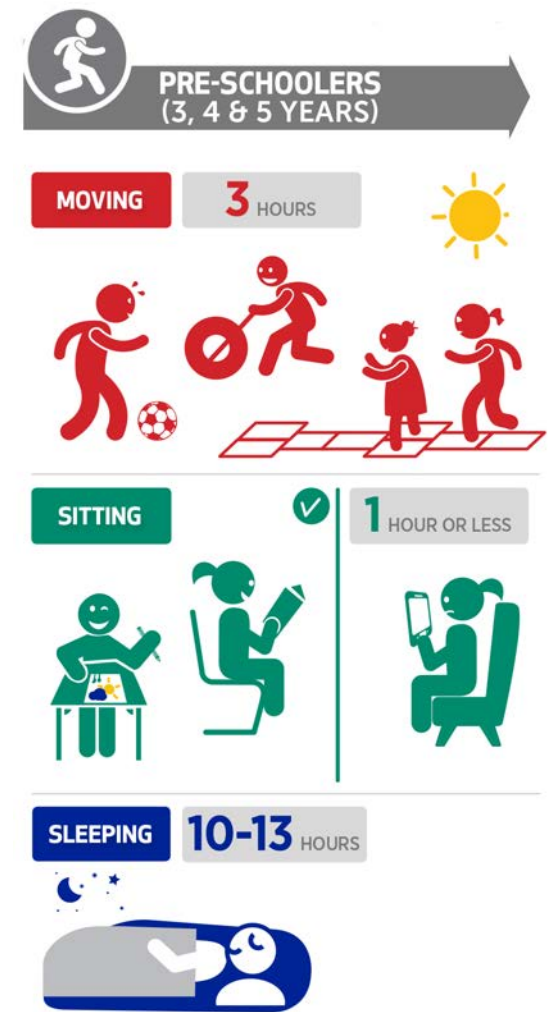
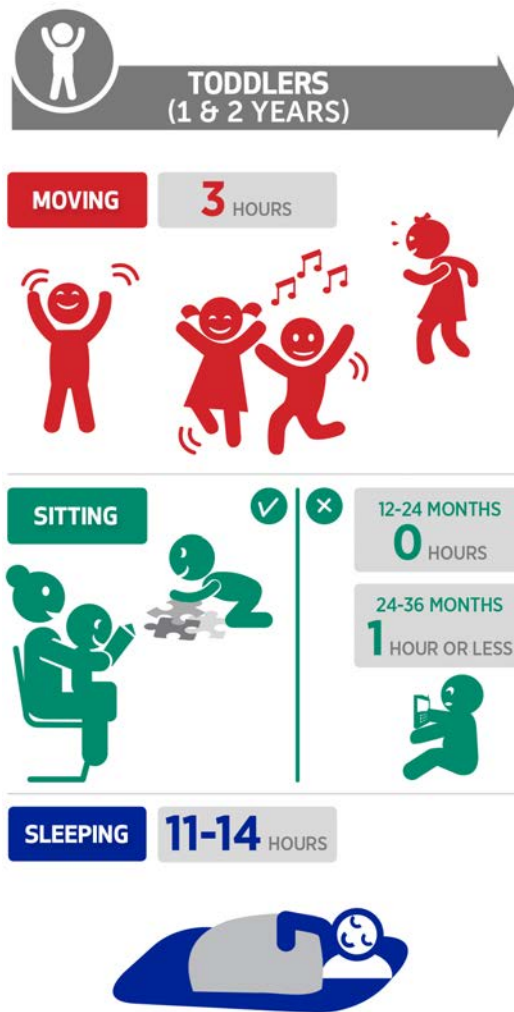
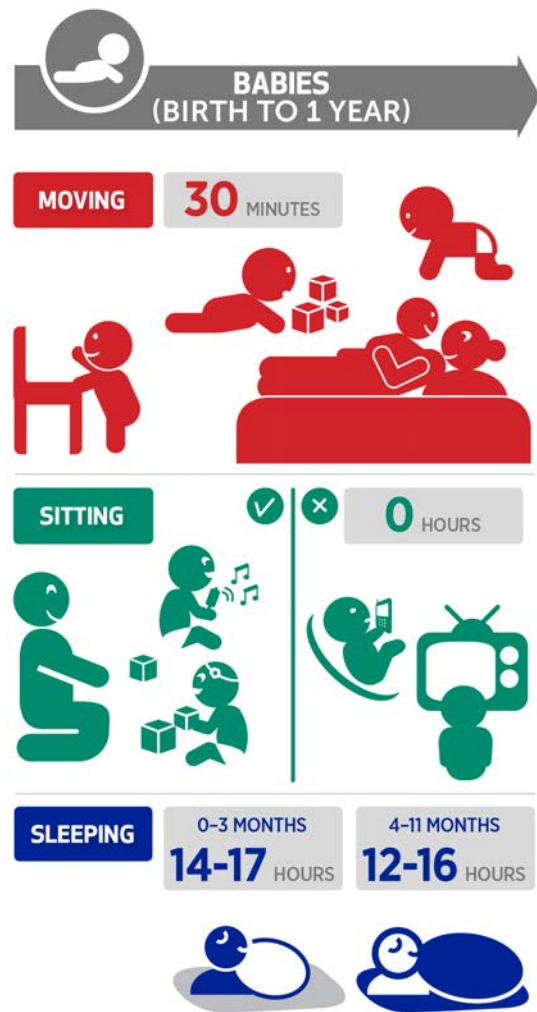


