

Adaptive Virtual Reality Exergame: Promoting Physical Activity Among Workers

ABSTRACT

This work presents a Virtual Reality (VR) Exergame application designed to prevent Work Related Musculoskeletal Disorders (WMSDs). Moreover, to help adapt the tasks of the exergame, a machine learning model that predicts users' exercise intensity level is presented. WMSDs are an important issue that can have a direct economic impact to an organization. Exercise and stretching is one method that can benefit workers and help prevent WMSDs. While several applications have been developed to prevent WMSDs, most of them suffer from a lack of immersivity or they just focus on education and not necessarily on helping workers warm up or stretch. In light of this, an Exergame application that leverages VR and Depth-sensor technology to help provide users with an immersive first-person experience that engage them in physical activities is introduced in this work. The objective of the Exergame is to motivate users to perform full-body movements in order to pass through a series of obstacles. While in the game, users can visualize their motions by controlling the virtual avatar with their body movements. It is expected that this immersivity will motivate and encourage the users. Initial findings show the positive effects that the base exergame has on individuals' motivation and physical activity. The results indicate that the application was able to engage individuals in low-intensity exercises that produced significant and consistent increases in their heart rate. Lastly, the results show that the machine learning model predicted users' exercise activity level with an accuracy of 76.67%.

INTRODUCTION

Work Related Musculoskeletal Disorders (WMSDs) are a type of physical ailment that hinder workers from performing their job properly. These injuries can consist of sprains, strains, tears, as well as back pain; all induced from repetitive or labor-intensive

27 tasks. WMSDs account for nearly 130 million healthcare visits annually [1], and for 28%
28 of injuries and illnesses that create days away from work from the employee [2].
29 Therefore, WMSDs can have a direct economic impact on a company and society due to
30 loss of productivity and increased costs.

31 One way to reduce WMSDs is to instill safer work practices and redesign
32 methods of completing tasks [3]. This is something reliant on the employer to instill
33 within the workplace and have the employees follow. Another approach to reducing
34 WMSDs is to incentivize workers to proactively exercise and stretch their muscles to
35 prevent tension buildup [3,4]. These exercises can be completed before, during, or after
36 the workday for the benefits of warming up, stretching out, and relaxing respectively
37 [4]. This can be completed in addition to safer work practices and be done during the
38 employees' own time. However, a limitation of this approach is motivating and engaging
39 workers to perform these activities. Hence, a potential solution would be to make
40 exercises and stretching activities more engaging to workers, for example with the use
41 of Exergames.

42 Exergames are beneficial games for promoting exercise and physical activities.
43 These applications turn a sedentary activity into one that can benefit the user through a
44 more involved one [5]. They can help make exercising fun and enjoyable. Studies have
45 shown that exergames can promote better self-efficacy, positive engagement,
46 enjoyment, stress management, and reduce depressive symptoms compared to
47 traditional machine exercise [6]. However, most exergames have been developed with
48 the general consumer in mind [7,8]. These exergames are not focused specifically to

49 address WMSD issues and might not benefit workers using them. In addition, most of
50 these exergames follow a “one-size-fits-all” design approach, which does not take into
51 consideration individuals' unique differences [9,10]. However, customization and
52 adaptation are an important part of exercise engagement relating to WMSDs. More
53 importantly, most existing exergames lack immersivity that can engage the user to
54 continue using the application and promoting physical activities [8]. Leveraging Virtual
55 Reality (VR) technology could help improve the engagement and immersive factor of
56 exergames that aim to promote healthy practices relating to WMSDs.

57 VR allows the user to be immersed within the virtual environment. Interactivity
58 and telepresence have a significant role in immersing a user when using VR. This
59 immersivity then contributes to the overall satisfaction of the user when engaging in the
60 virtual world [11]. These satisfaction factors emerging from VR relate to the enjoyment
61 of users when playing a VR game. When looking at VR headsets compared to the
62 alternative of screen use, studies have shown that VR is beneficial for immersivity and
63 motivation of exercising [12]. These studies show the effectiveness of VR on increasing
64 motivation and enjoyment as well as when combined with exergames [11,12]. However,
65 many of the existing exergame studies focus on basic exercise or rehabilitation and
66 many do not leverage VR technologies. Standard exergames lack the immersivity that
67 VR can provide to improve motivation for completing exercise daily. VR could play an
68 important role in helping promote exercise through exergames to mitigate the stress
69 put on muscles when completing repetitive or labor-intensive tasks.

70 In order to fully engage the player or have them receive the best exercise tasks
71 for them, customization and adaptation are important. Users would differ based on
72 fitness level or how they are motivated in comparison to others who engage with the
73 exergame. Moreover, users could find different aspects of the game beneficial or
74 detrimental based on their personality characteristics [13]. Utilizing an adaptive
75 approach to exergame customization could also be beneficial when tailoring how the
76 user will play the game [10]. Therefore, adaptation and customization through machine
77 learning could be a method that benefits the user when playing an exergame.

78 This study presents an Exergame application that leverages VR and Depth-sensor
79 technology for the prevention of WMSDs. Moreover, a machine learning model to
80 predict users' exercise intensity level is introduced with the objective to help adapt the
81 physical tasks of the application to the user. The results of an initial usability test
82 indicate that the exergame was able to engage individuals in low-intensity exercises that
83 produced significant and consistent increases in their heart rate. This engagement in
84 physical activity would help motivate workers to do warming up and stretching activities
85 to help reduce WMDs. Similarly, the results show that the machine learning model
86 achieved a prediction accuracy of 76.67% and that a model that takes into consideration
87 unique user data, outperforms a general model that does not take into consideration
88 user data. The content of this paper is based on the paper: *Virtual Reality Exergames:
89 Promoting Physical Health Among Industry Workers* (DETC2021-67608), presented at
90 the ASME CIE 2021 conference [14].

