Appendix A

Ethical Approval

	Арргоч		edical Research Ethics Re Fujian Third People's Ho		committee		
Project name		self-perce	ergames on body composition, ps eptions among overweight and of na		Ethical	2024	4-185
Project leader	Liu Chunging	Title	Contact number	+861	8370774883	Departments	
Person in charge	of research Unit		Universiti Putra Malays	ia Facult	v of Education	al Studies	
Cooperative res	and the second second	-	⊠one				
Research time	10.2	024	To		12.2024	t.	
Wassel Decine Off	ital medicine (3D p	rinting-re	elated technology)?		□Yes ⊠N	lone	
Are stem cell and		W 10	77.0				
Source of the rese	C. C	ane myon	ted Lites and the				
DLongitudinal res		t-support	Association/Foundation	□Cor	npany DCr	oss-sectional re	search
☐Multicentre rese		Autonom		1114.50.00.0	Manual Comment		
Research funding	assistance unit	EZIN	one				
Test object	Limited and the second		ct DAnimals DCell DMedins and samples 🗹 Other	cal Imag	ing data		
Review opinion							
			be carried out in accordance with				
100000000000000000000000000000000000000		uirements	, please modify it before submitt	ing it to	the ethics com	mittee for revie	ew.
Informed consent			ØYes □None				
Method for obtain	ning informed cons	ent	☑Appropriate □Inap	propriate	e		
Attachment upload		Fujian T	hird People's Hospital Medical	T L L L L L L L L L L L L L L L L L L L	是 是 是 是 是 Ethics Review	Committee	
Informed consent					ØlYes		
Carrier Street			Focus on the eight-week experimental groups and	THE PERSON			
Test method			modes				

公 证 书

(2024) 鄂尚诚证字第14004号

申请人:刘春青,女,一九九五年三月十七日出生,公民身份号码:360722199503175726。

代理人: 李天明, 男, 1989年7月10日出生, 公民身份 号码: 421083198907102117。

公证事项: 医学科研伦理审查委员会批准书

兹证明前面的福建省第三人民医院出具给刘春青的《福建省第三人民医院医学科研伦理审查委员会批准书》的原件属实。

中华人民共和国湖北省咸宁市尚诚公证处

本格



NOTARIAL CERTIFICATE

(2024) E.S.C.Z.Zi.No.14004

Applicant: Liu Chunqing, female, was born on March 17,1995, ID Card NO. 360722199503175726.

Agent:Li Tianming, male, was born on July 10,1989,ID Card No. 421083198907102117.

Issue under notarization: Approval of Medical Research Ethics Review Committee

This is to cerify that the original Approval of Medical Research Ethics Review Committee of Fujian Third People's Hospital issued by Fujian Third People's Hospital to Liu Chunqing is actual.

> Shangcheng NOtaTy Public Office, Xianning City, Hubei Province

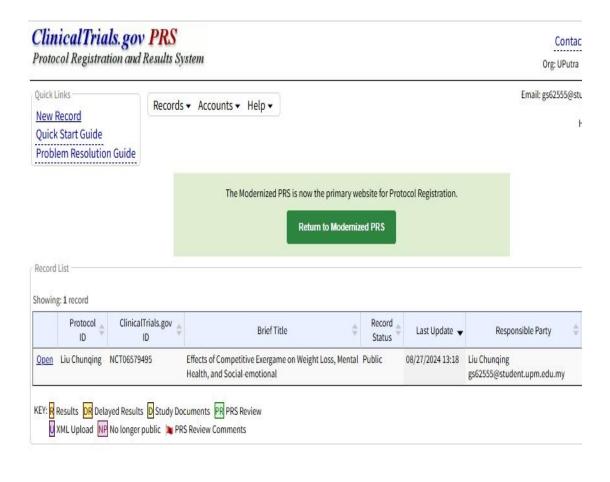
The People's Republic of China

Notary Public: Li Ge

April 18,2024

Appendix B

Registration of Trial Protocol



U.S. National Library of Medicine | U.S. National Institutes of Health | U.S. Department of Health & Human Services | HHS Vulnerability Disclosure

Appendix C

Respondent's Information Sheet and Informed Consent Form

RESPONDENT'S INFORMATION SHEET AND INFORMED

CONSENT FORM

Please read the following information carefully and do not hesitate to discuss any questions you may have with the researcher.

1. STUDY TITLE:

EFFECTS OF COMPETITIVE EXERGAMES ON BODY COMPOSITION, PSYCHOSOCIAL WELL-BEING, AND SELF-PERCEPTIONS AMONG OVERWEIGHT AND OBESE MALE ADOLESCENTS IN FUJIAN, CHINA

2. INTRODUCTION:

With the rapid development of society and the continuous advancement of science and technology, the world economy is moving towards a higher quality and more stable direction. In this process, economic development has brought about significant improvements in material living standards, educational resources, medical security, etc., and people's quality of life has been significantly improved. However, the improvement of living conditions is also accompanied by major changes in dietary structure and leisure and entertainment methods. In China, especially in urban areas, problems such as increased frequency of fast food consumption and reduced physical activity have become increasingly prominent, which has led to a serious public health challenge: overweight and obesity. Obesity is not only an external manifestation of lifestyle, but also a major social problem closely related to chronic diseases, mental health problems, and the physical and mental development of adolescents. Its causes are complex, involving multiple dimensions such as unbalanced nutritional intake, lack of exercise, and social and psychological factors, and it is urgent to attract widespread attention in the fields of public health and education.

Among adolescents, the problem of overweight and obesity is particularly prominent among male adolescents. According to data from multiple domestic epidemiological surveys in recent years, the overall overweight and obesity rates of Chinese adolescents have continued to rise, and the obesity rate of male adolescents is significantly higher than that of their female peers. This gender difference may be related to factors such as the high energy intake of males during adolescence, the single way of participating in sports, and the lack of ability to regulate physical and

mental stress. Adolescence is a critical stage of rapid physical and mental development. Obesity not only increases the risk of chronic diseases such as hypertension, diabetes, and abnormal lipid metabolism, but also brings a series of psychosocial problems, such as decreased self-esteem, social anxiety, depression, and reduced life satisfaction.

In recent years, with the development of virtual reality technology and somatosensory interactive devices, Exergames have emerged as a new type of intervention method that organically integrates physical exercise with game entertainment. In particular, Competitive Exergames (CE) can not only stimulate adolescents' interest in sports and intrinsic motivation but also enhance their self-efficacy, social skills, and emotional regulation abilities through mechanisms such as real-time feedback and peer confrontation, thereby improving their body composition and psychosocial health. CE has the potential to serve as an alternative to traditional exercise, helping overweight and obese adolescents improve their physical and mental health, and cultivating healthy concepts, lifelong physical education, and active lifestyles among this special population.

3. WHAT WILL YOU HAVE TO DO?

Using competitive exergames to improve body composition, psychosocial well-being, and self-perceptions among overweight and obese male adolescents in Fujian, China. The intervention was conducted over 8 weeks, with three sessions per week, each lasting 45 exclusion criteria

4. WHO SHOULD NOT PARTICIPATE IN THE STUDY?

The exclusion criteria of this study include the following five aspects:

- (1) Male adolescents not living in boarding schools.
- (2) Male adolescents who take weight loss pills or a diet.
- (3) Participants who reported having a physical and/or mental disability diagnosis.
- (4) Subjects participated in extracurricular sports activities.
- (5) Subjects with contraindications to physical activity were identified based on the PARQ-C questions.

