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Predictive Strength of Physical Education -centered Physical Literacy Indicators on Physical Activity

Abstract

The aim of this study was examine the predictive strength of selected physical education - centered physical literacy indicators on elementary school students' accelerometer measured moderate-to-vigorous intensity physical activity (PA) (MVPA). This study was a cross-sectional study with a sample of 450 fifth grade children ($M = 11.26[.32]$; $n_{females} = 194$; $n_{males} = 256$). A set of predictor variables (motor competence, in-class physical education [PE] PA, health-related fitness, and PE motivation and enjoyment) and MVPA as a single outcome variable were collected. The entire model explained almost 30% of the MVPA ($R^2_{adj} = .298$). Cardiovascular endurance ($\beta = .42$, $p < .001$, CI95% [.22, .62]) and MVPA in PE ($\beta = .27$, $p = .004$, CI 95% [.09, .44]) were statistically significant predictors of total MVPA. It can be concluded that of all included variables, cardiovascular endurance and MVPA in PE were the most important factors contributing to healthy levels of MVPA in childhood.

Keywords: accelerometry, physical education, moderate to vigorous intensity

18 The goal of school physical education (PE) is to educate physically literate individuals
19 and enhance overall student development (Society for Health and Physical Educators, 2013)
20 Association for ASPE). Physical literacy can be defined as “*the motivation, confidence, physical*
21 *competence, knowledge, and understanding to maintain physical activity (PA) throughout the life*
22 *course*” (Whitehead, 2010) or “*the ability, confidence, and desire to be physically active for life*”
23 (The Aspen Institute, 2015). Despite the slight differences in the definitions, the term physical
24 literacy can be understood as an individual’s capacity to engage in a physically active lifestyle
25 (Longmuir & Tremblay, 2016). Due to prolonged obesity epidemic (Hurt, Kulisek, Buchanan, &
26 McClave, 2010), it has been advocated that the primary focus of school PE programs should be
27 in helping students to meet the daily 60 minutes of moderate-to-vigorous intensity physical
28 activity (MVPA) recommendation (US Department of Health and Human Services, 2018).

29 **Although mandatory PE with the standardized curriculum (i.e., a scripted curriculum with clear**
30 **objectives and assessments) has been found to be the most impactful school-based policy to**
31 **increase PA in youth (Bassett et al., 2013),** very little is known which **PE-centered** physical
32 literacy components are the most beneficial in regards to healthy PA behavior in childhood
33 (Corbin, 2016). Thus, the aim of this study was to examine the predictive strength of selected
34 PE-centered physical literacy indicators on elementary school students’ objectively measured
35 MVPA.

36 Stemming from the physical literacy definitions (The Aspen Institute, 2015; Whitehead,
37 2010) and National PE Standards (Society for Health and Physical Educators, 2013), physically
38 literate individual should be able to a) be competent in motor skills, b) engage in a healthy dose
39 of PA, c) **demonstrate** health-enhancing levels of fitness, and d) to be motivated toward and
40 enjoy regular PA participation. **Although the National PE Standards highlight the balanced**

41 approach of students' meeting psychomotor, cognitive, and affective learning outcomes (Society
42 for Health and Physical Educators, 2013), from the public health perspective, achieving daily 60
43 minutes of MVPA is a worthy goal because regular MVPA has shown to have numerous benefits
44 for short- and long-term health of PE students, e.g., improved bone health, healthy body
45 composition, reduced symptoms of depression, and decreased likelihood of developing and type
46 2 diabetes mellitus (US Department of Health and Human Services, 2018). Although it is well
47 known that PA behavior is influenced by a complex interaction of demographic, (e.g., gender
48 [boys more active] and age [-]); anthropometric (body mass index [BMI; -]); socio-psychological
49 (e.g., intrinsic motivation/competence/self-efficacy [+]); and behavioral (e.g., previous PA [+])
50 determinants (Sallis, Prochaska, & Taylor, 2000; Seabra et al., 2013), only some of these
51 determinants can be intervened in school PE. Thus, to examine the contribution of PE-centered
52 physical literacy on MVPA (see Table 1 for operationalized definitions and Figure 1 for
53 conceptual framework), the determinants of motor competence, MVPA in PE, health-related
54 fitness, and PE motivation and enjoyment were selected based on the previous research evidence
55 that has shown the variables to be directly linked to MVPA (Barnett, van Beurden, Morgan,
56 Brooks, & Beard, 2009; Bassett et al., 2013; Chen, Hammond-Bennett, Hypnar, & Mason, 2018;
57 Dishman, Saunders, Felton, Ward, & Pate, 2005; Owen, Astell-Burt, & Lonsdale, 2013).

