MyVoice Data Blitz

Tammy Chang, Melissa DeJonckheere, Claire Chang, Marika Waselewski, Xochitl Amaro, Steve Gorga, and Kendrin Sonneville
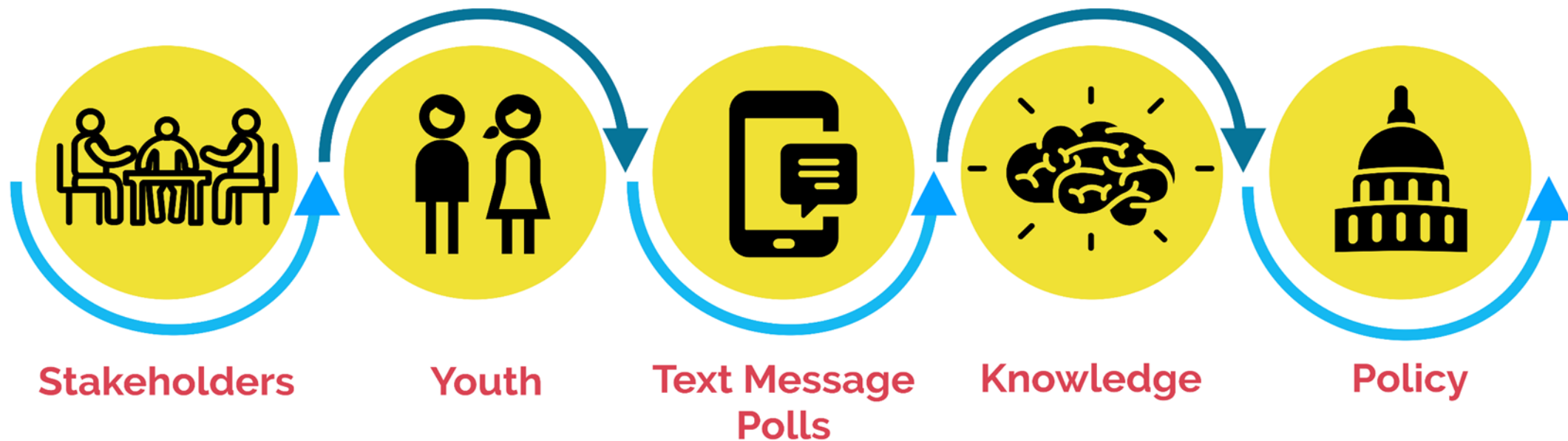
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What is MyVoice?

MyVoice is a national text message poll that empowers adolescents and young adults to voice their opinion on important policy issues.
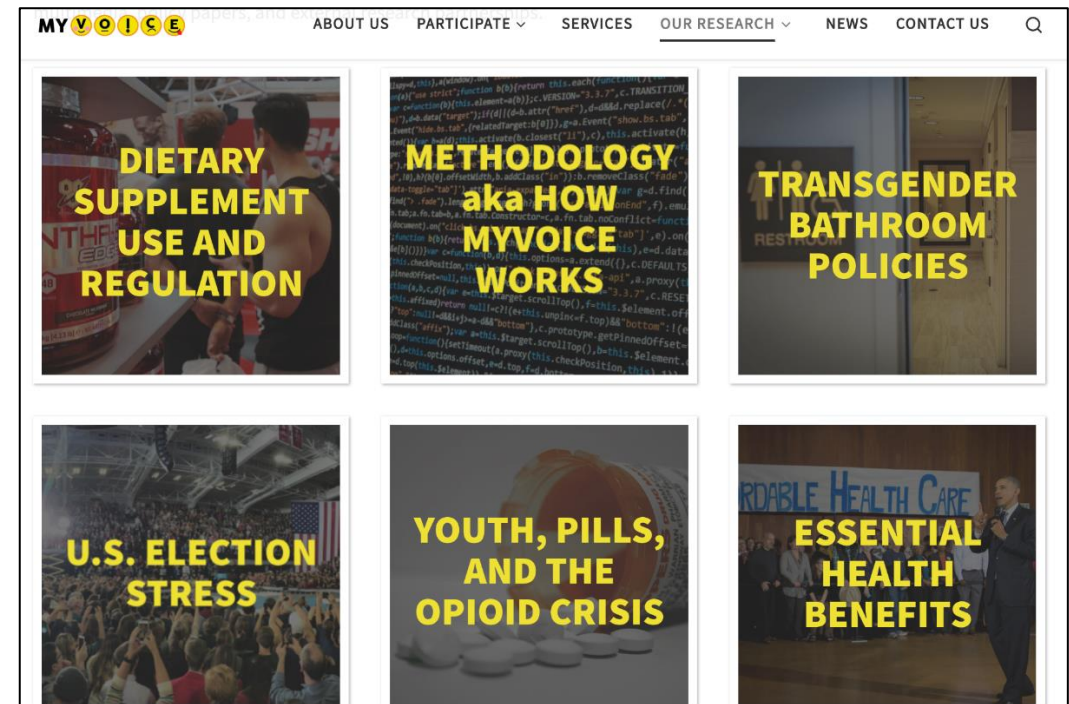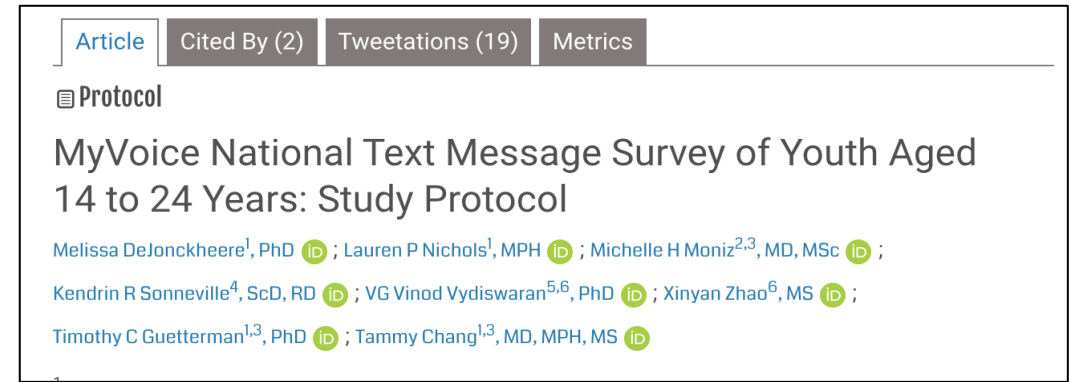

