

Research Summary – Physical Activity Recall Assessment for People with Spinal Cord Injury (PARA-SCI) – Community Reintegration

Author Year Research Design Setting (country)	Demographics and Injury Characteristics of Sample	Validity	Reliability	Responsiveness Interpretability
<p>Lyons and Ginis. 2024</p> <p>Secondary analysis of baseline data from the study of Martin Ginis et al. 2008 to test internal-consistency reliability and dimensionality of the PARA-SCI measure of leisure-time physical activity (LTPA)</p> <p>Canada</p>	<p>Adults with an SCI (n = 703)</p>	<p>Together, the following data demonstrate the multidimensionality of LTPA and the PARA-SCI is not unidimensional. Internal consistency should not be a criterion for evaluating LTPA questionnaires for use in studies of people with SCI.</p> <ul style="list-style-type: none"> - Principal components analysis showed two components/dimensions ('Moderate and Heavy Intensity LTPA' and 'Mild Intensity LTPA') explained 73% of the variance. 	<p>Internal consistency: Cronbach's α was 0.227.</p>	

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		- Binary logic crosstabulation produced no discernible patterns of behavioural interrelatedness across LTPA intensities.		
Zbogar et al. 2016 Observational study Two inpatient spinal cord injury rehabilitation centers in Canada	N=106 Non-ambulatory patients: (n=70) 49M, 21F Mean age (SD): 48.9 (18.3) 67% Traumatic, 33% Non-traumatic 49% Paraplegic, 51% Tetraplegic AIS: 33%A, 14%B, 21%C, 29%D Ambulatory patients: (n=36) 26M, 9F	Convergent Validity: Spearman correlations for PARA-SCI with: (Spearman correlation (95%CI)) Wrist accelerometry = -0.04 (-0.27-0.20) SCIM III mobility score = -0.14 (-0.37-0.11) Step counts = 0.35 (0.01-0.61)	Test-retest, Inter-rater, Intra-rater: Test-retest: $p \leq 0.01$ Non-ambulatory participants: Spearman's rho (95%CI) = 0.68 (0.53-0.79) Ambulatory participants: Spearman's rho (95%CI) = 0.53 (0.24-0.73)	Interpretability: MDC = 179.4 min

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	Mean age (SD): 51.8 (15.4) 69% Traumatic, 31% Non-traumatic 63% Paraplegic, 37% Tetraplegic AIS: 3%A, 6%B, 0%C, 91%D			
Martin-Ginis et al. 2012 Survey with a 1-week follow-up General community	Validity Study: N=103 (75% male, 25% female) Mean age: 48.10±12.70y Mean years postinjury: 17.9±11.9y 54% tetraplegic 46% paraplegic 40% complete 60% incomplete Test-Retest Reliability Study: N=35 (77% male, 23% female)	With the exception of mild intensity activity, there were moderate to strong correlations between Leisure Time Physical Activity Questionnaire for People with Spinal Cord Injury (LTPAQ-SCI) & PARA-SCI measures of Leisure Time Physical Activity (LTPA). All correlations between the PARA-SCI and LTPAQ-SCI measures of LTPA were positive and		Interpretability: Mean (SD) PARA-SCI leisure time physical activity (LTPA) subscore (min/day): mild: 6.58 (14.59) moderate: 12.69 (27.30) heavy: 5.37 (15.21) total: 24.64 (37.43)

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	<p>Mean age: 48.51±13.24y Mean years postinjury: 14.20±12.42y 60% tetraplegic 40% paraplegic</p> <p>25% complete 75% incomplete</p> <p>Patients with SCI who used a wheelchair as the primary mode of mobility</p>	<p>statistically significant (P<.01). The strongest correlation was between the measures of heavy LTPA (P=.54), followed by the measures of total (P=.46) and moderate LTPA (P=.43). The weakest correlation was between the measures of mild intensity LTPA (P=.27).</p>		
<p>Latimer et al. 2006</p> <p>Construct and convergent validity test</p> <p>Not specified</p>	<p>Convergent validity study: 73 participants; 52M, 21F, avg. age =39 37 tetraplegic, 36 paraplegic</p> <p>Construct validity study: 158 participants; 110M, 48F, avg. age= 38.5</p>	<p>Correlations with muscle strength:</p> <ul style="list-style-type: none"> Biceps muscle strength assessed by maximal load that could be lifted in one repetition (1RM) in unilateral bicep curl correlated positively with total, moderate and heavy intensity 		

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	81 tetraplegic, 77 paraplegic.	<p>PARA-SCI leisure time physical activity (LTPA) subscore ($r \geq 0.21$, $P < .05$).</p> <ul style="list-style-type: none"> • Bicep strength also correlated with heavy intensity lifestyle and cumulative activity ($r \geq 0.23$, $P < .05$). • Left Pectoral strength assessed by maximal load in one repetition (1RM) in unilateral chest press correlated only with moderately intensity LTPA subscore ($r = 0.23$, $P = .03$). <p>Correlations with aerobic fitness:</p> <ul style="list-style-type: none"> • Oxygen consumption (VO_2) correlated with <ul style="list-style-type: none"> ○ Heavy intensity Leisure Time Physical Activity 		

