Acceptability, utility, and engagement with the Health4Me intervention

Authors:

Raeside R^{1,2}, Todd AR^{1,2}, Partridge SR^{1,2} & Health4Me Team

¹Susan Wakil School of Nursing and Midwifery, Faculty of Medicine and Health, The University of Sydney, Sydney, Australia

² Charles Perkins Centre, The University of Sydney, Sydney, Australia

Background:

The Health4Me study is a 6-month text message intervention aiming to improve adolescents' physical activity and dietary behaviours compared to usual care, with optional health counselling. The full sample size (n=390) was recruited and randomised (1:1) to intervention/control. Six-month follow-ups complete Oct-2024. This qualitative study aims to evaluate the acceptability, utility, and engagement with the Health4Me intervention.

Methods:

Focus groups were held via Zoom (Feb 24-present). Eligible participants were in the intervention group and had completed 6-month follow-up. Participants received an e-gift voucher (\$50 AUD) for participating. Focus groups were recorded and transcribed verbatim, independently coded by two researchers, and analysed thematically (Framework approach).

Results:

Four focus groups were held, and preliminary results are presented. Participants (n=30) mean age was 16.5 years (SD 1.4), 23 were females, four males, and three identified as non-binary. Thematic analysis revealed that receiving information via text messages was acceptable and useful. Text messages increased access to health information, the information was delivered in a format that was suitable, and they could be referred to later. Participants desired further personalisation of the program in terms of content (age-appropriateness, tailored to specific contextual needs) and delivery (time, quantity) to enhance engagement with intervention. Participants highlighted a lack of trust with the intervention, despite having enrolled. They reported feeling sceptical about clicking on text message links, replying to text messages, and engaging with the health counsellor. Suggestions for improvement included addition of a mobile app and/or social media pages to build trust, and ability to personalise the intervention when signing up.

Conclusions:

Participants found the Health4Me intervention acceptable and useful. Optimisation of the intervention is needed to allow for participant personalisation and to build trust around engaging with intervention elements. This evidence supports the use of digital preventive health interventions among adolescents, and strategies to increase engagement in the future.

Disclosure of Interest Statement: RR is funded by a SOLVE-CHD Completion Scholarship. The Health4Me study is funded by the Australian Government Department of Health Medical Research Future Fund Primary Care Grant (2006315). No conflicts of interest to disclose.