Movement behaviours and parenting in the first two years of life

Dr Alessandra Prioireschi



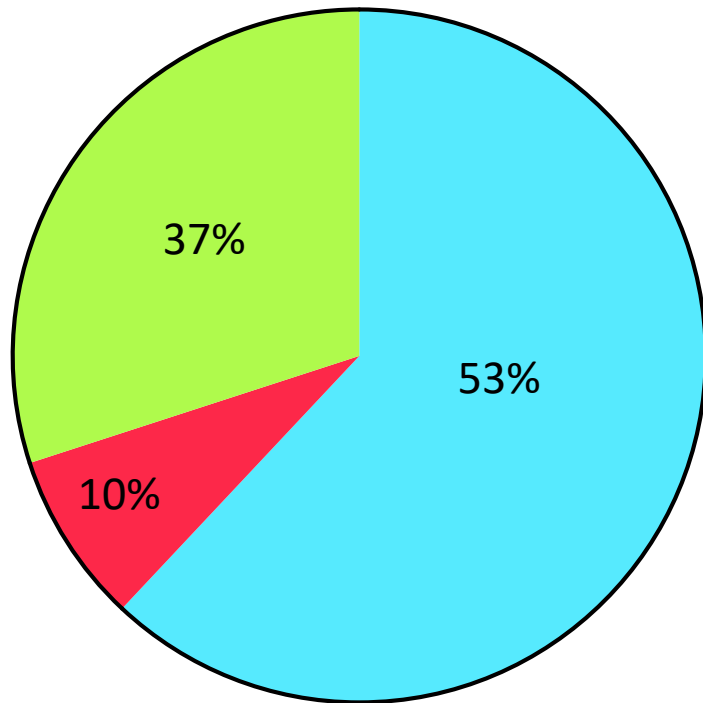
Movement behaviours



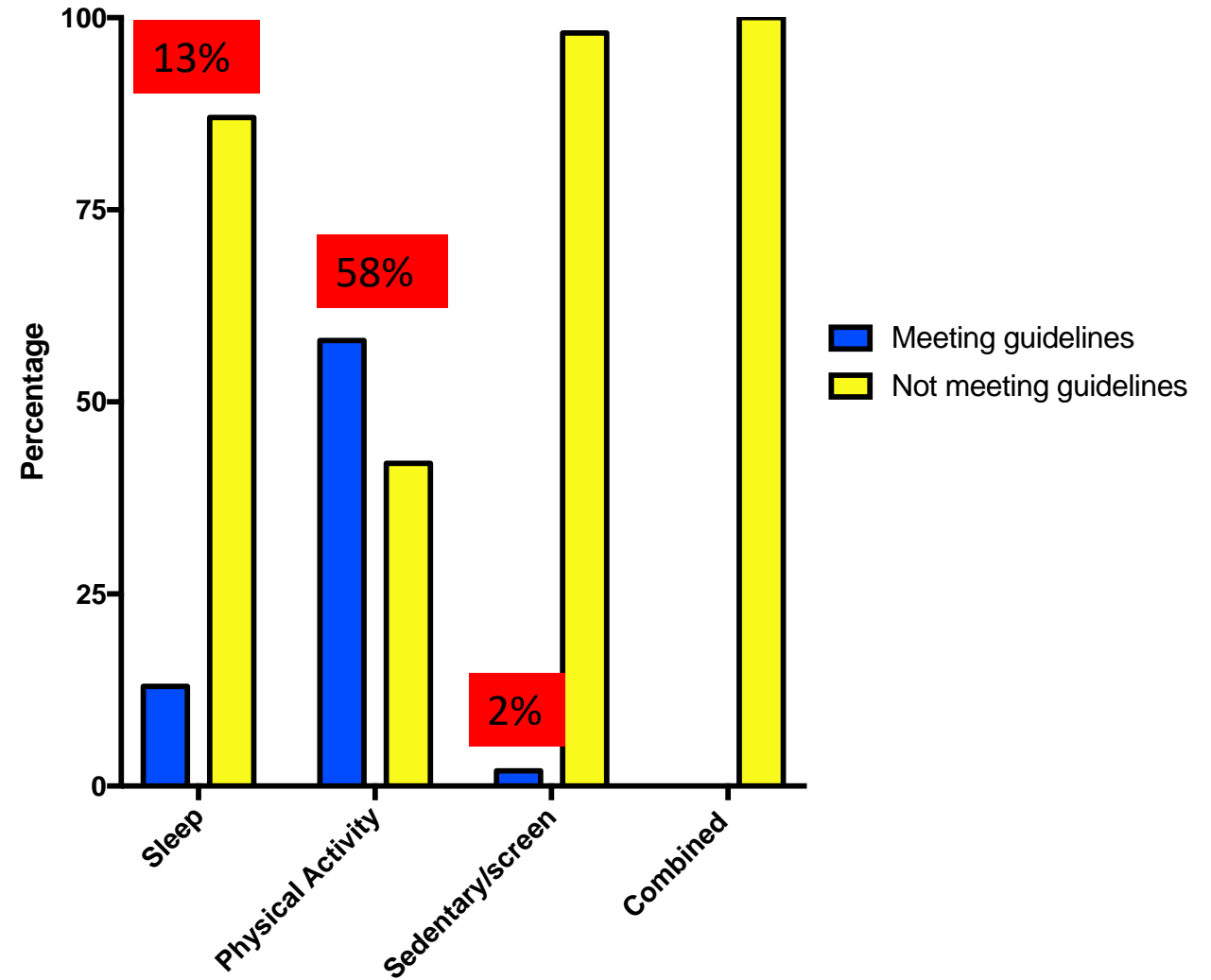
South African movement guidelines for the early years

Percentage of infants meeting guidelines (0-2years)

Maternal Reported Data



One guideline
Two guidelines
Zero guidelines



Compliance with guidelines

Physical Activity

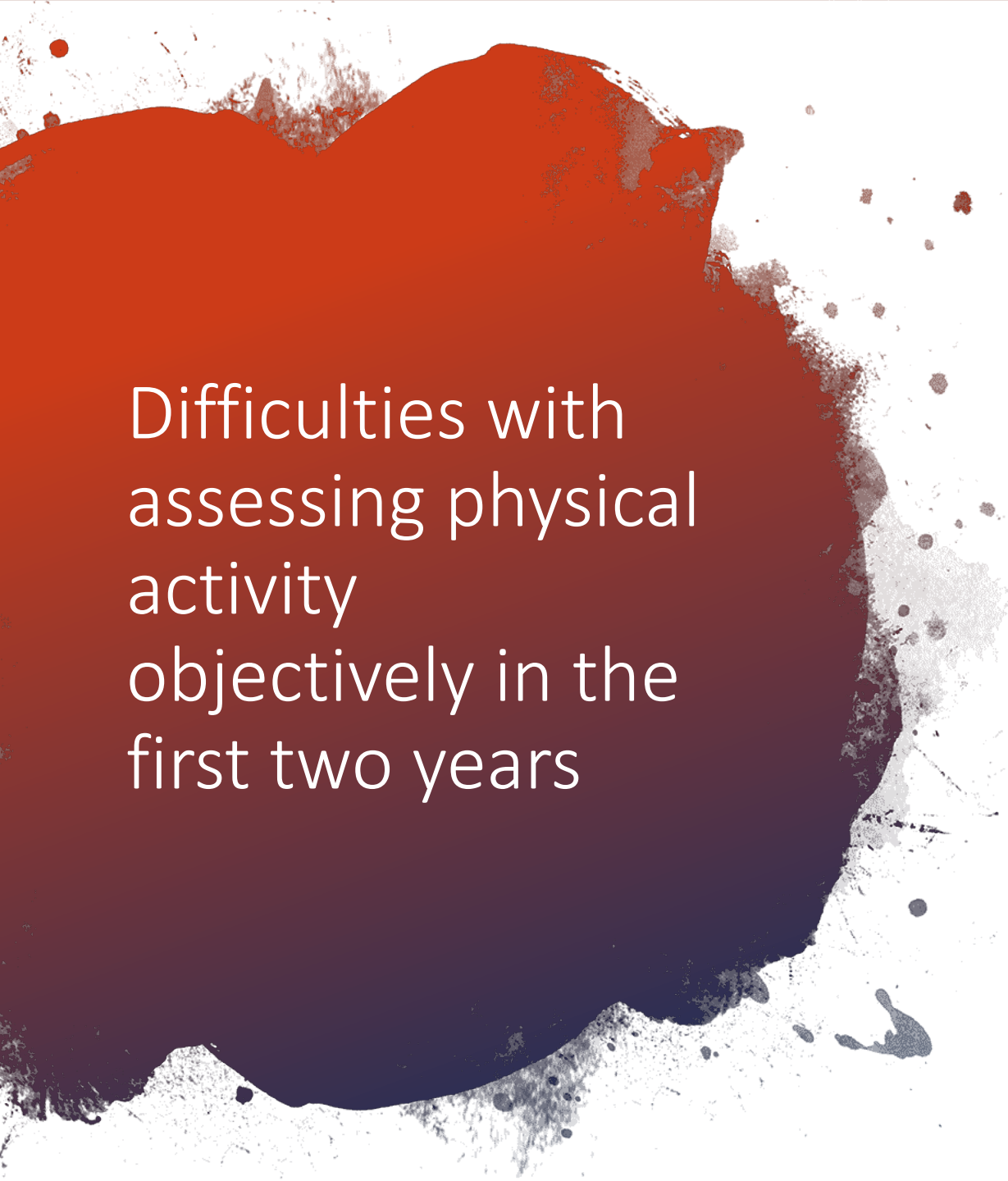
- Meeting PA guideline was associated with higher subcutaneous adipose fat, but not with higher BMI.
- Males met more guidelines than females, and were more likely to meet the physical activity guideline
- Infant tummy time ranged from 2-30 min/day (mean of 15 min/day)
- Toddler active time ranged from 120-240 min/day (mean of 151 min/day)

Sedentary and Screen time

- Only 2% met the sedentary time guideline, and this was largely driven by screen time.
- Time restrained ranged from 58-210 min/day (mean of 110 min/day)
- Screen time ranged from 10-60 min/day (mean of 30 min/day)

