# Promoting Healthy Lifestyles in Adolescence

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Positive Choices

# Overview

– The Big 6 risk factors for chronic disease

– The Health4Life Study
   A) Development
   B) Program Content – *how to promote healthy lifestyles among youth*
   C) Implementation
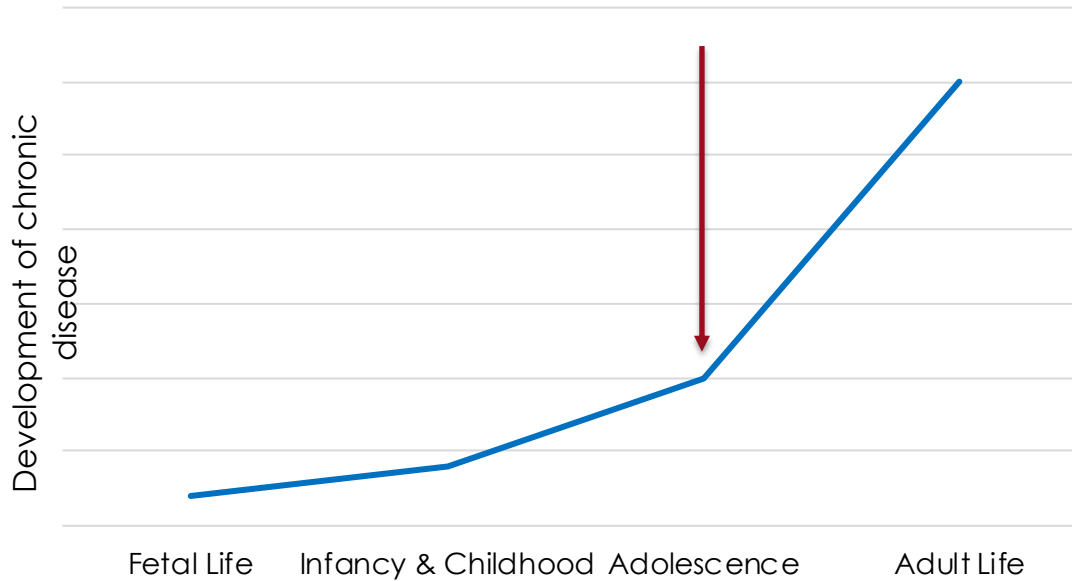   D) Evaluation

– How to get involved

# Risk factors for chronic disease

- Chronic diseases are the leading cause of death (AIHW, 2014).

- Physical inactivity, poor diet, alcohol use and smoking = key risk factors.

- Poor sleep and sedentary behaviour (recreational screen time) and have emerged as important risk factors

# Accumulation of risk



Development of chronic disease (y-axis) plotted against Fetal Life, Infancy & Childhood, Adolescence, Adult Life (x-axis). Adapted from World Health Organization (2005).

- Unhealthy habits emerge during adolescence, as they have greater autonomy over their lifestyle choices.

- Also a time where exposure to risky behaviours, e.g. alcohol use, occurs.

# The "Big 6" Snapshot

– Among young Australians (12-17 years):

**32%** have not consumed alcohol

**14%** meet guidelines for screen time

**30%** do not have a sleep problem

**28%** meet guidelines for physical activity

**5%** eat enough fruit & veg

**81%** have not used tobacco

**39%** do not consume sugary drinks

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# The "Big 6" co-occur

– Having multiple unhealthy behaviours are associated with increased risk of:

- – Depression,
- – Anxiety,
- – Psychological distress,
- – Obesity
- – Increased risk of later chronic disease



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# The Good News!

–   Adopting a healthy lifestyle in adolescence can have protective effects against the onset of chronic disease.

–   Adolescence is an opportune time to prevent the onset of disease by strengthening protective factors and reducing risk factors.

–   A **Multiple Health Behaviour Change approach** is a timely and efficient way to promote a healthy lifestyle

   -   Positively changing one behaviour, can lead to improvements in another.