MY V O ! C E

Stakeholders → Youth → Text Message Polls → Knowledge → Policy

Connecting youth perspectives to researchers, practitioners, and policymakers to influence policy and programs impacting youth

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MyVoice Methodology

- Youth participants age 14-24

- Recruitment via social media

  - Facebook, Instagram

  - Access marginalized or missing perspectives

- Participants earn $1 per week to answer text message polls

- Rapid data collection and analysis

- Prompt dissemination to stakeholders

Article | Cited By (2) | Tweetations (19) | Metrics

Protocol

MyVoice National Text Message Survey of Youth Aged 14 to 24 Years: Study Protocol

Melissa DeJonckheere[1], PhD ; Lauren P Nichols[1], MPH ; Michelle H Moniz[2,3], MD, MSc ;

Kendrin R Sonneville[4], ScD, RD ; VG Vinod Vydiswaran[5,6], PhD ; Xinyan Zhao[6], MS ;

Timothy C Guetterman[1,3], PhD ; Tammy Chang[1,3], MD, MPH, MS

MY VO!CE   ABOUT US   PARTICIPATE   SERVICES   OUR RESEARCH   NEWS   CONTACT US

DIETARY SUPPLEMENT USE AND REGULATION

METHODOLOGY aka HOW MYVOICE WORKS

TRANSGENDER BATHROOM POLICIES

U.S. ELECTION STRESS

YOUTH, PILLS, AND THE OPIOID CRISIS

ESSENTIAL HEALTH BENEFITS

DeJonckheere et al., 2017

Youth as experts

Right people
Right information
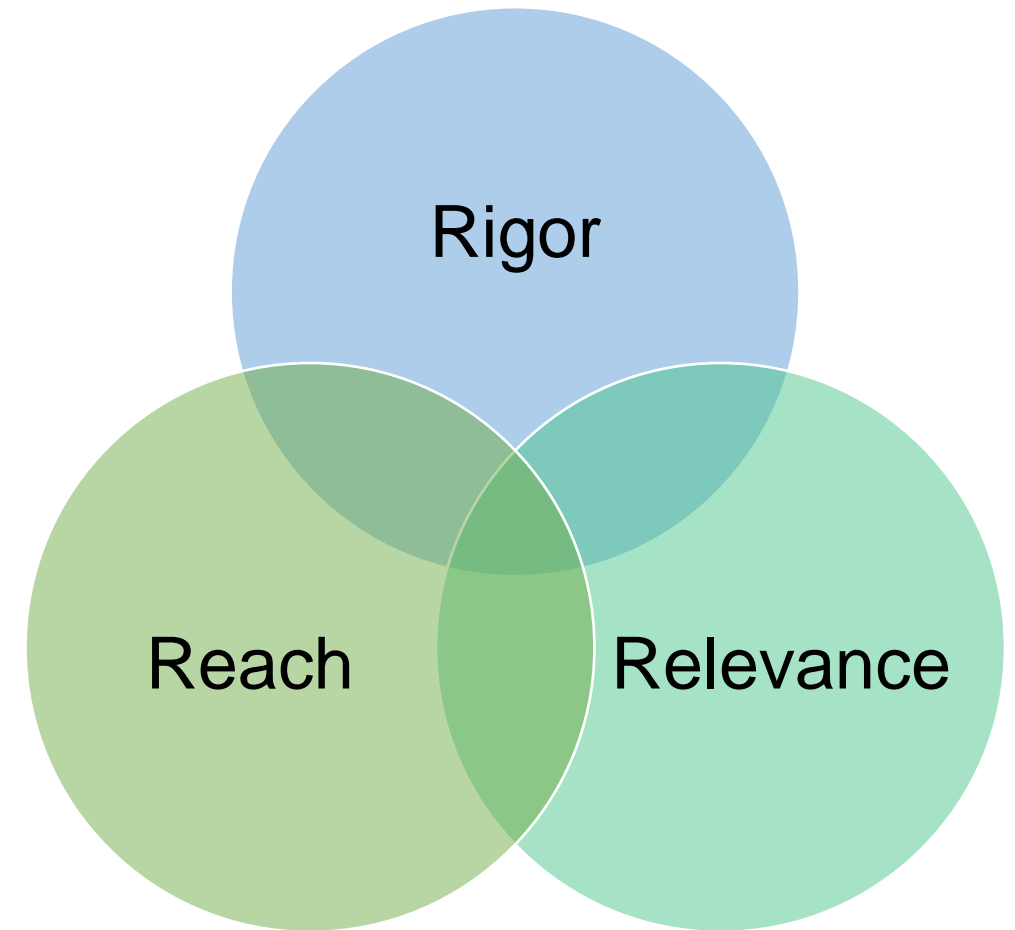Right time