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		<p>(LTPA) (r=0.35 P<.01)</p> <ul style="list-style-type: none"> ○ Moderate intensity cumulative activity (r=0.26 P<.05) ○ Heavy intensity cumulative activity (r=0.33 P<.01) ● Workload sig. correlated with moderate, heavy and total LTPA subscore as well as heavy intensity cumulative activity (r≥0.28, P<.02). <p>Extreme Groups analysis Leisure time physical activity ANOVA Total leisure time physical activity (LTPA) subscore</p>		

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		<p>indicated main effects for:</p> <ul style="list-style-type: none"> • age ($F(1,108)=11.18$, $P=.001$, $d=0.64$) • gender ($F(1,1456)=4.51$, $P=.04$, $d=0.36$) <p>Men and younger participants reported more total LTPA compared with women and older participants.</p> <p>MANOVA Effects on leisure time physical activity (LTPA) subscore for mild, moderate and heavy intensity were significant by:</p> <ul style="list-style-type: none"> • Age ($F(3,106)=3.94$, Pillai's trace=0.10, $P=.01$); younger respondents engaged in more moderate intensity 		

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		<p>LTPA than older participants.</p> <ul style="list-style-type: none"> • Having a gym/sports team membership ($F(3,129)=7.01$, Pillai's trace=0.14, $P<.001$); those who did belong to a gym or sports team reported more moderate and heavy intensity LTPA. • Participation frequency (low vs. high) ($F(3,80)=3.65$, Pillai's trace=, $P<.001$); those with high participation frequency reported more mild, moderate, and heavy intensity LTPA. <p>Lifestyle activity Lifestyle scores were significant for:</p> <ul style="list-style-type: none"> • Work status 		

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		<p>(F(3,151)=3.21, Pillai's trace=0.12, P=.02)</p> <p>Cumulative activity Cumulative scores were significant for:</p> <ul style="list-style-type: none"> Gym or sports team membership <p>(F(3,129)=3.14, Pillai's trace=0.07, P=.03)</p>		
<p>Martin Ginis et al. 2005</p> <p>Development and preliminary assessment of test-retest reliability and criterion validity</p> <p>Community dwelling - Telephone interviews</p>	<p>Reliability Study: 102 SCI patients Validity Study: 14 patients Age range: 27-53, 72% men</p> <p>Inclusion criteria: Neurological impairments secondary to SCI, wheelchair use and no cognitive deficit</p> <p>Reliability study participants:</p>	<p>Pearson correlations for indirect calorimetry measurement and levels of cumulative activity (using subset of validity sample; N = 9):</p> <ul style="list-style-type: none"> Mild: (r=0.27, n.s.) Moderate: (r=0.63, P<.05) Heavy: (r=0.88, P<.01) Total: (r=0.79, P<.01) 	<p>Test-retest, Inter-rater, Intra-rater: All 3 PARA-SCI measures of total physical activity had an ICC >0.70 (there were no significant differences between any pairs of PARA-SCI scores from T1 to T2, meaning scores were stable across the test-retest period)</p> <ul style="list-style-type: none"> Cumulative activity 	<p>Floor/ceiling effect: Minimum between-subject variability may have caused floor effects in heavy intensity lifestyle activity for reliability scores.</p> <p>Interpretability: Chronic SCI: (n = 102, combination of: paraplegia and tetraplegia, complete and incomplete SCI) See table 1.</p>

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	<p>50 paraplegic Mean (SD) age = 41.1 (12.2) years Mean (SD) time since injury = 12.5 (11.2) years 50% incomplete, 50% complete 64 % male</p> <p>52 tetraplegic Mean (SD) age = 36.9 (10.2) years Mean (SD) time since injury = 11.2 (8.5) years 49% incomplete, 51% complete 79 % male</p>		<p>ICC =0.79 (0.7-0.85)</p> <ul style="list-style-type: none"> Leisure time physical activity ICC =0.72 (0.6-0.8) Lifestyle Activity ICC =0.78 (0.68-0.84) <table border="1" data-bbox="1199 691 1501 1409"> <thead> <tr> <th>PARA-SCI measure and Intensity Level</th> <th>ICC</th> </tr> </thead> <tbody> <tr> <td>Cumulative - Total</td> <td>0.79</td> </tr> <tr> <td>Cumulative - Mild</td> <td>0.65</td> </tr> <tr> <td>Cumulative - Moderate</td> <td>0.75</td> </tr> <tr> <td>Cumulative - Heavy</td> <td>0.80</td> </tr> <tr> <td>Leisure Time Activity - Total</td> <td>0.72</td> </tr> <tr> <td>Leisure Time Activity -</td> <td>0.63</td> </tr> </tbody> </table>	PARA-SCI measure and Intensity Level	ICC	Cumulative - Total	0.79	Cumulative - Mild	0.65	Cumulative - Moderate	0.75	Cumulative - Heavy	0.80	Leisure Time Activity - Total	0.72	Leisure Time Activity -	0.63	<p>SEM and MDC (calculated by the SCIRE team from data in Martin-Ginis et al. 2005): See table 2.</p>
PARA-SCI measure and Intensity Level	ICC																	
Cumulative - Total	0.79																	
Cumulative - Mild	0.65																	
Cumulative - Moderate	0.75																	
Cumulative - Heavy	0.80																	
Leisure Time Activity - Total	0.72																	
Leisure Time Activity -	0.63																	