91

92 **LITERARY REVIEW**

93 The most common practice of preventing WMSDs comes from teaching how to
94 complete the task differently [15,16]. The Centers for Disease Control and Prevention
95 (CDC) of the USA offers tips and information on how to mitigate the strain on muscles
96 through improved ergonomics [15]. This would be beneficial to workers; however, the
97 employer would need to take action and purchase the equipment required to complete
98 the job more safely. Similarly, the World Health Organization (WHO) outlines many
99 methods of completing tasks in a safer manner. WHO explains why different repetitive
100 or strenuous activities are detrimental and how to complete them differently [17].

101 These follow the lines of the CDC in putting a focus on the teaching aspect in WMSD
102 mitigation. However, this relies heavily on employer teaching and employee learning.

103 Job rotation is another method for WMSD prevention. Rather than changing the
104 method in which the worker is completing the task, the worker could rotate through
105 different jobs alleviating the repetitiveness of that task [3]. Although recommended, a
106 study conducted to determine how much job rotation affected WMSD prevalence
107 showed that this method did not reduce the number of lost working hours due to sick
108 leave or the prevalence of musculoskeletal problems [18]. These suggestions and tips on
109 WMSD mitigation focus heavily on intervention from the employer through large
110 technology purchases or workplace practices. However, workers should be proactive
111 and motivated to prevent WMSDs for themselves by warming up, stretching out, and
112 relaxing before and after the job.

113

114 **Exergames**

115 An alternative to traditional exercise comes in the form of exergames. Exergames
116 help promotes exercise through video games and can promote users who would not
117 normally exercise. They can come in the form of specialized gym equipment or just a
118 video game that can be played at home [7,19]. One of the most popular Nintendo
119 Switch™ titles is an exergame; Ring Fit Adventure™ is ranked 12 in Switch sales, at 5.84
120 million units sold [20]. Through various forms of physical activity, a user's heart rate can
121 increase, allowing the user to burn more calories in a session [21]. Exergames can
122 provide a boost in heart rate activity through movements and increased engagement
123 [22]. One exergame developed focusing on full-body exercise demonstrated a boost in
124 heart rate and energy expenditure in users compared to market exergames [8]. This
125 boost in heart rate and energy expenditure would differ based on a user's age, physical
126 fitness, and other defining factors [23].

127 One method being used for exergames relates to rehabilitation, as games are
128 motivating for those who need to complete physical rehabilitation. One such application
129 focuses on arm rehabilitation through multiple games related to arm and hand
130 activities. The participants in the study reported enjoying playing the games and some
131 stated that they would buy this for themselves at home [24]. Exergames leverage the
132 use of game design elements to motivate and engage users to perform physical tasks
133 that otherwise they would have not found as enjoyable. However, studies have shown
134 that individuals' preferences for game elements differ [25]. Hence, different elements
135 might motivate users to perform better or worse depending on underlying individual

136 characteristics, like player type and game element preferences [13]. Another important
137 factor that has been shown to influence individuals' performance in exergames is the
138 complexity of the physical tasks itself. The more complex the task is, the more
139 motivated the individual needs to be in order to perform it [26].

140 In addition to game element customization, focus on the exertion of the user when
141 playing the game has been looked at. Customization and adaptation have been utilized
142 to provide a more in-depth exergame experience for users in various studies through
143 static (before game, customization) and dynamic (during game, adaptation) measures.
144 These can be utilized to abide by a given user's exercise plan or change the difficulty of
145 the game based on how much exertion is being used [27,28]. Compared to static
146 measures, adaptation within an exergame can help tailor the user's experience while
147 playing the game, retaining the immersion. Dynamic measures could leverage a machine
148 learning to help adapt to the user's exertion and how well they are completing the game
149 [28,29]. By tailoring the exergame to a user's need or wants, they can become more
150 engaged with the experience and want to play or exercise more [30]. This also relates to
151 the notion that different people would have different heart rates based on individual
152 characteristics [23,31]. The users would need a method of tailored exercise in order to
153 receive the maximum benefits they could out of the exergame without going overboard.

154 Given individual differences and task complexity, there is a potential that exergames
155 that follow a "one-size-fits-all" design approach, might not motivate its user to perform
156 certain physical tasks. For example, a study examining older adults' responses to an
157 exergame that required individuals to use full-body motion to interact with an avatar

158 demonstrated negative effects on engagement [32]. When playing the game on a
159 screen, it was not obvious for participants the direction to move in order to complete
160 the objective. Participants also reported a disconnect with the avatar indicating in
161 comments that thought the avatar did not move with their body. Therefore, exergames
162 could overcome issues of engagement by leveraging VR and machine learning
163 technology to provide a better first-person experience, as well as introducing adaptation
164 mechanics.

165

166 **Virtual Reality and Exergames**

167 Taking exercise into the virtual world can improve the willingness of people to
168 proactively do physical activity as well as benefit the heart rate of those who complete
169 tasks [12,22,33,34]. In a study examining users' heart rate while playing exergames, the
170 immersivity of the game played a role when comparing the heart rate after playing the
171 game in VR versus a regular screen. A volleyball full-body exergame increased the user's
172 average heart rate by 3 beat-per-minute (bpm) compared to the flat-screen version of
173 the same application. Similarly, when comparing the volleyball full-body exergame
174 versus an archery game that only works the upper body, users experience an increase of
175 10 bpm on their average heart rate [33]. Participants who engaged with the VR game
176 felt that it was extremely beneficial in immersing the user and visualizing motion when
177 completing tasks. This immersivity then translated to users moving their hands and arms
178 larger distances compared to the flat screen [33]. Another study determined the same
179 notion that utilizing a VR can benefit a user's experience when exercising. The

180 participants within the study commented on the immersivity, fun, and convenience of
181 the VR application [12]. These studies demonstrate how VR can be used for exercise,
182 however, it is not applied in a way that could benefit those with WMSDs. An exergame
183 based around running might be beneficial for exercise purposes, nevertheless, it might
184 not stretch areas of the lower back or upper body where WMSDs are
185 prevalent. Stretching can be beneficial in order to reduce muscle strain and circulation
186 [3]. An exergame that focuses directly on WMSDs and full-body motion would be ideal
187 for prevention.

