

Physical Activity in Youth

- < 1/5 adolescents report being regularly physically active (CDC, 2011)
 - Active Transport
 - Physical Education
 - Sedentary Behaviors
 - Obesity Epidemic
 - Function of Age



- Many health-related consequences
- Identify effective strategies to promote physical activity

Internet-Based Interventions

- Can lead to improvements in behavior change outcomes (Lau et al., 2011)
- Web 2.0
 - Socially interactive, virtual environment that fosters the creation and exchange of user-generated content
 - Has gained universal acceptance among Internet users
 - Evaluation of social media as a means to influence health behaviors is warranted (AHA, 2013; CDC, 2013; SBM, 2013)
 - Social Networking Sites are the most popular Web category
 - 57% look to their SNS for advice (e.g., health, diet, fitness) (Nielsen, 2009)



The SMART Trial



- 8-week, randomized design PA program
- Delivered entirely over social media
- Goal to influence PA behaviors in sedentary and low-active adolescents
- Objectives
- 1. Test the feasibility of a social media-delivered PA intervention for increasing lifestyle PA
- 2. Compare the effects of a progressive behavioral training condition to a simple information-based condition



Hypotheses



- 1. Trial would provide initial support for the feasibility of using social media to deliver a PA intervention
- 2. Behavioral training condition (i.e., intervention group) would experience greater improvements in PA



Recruitment & Eligibility



13-15 Years Old
Resident of Champaign County
< 60 Minutes of PA per Day
Internet Access, Facebook Account
N = 21 Parent-Child Dyads



Behavioral Assessments

- Conducted at baseline and program end (i.e., Week 8)
 - Accelerometry
 (Health One Technology, Fort Walton Beach, FL)
 - Godin Leisure-Time Exercise Questionnaire (Godin & Shephard, 1985)





Treatment Conditions

- Behavioral (n=10)
 - 8 unique PA-related modules (via YouTube)
 - Privately delivered on a weekly basis via FB Messages
- Informational (n=11)
 - 8 generic messages sent



- Mod1 Getting Started with the SMART Program
- Mod2 Physical Activity Definitions and Benefits
- Mod3 Physical Activity Guidelines
- Mod4 Goal-Setting for Physical Activity
- Mod5 Individual Expectations and Physical Activity
- Mod6 Social Support for Physical Activity
- Mod7 Overcoming Barriers to Physical Activity
- Mod8 Maintaining a Physically Active Lifestyle



The SMART Facebook Group

• SMART FB Group

- Study-specific, restricted access
- Interactive community
 that revolved around the
 topic of physical activity
 for adolescents

Two Group Posts/Day

- 1. PA-Related Websites
- 2. Infographics
- 3. Video PSAs
- 4. Tech & Mobile Apps
- 5. Local Parks & Facilities
- 6. Motivational Quotes
- 7. Miscellaneous



SMART Facebook Group Post



Data Analyses

- 2 (treatment condition) by 2 (time) repeated measures design
- Effect sizes (Cohen's d) calculated within groups to determine differential treatment effects outcomes



Sample Demographics

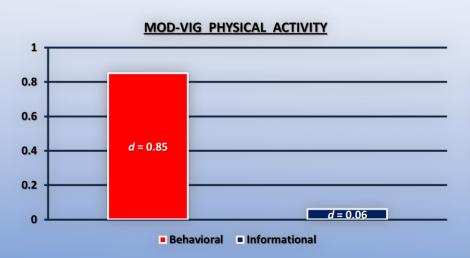


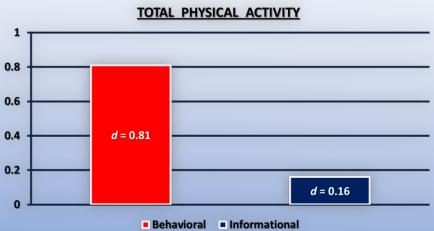
13.48 Years Old 42.90% 8th Grade 57.20% OW/Obese 61.90% White 52.40% Female 71.40% > \$100K AHI

Intervention Effects

- 2x2 repeated measures design revealed improvements over time on subjectively reported:
 - Weekly leisure-time PA (F = 8.426, p = .009, $\eta^2 = .319$)
 - MVPA approached significance (F = 4.186, p = .056, η^2 = .189)
 - Significant time and/or interaction effects not present in remaining behavioral outcomes
- Effect sizes calculated to identify patterns of change within each treatment condition

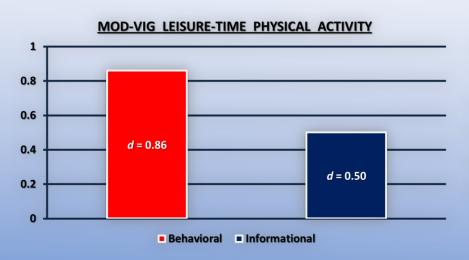
Effects on Objective PA

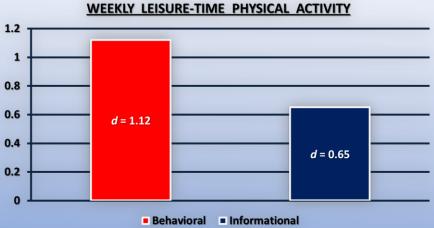






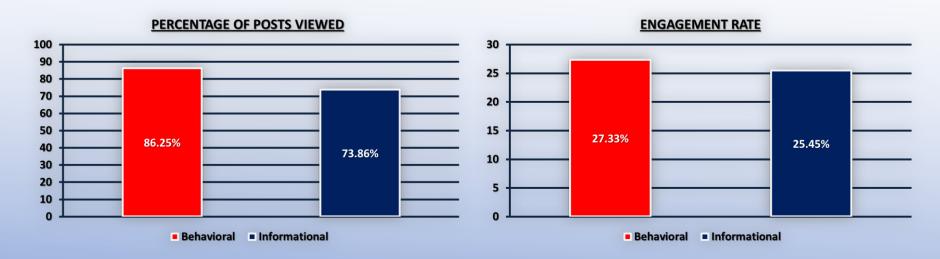
Effects on Subjective PA







Participation in FB Group



Preferred Wall Post Categories



- 1) Technology/Apps
 - 2) Websites
- 3) Miscellaneous/Topical
 - 4) Quotations
- 5) Local Resources & Facilities
- 6) Public Service Announcements
 - 7) Infographics

Discussion

- Changes in the behavioral outcomes were not statistically significant between groups
- Behavioral group effect sizes: moderate large
- Informational group effect sizes: small moderate
- Intervention effects were larger than those typically found in traditionallydelivered PA programs and web-based interventions
- Difference in behavioral effects may be specific to program delivery
 - Inherently social and interactive in nature
 - Readily available, instant access to content



Discussion

- Delivering a behavioral intervention via social media is both feasible and well-accepted
- Advances in Web 2.0 design may:
 - Influence health education and behaviors
 - Overcome many researchrelated barriers
 - Implications for public health



Strengths & Limitations

• Strengths

- Among the first to examine the feasibility of delivering a PA RCT over social media
- Subjective and objective assessment of behavioral outcomes
- Fairly even split between males and females
- ~ 40% minority participants

Limitations

- Small study sample, lack of statistically significant findings
- Predominantly higher SES households
- Inability to track the viewership of the weekly behavioral modules



Future Directions

- Larger trials to establish efficacy
- Evaluate in other populations
- Examine behavioral maintenance
- Identify strategies to increase rate of engagement with shared content
- Examine of the utility of various interactive features
- Explore the potential of other social media services



Thank You!