5. WHAT WILL BE THE BENEFITS OF THE STUDY:

(a) TO YOU AS THE SUBJECT?

Participants in this experiment will help improve body composition, psychosocial well-being, and self-perceptions among overweight and obese male adolescents in Fujian, China.

(b) TO THE INVESTIGATOR?

To explore the impact of Nintendo Switch on the physical and mental health of overweight and obese adolescents in China, as a supplement and alternative to traditional sports.

6. WHAT ARE THE POSSIBLE RISKS?

Since this study used a competitive video game intervention based on somatosensory interaction, participants needed to hold the Joy-Con controller and interact with the game system through body movements. Therefore, mild muscle soreness, joint fatigue, or temporary sports discomfort may occur during the training process. In order to minimize the risk of injury, the research team arranged warm-up activities before each training session and stretched the training session after each training session. In addition, all intervention activities were carried out under the full supervision and guidance of physical education teachers and trained research assistants to ensure standardized movements and safe operations during the training process. The experimental site is equipped with the necessary safety equipment to ensure that physical discomfort can be dealt with in a timely manner. Therefore, participants do not need to worry too much about adverse reactions during the training process.

7. WILLTHE INFORMATION THATYOU PROVIDEAND YOUR IDENTITY REMAIN CONFIDENTIAL?

All your personal and health information will be kept at Universiti Putra Malaysia. The researchers, research institutions and ethics committees will be allowed to access your health records. Your personal identity will not be revealed in any public reports of the results of this study. We will make every effort to protect your personal privacy to the extent permitted by law. When you sign this informed consent form, you agree to the use of your personal and health information in the circumstances described above.

8. WHO SHOULD YOU CONTACT IF YOU HAVE ADDITIONAL QUESTIONS DURING THE COURSE OF THE RESEARCH?

If you have various questions about this study, please contact the researcher immediately

Researcher's name: Liu Chunqing Tel: 60174033890 Email: lcqpe2021@gmail.com

If you have any questions about your rights as a participant in this study, please contact: The Secretariat, JKEUPM, at email address jkeupm@upm.edu.my

Please initial here if you have read and understood the contents of this page_____

9. CONSENT
I Identity Card No.
address
hereby voluntarily agree to take
part in the research with my child stated above *(clinical /drug trial/video recording/
focus group/interview-based/ questionnaire-based).
I have been informed about the nature of the research in terms of methodology,
possible adverse effects and complications (as written in the Respondent's
Information Sheet).
I understand that I have the right to withdraw from this research at any time without
giving any reason whatsoever. I also understand that this study is confidential, and all
information provided with regard to my identity will remain private and confidential.
I* wish / do not wish to know the results related to my participation in the research
I agree/do not agree that the images/photos/video recordings/voice recordings related
to me be used in any form of publication or presentation (if applicable)
* Delete where necessary
Signature Signature
(Respondent)
(Witness)
Date:
I/C No. :
I confirm that I have explained to the respondent the nature and purpose of the
above-mentioned research.
Date Signature
(Researcher)

Appendix D

PAR-Q &YOU

Physical Activity Readiness Questionnaire - PAR-Q (revised 2002)

PAR-Q & YOU

(A Questionnaire for People Aged 15 to 69)

Regular physical activity is fun and healthy, and increasingly more people are starting to become more active every day. Being more active is very safe for most people. However, some people should check with their doctor before they start becoming much more physically active.

If you are planning to become much more physically active than you are now, start by answering the seven questions in the box below. If you are between the ages of 15 and 69, the PAR-Q will tell you if you should check with your doctor before you start. If you are over 69 years of age, and you are not used to being very active, check with your doctor.

YES	NO								
		1.	Has your doctor ever said that you have a heart condi recommended by a doctor?	ition and that you should only do physical activity					
		2.	Do you feel pain in your chest when you do physical a	activity?					
		3.	In the past month, have you had chest pain when you	were not doing physical activity?					
	4. Do you lose your balance because of dizziness or do you ever lose consciousness?								
		5.	Do you have a bone or joint problem (for example, be change in your physical activity?	ack, knee or hip) that could be made worse by a					
		6.	Is your doctor currently prescribing drugs (for examp dition?	le, water pills) for your blood pressure or heart con-					
		7.	Do you know of <u>any other reason</u> why you should not	do physical activity?					
you			your doctor about the PAR-Q and which questions you answered YES. You may be able to do any activity you want — as long as you start:	slowly and build up gradually. Or, you may need to restrict your activities to					
NO i	swered Moecoming) hone	those which are safe for you. Talk with your doctor about the kinds of Find out which community programs are safe and helpful for you. UESTIONS estly to all PAR-Q questions, you can be reasonably sure that you can: who have all particles and build up gradually. This is the	DELAY BECOMING MUCH MORE ACTIVE: • if you are not feeling well because of a temporary illness such as a cold or a fever — wait until you feel better; or • if you are or may be pregnant — talk to your doctor before you					
NO If you an start is safest take p that y have y	swered Moccoming and easie art in a fit ou can pla	D hone much est way tness a an the I press	Find out which community programs are safe and helpful for you. Uestions estly to all PAR-Q questions, you can be reasonably sure that you can: more physically active — begin slowly and build up gradually. This is the	DELAY BECOMING MUCH MORE ACTIVE: • if you are not feeling well because of a temporary illness such as a cold or a fever — wait until you feel better; or					
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If you an start I safest take p that y have y before	swered Mo becoming and easie art in a fil ou can pla your blood a you start	O hone much est way tness a in the I press t beco R-Q: T sult you	Find out which community programs are safe and helpful for you. Westions estly to all PAR-Q questions, you can be reasonably sure that you can: more physically active — begin slowly and build up gradually. This is the y to go. appraisal — this is an excellent way to determine your basic fitness so best way for you to live actively. It is also highly recommended that you sure evaluated. If your reading is over 144/94, talk with your doctor ming much more physically active.	DELAY BECOMING MUCH MORE ACTIVE: • if you are not feeling well because of a temporary illness such as a cold or a fever — wait until you feel better; or • if you are or may be pregnant — talk to your doctor before you start becoming more active. PLEASE NOTE: If your health changes so that you then answer YES to any of the above questions, tell your fitness or health professional. Ask whether you should change your physical activity plan. ne no liability for persons who undertake physical activity, and if in doubt after completic					
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NO (If you an start is safest take p that y have y before	swered No becoming and easie and in a fil but can pla your blood your blood you start e of the PA nnaire, con-	o hone much est way tness a an the I press t beco R-Q: T sult you chair	Find out which community programs are safe and helpful for you. UESTIONS estly to all PAR-Q questions, you can be reasonably sure that you can: more physically active — begin slowly and build up gradually. This is the y to go. appraisal — this is an excellent way to determine your basic fitness so best way for you to live actively. It is also highly recommended that you sure evaluated. If your reading is over 144/94, talk with your doctor ming much more physically active. The Canadan Society for Exercise Physiology, Health Canada, and their agents assurur doctor prior to physical activity. Inges permitted. You are encouraged to photocopy the service of the canada and their agents assurur doctor prior to physical activity. Inges permitted. You are encouraged to photocopy the canada and their agents assurur doctor prior to physical activity.	DELAY BECOMING MUCH MORE ACTIVE: if you are not feeling well because of a temporary illness such as a cold or a fever – wait until you feel better; or if you are or may be pregnant – talk to your doctor before you start becoming more active. PLEASE NOTE: If your health changes so that you then answer YES to any of the above questions, tell your fitness or health professional. Ask whether you should change your physical activity plan. ne no fiability for persons who undertake physical activity, and if in doubt after completing the PAR-Q but only if you use the entire form. Itness appraisal, this section may be used for legal or administrative purposes.					
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If you an start I safest take p that y have y before	swered No becoming and easie and in a fil but can pla your blood your blood you start e of the PA nnaire, con-	o hone much est way tness a an the I press t beco R-Q: T sult you chair	Find out which community programs are safe and helpful for you. UESTIONS estly to all PAR-Q questions, you can be reasonably sure that you can: more physically active — begin slowly and build up gradually. This is the y to go. appraisal — this is an excellent way to determine your basic fitness so best way for you to live actively. It is also highly recommended that you sure evaluated. If your reading is over 144/94, talk with your doctor ming much more physically active. The Canadian Society for Exercise Physiology, Health Canada, and their agents assure ur doctor prior to physical activity. Inges permitted. You are encouraged to photocopy the given to a person before he or she participates in a physical activity program or a fit	DELAY BECOMING MUCH MORE ACTIVE: if you are not feeling well because of a temporary illness such as a cold or a fever – wait until you feel better; or if you are or may be pregnant – talk to your doctor before you start becoming more active. PLEASE NOTE: If your health changes so that you then answer YES to any of the above questions, tell your fitness or health professional. Ask whether you should change your physical activity plan. ne no fiability for persons who undertake physical activity, and if in doubt after completing the PAR-Q but only if you use the entire form. Itness appraisal, this section may be used for legal or administrative purposes.					