# The Health4Life Study

Aims to:

1.  Develop an evidence-based eHealth intervention to concurrently target the Big 6 among adolescents, known as **Health4Life.**

2.  Compared to a control group, evaluate the effectiveness of **Health4Life** in:
    A)  Improving the Big 6, and
    B)  Improving mental health among adolescents.

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# What is Health4Life?

– Evidence-based program to empower adolescents to improve their physical and mental health and prevent chronic disease.

– Based on the latest evidence and aligned with the Australian HPE and NSW PDHPE curriculums.

– Health4Life encourages students to:
  o **Eat healthily,**
  o **Be physically active,**
  o **Limit sedentary recreational screen time,**
  o **Adopt healthy sleep habits,**
  o **Resist pressure to drink alcohol and smoke.**



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# What is Health4Life?

1. Web-based cartoon program, delivered during PDHPE/HPE
2. Smartphone application
3. Booster content

Health4Life | Physical and mental wellbeing in adolescence and beyond

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# How was it developed?

**1. Expert Advisory Group**
Physical activity, dietetics, addiction, mental health, sleep, behaviour change, eHealth

**2. Systematic Review and Meta-Analysis**
Of existing MHBC eHealth school-based interventions

**3. Youth Consultation**
Online survey of 815 adolescents

**4. Web + App development**

**5. User Testing**
Focus groups with students and interviews with teachers

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# Expert Advisory Group

| | | | |
|---|---|---|---|
| Physical Activity | Sleep | Diet | Addiction |
| Screen Time | Mental Health | Educational Sector | Behaviour Change |

eHealth interventions

THE UNIVERSITY OF SYDNEY — Matilda Centre · PREMISE NHMRC CENTRE OF RESEARCH EXCELLENCE · THE UNIVERSITY OF NEWCASTLE AUSTRALIA · Curtin University · THE UNIVERSITY OF QUEENSLAND AUSTRALIA · UNSW SYDNEY · Northwestern Medicine Feinberg School of Medicine · Positive Choices

# Youth Consultation: Online survey

– Online survey to explore:

- Knowledge of the Big 6

- Engagement with health behaviours

- Attitudes about health
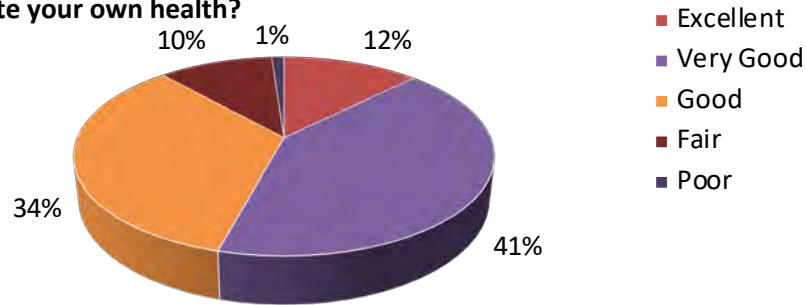
- Use of mobile phones and smartphone applications

- 815 students from 3 schools
- Mean age=13.9 years
- 84% were female
- (Ethics Approval: HC180224)

**Which Life Domain Is Most Important To You Right Now?**

16%
36%
12%
14%
22%

■ Family  ■ Academic Achievement  ■ Social Relations  ■ Physical Health  ■ Mental Health
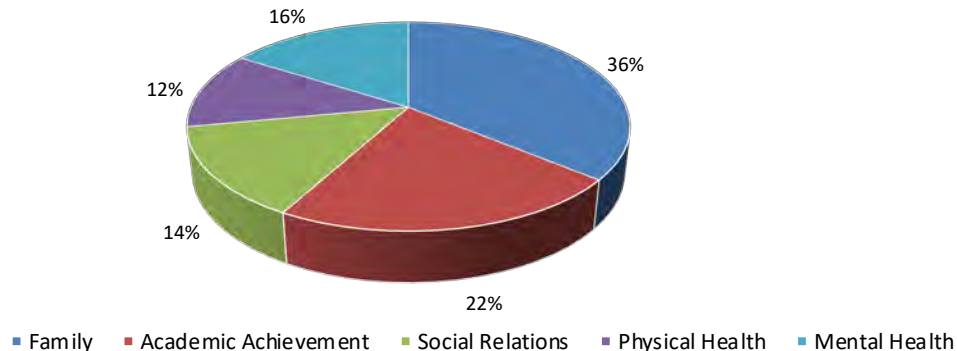
# Youth Consultation: Online survey