188 A study that introduced a VR exergame application for reducing lumbar flexion,
189 demonstrates the benefits of providing a VR experience. It reported that users were
190 motivated to complete tasks in a fun engaging way. The results of this study
191 demonstrated that participant's lumbar flexion was improved over multiple gameplay
192 sessions [35]. Unfortunately, these games are not tailored to specific muscles or areas of
193 the body most affected by WMSDs, nor to specific users. Nevertheless, these exercise
194 studies support that through targeted exercises, a VR application could motivate and
195 benefit a user in the prevention of WMSD.

196

197 **VR Exergames for WMSDs**

198 One of the few studies that leveraged VR and games for WMSDs mitigation was
199 presented by Sisto et al [16]. They introduced a VR game application that focuses on
200 WMSD education. In their game, the user is scored based on how well they move their
201 body when completing tasks. The intent is focused on providing the user with data on

202 what muscles need to be moved differently when completing the tasks to alleviate the
203 WMSD risks [16]. The teaching of how to move is very beneficial to WMSD prevention,
204 however it requires the user to retain that knowledge when in the workplace.
205 Unfortunately, knowledge retention over time can result in more incorrect choices [36].
206 In this case, it may be hard for the user to remember exactly how to move without
207 being in the game. Unless the game was tailored to the exact job that was needed to be
208 completed it does not provide a similar enough experience to the vast number of tasks
209 an industry worker might need to complete. Even then, that could create muscle strain
210 if the user needed to repeat the same task after not completing the level. Another study
211 looking at real-time feedback for construction ergonomics utilizes teaching methods
212 through analysis of user movement with the Kinect depth sensor [37]. This falls into the
213 same potential drawback of knowledge retention without having the device to watch
214 every move a construction worker makes. Strengthening muscles and warming up is a
215 key part of WMSD mitigation [4], which is not reflected in these previous studies.

216 One other area looked at for prevention of WMSDs was ergonomics and the working
217 environment. These two factors can contribute to WMSDs through poor working
218 conditions and not performing tasks properly [15,17]. Two studies utilizing VR looked at
219 a user's movement in a work environment [38,39]. VR is used in a way that simulates
220 the work environment and allows for easy immersion and creates a similar experience
221 to how the real experience would be. However, this solution directly involves changing
222 the way the workspace is laid out or constructed. This solution would not be self-

223 motivated, rather the employer would need to be motivated to invest the time and
224 money to change how the workspace is set up.

225 Table 1 shows a summary of existing exergames and WMSD prevention methods.
226 One key takeaway from the table is the gap that exists in WMSD focused exergames.
227 Many studies examine games as they relate to basic physical activity, however only one
228 relates to WMSD prevention through education and VR. WMSD and ergonomics-focused
229 VR efforts do not allow for the user to participate in an exergame and rely on the
230 employer to change the workspace. The basic physical activities are not suitable for
231 WMSD prevention, and an educational game requires good knowledge retention on
232 how to move for specific jobs. Moreover, the others preventative methods do not
233 incorporate VR or exergames at all, thus only educating the user on what to do and not
234 helping them complete it nor engaging the user. This does not motivate the individual
235 worker to practice WMSD prevention and is heavily reliant on employer intervention.

236 The one VR WMSD focused application takes the educational approach, which
237 does not benefit the user's stretching or warming up. It also requires the user to retain
238 knowledge on how to move when completing these tasks. Looking at the benefits that
239 exergames and VR can bring to WMSD prevention, this work introduces a method that
240 focuses on motivating the user to complete stretches and exercise through a VR
241 exergame. The method incorporates an engaging first-person VR experience with the
242 goal to motivate users to play the exergame. Moreover, a machine learning model is
243 also introduced with the intention to help adapt the application with the objective to
244 further improve a user's experience. An immersive adaptive VR exergame that

245 encourages stretching and exercise could help lower the prevalence of WMSDs in
246 working adults. The developed VR exergame allows players to stretch and exercise in
247 order to succeed within the game. The immersivity, body interaction, and adaptation
248 options from this exergame could play a key role in promoting WMSD prevention by
249 motivating its user to stretch and warm up.

250

251 **MATERIALS AND METHOD**

252 **Exergame Gameplay**

253 The main focus of the exergame is to motivate full-body movements to promote
254 exercise and stretching. This is done with diverse obstacles continuously moving
255 towards the player. The player needs to stretch and move his/her body in different ways
256 to fit through the obstacles. Figure 1 illustrates some of the obstacles the player will
257 encounter and how the user will use their body to navigate them. The player is then
258 scored based on how well they fit through the obstacle; higher scores come from not
259 touching the obstacle when moving past them. This scoring method encourages users to
260 continue playing to achieve higher scores, thus allowing more time to stretch, exercise,
261 and relax their muscles to prevent WMSDs. The Unity3D game engine
262 (www.unity3d.com) was used to develop the exergame and integrate the hardware
263 components (see *Hardware Integration* section). 3D models for the avatar and gym
264 pieces were imported to make the scene more realistic and immersive.

265 Figure 2 shows an aerial, non-first-person view of the play space with all added 3D
266 models and the menu of the game. A key aspect of the game development were the

267 collision boxes added to the different 3D models. These were added to the avatar,
268 obstacles, coins, as well as menu buttons to allow the users to interact with the
269 application using their body with the help of a depth sensor. The collision boxes will
270 trigger a signal when two collide and can perform functions such as counting how much
271 of the avatar body is hitting the obstacle or allow the user to press the buttons within
272 the menu with their hand, as shown in Fig. 3. Immersivity plays a key role with the
273 buttons. By allowing the user to press the in-game buttons with only their hands, it
274 removes the need for an external controller which could break the immersion. Unity's
275 voice recognition package is also used to recognize letters that can then be input into
276 the username. This alleviates the need for a keyboard which could also hinder
277 immersion.