Note: This physical activity clearance is valid for a maximum of 12 months from the date it is completed and becomes invalid if your condition changes so that you would answer YES to any of the seven questions.





Supported by: Health Santé Canada Canada

continued on other side...

Appendix E

Patient Health Questionnaire

PATIENT HEALTH QUESTIONNAIRE-9 (PHQ-9)

Over the <u>last 2 weeks</u> , how often by any of the following problem (Use "" to indicate your answer	ns?	Not at all	Several days	More than half the days	Nearl every day
1. Little interest or pleasure in do	ing things	0	1	2	3
2. Feeling down, depressed, or h	opeless	0	1	2	3
3. Trouble falling or staying aslee	p, or sleeping too much	0	1	2	3
4. Feeling tired or having little en	ergy	0	1	2	3
5. Poor appetite or overeating		0	1	2	3
6. Feeling bad about yourself — have let yourself or your family	or that you are a failure or down	0	1	2	3
7. Trouble concentrating on thing newspaper or watching televis		0	1	2	3
8. Moving or speaking so slowly to noticed? Or the opposite — but that you have been moving and	eing so fidgety or restless	0	1	2	3
Thoughts that you would be be yourself in some way	etter off dead or of hurting	0	1	2	3
	For office codi	NG <u>0</u> +	+	+	·
			-	Total Score	
If you checked off <u>any</u> problem work, take care of things at ho			ade it for	you to do y	your
Not difficult at all	Somewhat difficult d	Very lifficult		Extreme difficul	

Developed by Drs. Robert L. Spitzer, Janet B.W. Williams, Kurt Kroenke and colleagues, with an educational grant from Pfizer Inc. No permission required to reproduce, translate, display or distribute.

Appendix F

Social Phobia and Anxiety Inventory Brief Form

The following entries correspond to your level	Never happen 1	Rarely happens	Sometimes happens 3	Very often happens	Always happens 5
1. When I am the center of attention in social situations, I feel anxious.					
2. In social situations, I get anxious if someone expects me to participate in something.					
3. I feel anxious when giving a presentation in front of an audience.					
4. I feel anxious when attending small gatherings.					
5. I feel anxious when attending large gatherings.					
6. When I disagree with others, I feel anxious worried and not knowing what to do.					
7. When discussing with others what intimacy is, I feeling anxious.					
8. I feel anxious when I give advice to others consider.					
9. When discussing work or study with others, I feel to anxiety.					
10. When I approach someone or start a conversation with someone Sometimes, I feel anxious.					
11. When I am criticized or rejected, I feel anxiety.					
12. I try to avoid social situations.					

13. I feel anxious when entering an unfamiliar social situation.			
14. When I speak in a social situation, my voice is out of control.			
15. In certain social situations, I have strange thoughts, such as			
(1) I wish I could leave or escape all love conditions			
(2) If I mess up again, I will really Loss of self-confidence.			
(3) What impression have I left on others?			
(4) No matter what I say, it sounds stupid.			
16. I have had the following experiences in social situations:			
(1) sweating			
(2) blush			
(3) tremble			
(4) Frequent urination			
(5) Palpitations			

Appendix G

Multidimensional Students' Life Satisfaction Scale (MSLSS)

Student:	Date:
Teacher:	
Instructions: We would like to know what thoughts about life	e you've had during the past several

Instructions: We would like to know what thoughts about life you've had *during the past several weeks*. Think about how you spend each day and night, and then think about how your life has been during most of this time. Here are some questions that ask you to indicate your satisfaction with life. In answering each statement, circle a number from 1 to 6, where 1 indicates you strongly *disagree* with the statement and 6 indicates you strongly agree with the statement.

	Strongly disagree	Disagree	Slightly disagree	Slightly agree	Agree	Strongly
1. My friends are nice to me.	1	2	3	4	5	6
2. I am fun to be around.	1	2	3	4	5	6
3. I feel bad at school.*	1	2	3	4	5	6
4. I have a bad time with my friends.*	1	2	3	4	5	6
5. There are lots of things I can do well.	1	2	3	4	5	6
6. I learn a lot at school.	1	2	3	4	5	6
7. I like spending time with my parents.	1	2	3	4	5	-6
8. My family is better than most.	1	2	3	4	5	6
9. There are many things about school I don't like.*	1	2	3	4	5	6
10. I think I am good-looking.	1	2	3	4	5	6
11. My friends are great.	1	2	3	4	5	6
12. My friends will help me if I need it.	1	2	3	4	5	6
13. I wish I didn't have to go to school.*	1 1	2	3	4	5	- 6
14. I like myself.	1	2	3	4	5	6
15. There are lots of fun things to do where I live.	1	2	3	4	5	6
16. My friends treat me well.	1	2	3	4	5	6
17. Most people like me.	1	2	3	4	5	6
18. My family gets along well together.	1	2	3	4	5	6
19. I look forward to going to school.	1	2	3	4	5	6

(continued

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Multidimensional Students' Life Satisfaction Scale (MSLSS) (page 2 of 3)

	Strongly disagree	Disagree	Slightly disagree	Slightly agree	Agree	Strongly agree
20. My parents treat me fairly.	1	2	3	4	5	6
21. I enjoy being at home with my family.	1	2	3	4	5	- 6
22. I like being in school.	1	2	3	4	5	6
23. My friends are mean to me.*	1	2	3 -	4	5	6
24. I wish I had different friends.*	1	2	3	4	5	6
25. School is interesting.	1.	2	3	4	5	6
26. I enjoy school activities.	1	2	3	4	5	6
27. I wish I lived in a different house.*	1	2 -	3	4	5	6
28. Members of my family talk nicely to one another.	1	2	3	4	5	6
29. I have a lot of fun with my friends.	1	2	- 3	4	5	6
30. My parents and I do fun things together.	1	2	3	4	5	6
31. I like my neighborhood.	1	2	3	4	5	6
32. I wish I lived somewhere else.*	1	2	3	4	5	6
33. I am a nice person.	1	2	3	4	5	6
34. This town is filled with mean people.*	1	2	3	4	5	6
35. I like to try new things.	1	2	3	4	5	6
36. My family's house is nice.	1	2	3	4	5	6
37. I like my neighbors.	1	2	3	4	5	6
38. I have enough friends.	1	2	3	4	5	6
39. I wish there were different people in my neighborhood.*	1	2	3	-4	5	6
40. I like where I live.	1	2	3	4	5	6

Student, please stop here, thank you!