58 To date, research has demonstrated that motor competence (sometimes used terms
59 include e.g. motor coordination, fundamental movement skills, or motor skill proficiency) is
60 related to PA engagement from childhood to adolescence and from adolescence to young
61 adulthood (Barnett et al., 2009; Jaakkola et al., 2016). It has shown that children with proficient
62 motor competence (i.e., object control skills) have a 20% higher probability of to engage in
63 vigorous intensity PA in adolescence compared to the children with a lack of appropriate object

64 control skills. Additionally, it has been found that that childhood object control skills accounted
65 for 3.6% of participation in MVPA, and 18.2% of participation in organized PA in adolescence
66 (Barnett et al., 2009). In addition, a longer-term relationship between boys' motor competence
67 and PA has established, research showing that PA and motor competence in early adolescence
68 explains 29% of total PA in late adolescence (Jaakkola & Washington, 2013).

69 Student participation in-class PA participation is one of the key objectives of PE, and it is
70 an important PE outcome contributing to healthy daily levels of PA (Bassett et al., 2013; US
71 Department of Health and Human Services, 2018). Specifically, research has shown that
72 students who participate in daily PE are more likely to achieve recommended 60 minutes of daily
73 MVPA (US Department of Health and Human Services, 2018). When examining the school time
74 MVPA, mandatory PE has been found to be one of the most effective means to increase total
75 daily MVPA (Bassett et al., 2013). The comprehensive large-scale study by Bassett et al. (2013)
76 has shown that daily mandatory PE will contribute 23 minutes toward elementary school
77 students total MVPA and additional six minutes will be gained if the schools use standardized
78 PE curriculum compared to traditional PE.

79 Health-related physical fitness and regular PA are reciprocally associated and enhance
80 one another (Stodden et al., 2008). Previous research has shown that health-related fitness
81 components can explain 10% to 13% of total PA among children (Chen et al., 2018), with
82 cardiovascular endurance being strongest predictor, followed by upper body strength and
83 endurance (Chen et al., 2018). It has been shown that cardiovascular fitness in late adolescence
84 has a long-term predictive strength predicting 31% and 24% of PA in men and women,
85 respectively (Glenmark, Hedberg, & Jansson, 1994). On the other hand, research has shown

86 muscular strength and endurance and flexibility to have more positive effect on skeletal health
87 compared to cardiovascular endurance (Blair, Cheng, & Holder, 2001).

88 A plethora of studies has shown PE motivation and enjoyment to be determinants of PA.
89 This study operationalized motivation using self-determination theory (Deci & Ryan, 1985), and
90 the operationalization of the motivation concept is presented in Table 1. Research has shown
91 adaptive motivation (i.e., intrinsic motivation and the most intrinsic forms of extrinsic
92 regulation) in PE to be a predictor of school students' total MVPA, with the predictive strength
93 of adaptive motivation in PE on total MVPA ranging from 8% to 12% (Owen et al., 2013; Yli-
94 Piipari, 2011). In addition, adaptive motivation has shown positively associate with PA intensity
95 in PE (Owen et al., 2013), decisions to enroll in PE as an optional subject (Ntoumanis, 2005),
96 and PA during leisure-time (Chatzisarantis & Hagger, 2009). PE enjoyment, on the other hand,
97 has shown to be positive predictor of total MVPA (Dishman et al., 2005) and leisure-time
98 MVPA (Dishman et al., 2005; Sallis et al., 2000) in adolescence. The predictive strength of PE
99 enjoyment on in-class MVPA has found to be moderate 31% (Gao, 2008), whereas predictive
100 power on total MVPA has found to be weak (Dishman et al., 2005).