Sleep

- Meeting the sleep guideline was associated with higher subcutaneous adipose fat, but not with higher BMI.
- Sleep time was on average 10.21hours/night



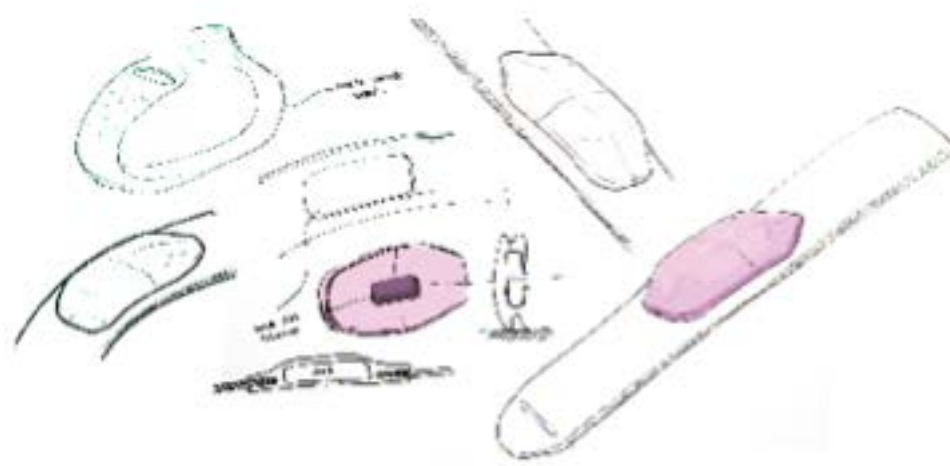
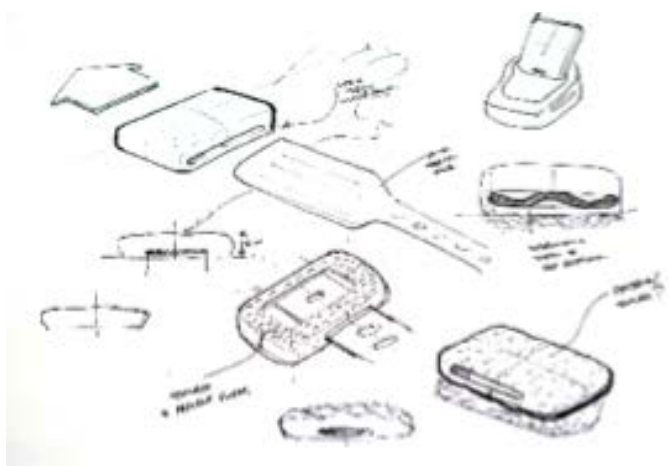
Difficulties with
assessing physical
activity
objectively in the
first two years

- Sporadic activities
- Regular naps
- Developmental stages
- Subjective measures may miss this
- Accelerometer placement and wear time need to be relevant
- Cut points vary
- Caregiver influences on data (up to 55% observed)
- Feasibility of devices



Aims

- To design a reusable wrist-worn band for the Axivity AX3 device (logging accelerometer) that was suitable for continuous wear by infant/toddlers aged 3-24 months
- To test the feasibility and acceptability of this device in a Soweto population



Horizontal position of AX3 on 18mth old



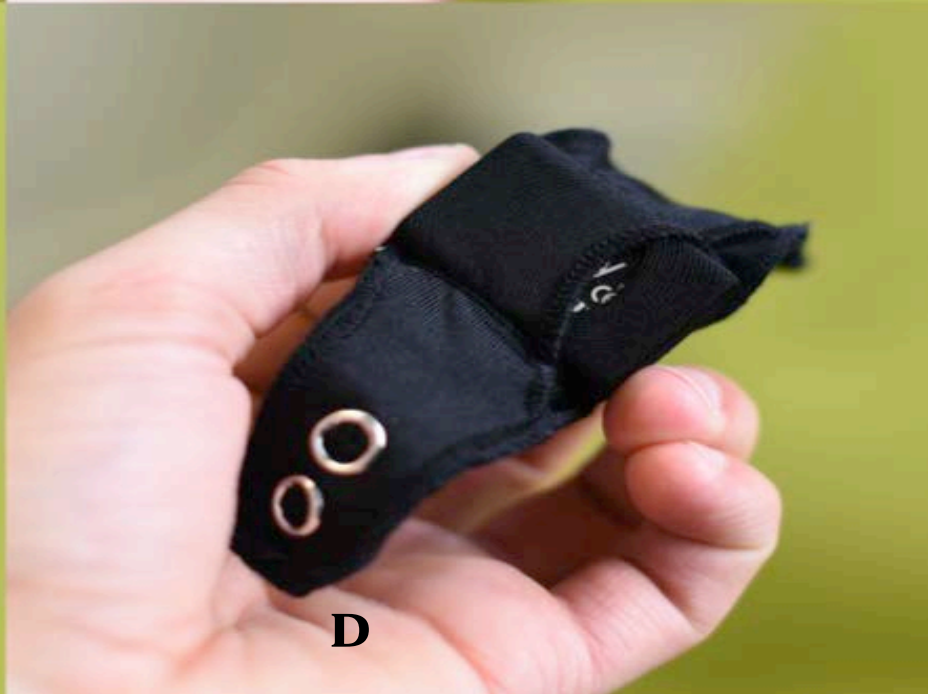
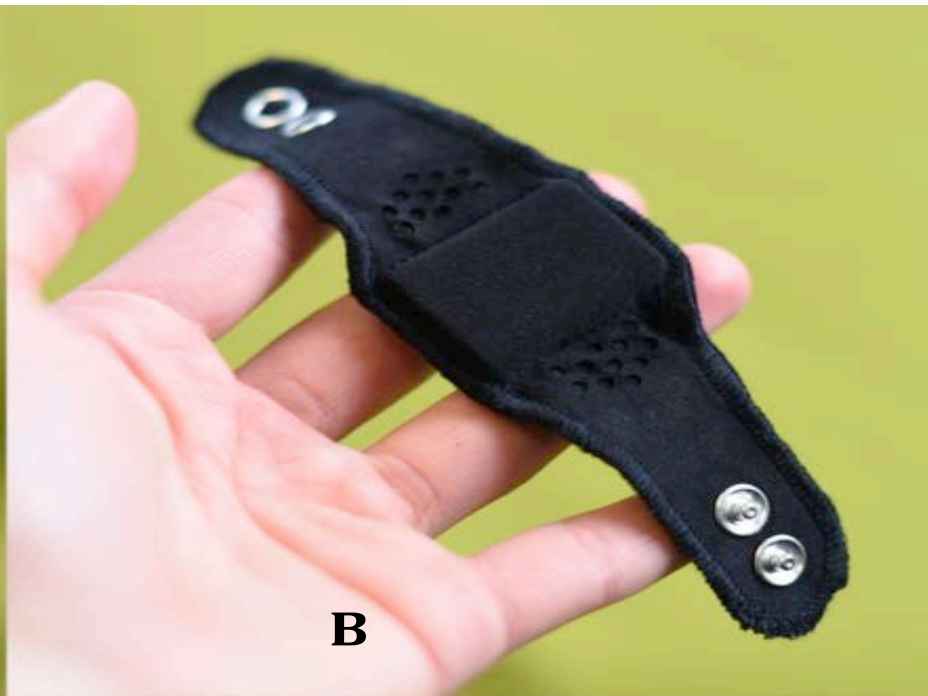
Vertical position of AX3 on 18mth old