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			Mild		
			Leisure Time Activity - Moderate	0.45	
			Leisure Time Activity - Heavy	0.91	
			Lifestyle Activity - Total	0.78	
			Lifestyle Activity - Mild	0.66	
			Lifestyle Activity - Moderate	0.8 0	
			Lifestyle Activity - Heavy	0.56	
	Table 1.				
	PARA-SCI measure and Intensity Level	Mean (SD) in minutes of PARA-SCI results at Time 1	Mean (SD) in minutes of PARA-SCI results at Time 2 (one week after Time 1)		
	Cumulative - Total	184.1 (141.2)	189.3 (138.3)		
	Cumulative - Mild	113.3 (107.4)	103.3 (95.2)		

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	Cumulative - Moderate	66.1 (72.6)	63.9 (61.4)	
	Cumulative - Heavy	19 (30.5)	21.5 (36.4)	
	Leisure Time Activity - Total	45.3 (59.9)	51.2 (68.6)	
	Leisure Time Activity - Mild	13.5 (25.1)	16.2 (37.0)	
	Leisure Time Activity - Moderate	20.2 (33.4)	20.2 (30.6)	
	Leisure Time Activity - Heavy	11.7 (28.3)	14.8 (34.4)	
	Lifestyle Activity - Total	138.8 (138.5)	138.1 (127.4)	
	Lifestyle Activity - Mild	85.6 (93.2)	87.6 (89.5)	
	Lifestyle Activity - Moderate	45.9 (65.9)	43.8 (58.1)	
	Lifestyle Activity - Heavy	7.3 (14.8)	6.7 (16.0)	
Table 2.				
PARA-SCI measure and Intensity Level		SEM (min of activity/day)	MDC (min of activity/day)	
Cumulative - Total		64.7	179.4	
Cumulative - Mild		63.5	176.1	
Cumulative - Moderate		36.3	100.6	
Cumulative - Heavy		13.6	37.8	
Leisure Time Activity - Total		31.7	87.9	
Leisure Time Activity - Mild		15.3	42.3	
Leisure Time Activity - Moderate		24.8	68.7	
Leisure Time Activity - Heavy		8.5	23.5	
Lifestyle Activity - Total		65.0	180.1	

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	Lifestyle Activity - Mild	54.3	150.6	
	Lifestyle Activity - Moderate	29.5	81.7	
	Lifestyle Activity - Heavy	9.8	27.2	

Research Summary – Physical Activity Recall Assessment for People with Spinal Cord Injury (PARA-SCI) – Community Reintegration - Cross-cultural Validation Studies

Author Year Research Design Setting (country)	Demographics and Injury Characteristics of Sample	Validity	Reliability	Responsiveness Interpretability
<p>Eitvupart et al. 2022</p> <p>Psychometric study to translate and culturally adapt the PARA-SCI Thai-version and to assess its inter- and intra-rater reliability.</p> <p>University of Sydney, and in a community of convenience in Bangkok, Thailand.</p>	<p>Participants with SCI (n = 38) Mean (\pm SD) age 37.4 \pm 10.4 years Sex: 27M, 11W Tetraplegia (n = 13) and paraplegia (n =25) Mean (\pm SD) time since injury 12.7 \pm 9.3 years</p>		<p>An excellent degree of inter-rater reliability (assessed by comparing the assessment by 2 researchers 1 hour apart on the same day) was found in all types of physical activity intensity. The average ICC for inter-rater reliability for all types of activity and intensities was 0.99 (95% CI range from 0.95 to 0.99, F (1,37) = 0.07–1.06, p>0.05).</p> <p>Intra-rater reliability (assessed by comparing the results of the interviews one week apart) was poor (ICC</p>	

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			score $r < 0.5$) for moderate intensity ADL, LTPA and cumulative physical activity as well as heavy intensity of LTPA and cumulative physical activity; and moderate reliability (ICC score between $r = 0.5 - 0.75$) for mild intensity ADL, LTPA, and cumulative physical activity as well as the heavy intensity ADL.	