101 Several variables (e.g., BMI, gender, accelerometer wear time, and classroom
102 membership) have shown to moderate MVPA (Deng & Fredriksen, 2018). The relationship
103 between BMI and total MVPA is reciprocal, BMI affecting the engagement in PA and vice versa
104 (Deng & Fredriksen, 2018). It has been shown that students with higher BMI accumulate less
105 MVPA during PE lesson (Gao, Oh, & Sheng, 2011). In addition, it has been shown that
106 overweight school students are less likely to enroll in PE when offered a selective course
107 (Ntoumanis, 2005). In addition, PA research has shown that accelerometer wear time may be one
108 factor that confounds accelerometer based studies (Choi, Liu, Matthews, & Buchowski, 2011).

109 Research has shown that physically inactive study participants are less interested to use wearable
110 PA tracking devices, which can impact the wear-compliance (Alley et al., 2016). Finally, it is
111 well regarded phenomenon that school-based studies are sensitive to the biases that are due
112 hierarchical dependence of the data. In other words, students are members of their schools and
113 classrooms, and that may affect their PA during and after school day (Raudenbush & Bryk,
114 1986). Although this data dependence has been found to be relatively small in Finnish PE
115 context (Yli-Piipari, 2011), it has been recommended to be accounted in the school-based studies
116 (Raudenbush & Bryk, 1986).

117 Despite the previous studies that have shown that children's total PA activity is impacted
118 **by numerous variables**, there is a need to increase common knowledge base of the potential
119 effect of physical literacy components on total MVPA in childhood (Corbin, 2016). In this study,
120 the physical literacy indicators of motor competence, MVPA in PE, health-related fitness, and
121 PE motivation and enjoyment were selected, because these indicators have shown to be impacted
122 by quality school PE instruction (Bassett et al., 2013; Gao, 2008; Jaakkola et al., 2016; Owen et
123 a., 2013; Society for Health and Physical Educators, 2013). Therefore, the purpose of this study
124 was to examine the predictive strength of these selected physical literacy indicators on
125 elementary school students' objectively measured MVPA. It was hypothesized that after
126 controlling gender, age, accelerometer wear time, and the nested structure of the data, MVPA in
127 PE, adaptive motivation, and enjoyment, will have a weak-to-modest predictive strength on total
128 MVPA. In addition, it was hypothesized that motor competence and health-related fitness
129 components will be **predictors of total MVPA, and this effect will be moderate in size.**

130

131

Method

132 **Study Design and Participants**

133 This study was a cross-sectional study with the data collected during one collection point
134 in between late August to early October in 2017 in 35 schools across Finland. The sample is
135 nationally representative in terms of geographical representation, a number of schools, and a
136 number of students. A sample of 450 5th grade children ranging from 10 to 12 years of age ($M =$
137 11.26[.32]; $n_{females} = 194$; $n_{males} = 256$) participated in the study. Participant assents, parental
138 consents, and university's institutional review board, i.e. ethical committee acceptance were
139 collected prior to the study.

140 In Finland, 5th grade students have 90 minutes of weekly mandatory PE, normally offered
141 in two 45 minutes classes. The mission, objectives, and content of Finland's PE are similar to the
142 US, with the exception that - oftentimes - in Finland 5th grade PE is taught by a classroom
143 teacher, whereas in the US, PE is taught by a trained PE specialist.

144 **Procedures**

145 Cross-sectional data were collected in three meetings, each conducted within three days.
146 First, motor competence and physical fitness data were collected in school gym during PE
147 classes. Second, data on students' PE motivation and enjoyment were gathered in a school
148 classroom setting. After collecting the questionnaires, accelerometers were provided to students.
149 A letter explaining the appropriate use of accelerometers, devices were given to the participants
150 and their parents. Additionally, teachers were informed to check every morning that the students
151 wore accelerometers as planned. Finally, weight and height of each participant were measured in
152 a quiet and private dressing room by researchers (trained graduate students under the supervision
153 of the professor leading the study).