MY.
VOICE

COVID Reopening: Youth-Led Analysis of MyVoice Data

Melissa DeJonckheere, PhD

Youth as Co-Researchers

- Grounded in community-based participatory research (CBPR) principles
  - Youth are experts of their own experiences
  - Youth perspectives increase the rigor, relevance, and reach of adolescent health research
- Co-researchers are insider peers who equitably contribute to research processes and decision making

Rigor

Reach

Relevance

Balazs & Morello-Frosch (2013)

Israel et al., 2005; Balazs & Morello-Frosch, 2013; Vaughn et al., 2018; 2019

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Study Context

- Mitigation measures (closing businesses, restricting gatherings, stay-at-home orders) reduced transmission of SARS-CoV-2 and cases of COVID-19
  - Social and economic impact
- Restrictions lessened with increasing vaccine availability and decreasing cases and deaths in the U.S. (April 2021)
  - Schools re-opening or moving to hybrid models as early as Fall 2020
  - Variation in restrictions for masks, social distancing, vaccination

Fuller et al., 2021; Honein et al., 2021; Budzyn et al., 2021

To describe youth perspectives on re-opening plans during the COVID-19 pandemic

Data Collection

- Five-questions administered to MyVoice youth April 4, 2021

As the COVID-19 pandemic gets more under control, what are you looking forward to doing that you can't do now?

As things go back to normal, what do you think should reopen first? Why?

What do you think has gotten better during the pandemic and should stay the same?

What do you think has gotten worse during the pandemic and should change?

Is there anything you are worried about as things reopen?

Youth-Led Data Analysis

- Prioritization of questions

- Codebook development
  - Reviewing ~100 responses
  - Memoing to create a list of main ideas (Google Docs or Word)
  - Discussing codes to develop coding scheme
  - Refining codebook with definitions and examples

- Coding (Google Sheets or Excel)
  - Line by line coding of text message data
  - Reconciling disagreements

- Theme development (*in progress*)

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Memos to Coding Scheme

COVID Reopening Memos

Q2: As things go back to normal, what do you think should reopen first? Why?

1. **School/Work**
   i. Schools, Colleges, (Small/Local) Businesses, Offices, Conferences
2. **Essential Services**
   Church, Libraries, Grocery Stores, Daycare, Hospitals, Nursing Homes, Labs, Med
3. **Not Sure/Not Specific/ I don't know**
   "Nothing specific", "Things that allow for maximum social distance" "Just make s
   have no clue","Whatever the science says should open first"
4. **Still Skeptical**
   i. "I'm not sure. Probably not restaurants because with masks off while eating there
   spreading the virus." "Covid is still around""Numbers have been a lie since day on
   risky until people are vaccinated" , I don't think it should have been shut down to b
5. **Outside Activities**
   "outside activities that can be distanced", "Outdoor large gatherings", Outdoor Ver
   Patios, Parks
6. **Recreational/Social Activities**
   Shopping Malls, Restaurants, Bars, Gyms, Coffee Shops, Concerts, Beaches, Sp
   Museums, Theaters, Strip Clubs, Open Venues, Orchestras, Amusement Park, Rav
   Guided Tours, Recreational Centers
7. **Everything**
   "Everything all at once" , "Everything should be opening"
8. **Things are already open**
   "Most things are open where I live", "Nothing is closed right now", "I'm not sure. M
   already somewhat open right now"

COVID Reopening Codebook

Q2: As things go back to normal, what do you think should reopen first? Why?

1. **Everything**
   a. Definition: A response that indicates the desire for everything to reopen
   a. Examples: "Everything all at once" , "Everything should be opening"
2. **School/Work**
   a. Definition: A response that indicates the desire to prioritize educational and occupational institutions like schools, colleges, conferences, workplaces, etc. in the COVID reopening
   b. Examples: "Schools, because learning is harder online", "Businesses and schools. Businesses so our economy becomes stable. Schools because kids need to get back to learning with other kids.", "Schools need to be the first to open"
3. **Essential Services**
   a. Definition: A response that indicates the desire to prioritize essential services like Church, Libraries, Grocery Stores, Daycare, Hospitals, Nursing Homes, Transportation, Medical Practices, etc in the COVID reopening
   b. Examples: "Open visiting for hospitals and nursing homes. Patients would be much happier if they were allowed to see family!", "Probably public usage things such as libraries or markets", "places like doctors offices, grocery stores, ect"
4. **COVID Precautions/ "Still skeptical"**
   a. Definition: A response that indicates the person is having doubts on the reopening as a whole or thinks it depends on the level of precautions.
   b. Examples: "I'm not sure. Probably not restaurants because with masks off while eating there is still risk of spreading the virus.", "Covid is still around", "Numbers have been a lie since day one", "it's still risky until people are vaccinated"
5. **Outside Activities**
   a. Definition: A response that indicates the desire to prioritize outdoor activities such as outdoor venues/dining, patios, and parks in the COVID reopening
   b. Examples: "outside activities that can be distanced", "Outdoor large gatherings", Outdoor Venues/Dining, Patios, Parks

As things go back to normal, what do you think should reopen first? Why?	Every thing	School/ Work	Essential services	COVID Precautions/ "Still skeptical"	Outside activities	Recreational/ Social	Things already open	Too risky	Less risky
I think outdoor activities such as restaurants, beaches, concerts should open first						1			
Churches since they are the most important				1					
Everything all at once	1								
Schools to 100% capacity. Children are missing important experiences and stimuli during their critical developmental periods		1							
Whatever the science says should open first					1				
Recreation-type activities should open last because they are less important, but anything like libraries and stuff should open earlier because they are more needed				1					
Businesses		1							
Not sure…stores?				1					
Outdoor events, schools, some offices only for people who want to go back		1				1			
smaller, local businesses that would limit the amount of people inside because it'd be easier to manage and clean		1							1
Outdoor things and things that are more essential				1		1			
Nothing is closed right now . I don't mind keeping things closed to contain the virus .					1			1	