278 Some game elements that were added to the exergame were the coin collection,
279 achievements, and leaderboard. These elements could help promote physical activity
280 within the game [40]. The coins could be collected through the duration of the game,
281 placed in areas the player would need to stretch to in order to collect. Collecting enough
282 allows the user to unlock a tropical beach background to play in on the second level of
283 the application, which serves as an incentive to collect the coins. The achievements
284 were given after completing certain tasks, such as passing 5 obstacles in a row. When
285 the user completes one of these achievements a small window pops up in the game to
286 notify the player that they have completed an achievement. The menu navigation,
287 depicted in Fig. 4, allows the user to view the achievements before and after the game.
288 The leaderboard could be used to promote competition with players who utilize the

289 game or just to achieve a high score compared to set values. This can be viewed before
290 or after playing the game as well. Each of these promotes some form of collection,
291 achievement or competition that the user can work towards when playing the
292 exergame. These game elements can be toggled on and off for the user to provide the
293 best experience by allowing users to customize their game experience.

294

295 **Hardware Integration**

296 The Oculus Rift™ VR headset and the Microsoft Kinect™ depth sensor were chosen
297 to provide an immersive full-body VR experience. Both of these hardware are integrated
298 with the game that was developed using the Unity 3D game engine. This exergame
299 utilizes the Kinect's full-body tracking to allow the user to interact with the game using
300 their body. The Microsoft Kinect™ SDK 2.0 and Microsoft Kinect Studio are used to track
301 user motion and translate it into the avatar motion in the exergame. This enables the
302 avatar to mimic player motions and encourage exercise through full-body motion and
303 stretching to fit through the obstacles that gradually come at them. The Kinect was used
304 since previous studies show that it provides good accuracy for upper body tracking and
305 allows for manipulation of the in-game avatar [41]. Fig. 5 shows the keypoints the Kinect
306 tracks from the users' body, which are translated into the avatar for the exergame.

307 The utilization of the Oculus Rift™ allows for this immersive game experience to
308 engage the player. Unity utilizes its own XR package to display the game on an HMD and
309 the Oculus Integration package to link with the device. To create the most immersive
310 experience, the user's view is from within the avatar's head (see Fig. 6). This in

311 combination with the Kinect body tracking, has the potential to enhance the feeling of
312 being physically present in the simulated environment (i.e., first-person experience).
313 The avatar's body acts as the player's body; the user can see all of the body parts match
314 when maneuvering within the virtual world. The immersion is also improved when the
315 users can visualize how their body fits through the obstacles by seeing the avatar's arms
316 and legs. This immersion is important because studies have shown that it can engage
317 the user and creates satisfaction, leading them to want to continue playing [11,33].
318 Depicted in Fig. 6 is a demonstration of a user observing the correlation of motion
319 between the avatar and their own body. The Kinect allows for the translation of motion
320 to the game world and the Oculus creates immersion through the HMD. Fig. 6 also
321 exemplifies the connections between the hardware and gameplay enable by the Unity
322 game engine.

323

324 **Predictive Model**

325 The objective of the proposed machine learning model is to predict users'
326 exercise intensity level based on the movement required to pass through an obstacle.
327 This with the intention to help adapt the application by presenting the right set of
328 obstacles that will help maintain a desired exercise level. Given the heterogeneity of
329 individuals (e.g., physical fitness, age) this work proposes the use of an *adaptive-*
330 *individual-task* model, similar to previous studies [29]. This model uses input data
331 pertaining to the task, as well as to the individual. Moreover, the training data used to
332 generate the model is updated every time new data from an individual of interest is

333 acquired. This online learning (i.e., adaptive) approach helps to improve the model's
334 prediction accuracy and account for variations across individuals as more data is
335 acquired when the user plays the exergame.

336 Specifically, to predict the exercise intensity level of an individual after a given
337 obstacle, the model uses as predictor the total movement, average acceleration, and
338 average velocity of the individual's joints tracked by the Kinect on the previous and
339 current obstacle, score achieved on the previous obstacle, coins collected on the
340 obstacles, as well as individual and obstacle identifier data. Since the model requires
341 data from a previous obstacle, the model is first trained with a dataset of a general
342 population of individuals (i.e., no individual identifier). Then, as new data of an
343 individual of interest is acquired, the training set is updated, and the model is re-trained.
344 This online learning approach allows mitigation of the "cold start" problem.

345 In this work, multiple machine learning algorithms are implemented to test their
346 capability to generate a model that can accurately predict an individual's exercise
347 intensity level. Specifically, in this work, a Logistic Regression, Naïve Bayesian, Support
348 Vector Machines, Random Forest, and a Neural Network classification algorithms are
349 implemented. These algorithms were selected since they have different underlying
350 processes for generating classification models and are frequently used in the literature
351 [42]. The performance of these algorithms is evaluated using a 10-fold cross-validation
352 approach. Moreover, to simulate the scenario in which new data of an individual of
353 interest is acquired, and the model is re-trained, an iterative online evaluation approach
354 is implemented. For this approach, the same testing sets are used in each of the

355 instances to maintain consistency between the iterations of the procedure. Therefore,
356 in each of the instances, the data pertaining to an individual is randomly partitioned into
357 a 70/30 training and testing sets. In the first iteration, the training set of the model is
358 composed of a set that does not contain data of the individual of interest . Hence, in this
359 first iteration, the training and testing sets are person independent, which produces a
360 general model. In the subsequent iterations, an extra tuple containing information
361 about the individual of interest is randomly added to the training set. This procedure is
362 followed for all the individuals in the dataset.