154 **Measurements**

155 **Criterion Variable. Total MVPA.** MVPA was measured by Actigraph WGT3X+
156 accelerometers. The participants wore an accelerometer on their right hip during waking hours
157 for seven consecutive days excluding the time when engaged in aquatic activities. A raw
158 acceleration frequency of 30Hz was used, and data were converted into 15s epoch counts. A
159 customized Visual Basic Macro for Microsoft Excel software was used for data reduction. A
160 valid day of PA monitoring included the measured values ≥ 500 min/day for at least two
161 weekdays and one weekend day. Values over 20,000 counts per minute (cpm) were ruled out as
162 spurious accelerations (Heil, Brage, & Rothney, 2012). Evenson cut-points were used to
163 calculate MVPA (≥ 2296 cpm) (Evenson, Catellier, Gill, Ondrak, & McMurray, 2008).

164 **Predictor Variables. Motor competence.** Motor competence measures included the
165 following tests: throwing-and-catching combination (Jaakkola, et al., in press), two-leg jump,
166 balance beam (Iivonen, Sääkslahti, & Laukkanen, 2015), and five-jump (Nupponen, Soini, &
167 Telama, 1999) tests.

168 *Throwing-catching combination test.* This test measured fundamental motor skills of
169 throwing and catching. In the test, a participant had 20 attempts to throw a tennis ball to a 1.5m x
170 1.5m sized target area (90cm above the floor) and catch the ball after one bounce. Throwing
171 distances for the girls and the boys were seven and eight meters, respectively. The final score of
172 the test is the number of correctly performed throwing-catching combinations. The throwing-
173 catching combination -test is widely used instrument in Finnish PE studies (e.g. Jaakkola et al.,
174 submitted), and the test has shown acceptable reliability and validity in children (Jaakkola,
175 Sääkslahti, Liukkonen, & Iivonen, 2012).

176 *Two-leg jump test.* The two-leg jump test measured participants' agility and dynamic
177 balance. In the test, participants jumped feet in a parallel position from side to side over a small

178 wooden beam ($60 \times 4 \times 2$ cm) as many times as possible during a 15s. The test was conducted
179 twice, and the final score was the sum of two attempts. With acceptable reliability and validity in
180 this age group, the two-leg jump test is widely used instrument in studies related to children's
181 motor coordination (Jaakkola et al., 2012; Iivonen, Sääkslahti, & Laukkanen, 2015).

182 *Balance beam test.* The balance beam test was used to measure participants' dynamic
183 balance. In the test, a participant was asked to walk backwards on three meter long balance
184 beams of decreasing width (6, 4.5, and 3 cm). After one practice walk, a participant was asked to
185 walk backward each beam three times. Every step a participant was able to perform on the beam
186 were counted. The maximum amount of steps on each walk was eight. The final score was the
187 sum of steps a participant was able to perform in nine attempts (maximum score $9 \times 8 = 72$). The
188 balance beam test has shown to be a reliable and valid test for children (Iivonen, Sääkslahti, &
189 Laukkanen, 2015; Jaakkola et al., 2012).

190 *Five-Jump Test.* The five-jump test was used to measured participants' lower limb
191 explosive power. In the test a participant jumps five times beginning and finishing feet in a
192 parallel position. The score of the test is the length (cm) of five jumps from the starting line to
193 the landing spot. A five-jump test has widely been used in Finnish PE studies and its reliability
194 and validity has reported to be acceptable in school-aged children (Jaakkola et al., 2012, in
195 press).

196 *Health-related physical fitness.* Health-related physical fitness was measured by the 20
197 meter Progressive Aerobic Cardiovascular Endurance Run (PACER) (Plowman & Meredith,
198 2013), push-up test and sit-up tests procedures identical with the tests of the FitnessGram
199 (Plowman & Meredith, 2013).

200 *PACER*. The PACER was used to measure participants' cardiorespiratory endurance.
201 Adhering to the cadence with an increasing pace, participant's goal was to run as many 20m laps
202 as possible. The PACER test has shown to be reliable and valid test to measure cardiovascular
203 endurance in different cultures (Olds, Tomkinson, Léger, & Cazorla, 2006).