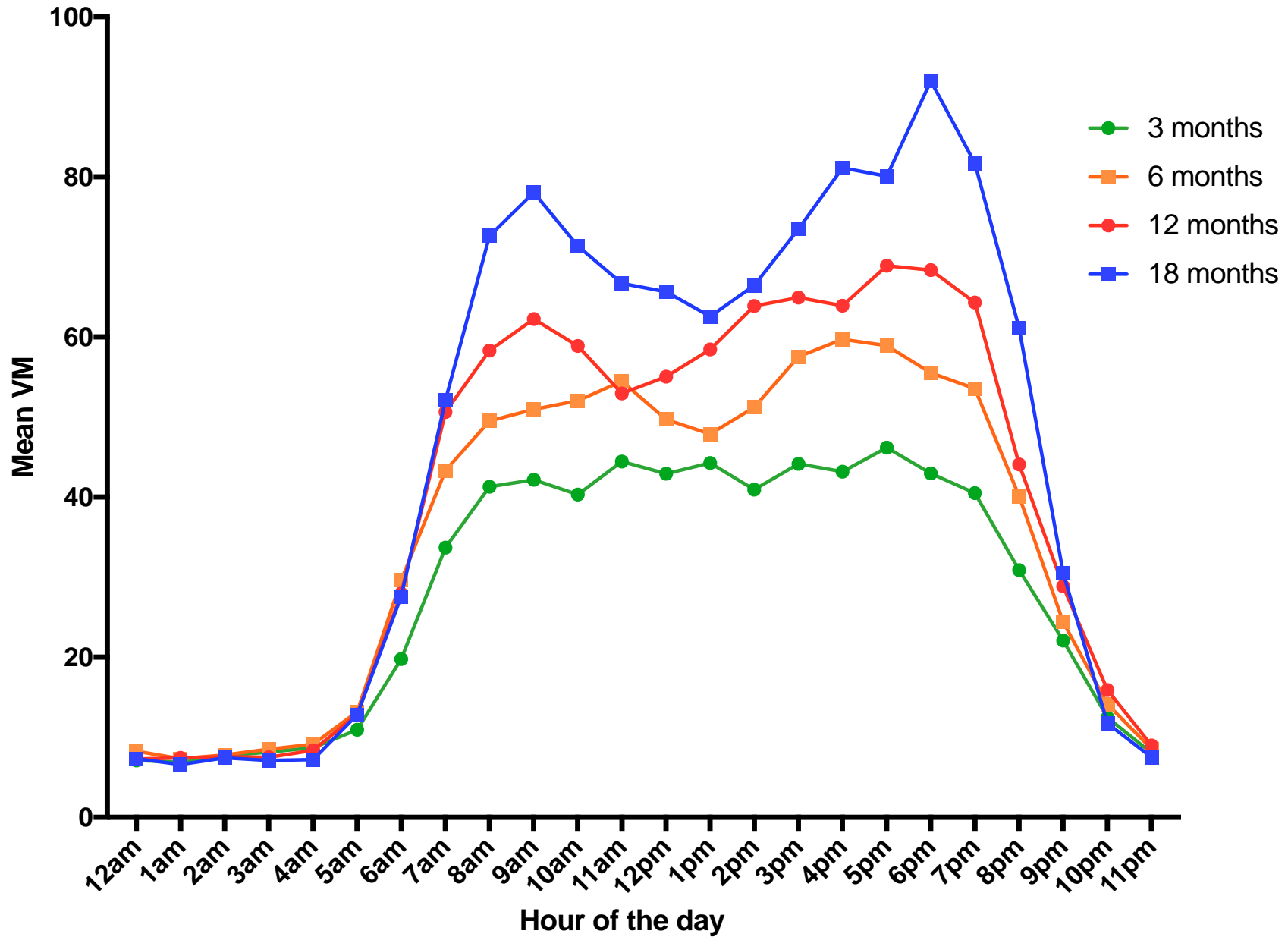


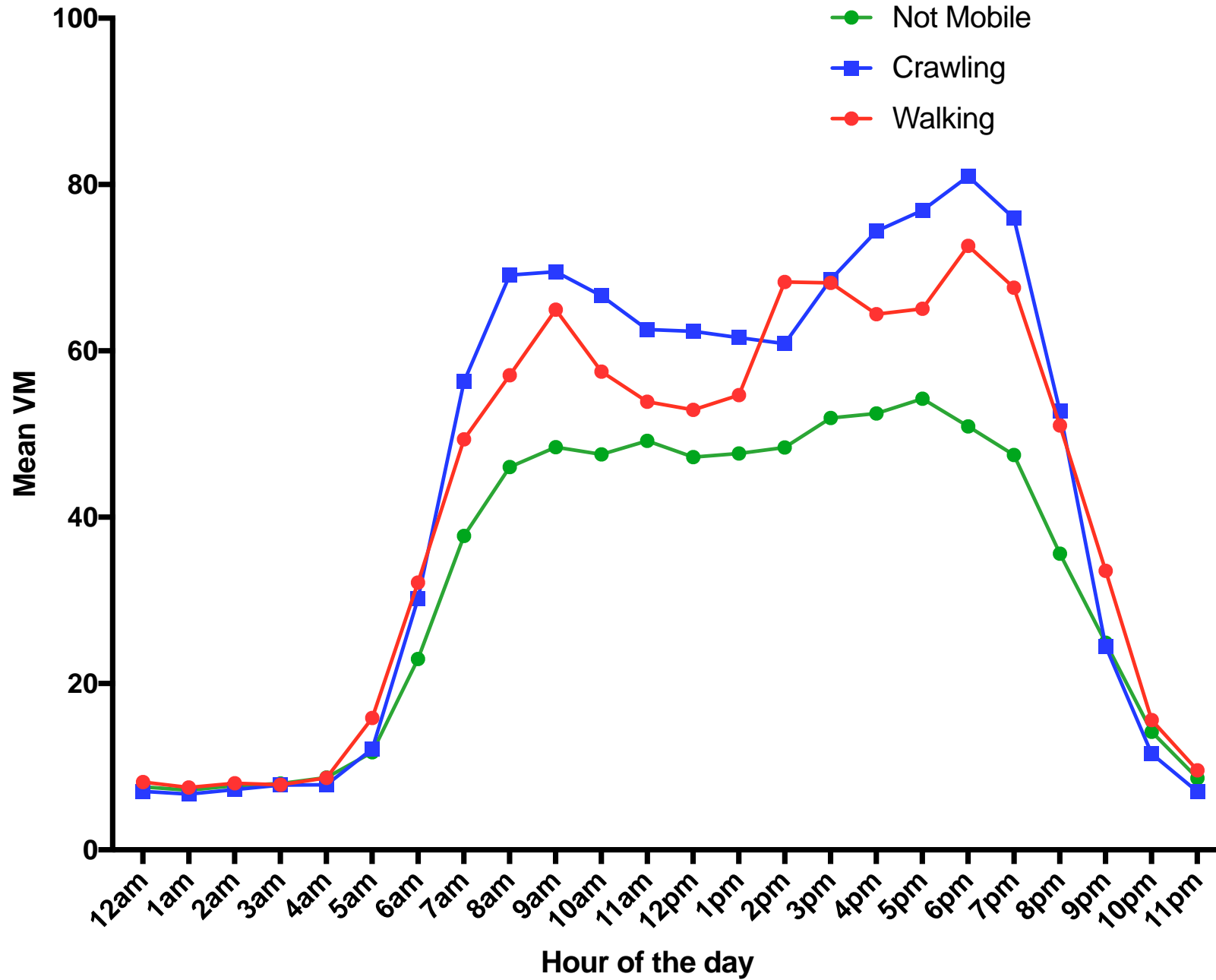
Piloting and final design

- Piloting on prototype designs in Cambridge, UK (n=3) and Soweto, South Africa (n=6):
 - Security of the bands (parents commented on a range of press stud configuration for fixing bands)
 - Inflexibility of a cotton material used in early designs.
- The final designs (full material and component specifications and design patterns) are published under Creative Commons 3.0 BY Attribution licence (see: <https://github.com/digitalinteraction/openmovement/wiki>).