363

364 **RESULTS AND DISCUSSION**

365 In order to test the capability of the VR exergame to promote stretching and light
366 exercise (i.e., warming up), as well as the capability of the proposed machine learning
367 model to predict an individual's exercise intensity level, an experiment in which
368 participants interacted with the exergame was conducted. The exergame requires
369 participants to perform full-body motions to pass through 18 different obstacles per
370 level. Participants interact with the application for two levels. During the first level, they
371 were given the option to collect coins in order to unlock a new background for the
372 second level. While the participants in this experiment interacted with the non-VR
373 version of the exergame, the findings of this study can help support the capability of this
374 type of exergame application to promote light exercise (i.e., warming up) and stretching,
375 which are key in the prevention of WMDs.

376 A total of 15 participants took part in this experiment, in which their heart rate was
377 captured before and during their interaction with the application. Participants' age
378 ranged from 19 to 26 years of age ($M=22$, $SD= 2.17$). A wireless heart rate monitor was
379 used to avoid interferences while interacting with the exergame. The heart rate
380 monitor's accuracy was validated before the experiment by taking a manual
381 measurement of participants' heart rate.

382

383 **Exercise Intensity Results**

384 Before interacting with the application, participants were requested to relax for 5
385 minutes in a dimmed room with nature music in the background. This was done in order
386 to get an estimate of the participants' heart rate at resting condition
387 ($HR_{resting}$). Participants' maximum heart rate (HR_{max}) was estimated using the
388 formula $HR_{max}=220-Age$. This is a well-known and used formula to approximate
389 maximum heart rate in healthy individuals [43–45]. With participants' HR_{max} and
390 $HR_{resting}$, their heart rate reserve was estimated ($HR_{reserve} = HR_{max}-HR_{resting}$). Subsequently,
391 the $HR_{reserve}$ of participants was used to estimate their exercise intensity level following
392 the American College of Sports Medicine guidelines [46]. Table 2 shows the statistics of
393 how long participants lasted in each of the different exercise intensity levels during their
394 interaction with the application, which lasted 300 sec (5 mins). From these results, it is
395 clear that the exergame application incentivized participants to perform light physical
396 activity since, on average, participants spend 90% of the time (i.e., 271.3 sec/ 4.5mins)
397 in the *Very Light* or *Light* exercise intensity zones. These zones relate to warming up and

398 weight control zones respectively. These findings support the capability of the exergame
399 application to engage individuals in physical activity to warm up and stretch.

400 The exercise intensity achieved by an individual after performing a physical task
401 depends on both the physical fitness of the individual as well as the complexity of the
402 task itself. Tasks that require more rapid movements will result in higher energy
403 expenditure which would directly increase an individual's heart rate [47]. This is
404 supported by the results that indicate a positive correlation between participant's
405 average heart rate per obstacle and the total distance moved ($\rho=0.18$, $p\text{-value}<0.001$),
406 as well as the average acceleration ($\rho=0.34$, $p\text{-value}<0.001$) and average velocity
407 ($\rho=0.34$, $p\text{-value}<0.001$) of all their joints tracked by the Kinect before each obstacle.

408

409 **Predictive Model Results**

410 The results of the 10-fold cross-validation indicate that the Support Vector Machine
411 (SVM) algorithm generated the model with the largest average accuracy ($M=0.7667$,
412 $95\%CI=[0.7287-0.8017]$). Figure 8 shows a summary of the accuracy results of the 10-
413 fold cross-validation benchmark analysis. From this figure, it is clear that all the
414 algorithms, with the exception of the Naïve-Bayesian, generated a model that had an
415 accuracy greater than the non-information rate of 0.6372 (red dotted line in Fig. 8).
416 Moreover, while the SVM has on average the largest accuracy, this was not statistically
417 significantly different than the accuracy of the model generated with the Logistic
418 Regression (LR), Random Forest (RF), and Neural Network (NN). These findings indicate

419 that a machine learning model can accurately predict the exercise intensity level of
420 individuals prior to completing an obstacle.

421 For completeness and to assess the value of considering individual's information,
422 the proposed model was benchmarked against a model that does not consider an
423 individual's identifier data (i.e., general model). This benchmark analysis was performed
424 using the SVM algorithm and a 10-fold cross-validation approach. The results show that
425 this general model only achieved an average accuracy of 0.6630 (95%CI=[0.6214-
426 0.7028]), which was statistically significantly lower than the *individuals-task* model's
427 accuracy and not statistically significantly different than the non-information rate. This
428 indicates the value of considering an individual's information, given the heterogeneity of
429 users. When looking at the importance of the features, the features with the largest
430 weight were the average acceleration and average velocity of all the joints on the
431 previous and current obstacle. These findings are in line with the previous results, that
432 show a positive correlation between these independent variables and individuals' heart
433 rate. These findings support the value of considering individuals' movement information
434 to predict their exercise intensity level.

435 Similarly, to test the performance of the proposed machine learning model as new
436 data of an individual of interest is acquired and the model is re-trained, an iterative
437 online evaluation approach is implemented. Since there were 36 data points per
438 participant (i.e., 18 obstacles by 2 levels) and a 70/30 training and testing partition was
439 used, 11 obstacles per participant were randomly assigned to a testing set, while 25
440 obstacles were assigned to a training set. This iterative approach had a total of 26

441 iterations per participant. The first iteration used a general model to predict a
442 participant's exercise intensity level on the testing set (i.e., model trained with no data
443 from the individual of interest). The model was subsequently re-trained with a new data
444 point of the individual of interest until all the training set was used to train the
445 individual-task model on the 26th iteration. Figure 7 shows the average accuracy of the
446 model as new data of an individual of interest is acquired and the model is re-trained.
447 On the 1st iteration, where the general model was training, an accuracy of only 0.60
448 (95%CI=[0.5209,0.6753]) was achieved, while in the 26th iteration, the individual-task
449 model shows an accuracy of 0.7212 (95%CI=[0.6462,0.7881]). Moreover, the results
450 show a significantly positive correlation between the accuracy and the iterations
451 ($\rho=0.8738$, $p\text{-value}<0.001$), indicating that the model accuracy improves as more data of
452 an individual of interest is provided. These results show the capability of the *adaptive-*
453 *individuals-task* model to accurately predict an individual exercise intensity level as the
454 user interact with the exergame.