**1. How would you rate your own health?**



- 12% Excellent
- 1% Poor
- 10% Fair
- 34% Good
- 41% Very Good

Legend:
- Excellent
- Very Good
- Good
- Fair
- Poor

**39%** had not consumed a full alcoholic drink

**35%** met guidelines for screen time

**54%** met sleep guidelines

**12%** met guidelines for physical activity

**11%** ate enough veg
**76%** enough fruit

**96%** had tried tobacco

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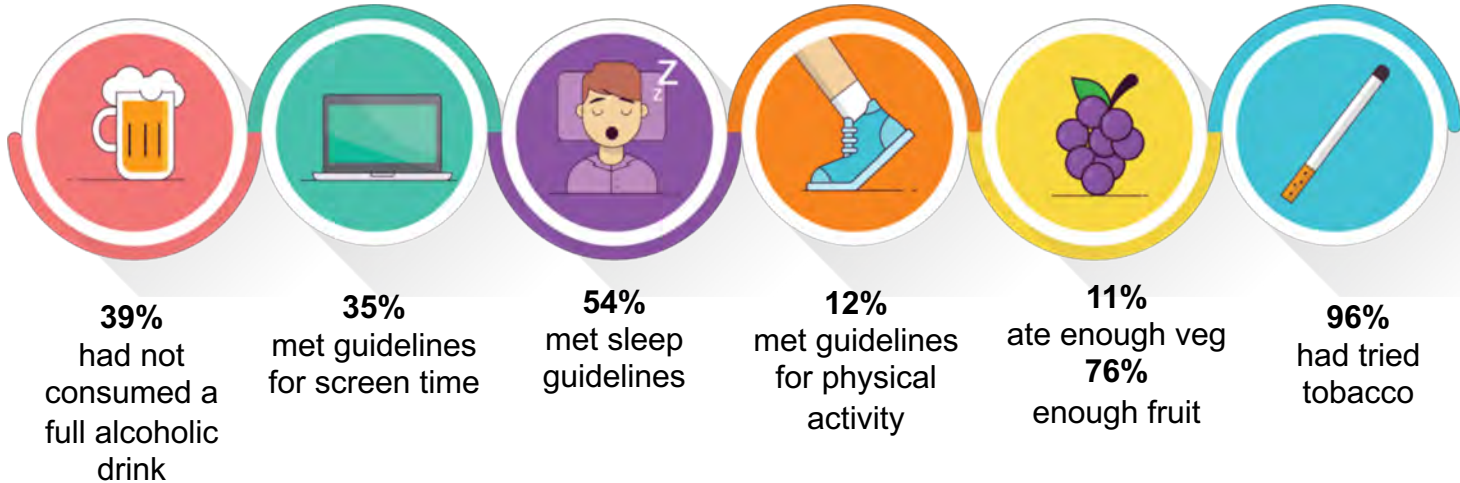
# Youth Consultation: Online survey

– There were clear opportunities to improve knowledge:

*% of respondents who knew the correct guidelines:*

| 88% | 49% | 27% | 26% | 35% fruit 33% veg | n/a |
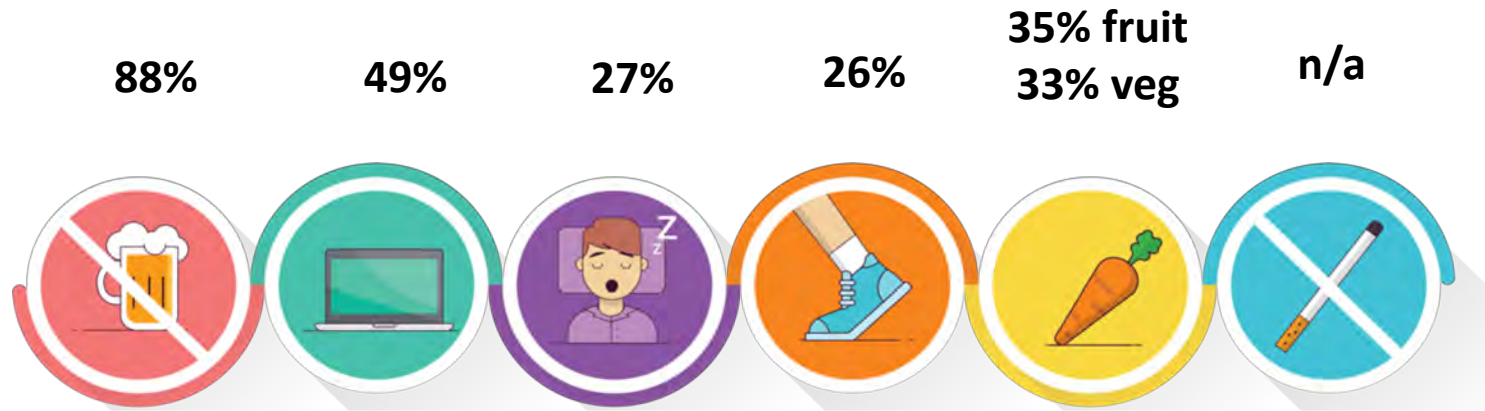
# User Testing

– Focus groups with students and interviews with teachers will be conducted to get feedback on:

- Language

- Relevance

- Acceptability

– Focus group held with 12, 11-14 year old females to get feedback on the Health4Life smartphone app (Ethics Approval: HC180224)

# User Testing: Results

– Displaying Health Behaviours
  – Display Big 6 individually on graphs
  – Data should be displayed for a week-long period with the option to view previous weeks for comparison
  – Information should be displayed as a line graph

– Goal Setting
  – App should set goals specific to age and gender
  – Make goal setting a rewarding experience ('winning' an icon/emoji when reaching a goal)
  – Include motivational comments or explanations of why you should try to reach each health behaviour goal

# What is Health4Life?

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# 1. Health4Life Web-based program

- Builds on our effective *Climate Schools* prevention programs (Newton et al., 2009; 2010; Champion et al, 2016)

- Uses cartoon storylines and web-based delivery to increase engagement.

- Aims to increase knowledge about the Big 6, and encourage students to maintain and achieve good health.

- Provides tailored feedback to students relative to national guidelines with motivational advice.

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# What are the national guidelines?

| Behaviour | Guideline |
|---|---|
| **Physical Activity** | • 60 minutes or more of moderate to vigorous physical activity involving mainly aerobic activities (which can be accumulated over the day).<br><br>• This should include activity of vigorous intensity as well as activity to strengthen muscle and bone, at least 3 days per week. |

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| **Diet** | • Limit sugar sweetened beverages and discretionary food items<br>• Minimum of 2 servings of fruit/day<br>• Minimum of 5 serves of vegetables/day |
| **Alcohol** | For children and young people under 18 years of age, not drinking alcohol is the safest option. |
| **Tobacco** | Do not smoke |

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# Overarching messages

- Associations and clustering between health habits

- Relationships between physical and mental health

- Physical, social and emotional benefits of health and wellbeing

- Skill development: self-management & interpersonal

# **What does H4L Cover?**

# **Alcohol & Smoking**

- Short-term consequences

- Assertive communication & refusal skills

- Identifying reasons teenagers choose not to drink

- Keeping yourself and others safe

- Normative education - Correcting student misperceptions about peer use

# Physical Activity

- Move more often

- Strive to achieve 60 minutes of MVPA daily.