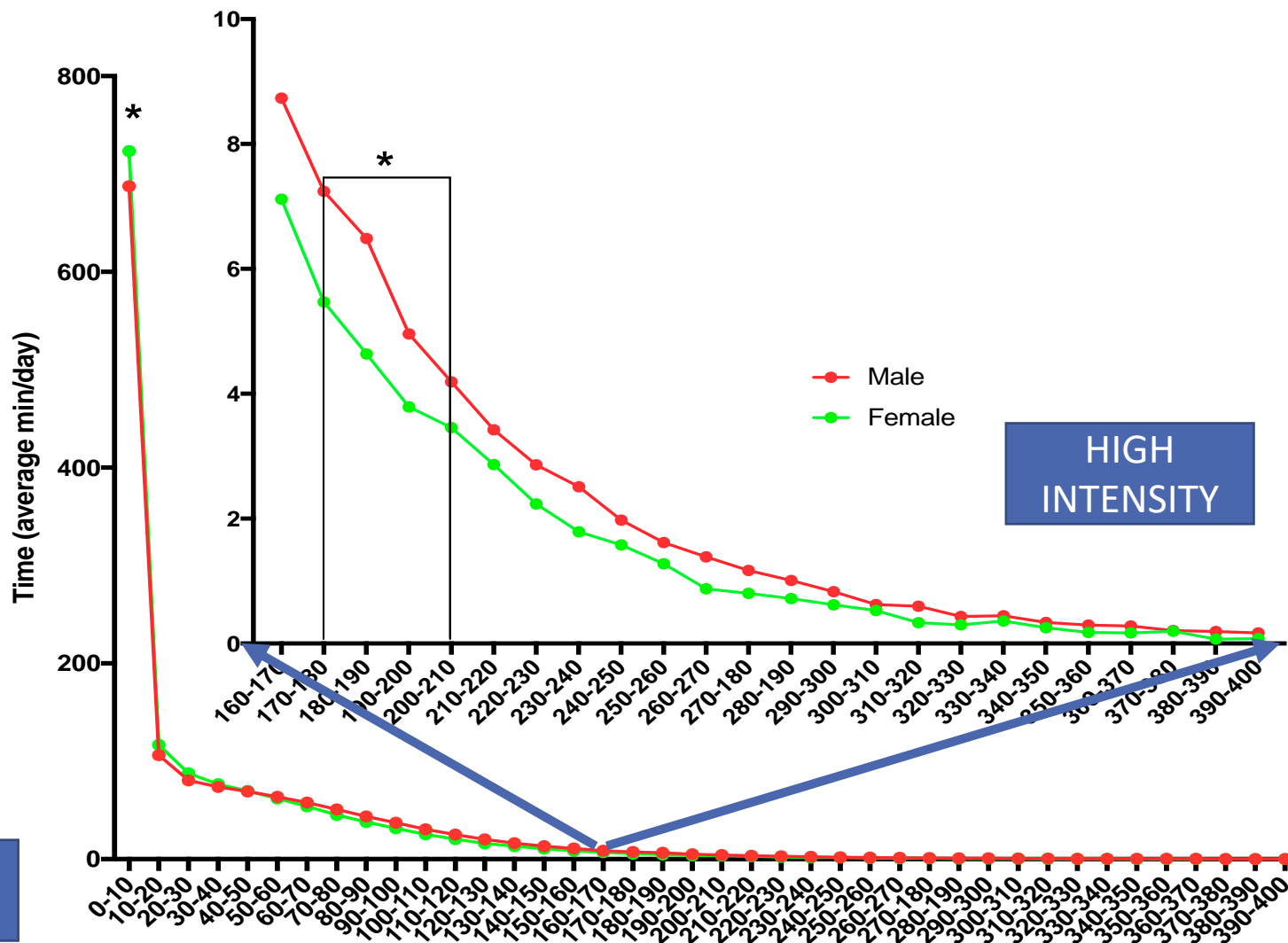




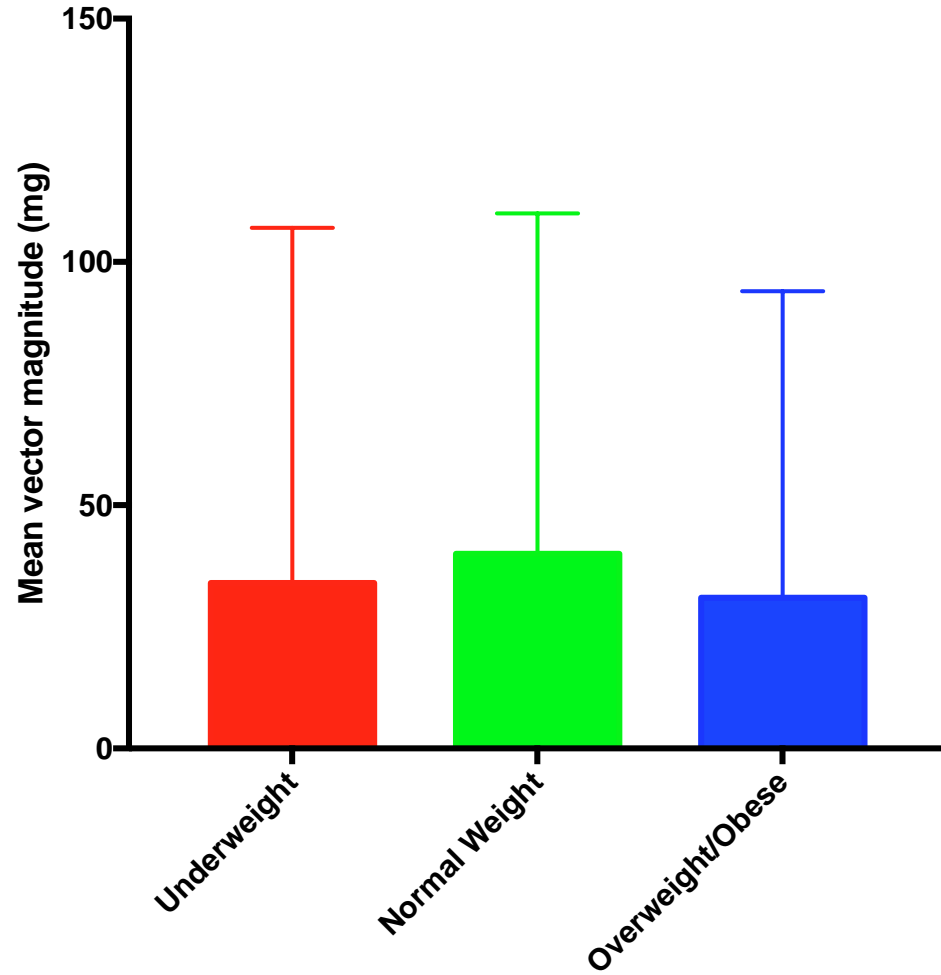




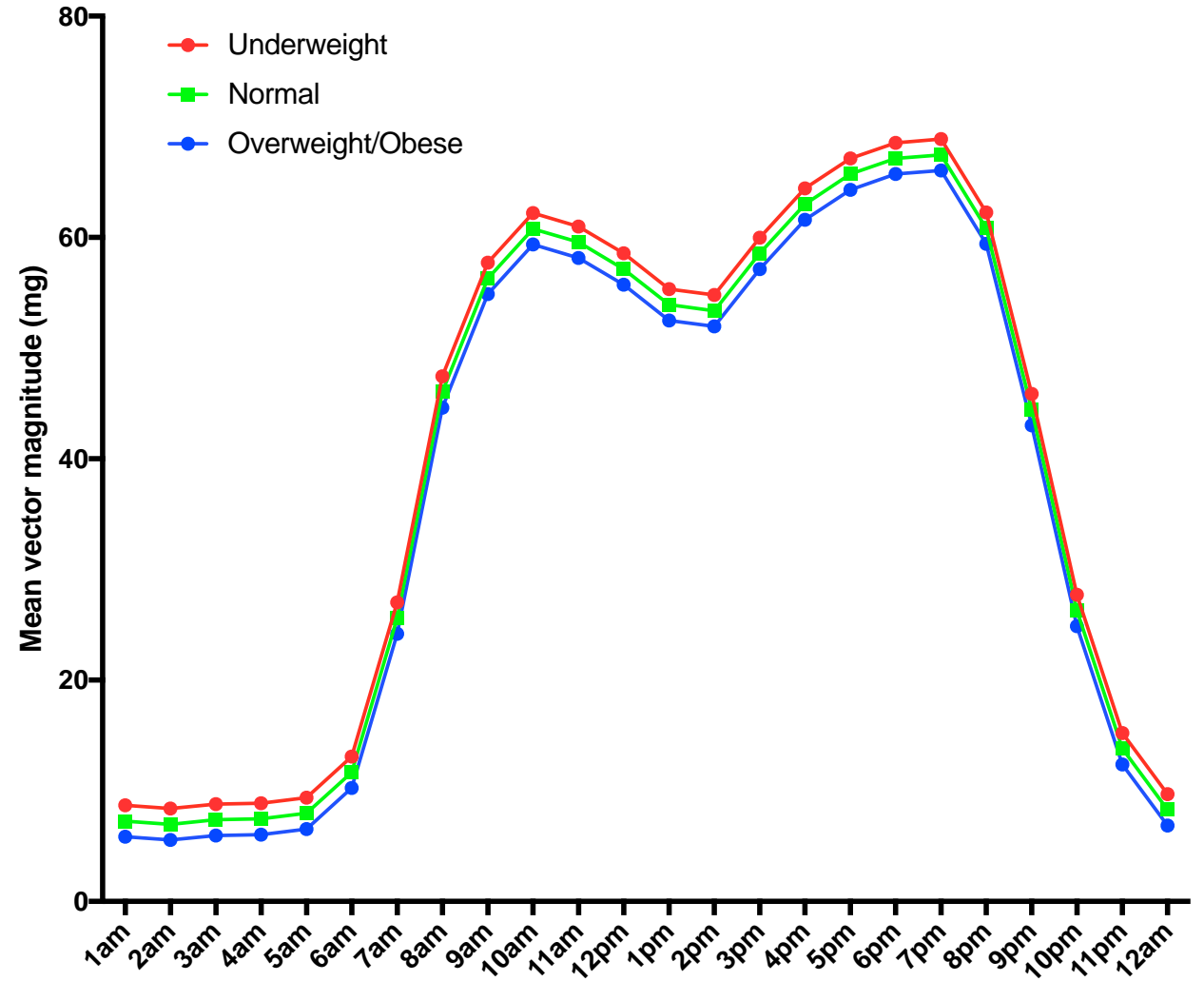
LOW INTENSITY



HIGH INTENSITY



ANOVA $p < 0.01$



$\beta = -1.42$, $p = 0.57$

Caregiver-Infant interactions