455

456 **Usability Results**

457 Finally, after interacting with the exergame, participants were asked to complete a
458 short post-experiment questionnaire. The questionnaire was composed of five
459 statements, in which participants reported how much they agree or disagree using a 5-
460 point Likert scale, followed by an open-ended question about what they liked or disliked
461 about the application. Table 3 shows the summary statistics of the post-experiment
462 questionnaire responses. A series of t-test indicates that, on average, participants'

463 responses were statistically significantly greater than the neural response at an alpha
464 level of 0.05 (i.e., 3 in the 5-point Likert scale).

465 When looking at the opened-ended question, only 11 participants responded. A
466 Semantic Network Analysis was performed based on participants' responses (see Fig. 9).
467 Similarly, a word frequency analysis showed that the top 5 most frequent words, after
468 removing for English stop words, were: (i) *obstacles*, (ii) *see*, (iii) *motion*, (iv) *fun*, (v) *time*.
469 Lastly, sentiment analysis of the responses was performed using the VADER rule-based
470 model [48], where the sentiment ranges from -1 to +1 (negative values represent
471 negative sentiment). The sentiment analysis result shows that, on average, the
472 responses had a positive sentiment of 0.34 (Min=-0.46, Max=0.9, SD=0.50). A non-
473 parametric t-test shows that the average sentiment was significantly different than 0 (p-
474 value=0.03).

475 From the analyses of the open-ended responses, it is clear that participants liked
476 the application. For example, as stated by some of the participants: "*It was fun and*
477 *interesting. I would do another experiment like this again.*". However, participants also
478 reported having issues with the Kinect sensor and some of the obstacles. For example,
479 some participants stated: "*The obstacles with the jumps could be made easier*", "*The*
480 *motion sensor didn't, at times, accurately capture my movements*", "*Couldn't see the*
481 *obstacles with the avatar/person in front of it.*" The issues with the Kinect sensor not
482 accurately tracking the body of participants was related to participants' non-infrared
483 reflective cloth (e.g., dark color cloth). Also, in this non-VR version of the application

484 participants complained about not being able to clearly see the obstacles. This issue
485 would be mitigated by leveraging VR technology to provide a first-person experience.

486 Overall, the results show that participants found the applications useful,
487 motivational, interesting, and that would like to continue using the application in the
488 future. These are key characteristics of an engaging and motivating application.

489 Nevertheless, these results also indicate that there is room for improvement. Hence,
490 leveraging VR technology could potentially improve the capability of the application to
491 engage and motivate individuals to perform light physical activities (i.e., warming up)
492 and stretching, which are key for preventing WMDs.

493

494 **CONCLUSION**

495 Work Related Musculoskeletal Disorders are a serious issue that takes industry
496 workers out of work for extended periods of time. This issue could be prevented by
497 promoting healthy exercise and stretching habits. One method for promotion can be
498 through the use of exergames, which engage the user with gameplay and game design
499 elements. However, many of the current exergames do not address WMSDs specifically
500 or integrate VR for a more immersive experience. Studies that do address WMSDs focus
501 more on the teaching of how to move your body rather than stretching and exercise of
502 muscles. Exercise and stretching are two key preventative methods that do not require
503 knowledge retention such as teaching how to position your body when performing a
504 task.

505 This work presents a VR exergame that can be used to promote exercise and
506 stretching for the prevention of WMSDs, as well as a machine learning model to predict
507 users' exercise intensity level with the objective to help adapt the physical tasks of
508 exergame. Results from an initial usability study of the base exergame show promise in
509 utilizing the exergame for motivating and engaging users to stretch and exercise.
510 Similarly, the results indicate that by training an individual-task machine learning model,
511 a user's exercise intensity level can be predicted before completing a task with an
512 accuracy signifyingly greater than random chance. This type of individuals-task model
513 can be used to help adapt the task of an exergame by predicting a user's exercise
514 intensity level on a given obstacle, based on the movement that the obstacle would
515 require the individuals to perform, as well as the movement they performed a previous
516 obstacle. Leveraging VR and machine learning technology could help increase the
517 immersivity and engagement of exergames. Other studies present the immersivity and
518 motivation VR can bring to the exergame [12,32]. The VR exergame facilitates a true
519 first-person experience that could motivate the user to continue playing the exergame;
520 thus helping prevent WMSDs.

521 Future work will explore the impact of the added immersivity and engagement of VR
522 compared to the non-VR application. The exergame could also be fine-tuned to stretch
523 and exercise areas of the body that are specific to WMSDs; introducing new obstacles or
524 levels that could be tailored to the individuals. Similarly, educational content could also
525 be added to leverage both the benefits of stretching and learning about WMSDs
526 prevention. Lastly, although VR is immersive, the field of view of most VR headsets is

527 limited, which creates an issue that limits the user's first-person perspective in-game.
528 Future work could focus on designing the obstacles to mitigate issues that might arise
529 due to the reduced field of view of VR headsets.
530

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Figure Captions List

- Fig. 1 Y-shaped obstacle & user in VR crouching under obstacle
- Fig. 2 Exergame play space
- Fig. 3 User interacting with button
- Fig. 4 Navigation through menus
- Fig. 5 Depiction of Kinect body tracking [49]
- Fig. 6 Depiction of hardware integration
- Fig. 7 10-fold CV Benchmark results
- Fig. 8 Online training model performance
- Fig. 9 Semantic network analysis of participants' responses