MY V O ! C E

Participants
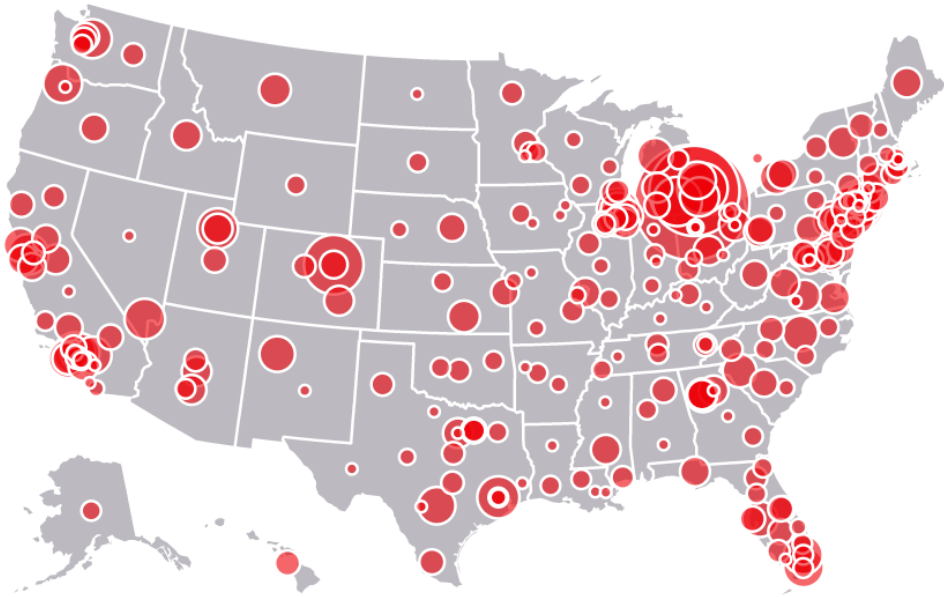
992 respondents (86%) to at least one question

Average age was 19.3 ± 2.4

49% male, 41% female, 10% nonbinary or transgender

62% non-Hispanic white

37% qualified for free or reduced lunch (self-report)

MY VOICE

Priorities of youth co-researchers

what should
re-open first

struggles during
the pandemic

MY VO!CE

Respondents prioritized the return of "essential services" noting impact on well-being

"I believe that health centers for the general public should be among the first, since there are many who do not have covid and need care."

"Open visiting for hospitals and nursing homes [first]. Patients would be much happier if they were allowed to see family!"

"Schools, libraries, and community services. These closing have had some of the greatest impact on people ."

"probably colleges and schools because it's important that students get the proper education they need, which may not be fully possible in a virtual environment."

"Maybe schools because a lot of kids are struggling with online school and the social aspect can be beneficial ."

"Most Things are pretty much open around me just with masks required and appropriate spacing. If they weren't I'd probably say schools cause kids have really taken a bad toll from lack of socialization."

MY VO!CE

Some respondents highlighted the need to maintain risk mitigation strategies

"I think places where it's easy to stay distanced, like restaurants."

"I think any activity people can participate in while wearing masks should reopen first because it's safer."
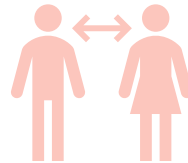
"Outdoor concerts because with distancing appropriately in regards to groups that come together, it seems like it would be fairly safe."

MY VOICE

During the pandemic, respondents described worsening:

"Trying to socialize feels way different now and I'm not sure if it's worth it."

"People have become more selfish, which just shows who you should and shouldn't trust."

14% Social and personal life

11% Respect of others

12% Health and wellness

8% Political tension and (lack of) government action

12% Restrictions and public health guidelines

"I think nothing has gotten worse other than people refusing to wear masks and social distance."

MY VO!CE

Conclusions

- Most respondents were supportive of re-opening essential services and others while:
    - Prioritizing re-opening services that impact health and quality of life
    - Maintaining some public health precautions
- Very few reported "everything" was already open when data was collected in April 2021
- Respondents reported significant struggles with social and personal life

Implications and Next Steps

- High school student co-researchers completed memoing, codebook development, and coding for 2 of 5 questions
  - Same processes used by full-time academic researchers on our team
  - Use MyVoice as a tool for building interest in STEM and research

- Youth are engaged in these issues and want to stay safe.

MY V O ! C E

Youth perspectives on their medical team's role in screening for and addressing social determinants of health

Claire Chang

Study Context

- Social and structural determinants of health (SDOHs) **significantly influence health outcomes**, especially among adolescents.

- Health systems **increasingly are implementing interventions to screen for and address SDOHs** in clinical settings.

Gaps in Knowledge

➢ Do patients want or expect help for social risks in the clinical context?
➢ What are youth's preferences surrounding their medical team's role in screening for and addressing SDOHs?

To understand youth preferences for SDOH screening and support in the medical setting

Data Collection and Analysis

- Five open-ended questions posed to MyVoice youth on March 5, 2021

- Iterative codebook development with 2 independent coders

- Summary statistics and themes assessed

Factors in the environments where we live, learn, work, and play can affect our health. Examples include housing, food, education, safety, transportation, discrimination, etc. What factors are most important to your health?

If you had a problem related to any of these factors, what might prevent you from seeking or receiving help?

Do you think it is important for your doctor or medical team to ask you about these factors? Why or why not?