Movement in the first two years of life is likely dependent on opportunities provided by caregivers

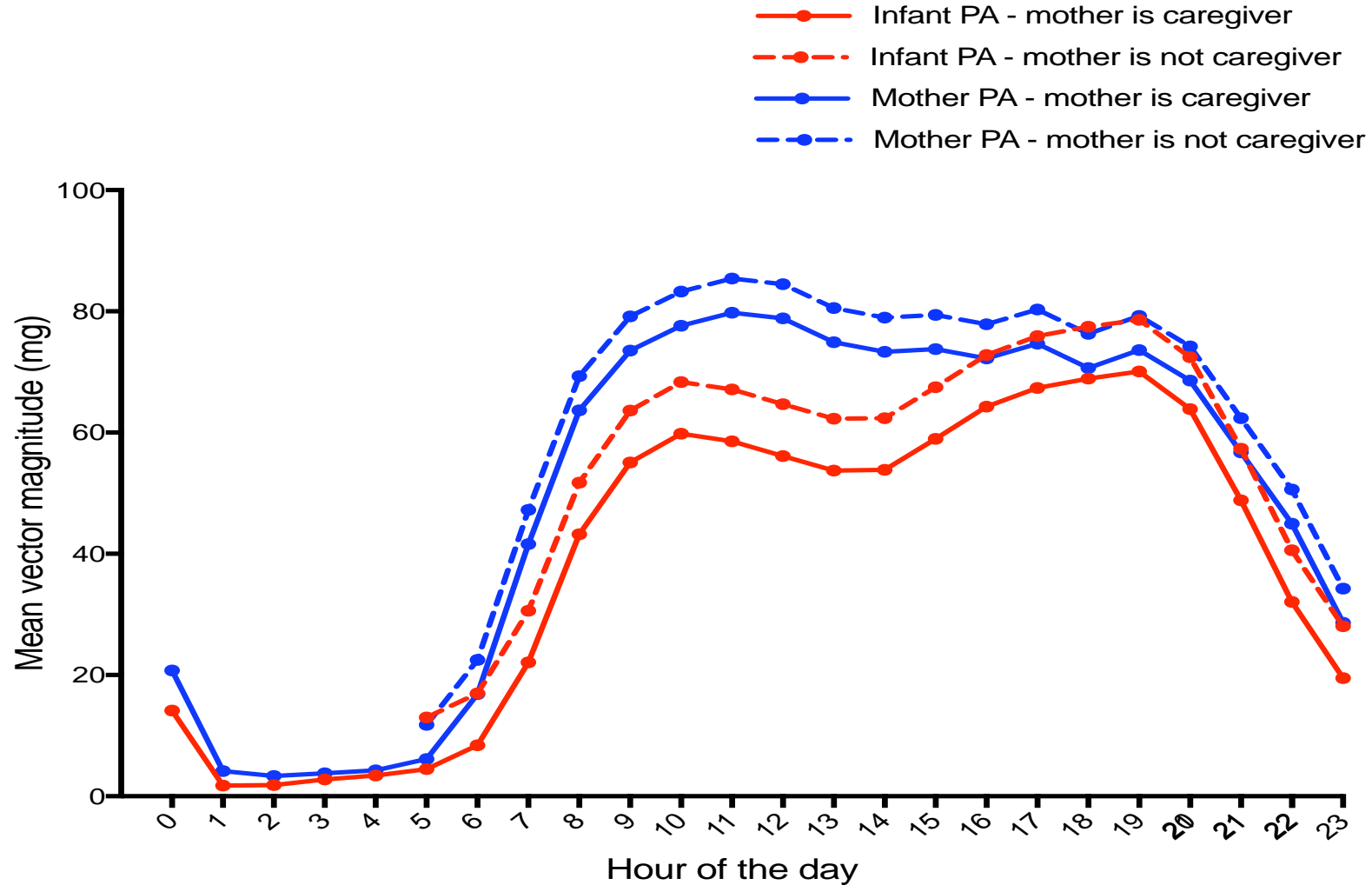
- Thereafter, activity is influenced through
- *Role Modeling*
- *Joint participation*
- *Home environment*
- *Genetics*