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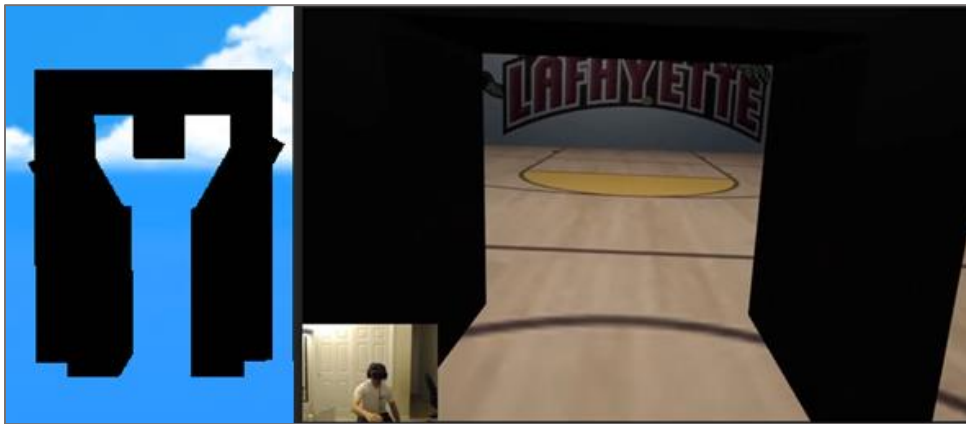
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Table Caption List

Table 1	Summary of related works
Table 2	Time spent [sec] by participants in different exercise intensity zones
Table 3	Summary statistics of post-experiment questionnaire

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Fig. 1 Y-shaped obstacle & user in VR crouching under obstacle

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Fig. 2 Exergame play space

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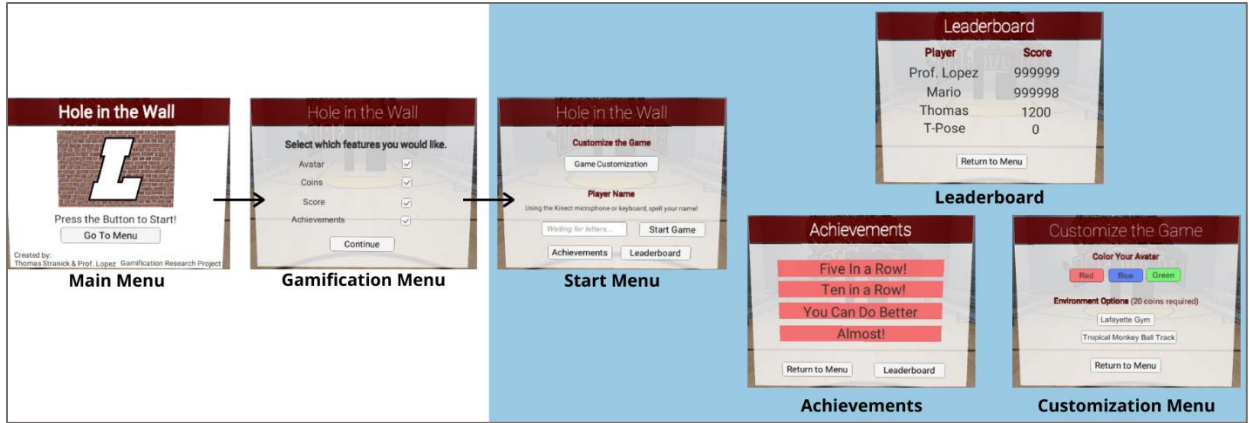
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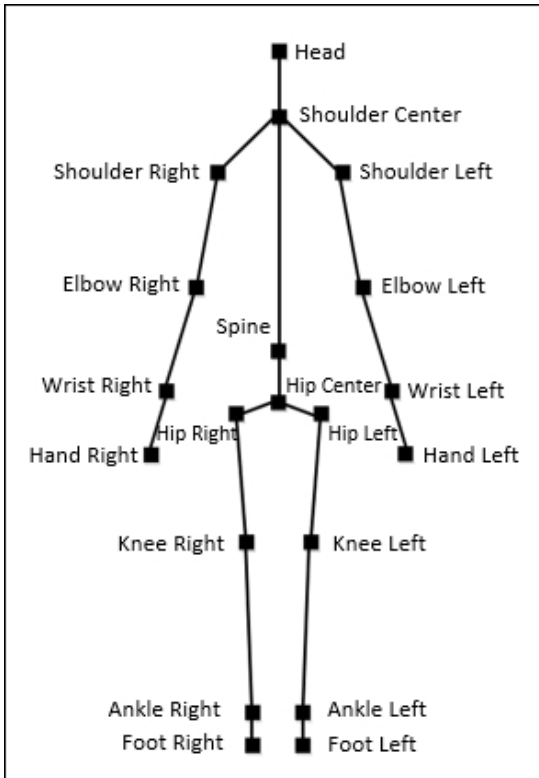
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Fig. 3 User interacting with button



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Fig. 4 Navigation through menus



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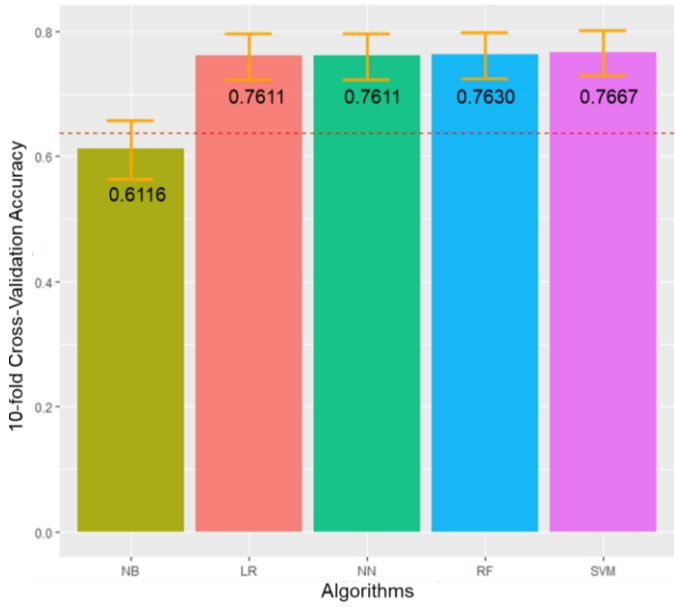
Fig. 5 Depiction of Kinect body tracking [49]