If you had a problem related to any of these factors, how would you want your doctor or medical team to help?

How would you want your doctor or medical team to communicate with you about resources or services that could help you with these problems (e.g. text, email, handout, phone call, in-person etc.)?
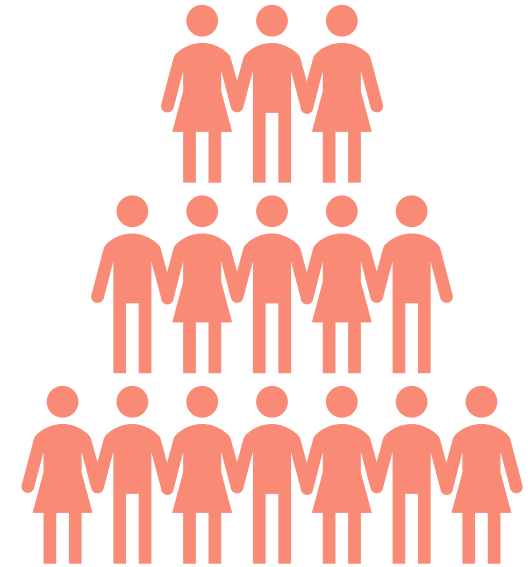
Participants

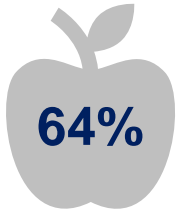1038 (89.8%) respondents

Average age: 19.2 ± 2.4

48% female

62% Non-Hispanic white

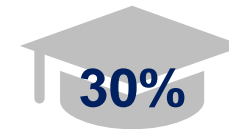39% qualified for free or reduced lunch in school

# Youth reported a variety of factors important to their health

"What might prevent me from seeking or receiving help is that it's hard to expose yourself and show how vulnerable you are to other people. You may know you need help but reaching out for it is harder."

The most common barriers to seeking or receiving assistance for SDOH were embarrassment, fear, and stigma

"The fear of being judged for my class and situation"

"Fear of being judged or gossiped about and fear of being rejected"
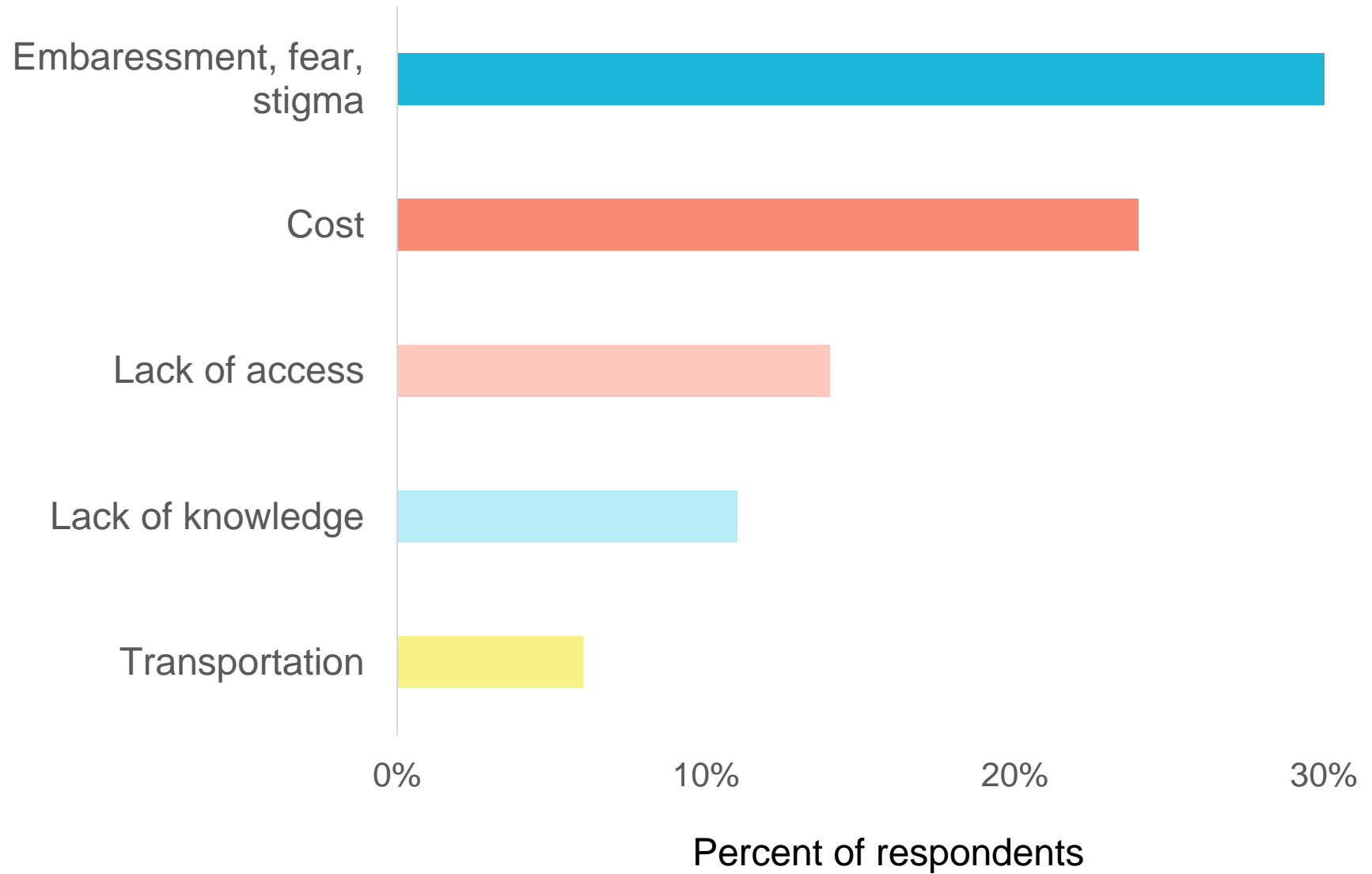
Most participants think it is important for their healthcare provider or medical team to ask about SDOH

IMPORTANT (81%)

"...they can **contribute a massive amount to your overall health**."