Evidence in the first two years of life is unclear

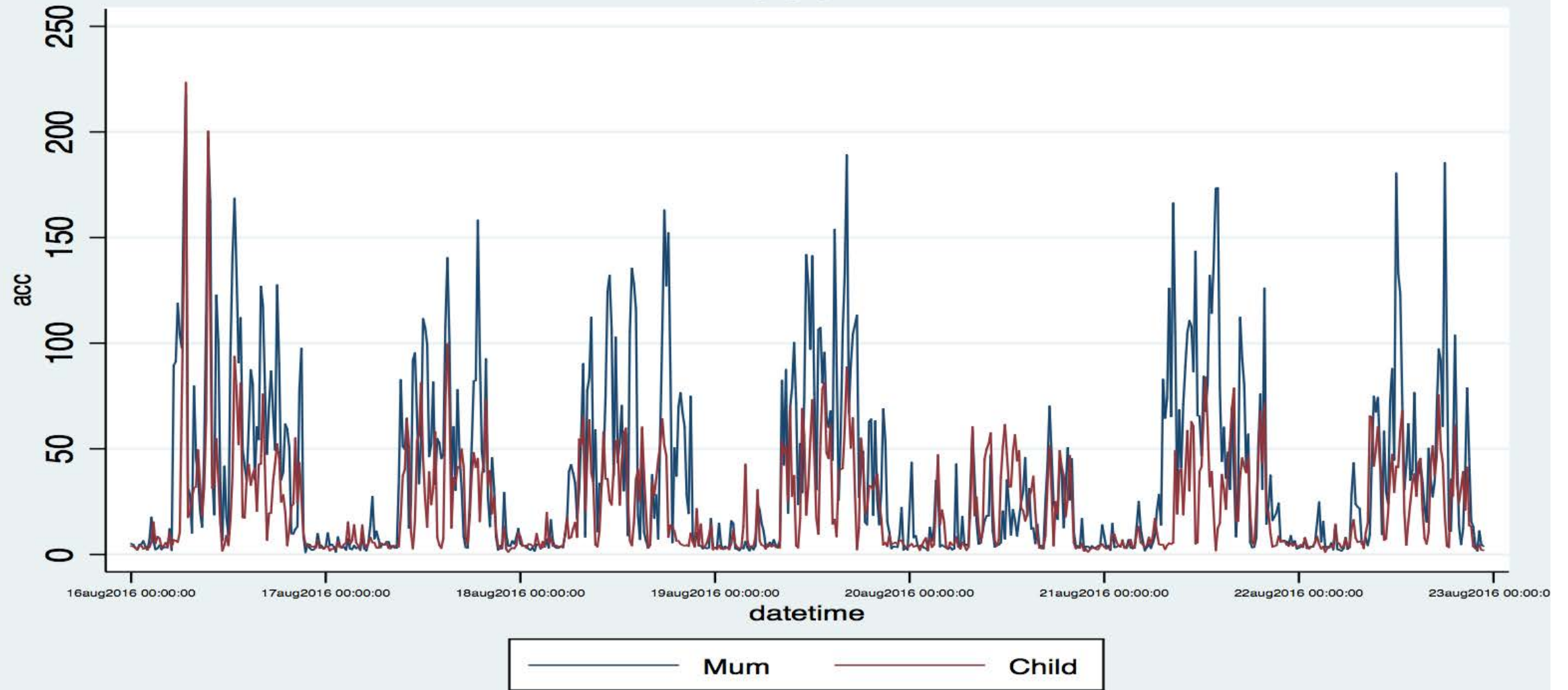
- Many confounding variables
- *Other children*
- *Employment*
- *Time of day*



- Mothers physical activity and interaction with infants was shown to influence infant physical activity (0-2 years).
- Infants were more active when they were not with their mother, unless their mother was being active while they were together.



3002





Headcams to measure parent- infant interactions





Pilot findings for headcam use in SA

POSITIVES

- The majority of mothers reported that they enjoyed using the headcams.
- Instructions given were useful and sufficient
- Other family members did not mind the use of cameras in the home, and in fact enjoyed being involved.
- All mothers reported that they would wear the headcams again, and were interested in viewing the footage obtained; and, in general, were not concerned about breaches in privacy or the use of their data.

NEGATIVES

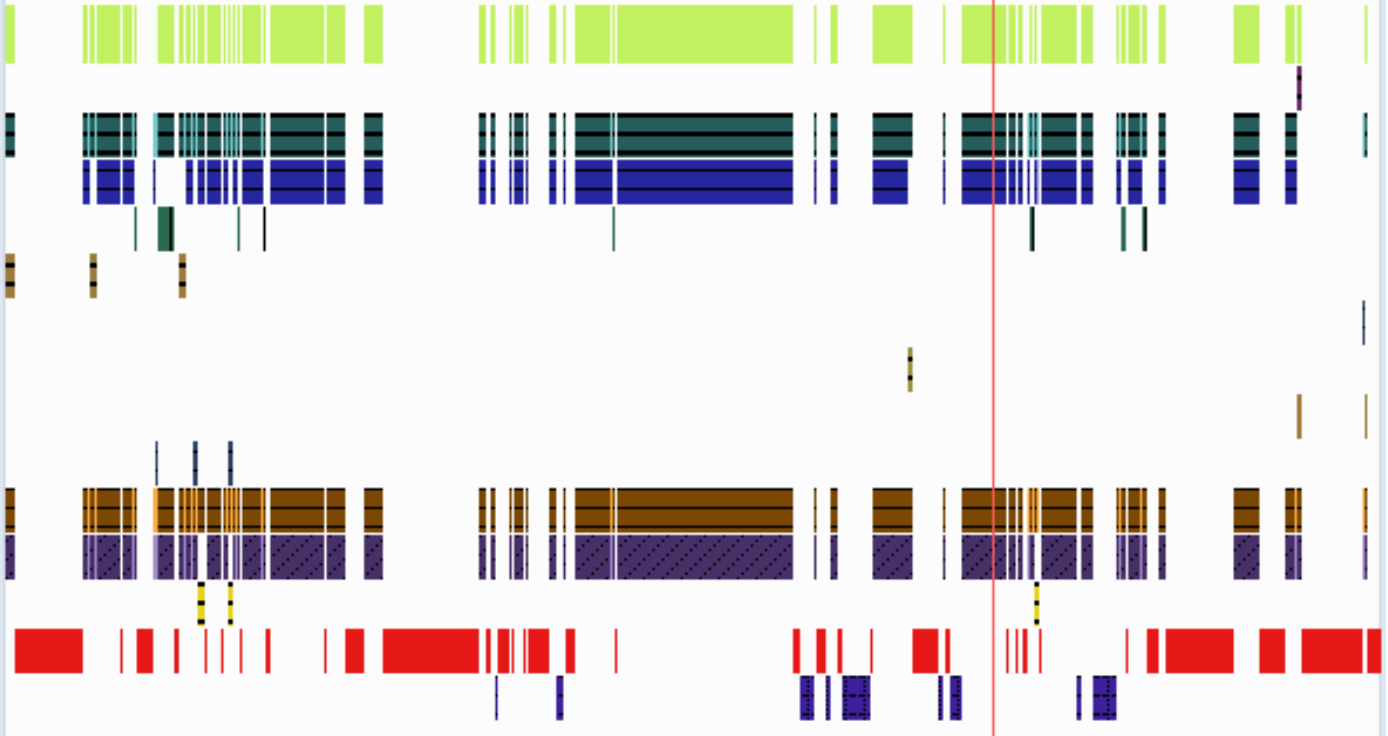
- The headcams used did not indicate when they were recording, and this made it difficult for some mothers to know whether they switched on correctly.
- Some mothers reported difficulties with using the headband placement of the camera on the infant and suggested different methods of attachment.
- Acceptability, as well as feasibility of the data was better in younger infants due to decreased autonomy of movement and better compliance.



