ja kulttuuria lapsille ja nuorille by Olun Diaconialaitos (ODL) and Kid Power by United Nations Children's Fund (UNICEF) just to name few. Also the idea where I would have this event was easy to decide, I lived

my childhood in the municipality of Merikarvia and I still have good links to that place. Other thing that advocated this decision was that I knew that in Merikarvia there is nothing like this done before.

Organizing an event was totally new experience to me. I have never been part of project before or organized anything like this. I knew that taking this kind of thesis topic is a big job for one person but I still wanted to do it. I really enjoyed doing this thesis and that's why it really did not feel like I would have taken too big task to myself. What was also good thing that I had almost one-year time to plan, and organize this thesis, so I had plenty of time. Of course, the closer the date came more there were things to do, but that is quite normal. I also noticed this kind of job suits me. To me, it is easy to think and plan rationally and systematically. Of course there was also own challenges in this project. Even though I got the participants signed on early, and all the main things were arranged early, like reserving the Eumer arena and organizing the needed outdoor areas, there was still uncertainties, because always there can be cancelations and changes. One of these step-backs was the canceled participation by Merikarvian Into just few days before the event.

I felt that the planning and arranging of the event was done well. With this I mean that all the necessary paper works and permissions were arranged, well before the event. All the participant knew when and where they have to be, and which areas are reserved to their use. I feel that the advertisement could have been done better from my part, but also there were few uncertainties which effected to this. Thus, it was not possible to advertise all the activities beforehand, and it had to be done in the same week. The advertisement could have been done better with the proper event page and marketing that, but it would have costed money. I did not have any expectations about how many people would attend to the event, and I did not do counting on how many visited the event, but as an estimated 60 people visited the Merikarvia liikkuu- event. Over all I feel that the event served its purpose. Few participants got new member to their organizations and children had the chance to try out new things like horseback riding. Because I did not do any kind of straw up on how the participants or the attendant felt about the event or the success of it, I can only tell how I felt it went. When doing this kind of event, it would be good to somehow evaluate the success but then it would be more than one person's job, I feel. Also good thing would be follow up survey, to find

out did this kind of event actually increase the physical activity level. If I would do this kind of event again I would try to get more participants, advertise it better and also create program for example competitions, which would draw more attendant to the event.

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