"They can then **help you get help** and make sure you are healthy and back on your feet."

"...knowing my situations in these areas [can] help them **determine the best treatment plans** and recommendations for me"

"It's important for a provider to provide **holistic care** and that includes living factors"

NOT IMPORTANT (9%)

"No, **not their job**"

"They probably **wouldn't be able to help** it and most factors are not up to them"

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Youth wanted information and conversations from medical providers related to SDOH
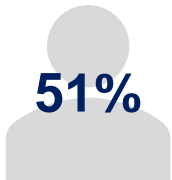
Youth indicated they would want their medical team to help by recommending or providing **information about resources (25%)** or by **referring (13%)** them to programs or agencies that could assist

Youth also expressed a desire for their medical teams to help by **offering advice (22%)** and by **listening (11%)** to their concerns
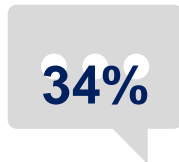
Youth primarily desire face-to-face communication from their providers about SDOH

"In person during an appointment"

"By phone"

"Probably in a handout or something so it could be referenced in the future."

51%

34%

27%

37%

17%

"Text is easiest"

"Email is great, organized, efficient"

MY V O ! C E

Conclusions

- Youth are concerned about embarrassment, fear, and stigma related to getting support for SDOH issues

- Provider-patient relationships are important to supporting and assisting adolescent and young adult patients with SDOH

- Healthcare-based SDOH interventions for youth should optimize opportunities for face-to-face discussions about assistance

MY VO!CE

Study Context

- **Telemedicine is increasing in popularity** across multiple stakeholders in efforts to facilitate access and reduce costs

- Telemedicine is **associated with improved or comparable health outcomes** when compared to in-person care

- Despite being "tech natives," there are **few guidelines or recommendations** regarding teen and young adult telemedicine use

AAFP, 2019; American Well, 2019; Mohrotra A, et al., 2013; Lin MH et al., 2017; Barney A, et al., 2020

MY V O ! C E

To understand youth knowledge, experiences, and preferences with telemedicine

Data Collection and Analysis

- Open-ended questions posed to MyVoice youth at two time-points

  - Five posed on October 18, 2019

  - Five posed on October 9, 2020

- Codebook development and coding completed by 2 independent investigators

- Summary statistics of demographics and code frequencies

2019

Telemedicine is when a doctor provides care for a patient when they aren't physically together (like online, phone, or video). Have you ever heard of telemedicine?

Is telemedicine something you think you would use? Why or why not?

Have you or anyone you know ever used telemedicine? Tell us about it.

What kinds of health issues do you think telemedicine would be good for?

What kinds of health issues would you rather see a doctor in person for?

2020

Telemedicine is when a healthcare provider cares for a patient when they aren't physically together (like online, phone, or video). Since the start of the COVID-19 pandemic, have you or anyone you know used telemedicine? Tell us about it.
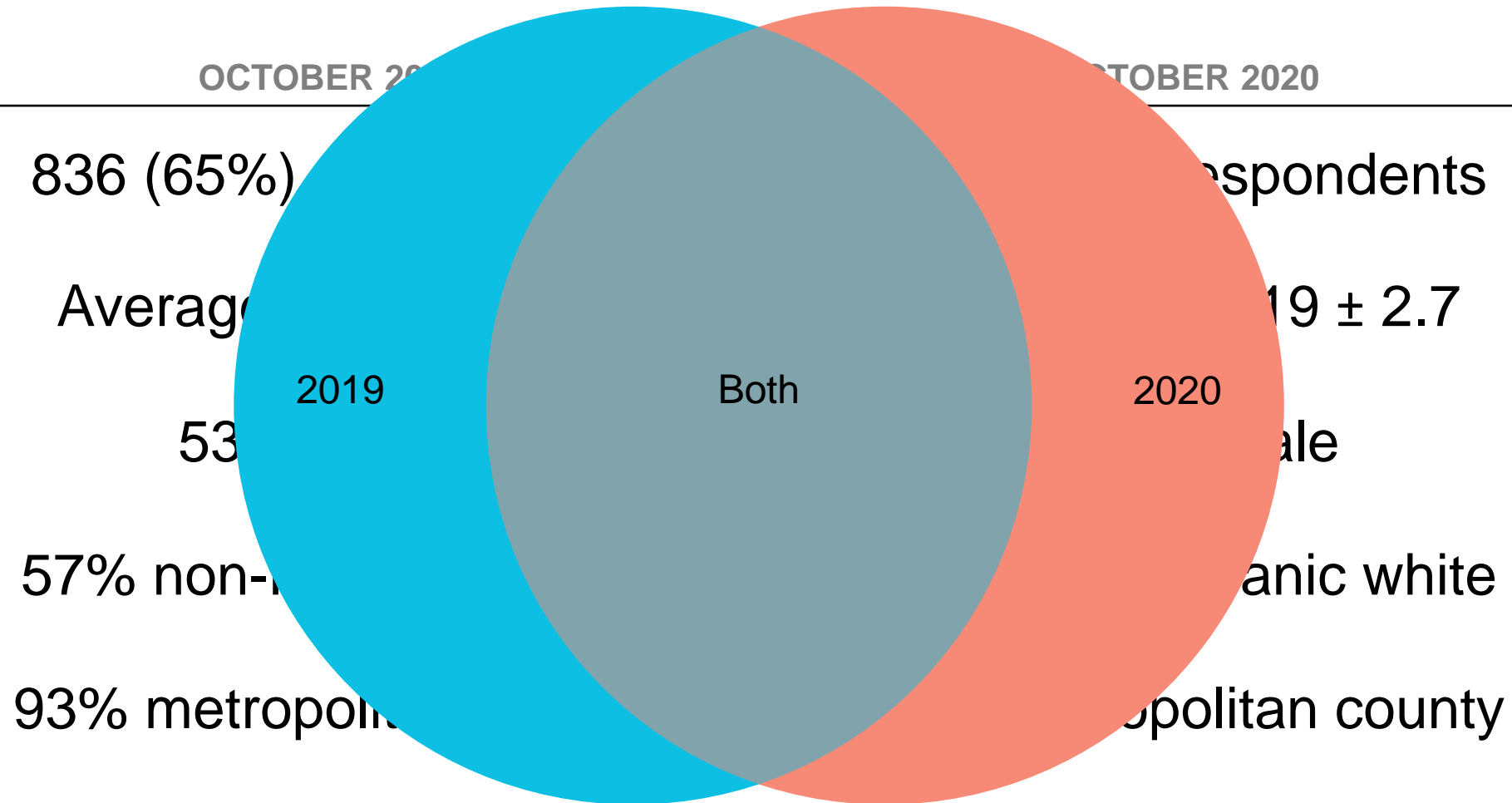
If you were to use telemedicine to see a healthcare provider, would you prefer a phone call or video visit? Why?