(continued)

Appendix H

Self-Confidence Scale

The following entries correspond to your level	Strongly Disagree	Disagree 2	Not sure	Agree 4	Strongly Agree 5
1. I can generally achieve the goals I set for myself.					
2. I feel that my life is positive and full of energy.					
3. As long as I try hard, I can always find the answer to a problem.					
4. When classmates have different opinions from mine, I start to doubt whether I am right.					
5. I can face new environments and problems with ease and confidence.					
6. I feel that all my classmates are not as good as me.					
7. Whatever I do, I feel others do it better than me.					
8. I believe I can change others' negative impressions of me.					
9. Deep down, I look down on the people around me.					
10. When someone says I look nice today, I feel uneasy and wonder if they're joking.					
11. It is hard for others to change my point of view.					
12. I am good at learning new knowledge.					

13. I believe I have the ability to create a bright future.			
14. I believe I can achieve my goals as long as I work hard.			
15. If good friends break up with me, I consider it their loss.			
16. I often feel like I'm a failure.			
17. Even the nicest clothes don't look good on me.			

Appendix I

Rosenberg Self-Esteem Scale

The following entries correspond to your level	Strongly Disagree 1	Disagree 2	Agree 3	Strongly Agree 4
1. On the whole, I am satisfied with myself.				
2.* At times, I think I am no good at all.				
3. I feel that I have a number of good qualities.				
4. I am able to do things as well as most other people.				
5.* I feel I do not have much to be proud of.				
6.* I certainly feel useless at times.				
7. I feel that I'm a person of worth, at least on an equal plane with others.				
8.* I wish I could have more respect for myself.				
9.* All in all, I am inclined to feel that I am a failure.				
10. I take a positive attitude toward myself.				

Appendix J Physical Activity Self-Efficacy Scale

The following entries correspond to your level	Strongly Disagree	Disagre e 2	Not sure	Agree 4	Strongly Agree 5
1. I exercise on most days of the week					
2. I can ask my parents or other adults to exercise with me					
3. Even if I can watch TV or play video games, I can still exercise in most of the free time of the week					
4. Even if it's very hot or cold outdoors, I can still exercise on most of days of the week					
5. I can ask my best friend to exercise with me for most of the days of the week					
6. Even at home, I can still exercise.					
7. I can exercise because I know how to exercise.					
8. No matter how busy I am, I can still exercise in most of the free time of the week					

Appendix K Content Validity of Intervention and Instruments

Table 1: Relevancy and Clarity Agreement of the Intervention Items

C 1 1	Number of	Rel	evance	Number of	Cl	arity
Contents	Agreement	I-CVI	KAPPA	Agreement	I-CVI	KAPPA
Frequency	6	1	1	6	1	1
Intensity	5	0.833	0.816	6	1	1
Time	6	1	1	6	1	1
Type of Games Selected	6	1	1	6	1	1
Duration	5	0.833	0.816	5	0.833	0.816
Risk	6	1	1	5	0.833	0.816
Overall						
evaluation of the program	6	1	1	6	1	1

Table 2: Relevancy and Clarity Agreement of the Instruments Items (PHQ-9)

Туре	Sub type	Number of experts	Agreement	Rele	evance	Cla	arity
				I-CVI	KAPPA	I-CVI	KAPPA
	Q1	6	6	1	1	1	1
	Q2	6	6	1	1	1	1
Patient	Q3	6	6	1	1	1	1
Health	Q4	6	6	1	1	1	1
Questionnaire	Q5	6	6	1	1	1	1
(PHQ-9)	Q6	6	6	1	1	1	1
	Q7	6	5	0.833	0.816	1	1
	Q8	6	6	1	1	1	1
	Q9	6	5	1	1	0.833	0.816

Table 3: Relevancy and Clarity Agreement of the Instrument Items (SPAI-B)

Туре	Sub type	Number of experts	Agreement	Rele	evance	Cla	arity
				I-CVI	KAPPA	I-CVI	KAPPA
	Q1	6	6	1	1	1	1
	Q2	6	6	1	1	1	1
	Q3	6	6	1	1	1	1
	Q4	6	6	1	1	1	1
	Q5	6	6	1	1	1	1
Social Phobia	Q6	6	6	1	1	1	1
and Anxiety	Q7	6	6	1	1	1	1
Inventory –	Q8	6	6	1	1	1	1
Brief Form	Q9	6	6	1	1	1	1
(SPAI-B)	Q10	6	6	1	1	1	1
	Q11	6	5	0.833	0.816	0.833	0.816
	Q12	6	6	1	1	1	1
	Q13	6	6	1	1	1	1
	Q14	6	5	0.833	0.816	0.833	0.816
	Q15	6	6	1	1	1	1
	Q16	6	6	1	1	1	1

Table 4: Relevancy and Clarity Agreement of the Instrument Items (MSLSS)

Туре	Sub type	Number of experts	Agreement	Rele	evance	Cla	arity
				I-CVI	KAPPA	I-CVI	KAPPA
	Q1	6	6	1	1	1	1
	Q2	6	6	1	1	1	1
	Q3	6	6	1	1	1	1
	Q4	6	6	1	1	1	1
M-14: 1:	Q5	6	6	1	1	1	1
Multidimensional Students' Life	Q6	6	6	1	1	1	1
Satisfaction Scale	Q7	6	6	1	1	1	1
(MSLSS)	Q8	6	6	1	1	1	1
(MSLSS)	Q9	6	6	1	1	1	1
	Q10	6	5	0.833	0.816	0.833	0.816
	Q11	6	6	1	1	1	1
	Q12	6	6	1	1	1	1
	Q13	6	6	1	1	1	1
	Q14	6	6	1	1	1	1

Q15	6	6	1	1	1	1
Q16	6	6	1	1	1	1
Q17	6	6	1	1	1	1
Q18	6	6	1	1	1	1
Q19	6	6	1	1	1	1
Q20	6	5	0.833	0.816	0.833	0.816
Q21	6	6	1	1	1	1
Q22	6	6	1	1	1	1
Q23	6	6	1	1	1	1
Q24	6	6	1	1	1	1
Q25	6	6	1	1	1	1
Q26	6	6	1	1	1	1
Q27	6	6	1	1	1	1
Q28	6	6	1	1	1	1
Q29	6	6	1	1	1	1
Q30	6	5	0.833	0.816	0.833	0.816
Q31	6	6	1	1	1	1
Q32	6	6	1	1	1	1
Q33	6	6	1	1	1	1
Q34	6	6	1	1	1	1
Q35	6	6	1	1	1	1
Q36	6	6	1	1	1	1
Q37	6	6	1	1	1	1
Q38	6	6	1	1	1	1
Q39	6	6	1	1	1	1
 Q40	6	5	0.833	0.816	0.833	0.816