204 *Push-up test*. The test was used to measure participants' upper body muscular endurance
205 and strength. The boys and the girls conducted different versions of the test, in which boys did
206 the regular push-ups and girls modified push-ups (knees on the floor) with cadence. Participants
207 started push-up with elbows in 90-degree angle. The final score of the push-up test is the number
208 of correctly completed push-ups (max. 60 repetitions). The push-up tests have been found to be
209 valid measures to measures upper body muscular endurance and strength (Jaakkola et al., 2012).

210 *Abdominal muscles endurance test*. The abdominal test was used to measure participants'
211 abdominal muscles muscular endurance and strength. In a starting position, participants laid on
212 their backs with knees bent at 120 degrees, both feet are on floor, and arms are straight and
213 parallel to the trunk. Measuring tape is situated under participant's legs so that their fingertips are
214 just resting on the nearest edge of tape. In the test a participant is curling up so that their fingers
215 slide across the measuring tape until fingertips reach the other side of tape. The final score is the
216 number of correctly completed curl-ups reached before participant is unable to keep on pace are
217 counted. The rhythm for the performance was coming from the cadence. This abdominal test has
218 found to be reliable and valid test for abdominal strength and endurance (Jaakkola et al., 2012).

219 *PA in PE*. MVPA in PE was measured using accelerometers following the guidelines
220 above. Data were recorded using the actual time spent in PE.

221 *PE motivation*. PE motivation was measured using the Finnish version of the Revised
222 Perceived Locus of Causality Scale (PLOC-R; Vlachopoulos, Katartzi, Kontou & Goudas,

2011). The PLOC-R includes the item stem: “I take part in PE...”, and comprises 19 items which analyze intrinsic motivation (4 items; e.g., “Because I enjoy learning new skills”), identified regulation (4 items; e.g., “Because it is important to me to improve in the drills we do in PE”), introjected regulation (4 items; e.g., “Because it would bother me if I didn’t”), external regulation (3 items; e.g., “So that the teacher won’t yell at me”), and amotivation (4 items; e.g., “But I really feel I’m wasting my time in PE”). All items are rated on a 5-point Likert scale ranging from 1 = strongly disagree to 5 = strongly agree. Internal consistency values for this scale were acceptable .78 (intrinsic motivation), .82 (identified regulation), .76 (introjected regulation), .74 (extrinsic regulation) and .89 (amotivation). **The scale has been shown to reliable and valid test to measure PE motivation (Vlachopoulos et al., 2011).**

Enjoyment in PE. Enjoyment in PE was measured by the Finnish version of the Enjoyment subscale from the Sport Commitment Questionnaire -2 (SCQ; Scanlan & Simmons, 1992). The scale consists of five items (e.g., “I enjoy PE lessons”) which are rated on a 5-point Likert scale ranging from 1 = strongly disagree to 5 = strongly agree. The SCQ has the item stem of “In my PE classes...”. The Finnish version of the enjoyment scale has been found to be a valid and reliable tool when used with students during PE classes (Kalaja, Jaakkola, Liukkonen, & Watt, 2010). In this study, Cronbach analysis showed an acceptable internal consistency (Cronbach’s $\alpha = .91$).

Controlling Variables. BMI and gender. The continuous variable examined was BMI and the dichotomous variable was gender (male or female). Student height and weight were measured by the researches, and BMI was calculated by researches using a formula of the $BMI = \text{mass}/\text{height}^2$.

245 *Accelerometer wear time.* To control the accelerometer wear time in the analyses, wear
246 time was included in the analyses. Specifically, periods of 30 minutes of consecutive zero counts
247 were defined as non-wearing time.

248 *Classroom membership.* To control the potential nested structure of the data, classroom
249 membership was included in the analyses.

250 **Statistical Analyses**

251 Normality of the data (outliers, kurtosis, and skewness) and descriptive statistics
252 (aggregated mean and standard deviation [SD]) were assessed. Second, hierarchical multiple
253 regression analysis was conducted to test the predictive strength of the predictor variables (motor
254 competence, PA in PE, health-related fitness, PE motivation, and PE enjoyment) on participants'
255 total MVPA. BMI, gender, accelerometer wear time, and classroom membership were set as
256 controlling variables. Independent dimensions of health-related fitness and PE motivation were
257 included in the analyses, due to considerable differences in the predictive strength between
258 variables (Jaakkola et al., 2016). Forming a standardized composite score would potentially
259 dilute the individual effects of the predictor variables, and thus potentially mask the existing
260 relationships. IBM SPSS Statistics for Windows, Version 22 (2017 SPSS Inc.; IBM Corp.;
261 Armonk, NY) was used for the analyses.