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Fig. 6 Depiction of hardware integration



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Fig. 7 10-fold CV Benchmark results

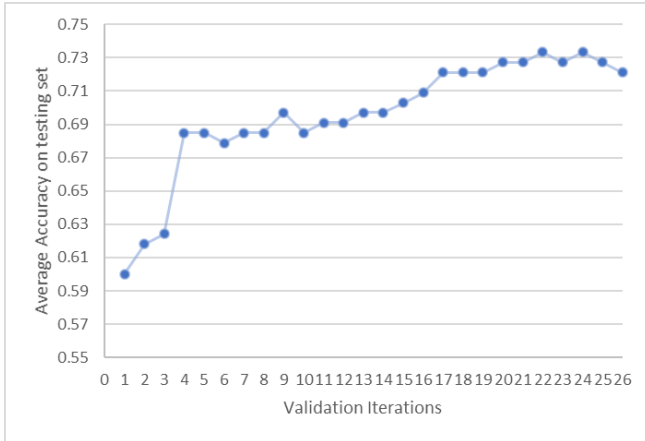
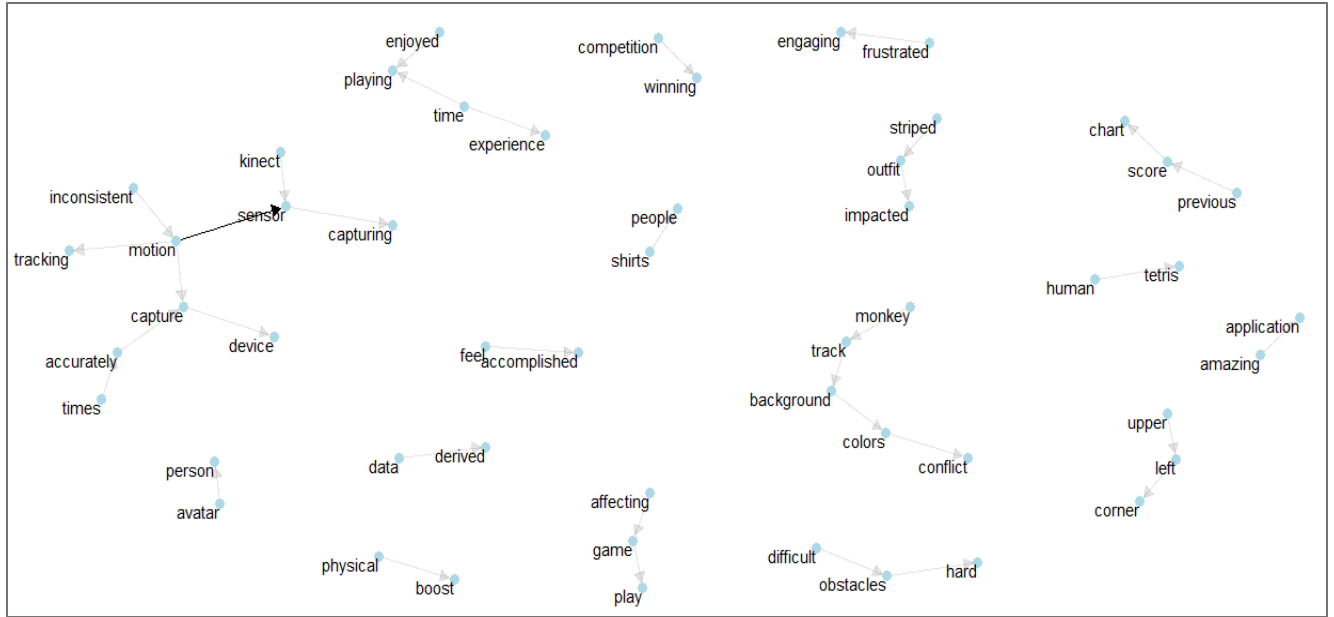


Fig. 8 Online training model performance

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Fig. 9 Semantic network analysis of participants' responses

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766 Table 1 Summary of related works

Study	WMSD Focused	Education	Exergame	Virtual Reality
[38,39]	No	No	No	Yes
[7,8,19,24,32]	No	No	Yes	No
[12,22,33–35]	No	No	Yes	Yes
[27,29]	No	No	Yes	No
[28]	No	No	Yes	Yes
[3,15,17]	Yes	Yes	No	No
[16,37]	Yes	Yes	No	Yes
<i>This Work</i>	Yes	No	Yes	Yes

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771 Table 2 Time spent [sec] by participants in different exercise intensity zones

Level:	Very Light	Light	Moderate	Vigorous
reserve [%]	<30%	30%- 39%	40%- 59%	60%- 89%
Min.	52.91	0.00	0.00	0.00
Mean	196.14	75.19	27.43	0.95
Max.	299.73	188.71	147.28	14.32
SD	76.85	50.31	43.69	2.65

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788 Table 3 Summary statistics of post-experiment questionnaire

Statements	Min	Mdn	M	Max	SD
<i>1) I found the application useful</i>	2	4	4.13	5	0.74
<i>2) I was motivated by the application</i>	3	5	4.46	5	0.74
<i>3) I found it easier getting real-time feedback</i>	2	4	4.13	5	0.99
<i>4) I found it interesting to interact with the application</i>	3	4	4.33	5	0.62
<i>5) I will be interested to continue using the application</i>	2	4	3.94	5	0.88

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