Table 5: Relevancy and Clarity Agreement of the Instrument Items (SCS)

Туре	Sub type	Number of experts	Agreement	Rele	evance	Cla	arity
				I-CVI	KAPPA	I-CVI	KAPPA
	Q1	6	6	1	1	1	1
	Q2	6	6	1	1	1	1
	Q3	6	6	1	1	1	1
Self-Confidence	Q4	6	6	1	1	1	1
Scale (SCS)	Q5	6	6	1	1	1	1
	Q6	6	6	1	1	1	1
	Q7	6	6	1	1	1	1
	Q8	6	6	1	1	1	1
	Q9	6	6	1	1	1	1

Q10	6	6	1	1	1	1
Q11	6	5	0.833	0.816	0.833	0.816
Q12	6	6	1	1	1	1
Q13	6	6	1	1	1	1
Q14	6	5	0.833	0.816	0.833	0.816
Q15	6	6	1	1	1	1
Q16	6	6	1	1	1	1
Q17	6	6	1	1	1	1

Table 6: Relevancy and Clarity Agreement of the Instrument Items (RSES)

Туре	Sub type	Number of experts	Agreement	Rele	evance	Cla	arity
				I-CVI	KAPPA	I-CVI	KAPPA
	Q1	6	6	1	1	1	1
ъ	Q2	6	6	1	1	1	1
	Q3	6	6	1	1	1	1
Rosenberg	Q4	6	6	1	1	1	1
Self-Esteem Scale	Q5	6	6	1	1	1	1
(RSES)	Q6	6	6	0.833	0.816	0.833	0.816
(RSES)	Q7	6	6	1	1	1	1
	Q8	6	6	1	1	1	1
	Q9	6	6	0.833	0.816	0.833	0.816
	Q10	6	6	1	1	1	1

Table 7: Relevancy and Clarity Agreement of the Instrument Items (PASE)

Туре	Sub type	Number of experts	Agreement	Rele	evance	Cla	urity
				I-CVI	KAPPA	I-CVI	KAPPA
	Q1	6	6	1	1	1	1
Dl	Q2	6	6	1	1	1	1
Physical	Q3	6	6	1	1	1	1
Activity	Q4	6	6	1	1	1	1
Self-Efficacy Scale (PASE)	Q5	6	6	1	1	1	1
Scale (I ASE)	Q6	6	6	1	1	1	1
	Q7	6	6	0.833	0.816	0.833	0.816
	Q8	6	6	1	1	1	1

Table 8: Relevancy and Clarity Agreement of the Instrument Items (Body Composition)

	Measurement	Number		Relevance		Clarity	
Sub type	Method	of experts	Agreement	I-CVI	KAPPA	I-CVI	KAPPA
zBMI	BIA Stable stadiometer	6	5	0.833	0.816	0.833	0.816
Body fat percentage	BIA	6	6	1	1	1	1
Waist to hip ratio	Tape ruler [Waist (cm) / hips (cm)]	6	6	1	1	1	1

Note: zBMI: Body Mass Index z-score; BIA: Bioelectrical Impedance Analysis; CM: centimetre.

Appendix L

Rating of Perceived Exertion Scale and Permission

1. Borg RPE Scale (English version)

Borg RPE Scale®

Use this scale to tell how strenuous and tiring the work feels to you. The exertion is mainly felt as fatigue in your muscles and as breathlessness or possibly aches. When the exercise is hard it also becomes difficult to talk. It is your own feeling of exertion that is important. Don't underestimate it, but don't overestimate it either. For common exercise, such as cycling, running or walking, 11-15 is a good level. For strength and high-intensity interval training (HIIT), 15-19 is good. If you are sick follow your doctor's advice. Look at the scale and the descriptions and then choose a number. Use whatever numbers you want, even numbers between the descriptions.

6	No exertion at all	No muscle fatigue, breathlessness or difficulty in breathing.
7 8	Extremely light	Very, very light.
9	Very light	Like walking slowly for a short while. Very easy to talk.
10		\$ 1000 CO
11	Light	Like a light exercise at your
12	Moderate	own pace.
13	Somewhat hard	Fairly strenuous and breathless. Not so easy to talk.
14		Heavy and strenuous. An upper
15	Hard	limit for fitness training, as when
16		running or walking fast.
17	Very hard	Very strenuous. You are very tired and breathless. Very difficult to talk.
18		and breathess. Very united to take
19	Extremely hard	The most strenuous effort you have ever experienced.
20	Maximal exertion	Maximal heaviness.

Borg RPE Scale® Ratings (R) of Perceived (P) Exertion (E). © Gunnar Borg, 1970, 1998, 2017 English

2. Borg RPE Scale (Chinese version)

博格 RPE 量表®

使用此量表来表示你因体力活动而感受的辛苦和疲劳程度。这种用力的感觉主要是肌肉疲劳、呼吸困难或可能疼痛。当动作强度高时,说话也会变得困难。最重要的是你自己的用力感觉。不要低估它,但也不要高估它。对于骑自行车、跑步或步行等普通运动,11-15是一个良好水平。对于力量和高强度间歇训练(HIIT)来说,15-19是良好状态。如果你生病了,请听从医生的建议。请看量表和说明,然后选择一个数字。使用任何你想要的数字,甚至是两个说明之间的数字。

完全不用力	无肌肉疲劳、喘不上气或呼吸困 难。
极轻	非常非常轻。
很轻	如同慢慢地走了片刻。非常容 易说话。
	30 00 Hz
轻	就像按自己的节奏而进行的轻 量运动。
适度	
有些困难	相当吃力,气喘吁吁。没那么好说话
困难	沉重而费力。健身训练的上限,如 快跑或快走。
	NA STATE OF THE ST
很困难	非常吃力。你非常疲惫,上气不接下气。很难开口说话。
极困难	你所经历过的最费劲的用力。
最大用力	最为沉重。
	极轻 很轻 轻

博格 RPE 量表®

感知(P)运动量(E)的评级(R)。 © Gunnar Borg, 1970, 1998, 2017

3. Borg RPE Scale Permission

BorgPerception AB | c/o Elisabet Borg | Hantverksvagen 81 | SE-184 32 Akersberga | Sweden

https://www.borgperception.se | info@borgperception.se | +46 (0)70 4063758

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Appendix M

Validation of Experts for Intervention Program

Dear Experts,

I am a PhD student in Physical Education at Universiti Putra Malaysia. My research

title is "Effects of Competitive Exergames on Body Composition, Psychosocial

Well-Being, and Self-Perceptions among Overweight and Obese Male Adolescents in

Fujian, China". As you have good theoretical and practical experience in your

professional field, I would like to invite you to participate in my research. Therefore, I

sincerely invite you as an expert to give your opinions and suggestions for my

research. All information you have entered will only be used for this study and not for

any other purpose. This content does not require a signature, and all information you

enter will be confidential. Please fill it out carefully.

Thank you for your help.

University Putra Malaysia

Supervisor committee: Prof. Dr. Soh Kim

Geok

Dr. Hazizi Abu Saad

1. Expert information

Name:	
Title	
Research Area:	
Work unit:	

2. Questionnaire information

The questionnaires are scored on a 4-point scale where 1 = not relevant, 2 = somewhat relevant, 3 = relevant, and 4 = highly relevant. Please rate the instrument for all variables on the appropriate scale and mark " \checkmark ". If you have any further comments or suggestions, please make notes, and indicate them.