262

263

Results

264 Descriptive statistics are presented in Table 2. A test carried out to evaluate the normality
265 of the distribution of the variables in the research variables revealed the variables to be within the
266 limits of -2 to +2 for skewness and kurtosis. The entire data included 3.9% of missing value data
267 points, as 62 students did not provide balance beam test scores and 46 students missed MVPA in

268 PE measurements. The missing completely at random test ($\chi^2 = 344.27, df = 320, p = .168$)
269 showed that data with and without missing information were similar, and therefore missing
270 values were expected to be missing completely at random.

271 Table 3 shows the main findings of the study. The explanatory power of the controlling
272 variables (BMI, gender, accelerometer wear time, and classroom membership) was not
273 statistically significant on participants' MVPA ($R^2_{adj} = .114$). However, the entire model
274 comprising of controlling and criterion variables explained almost 30% of the MVPA ($R^2_{adj} =$
275 $.298$). The results showed that cardiovascular endurance ($\beta = .42, p < .001, CI95\% [.22, .62]$)
276 and MVPA in PE ($\beta = .27, p = .004, CI95\% [.09, .44]$) were statistically significant predictors of
277 total MVPA. The findings did not show statistically significant predictive power on any of the
278 PE motivation variables, PE enjoyment, motor competence, or muscle strength and endurance
279 variables, but gender ($MVPA_{boys} > MVPA_{girls}$) and wear time (the physically active participants
280 had better compliance) had a statistically significant relationship to MVPA.

281

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Discussion

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The purpose of this study was to examine the predictive strength of selected PE-related
physical literacy factors, e.g. motor competence, MVPA in PE, health-related fitness, and PE
motivation and enjoyment on elementary school students' objectively measured MVPA. The
review of literature demonstrates that very little is known which of these PE-centered physical
literacy components are the most beneficial for total MVPA in late childhood.

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The results of this study showed that the PE-centered physical literacy model explained
almost 30% of students' total MVPA, whereas the predictive strength of PE-related physical
literacy factors was 19%. This finding indicates that the selected school PE health literacy factors

291 have a role in children's PA, but numerous other demographic, socioeconomic, socio-
292 psychological, and behavioral factors beyond PE influence school students' PA behaviors (Sallis
293 et al., 2000; Seabra et al., 2013). The findings partly supported our hypotheses showing that of
294 all selected factors, cardiovascular endurance was the strongest predictor of total MVPA. These
295 findings corroborate the previous findings (Jaakkola et al., 2016), which have showed that, in the
296 Finnish context, health-related fitness (including cardiovascular endurance, muscle strength, and
297 muscle endurance) predicted self-reported MVPA six years later. School PE has a great potential
298 to improve school students' cardiovascular endurance but, unfortunately, due to a lack of weekly
299 instructional time this potential is not usually materialized. Knowing that the students in our
300 sample had only 90 minutes of PE weekly, it is likely that cardiovascular endurance of these
301 students was mainly developed through out-of-school physical activities and sport participation.
302 Nevertheless, school PE is a very important context to teach students how to develop their
303 cardiorespiratory endurance (Committee on Physical Activity and Physical Education in the
304 School Environment, 2013).

305 Supporting our study hypotheses, another significant predictor variable was students'
306 engagement in MVPA in PE classes. This finding suggests that, even with a minimal PE
307 instruction time (in this study the instruction time was 90 minutes), PE is an important context
308 contributing to the total MVPA among elementary school students. This study corroborates the
309 findings of the previous studies showing school PE to be the most effective strategy to increase
310 school-day PA (Bassett et al., 2013). This study showed that, on average, these study participants
311 engaged in little over 20 minutes of MVPA during PE. Although contributing only one third of
312 the recommended daily 60 minutes of MVPA, this amount was enough to be a significant
313 predictor of elementary students' total MVPA profile. Altogether, these findings suggest that

314 elementary schools should provide PE more frequently to maximize students' time spent in
315 MVPA and subsequently improve their cardiovascular endurance.