How effective do you think telemedicine is compared to an in person visit? Why do you say that?

What kinds of health issues do you think telemedicine would be good for? Why?

How has the COVID-19 pandemic changed your view on telemedicine, if at all?

Participants

OCTOBER 2020

836 (65%) ...spondents

Average ...19 ± 2.7

2019 Both **2020**

53 ...ale

57% non-...anic white

93% metropol... ...opolitan county

MY VO!CE

Youth reported knowledge and willingness to use telemedicine

"Yes! I think it's a great use of technology to provide better accessibility."

"Yes because I live quite far from my doctor and being able to communicate online is a lot more convenient."

63% reported knowledge of telemedicine

66% would use or would consider use of telemedicine

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Youth prefer video rather than phone visits, but believe both to be less effective than in person

VIDEO PREFERRED (68%)

"I like to know that they are looking at …and paying attention"

"I like being able to…have a more personal interaction"

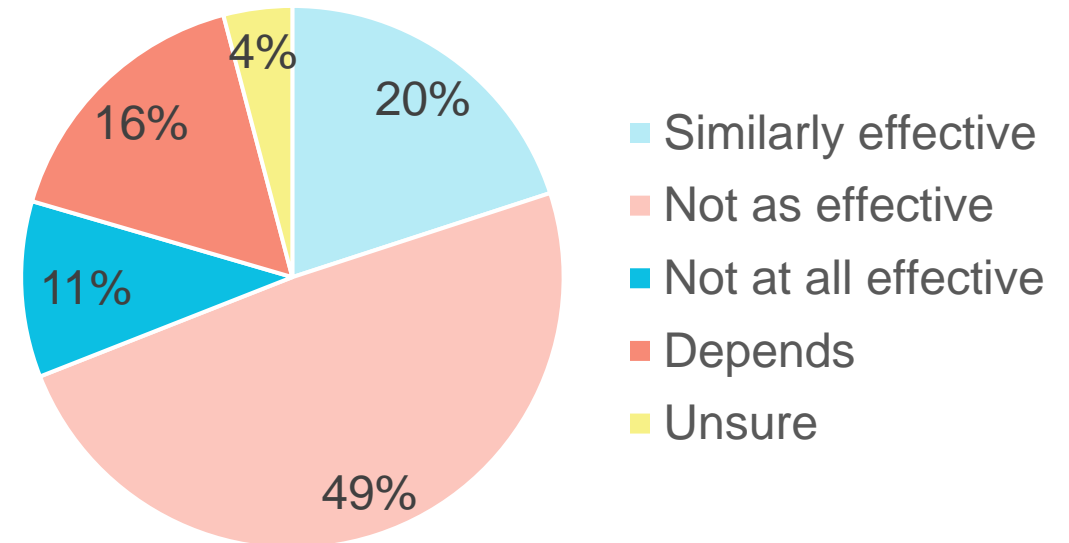"it is easier…to visibly see symptoms and actions to better assess and evaluate."

PHONE PREFERRED (23%)

"I don't like video calls, they make me incredibly anxious and on edge"

"…I have been in too many zoom meetings so I don't like video visits."