Table 1: Evaluation of the effectiveness of the intervention program

Contents	Relevance				Cla	rity			
	4	3	2	1	4	3	2	1	Comments
Frequency									
Intensity									
Time									
Type of Games									
Selected									
Duration									
Risk									
Overall evaluation									
of the									

3. Competitive Exergames Training Intervention Information

This protocol summarizes previous research and literature in related fields and designs a unique Competitive Exergames training program in combination with the

characteristics of Exergames. Previous studies have shown that a six-week Exergame intervention can effectively improve the waist-to-hip ratio of overweight and obese children, although no significant difference was found in the BMI percentiles between the somatosensory game group, the traditional game group, and the control group (van Biljon et al., 2021). However, some studies have also pointed out that after eight weeks of Active video game training, the subjects showed significant improvements in triceps skinfold thickness, waist circumference, and BMI values, which were statistically different from before the intervention (Duman et al., 2016). Therefore, the intervention period of this study was set at eight weeks, with three intervention training sessions per week, each lasting 45 minutes, which was consistent with the length of regular physical education classes for middle school students, ensuring the training effect while avoiding interference with students' normal learning progress. The subjects were overweight and obese male middle school students aged 12 to 15 in China. The experimental site was set in schools, and all experimental activities were carried out under the supervision and guidance of physical education teachers and assistants to ensure the safety of students and the standardization of training.

This study set up three groups in total, using an experimental group-control group design, including two experimental groups: peer involvement in CE play (PICE) and single-player CE play (SPCE), and a control group that took regular physical education classes (RPEC). In terms of training content, the design concept of interactive fitness video games such as Wii Active was borrowed. This type of

Exergame uses a controller to achieve large muscle group movements of the upper or lower limbs (Chapman, 2022). Players need to hold the remote control or fix it on their legs, and the sensor and display device will synchronously feed back the movement to achieve whole-body exercise. Each training session covers aerobic exercise, upper and lower limb strength training, and sports confrontation games (Staiano et al., 2013), and the game difficulty is gradually increased according to the intervention process, so as to effectively control the intensity of exercise.

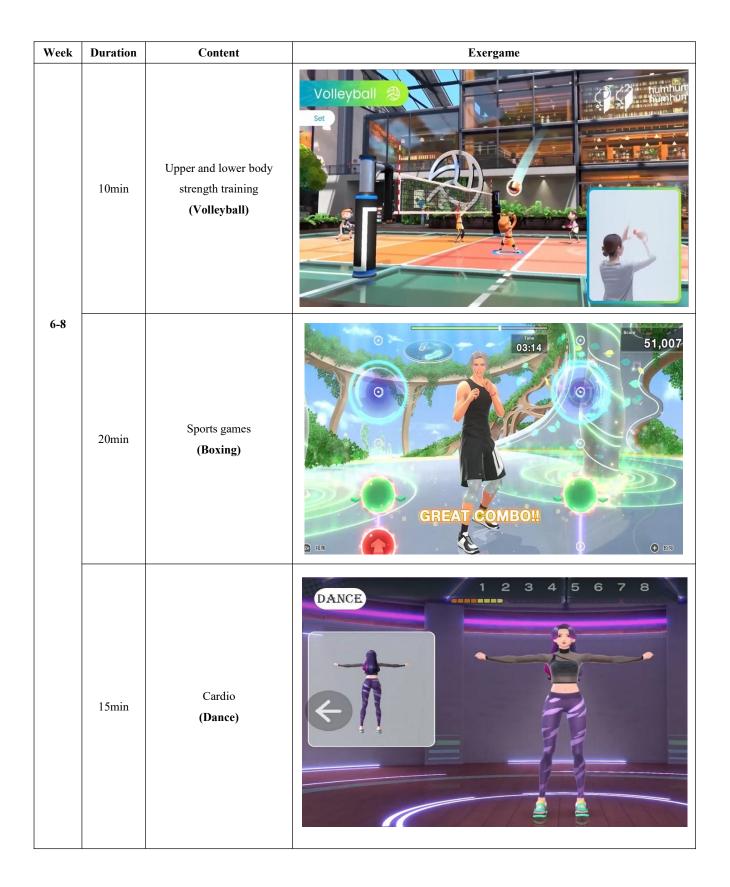
 Table 2. AVG Training Protocol (experimental group)

Week	Duration& Frequency	Intensity	Exercise	Contents
Week 1-2	3 times/week 45 minute	55-60% HRmax; RPE 11-12	10-minute upper and lower body strength training + 20-minute sports games + 15-minute cardio	Bowling + Table tennis + Fencing
Week 3-5	3 times/week 45 minute	60-70% HRmax RPE 12-13	10-minute upper and lower body strength training + 20-minute sports games + 15-minute cardio	Basketball + Tennis + Bicycling
Week 6-8	3 times/week 45 minute	70-75% HRmax RPE 13-14	10-minute upper and lower body strength training + 20-minute sports games + 15-minute cardio	Volleyball + Boxing + Dance

Competitive Exergames -- Nintendo Switch Sports

Week	Duration	Content	Exergame
	10min	Upper and lower body strength training (Bowling)	SPOCCO SQUARE SPOCCO SQUARE SPOCCO SQUARE SPOCCO SQUARE
1-2	20min	Sports games (Table tennis)	
	15min	Cardio (Fencing)	Chambara Charge Sword Charge Sword ZR

Week	Duration	Content	Exergame
	10min	Upper and lower body strength training (Basketball)	Basketball & San Control of the Cont
3-5	20min	Sports games (Tennis)	Tennis
	15min	Cardio (Cycling)	50 th



Appendix N

Validation of Experts for Instrument Contents

Dear Experts,

I am a PhD student in Physical Education at Universiti Putra Malaysia. My research

title is "Effects of Competitive Exergames on Body Composition, Psychosocial

Well-Being, and Self-Perceptions among Overweight and Obese Male Adolescents in

Fujian, China". As you have good theoretical and practical experience in your

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research. All information you have entered will only be used for this study and not for

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enter will be confidential. Please fill it out carefully.

Thank you for your help.

University Putra Malaysia

Supervisor committee: Prof. Dr. Soh Kim

Geok

Dr. Hazizi Abu Saad

1. Expert information

Name:	
Title	
Research Area:	
Work unit:	

2. Questionnaire information

The questionnaires are scored on a 4-point scale where 1 = not relevant, 2 = somewhat relevant, 3 = relevant, and 4 = highly relevant. Please rate the instrument for all variables on the appropriate scale and mark " \checkmark ". If you have any further comments or suggestions, please make notes, and indicate them.

Table 1: Evaluation of the Effectiveness of Instrument Contents

Туре	Sub-type	F	Relevance			Clarity				Suggestions
		4	3	2	1	4	3	2	1	
	Little interest or pleasure in doing things.									
	2. Feeling down, depressed, or hopeless.									
	3. Trouble falling or staying asleep, or									
	sleeping too much.									
	4. Feeling tired or having little energy.									
	5. Poor appetite or overeating.									
Patient Health Questionnaire-9	6. Feeling bad about yourself - or that you are									
(PHQ-9)	a failure or have let yourself or your family									
	down.									
	7. Trouble concentrating on things, such as reading the newspaper or									
	watching television.									
	8. Moving or speaking so slowly that other people									
	could have noticed? Or the opposite -being so									
	fidgety or restless that you have been moving									

around a lot more than usual.					
9. Thoughts that you					
would be better off dead					
or of hurting yourself in					
some way.					