316 The study showed that other **PE-centered** components of physical literacy - muscular
317 strength and endurance, motor competence, PE motivation, or PE enjoyment - did not have a
318 significant relationship with total MVPA. It is interesting that none of the motor competence
319 variables, such as throw and catching skill, agility, balance, or lower limb power, were related to
320 total MVPA in our sample of upper elementary school students. This finding contradicts **with our**
321 **hypothesis and** the studies that have shown children with proficient motor competence have a
322 greater likelihood to engage in PA (Barnett et al., 2009; Jaakkola et al., 2016). Specifically, it
323 has been shown previously that childhood object control skills account for 3.6% of participation
324 in MVPA and 18.2% of participation in organized PA in adolescence (Barnett et al., 2009).
325 Similarly, these findings do not support the theorization of Stodden (2008), which have argued
326 that both cardiovascular endurance and motor competence are determinants of PA. However, the
327 non-significant relationship between **abdomen / muscle strength endurance and MVPA** was not
328 unexpected, because of all health-related fitness components, cardiovascular endurance has
329 shown to have the strongest relationship with total MVPA (Blair, Cheng, & Holder, 2001; Chen
330 et al., 2018). In addition, previous research has shown that muscle strength and endurance have a
331 stronger relationship with skeletal health (Blair, Cheng, & Holder, 2001).

332 It was also unexpected that motivation and enjoyment in PE did not associate with total
333 MVPA engagement. Although the **cross-sectional** relationship between PE motivation and
334 enjoyment and total MVPA have been often established, the longitudinal relationship between
335 these constructs has been moderate at best (Yli-Piipari et al., 2011). **In addition, numerous**
336 **barriers, e.g. time constraints, longer school days, more homework, have shown to diminish the**

337 predictive effect of PE motivation on PA behavior (Yli-Piipari et al., 2018). Relying on the
338 previous studies in self-determination and enjoyment in PE, we do, however, argue that school
339 PE has an important role in increasing self-determined motivation and enjoyment toward PA
340 (e.g., Chatzisarantis & Hagger, 2009). Although the children of this study enjoyed and were
341 highly motivated toward PE, this did not relate to total MVPA. Sometimes, young children has
342 limited possibilities to participate in physically active play after school hours, despite their
343 motivation to be physically active. Research has shown that, over time, children's PA behavior
344 has transferred from free physically active outside play to parent-assisted and -supported sports
345 (Tremblay et al., 2016). These positive socio-cognitive and affective experiences, however, are
346 important when children and adolescents are old enough to make their own decisions whether
347 they are physically active or not (Hagger et al., 2016).

348 This study has several strengths. First, this study aimed to shed a light on school PE-
349 based physical literacy factors that are important contributors in total MVPA. Second, this study
350 used accelerometers to track participants' PA across a large sample size. However, this study
351 also had some limitations. Firstly, a cross-sectional design does not allow us to draw conclusions
352 on the cause and effect between independent and criterion variables. Secondly, this study utilized
353 only product-oriented (i.e., focusing on the end result) instead of process-oriented (i.e., focusing
354 on the factors other than end result, such as technique) measures to analyze students' motor
355 competence. It may be that measuring the technique of e.g. throwing/catching (process-oriented
356 measure) rather than number of catches (product-oriented) may be more sensitive measure to
357 collect data on 11-year-old students' motor competence (Donnelly, Mueller, & Gallahue, 2017).

358 **Conclusions and Practical Implications**

359 It can be concluded that of all variables included in the study, cardiovascular endurance
360 and MVPA during scheduled PE classes were the most important PE-related physical literacy
361 factors contributing to a healthy levels of MVPA in childhood. These findings advance the
362 previous work of Whitehead (2010) which has recognized the importance numerous physical
363 literacy factors. This study has practical implications to PE practitioners and researchers alike.
364 Although school PE has multiple objectives, PE teachers should include cardiovascular
365 improving exercises in the curriculum to positively impact students' total PA. Future studies
366 should investigate the association of broad range of physical literacy variables and PA
367 engagement in longitudinal design across the samples of school students of different ages.

368

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