- Variety of PA options & finding activities that you enjoy.

- Benefits of regular PA e.g. cognition and academic performance, improved sleep and mood.

# Sedentary recreational screen time

- Limit to no more than 2 hours/day

- Get off screens and interact face to face

- Switch off screens in the afternoon and at night in the bedroom

- Benefits of limiting screen time e.g. increased PA, improved sleep, reduced bullying, improved mental health

- Responsible use of social media

# Sleep



- Sleep needs:
  - 8-10 hrs (14yrs+) or 9-11hrs (<13yrs)

- Importance of regulating sleep patterns: "social jetlag" – avoiding oversleep on weekends

- Benefits of sleeping well e.g. improved mood, daytime functioning, school performance.

- Restrict electronic devices before bed time

# **Diet**

- Reduce sugar-sweetened beverages

- The Five Food groups: fruit, veg, grains, meat, dairy + water

- 2 fruit & 5 vegetables per day

- Limit sat fat, added salt, added sugars

- Benefits of eating well e.g. mood, weight control, brain function

# Program Implementation

- Accessed via the Health4Life study website

- Students and teachers register and to create unique username (email) and password

- 6 x 40 minute lessons, delivered once per week in PDHPE/HPE classes

- Students complete 20-minute cartoons individually.
    - "Stop & Think" scenarios
    - Quizzes at the end of each lesson

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# Program Implementation – PART 2

- Optional activities to suit needs of class e.g.:
  - Online worksheets
  - Interactive online tasks
  - Class discussions
  - Small group work
  - Homework assignments

- Teachers and students provided with lesson summaries

# What is Health4Life?

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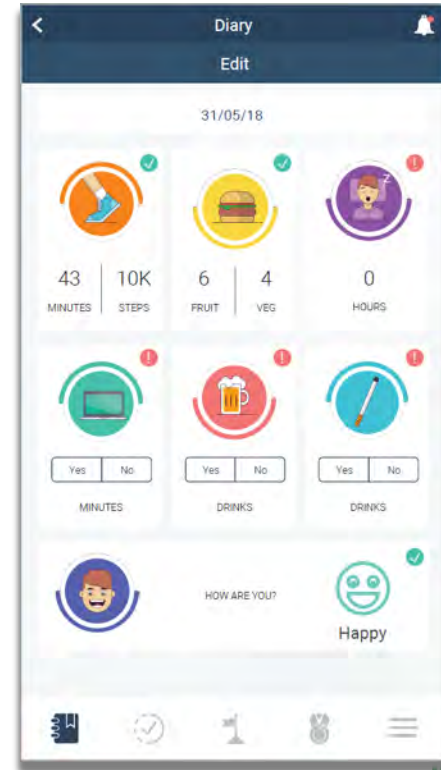2.  Smartphone application
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# 2. Health4Life Smartphone App

– Companion to the school-based program

– Includes self-monitoring, goal setting and tailored feedback.

– Completed outside the classroom setting (but some app-related homework).

– Students can track their progress & earn 'badges' for logging behaviour.

# What is Health4Life?

1. Web-based cartoon program, delivered during PDHPE/HPE
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# 3. Health4Life Booster

- Delivered 12- and 24-months after initial intervention to:
    - Students with 2+ risk factors, based on survey responses
    - 30-40% of youth

- Used outside of the classroom setting so that students will not be identifiable to peers.