Table 2: Evaluation of the Effectiveness of Instrument Contents

Туре	Sub-type	F	Relev	vano	ee		Cla	rity		Suggestions
		4	3	2	1	4	3	2	1	
	1. When I am the center of attention in social situations, I feel anxious.									
	2. In social situations, I get anxious if someone expects me to participate in something.									
	3. I feel anxious when giving a presentation in front of an audience.									
Social	4.I feel anxious when attending small gatherings.5. I feel anxious when									
Phobia and Anxiety	attending large gatherings. 6. When I disagree with									
Inventory Brief form (SPAI-B)	others, I feel anxious worried and not knowing what to do.									
	7. When discussing with others what intimacy is, I feeling anxious.									
	8. I feel anxious when I give advice to others consider.									
	9. When discussing work or study with others, I feel to anxiety.									
	10. When I approach someone or start a conversation with someone									

Sometimes, I feel anxious.					
11. When I am criticized or					
rejected, I feel anxiety.					
12. I try to avoid social					
situations.					
13. I feel anxious when					
entering an unfamiliar					
social situation.					
14. When I speak in a social					
situation, my voice is out of					
control.					
15. In certain social					
situations, I have strange					
thoughts, such as					
(1) I wish I could leave or					
escape all love conditions					
(2) If I mess up again, I will					
really					
Loss of self-confidence.					
(3) What impression have I					
left on others?					
(4) No matter what I say, it					
sounds stupid.					
16. I have had the following					
experiences in social					
situations:		1	ı		
(1) sweating					
(2) blush					
(2) 314011					
(3) tremble					
(4) Frequent urination					

Table 3: Evaluation of the Effectiveness of Instrument Contents

Туре	Sub-type	R	elev	vano	e		Cla	rity		Suggestions
		4	3	2	1	4	3	2	1	
	1.My friends are nice to me.									

	2.I am fun to be					
	around.					
	3.I feel bad at school.*					
	4.I have a bad time					
	with my friends.*					
	5. There are lots of					
	things I can do well.					
	6.I learn a lot at school.					
	7.I like spending time					
	with my parents.					
	8.My family is better	+				
	than most.					
Multidimensional		-				
Students' Life	9. There are many					
Satisfaction Scale	things about school I					
	don't like.*					
(MSLSS)	10.I think I am					
	good-looking.					
	11.My friends are					
	great.					
	12.My friends will help					
	me if I need it.					
	13.I wish I didn't have					
	to go to school.*					
	14.I like myself.					
	15.There are lots of fun					
	things to do where I					
	live.					
	16.My friends treat me					
	well.					
	17.Most people like					
	me.					
	18.My family gets					
	along well together.					
	19.I look forward to					
	going to school.					
	20.My parents treat me	1		\neg	\neg	
	fairly.					
	21.I enjoy being at	+				
	home with my family.					
	22.I like being in	+		\dashv	\dashv	
	school.					
	5511001.					

	23.My friends are mean
	to me.*
	24.I wish I had
	different friends.*
	25.School is
	interesting.
	26.I enjoy school
	activities.
	27.I wish I lived in a
	different house.*
	28.Members of my
	family talk nicely to
	one another.
	29.I have a lot of fun
	with my friends.
	30.My parents and I do
	fun things together.
	31.I like my
	neighborhood.
	32.I wish I lived
	somewhere else.*
	22.1
	33.I am a nice person.
	34.This town is filled
	with mean people.*
	35.I like to try new
	things.
	36.My family's house
	is nice.
	37.I like my neighbors.
-	38.I have enough
	friends.
	39.I wish there were
	different people in my
	neighborhood.*
	40.I like where I live.

Table 4: Evaluation of the Effectiveness of Instrument Contents

Type	Sub-type	R	Relev	vano	ce		Cla	rity		Suggestions
		4	3	2	1	4	3	2	1	
	1. I can generally achieve									
	the goals I set for myself.									
	2. I feel that my life is									
	positive and full of									
	energy.									
	3. As long as I try hard, I									
	can always find the									
	answer to a problem.									
	4. When classmates have									
	different opinions from									
	mine, I start to doubt									
	whether I am right.									
	5. I can face new									
	environments and									
	problems with ease and									
	confidence.									
	6. I feel that all my									
	classmates are not as									
	good as me.									
	7. Whatever I do, I feel									
	others do it better than									
	me.									
	8. I believe I can change									
	others' negative									
	impressions of me.									
Self-Confidence	9. Deep down, I look									
Scale	down on the people									
(SCS)	around me.									
	10. When someone says I									
	look nice today, I feel									
	uneasy and wonder if									
	they're joking.									
	11. It is hard for others to									
	change my point of view.									
	12. I am good at learning									
	new knowledge.									
	13. I believe I have the									
	ability to create a bright									

future.
14. I believe I can
achieve my goals as long
as I work hard.
15. If good friends break
up with me, I consider it
their loss.
16. I often feel like I'm a
failure.
17. Even the nicest
clothes don't look good
on me.

Table 5: Evaluation of the Effectiveness of Instrument Contents

Туре	Sub-type	R	Relev	vano	ee		Cla	rity		Suggestions
		4	3	2	1	4	3	2	1	
	On the whole, I am satisfied with myself. At times, I think I am									
	no good at all.									
	3. I feel that I have a number of good qualities.									
	4. I am able to do things as well as most other									
	people. 5.* I feel I do not have									
Rosenberg Self-Esteem	much to be proud of. 6.* I certainly feel									
Scale (RSES)	useless at times. 7. I feel that I'm a person									
	of worth, at least on an equal plane with others.									
	8.* I wish I could have more respect for myself.									
	9.* All in all, I am inclined to feel that I am a failure.									
	10. I take a positive attitude toward myself.									

Table 6: Evaluation of the Effectiveness of Instrument Contents

Туре	Sub-type	F	Relev	vano	e		Cla	rity		Suggestions
		4	3	2	1	4	3	2	1	
Rosenberg Self-Esteem Scale (RSES)	1. I exercise on most days of the week 2. I can ask my parents or other adults to exercise with me 3. Even if I can watch TV or play video games, I can still exercise in most of the free time of the week 4. Even if it's very hot or cold outdoors, I can still exercise on most of days of the week 5. I can ask my best friend to exercise with me for most of the days of the week 6. Even at home, I can still exercise. 7. I can exercise because I know how to exercise. 8. No matter how busy I am, I can still exercise in most of the free time of the week									

Table 7: Evaluation of the Effectiveness of Instrument Contents

Variables	Measurement Method	F	Relev	vano		Cla	rity		Suggestions	
		4	3	2	1	4	3	2	1	
Body Mass Index	Body composition									
z-score	analyzer (BIA) Stadiometer									

Waist to hip ratio	Tape ruler					
	Waist (cm) / hips					
	(cm)					
Body fat	Body composition					
percentage	analyzer (BIA)					

4. Instruments Information

The dependent variables in this study were Body Composition, Psychosocial Well-Being, and Self-Perceptions. Based on internationally recommended instruments. Body composition was measured using the Body Composition Analyser (BIA) and a tape measure. Psychosocial Well-Being (Depression, Social Anxiety, and Life Satisfaction)

were measured using the PHQ-9, SPAI-B, and MSLSS. Self-Perceptions (Self-Confidence, Self-Esteem, and PA Self-Efficacy) were measured using the SCS, RSES, and PASE.