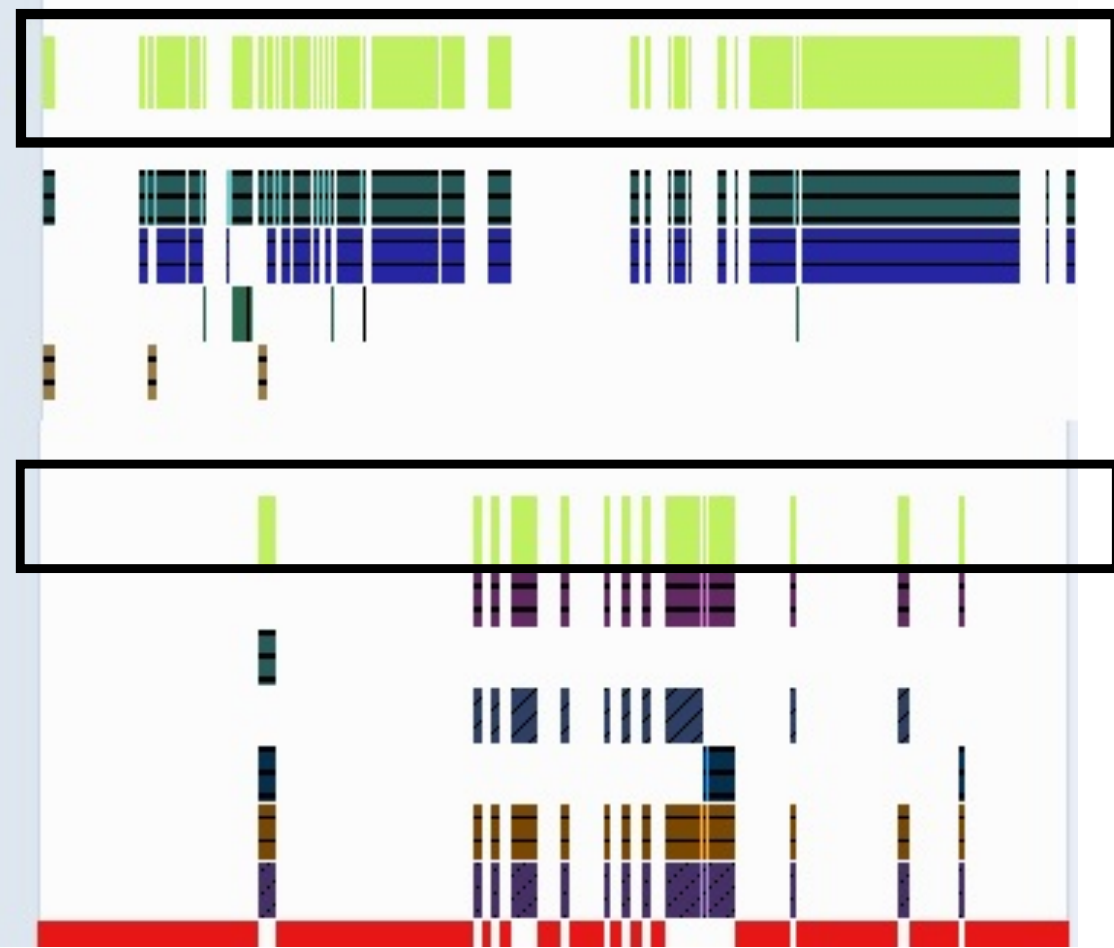
Touch with Right (R) Hand

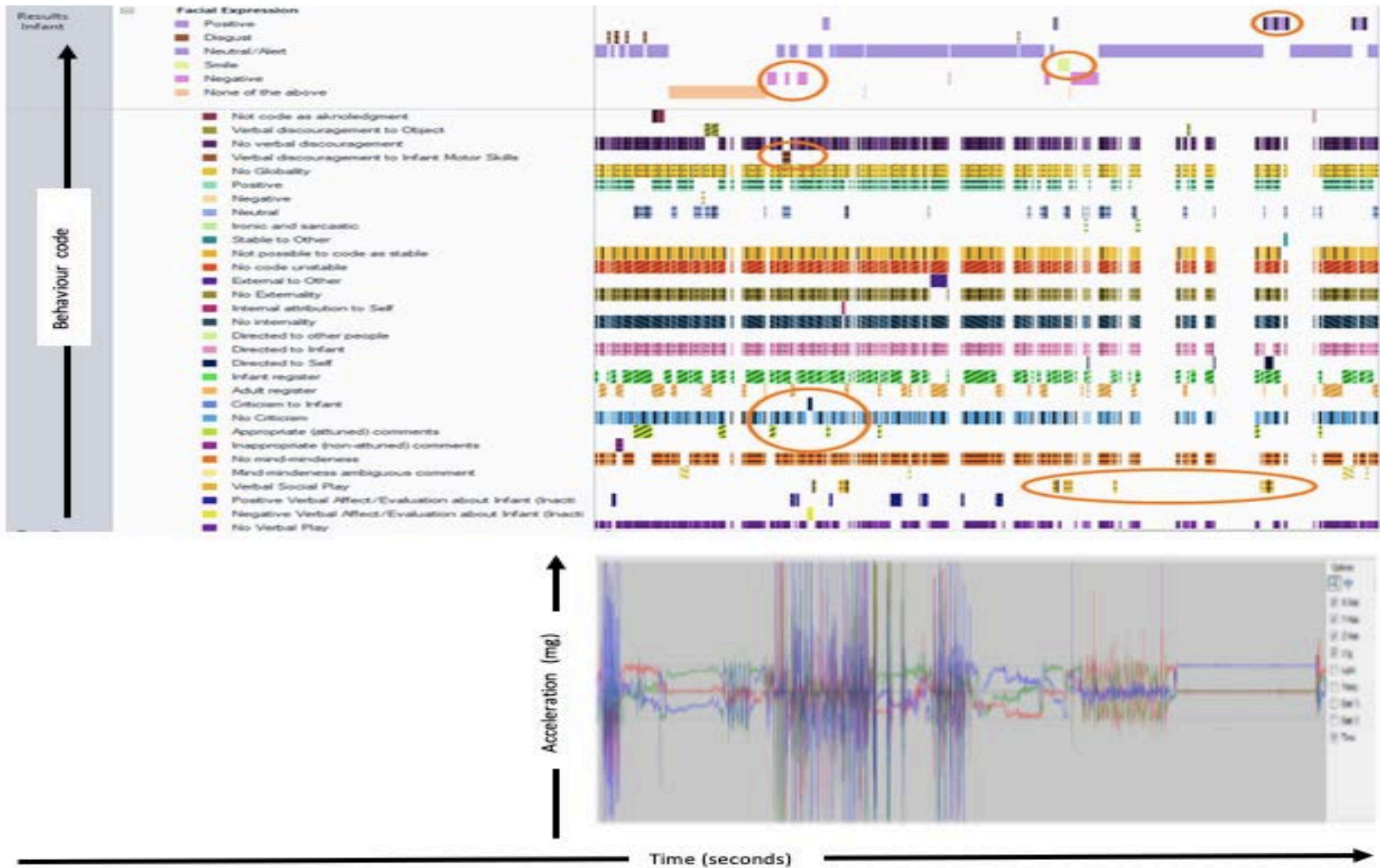


- Caregiver touch R
 - Positive/Warm
 - Neutral physical contact
 - Touch Focus Object
 - Touch Same Object as Infant
 - Touch Different Object to Infant
 - Touch Infant
 - Touch Own Body
 - Routine care
 - Object mediated touch
 - No pushing away
 - No Physical Intrusiveness evident
 - Physical intrusive evident
- No caregiver touch R
- Not possible to code touch R



- Touch with Right (R) Hand**
 - Caregiver touch R
 - Positive/Warm
 - Neutral physical contact
 - Touch Focus Object
 - Touch Same Object as Infant
 - Touch Different Object to Infant
- Touch with Right (R) Hand**
 - Caregiver touch R
 - Positive/Warm
 - Neutral physical contact
 - Touch Infant
 - Pick up/Hold Infant
 - No pushing away
 - No Physical Intrusiveness evid...
 - No responsive touch R





Thank you

- DST-NRF Centre of Excellence in Human Development
- Claude Leon Foundation
- Newton Fellowship

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DST-NRF Centre of Excellence
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Individual and Society



DPHRU

MRC/Wits Developmental
Pathways for Health Research Unit