- Uses CBT and motivation enhancement principles to teach students the skills needed to put their knowledge into practice.
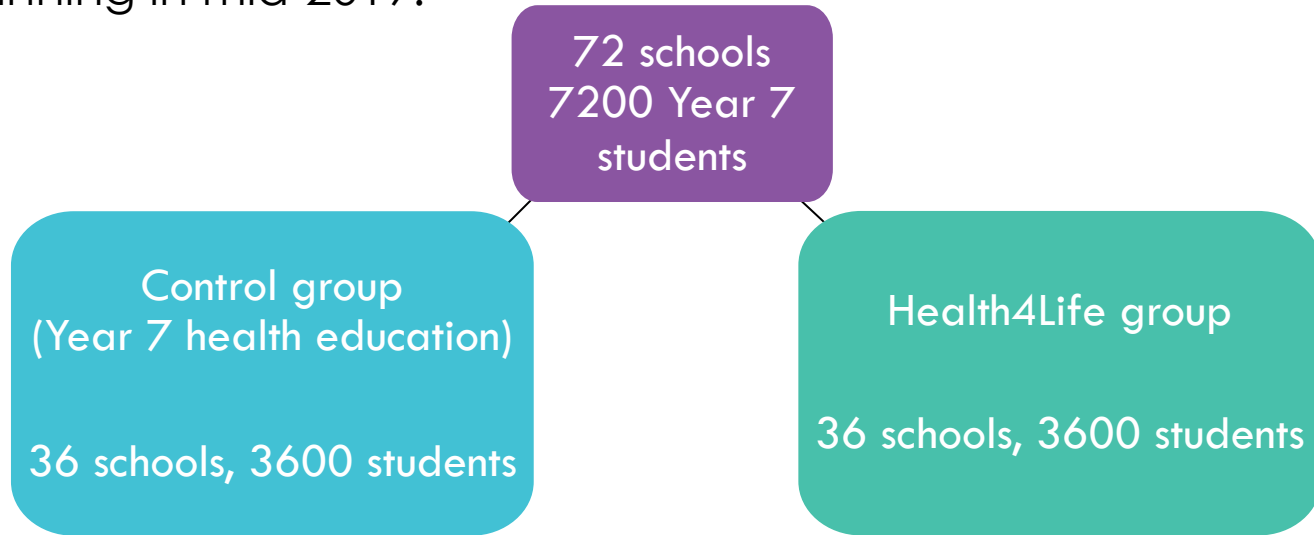
# What teacher training is required?

–   None!

–   Teachers will be provided with implementation guidelines, links to the syllabus, and lesson summaries and class activities.

–   Researchers will meet with teachers at participating schools in Term 2 to assist in navigation of study website.

# How will we evaluate Health4Life?

A cluster RCT in secondary schools across NSW, WA & QLD, beginning in mid-2019.

72 schools
7200 Year 7 students

Control group
(Year 7 health education)

36 schools, 3600 students

Health4Life group

36 schools, 3600 students

Not possible to choose the group to which a school is assigned.

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# Evaluation

Students will complete **5 online surveys (30-40mins)** over three years:

| | Pre | Health4Life Program + App | Post | 12 month + booster | 24 month + booster | 36 month |
|---|---|---|---|---|---|---|
| **Time** | Term 3, 2019 | Term 3, 2019 | Term 3 or 4, 2019 | Term 3, 2020 | Term 3, 2021 | Term 3, 2022 |
| **Year** | Year 7 | Year 7 | Year 7 | Year 8 | Year 9 | Year 10 |
| **H4L** | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |
| **Control** | ✗ | ✗ | ✗ | ✗ | ✗ | ✗ |

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# Evaluation

– Assess the students' health behaviours, knowledge about the Big 6, self-efficacy, and mental health symptoms.

– Survey completed during PDHPE/HPE, or another convenient time.

– Absent students contacted by the research team inviting them to complete the survey at home.

– Participant data is de-identified – linked over time via unique code.

# What are the benefits of participating?

– Access to an innovative, evidence-based eHealth intervention.

– Control schools will get complimentary access to the Health4Life program at the end of the study.

– Contribution to science and understanding of healthy lifestyles interventions

– No guarantee of benefits but students may improve their health behaviours and mood.

– If effective, Health4Life has the potential to not only improve physical and mental health in the short-term, but to enhance health outcomes in adulthood.

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# Acknowledgements

**Contact Details:**
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# Want to participate in Health4Life?

**Get in touch!**

www.health4life.org.au

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