Appendix O

Data Collection Process

Phase 1: Pre-intervention Phase									
Dogwiting participants	* Inclusion and exclusion criteria								
Recruiting participants	* Physical Activity Readiness Questionnaire (PAR-Q)								
	* Experimental group 1								
Cluster randomization	* Experimental group 2								
	* Control group								
	* Equipment installation								
	* Familiarity with specialised classrooms and CE								
Preliminary preparation	* Distribute training logs, attendance sheets, and game								
	instruction manuals								
	* Pilot study								
	* Body composition								
Pre-test (0 th week)	* Psychosocial Well-Being,								
	* Self-Perceptions								
Phase 2: Intervention Implem	entation Phase								
EG1:CE training with a peer	* PICE								
EG2: CE training alone	* SPCE								
CG: Regular training	* RPEC								
	* Body composition								
Post-test (8 th week)	* Psychosocial Well-Being,								
	* Self-Perceptions								

Appendix P

Training Protocol

Overview of Training Protocol

1. CE training Protocol (experimental group)

Week	Duration& Frequency	Intensity	Exercise	Contents
Week 1-2	3 times/week 45 minute	55-60% HRmax; RPE 11-12	10-minute upper and lower body strength training + 20-minute sports games + 15-minute cardio	Bowling + Table tennis + Fencing
Week 3-5	3 times/week 45 minute	60-70% HRmax RPE 12-13	10-minute upper and lower body strength training + 20-minute sports games + 15-minute cardio	Basketball + Tennis + Bicycling
Week 6-8	3 times/week 45 minute	70-75% HRmax RPE 13-14	10-minute upper and lower body strength training + 20-minute sports games + 15-minute cardio	Volleyball + Boxing + Dance

2. Regular Training Protocol (Control Group)

Week	Duration& Frequency	Intensity	Exercise	Contents
Week 1-2	3 times/week 45 minute	55-60% HRmax; RPE 11-12	10-minute warm-up + 20-minute sports activities + 15-minute cardio	Brisk walking + Jump rope + Jogging
Week 3-5	3 times/week 45 minute	60-70% HRmax RPE 12-13	10-minute warm-up + 20-minute sports activities + 15-minute cardio	Brisk walking + Jump rope + Easy running
Week 6-8	3 times/week 45 minute	70-75% HRmax RPE 13-14	10-minute warm-up + 20-minute sports activities + 15-minute cardio	Brisk walking + Jump rope + Running

3. Detailed training protocol

		EG	1 & EG2			CG									
Week	Exergame	Types of games/Time	Frequency	Time	Intensity	Exercise	Contents	Frequency	Time	Intensity					
	Bowling	UAL/10min			55-60%	Warm-up	Brisk walking /10min			55-60%					
1	Table tennis	SG/20min	3/wk	45min	HRmax RPE	Sports activities	Jump rope/20min	3/wk	45min	HRmax RPE					
	Fencing	CA/15min			11-12	Cardio	Jogging /15min			11-12					
	Bowling	UAL/10min			55 (00/	Warm-up	Brisk walking /10min			55-60%					
2	Table tennis	SG/20min	3/wk	45min	55-60% HRmax RPE	Sports activities	Jump rope/20min	3/wk	45min	HRmax RPE					
	Fencing	CA/15min			11-12	Cardio	Easy running /15min			11-12					
	Basketball	UAL/10min			60-70%	Golf	Brisk walking			60-70%					

					HRmax		/10min			HRmax
3	Tennis	SG/20min	3/wk	45min	RPE	Tennis	Jump rope/20min	3/wk	45min	RPE
	Bicycling	CA/15min			12-13	Bicycling	Easy running /15min			12-13
	Basketball	UAL/10min			60.700/	Golf	Brisk walking /10min			(0.700/
4	Tennis	SG/20min	3/wk	45min	60-70% HRmax RPE	Tennis	Jump rope/20min	3/wk	45min	60-70% HRmax RPE
	Bicycling	CA/15min			12-13	Bicycling	Easy running /15min			12-13
	Basketball	UAL/10min			60-70%	Golf	Brisk walking /10min			60-70%
5	Tennis	SG/20min	3/wk	45min	HRmax RPE	Tennis	Jump rope/20min	3/wk	45min	HRmax RPE
	Bicycling	CA/15min			12-13	Bicycling	Easy running /15min			12-13
	Volleyball	UAL/10min			70-75%	Basketball	Brisk walking /10min			70-75%
6	Boxing	SG/20min	3/wk	45min	HRmax RPE	Boxing	Jump rope/20min	3/wk	45min	HRmax RPE
	Dance	CA/15min			13-14	Dance	Running /15min			13-14

	Volleyball	UAL/10min			70.750/	Basketball	Brisk walking /10min			70.750/
7	Boxing	SG/20min	3/wk	45min	70-75% HRmax RPE	Boxing	Jump rope/20min	3/wk	45min	70-75% HRmax RPE
	Dance	CA/15min			13-14	Dance	Running /15min			13-14
	Volleyball	UAL/10min			70.750/	Basketball	Brisk walking /10min			70.750/
8	Boxing	SG/20min	3/wk	45min	70-75% HRmax RPE	Boxing	Jump rope/20min	3/wk	45min	70-75% HRmax
	Dance	CA/15min			13-14	Dance	Running /15min			13-14

NOTE: UAL: upper and lower body strength training; SG: sports games; CA: cardio; EG1: peer involvement in Competitive Exergames; EG2: single-player Competitive Exergames; CG: regular physical education class; 3/wk: 3 times/week.

Appendix Q

Training logs and Training Attendance Sheets

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(1) Physical Education Teacher Name:	Telephone Number:
(2) Physical Education Teacher Name:	Telephone Number:
If the participant has completed the prescribed training	g content, please tick " \checkmark " in the form; if not, please tick " x " in the form and record the
reason.	

Table1. Training Log

Number Name		V	Week 1			Week 2		Week 3		Week 4		Week 5		Week 6		6	Week 7			Week 8					
Number Name	1	2	3	1	2	3	1	2	3	1	2	3	1	2	3	1	2	3	1	2	3	1	2	3	
1																									
2																									
3																									
4																									
5																									
6																									
7																									
8																									

2. Training Attendance Sheets

(1) Research Assistant Name:	Telephone Number:
(2) Research Assistant Name:	Telephone Number:

If the participant has completed the prescribed training content, please tick " $\sqrt{}$ " in the form; if not, please tick "x" in the form and record the reason.

Table2. Training Attendance Sheets

Number Nome		Week 1			Week 2		V	Week 3		Week 4		Week 5		Week 6		6	Week 7			Week 8		8			
Number	Name	1	2	3	1	2	3	1	2	3	1	2	3	1	2	3	1	2	3	1	2	3	1	2	3
1																									
2																									
3																									
4																									
5																									
6																									
7																									
8															·										

Appendix R

Dietary Record Sheet

Dietary Information Record Form

(1) Research Assistant Name:	Telephone Number:	
(2) Research Assistant Name:	Telephone Number: _	

Record participants' weekly energy intake (Kcal).

Number	Name	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6	Week 7	Week 8
1									
2									
3									
4									
5									
6									
7									
8									