"it much easier to use than video call"

"I think it's less effective, you can tell a lot about a persons health by seeing them in person"

- 20% Similarly effective
- 49% Not as effective
- 11% Not at all effective
- 16% Depends
- 4% Unsure
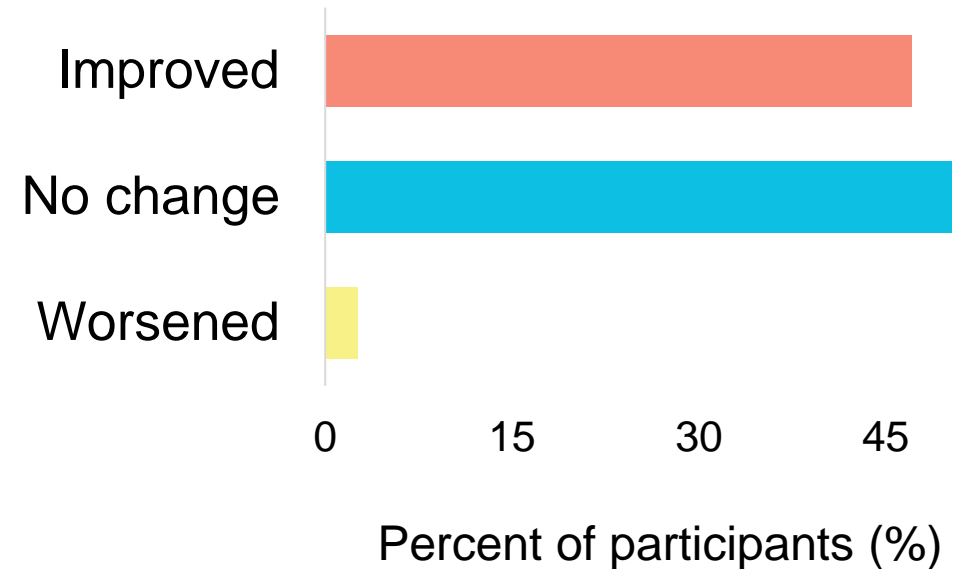
Conclusions

- Most youth know about and would use telemedicine services, particularly via video visits

- COVID-19 has increased youth use of telemedicine services as well as improved perception

- Though telemedicine is a viable option for a variety of services, in-person is preferred in some instances

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Implications

Engage youth in telemedicine

Offer a variety of services

Youth reflections on the first year of the COVID-19 pandemic (2020-2021)

Xochitl Amaro

MY.
VOICE

Youth are struggling today.

Understanding their experiences over the past year is critical to creating programs and policies to serve them in their "new normal"

Youth were asked to reflect on their experiences over the past year and share their feelings and future plans

MY V O ! C E

Data Collection and Analysis

- Five open-ended questions posed to MyVoice youth on May 7, 2021

- Iterative codebook development with 2 independent reviewers

What have been your best moments from the past year?

What have been your biggest challenges from the past year?

What has surprised you about the past year?

How do you feel your growth (personal, professional, etc.) has been impacted over the past year?

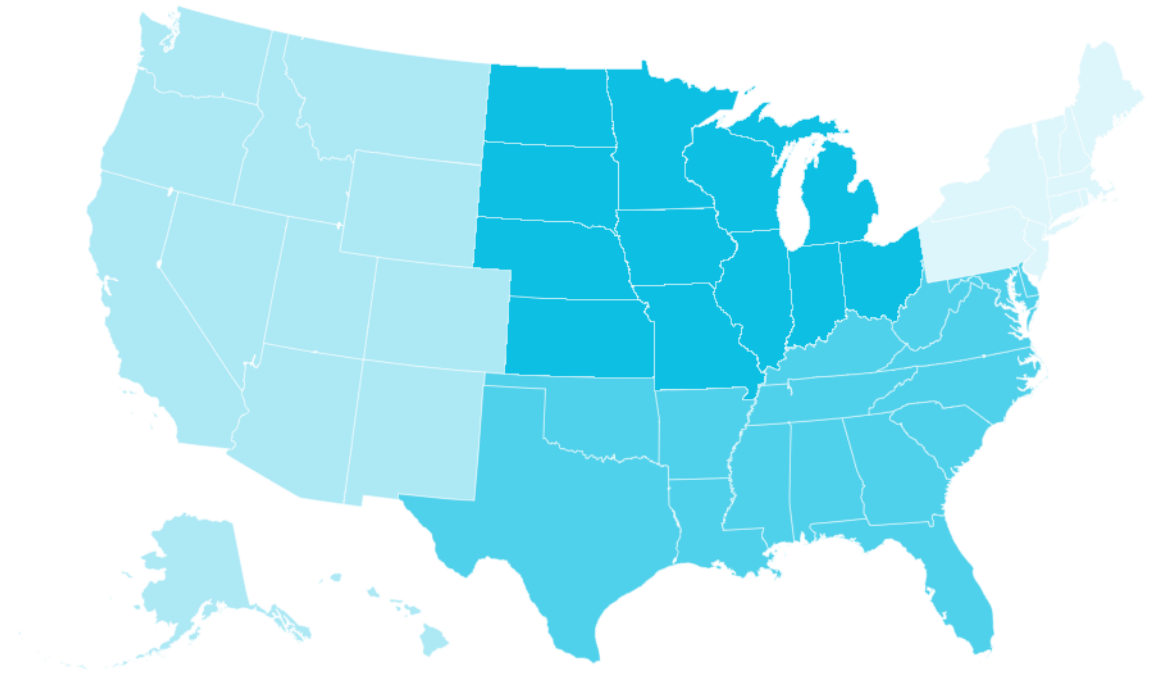How do you feel about your plans for the upcoming year? Why?

Best moments over the past year encompassed multiple contexts.

"Spending time in quarantine has let me spend more time in my hobbies and interests, learning and trying new things"

"Getting vaccinated and finally being able to return to a teeny bit of normalcy"

RELAXING
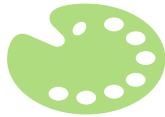
NEW HOBBIES

HEALTH & WELLNESS

FAMILY & FRIENDS

DEVELOPMENT

VACCINES & "NORMALCY"

"Being able to spend more time with family and friends, having time to reflect and focus on myself"

MY **V O ! C E**

Youth reported many challenging moments.

"Online school and trying to stay focused and engaged while doing so"

"Having to quarantine because I've been a close contact, not feeling motivated to do anything productive, feeling isolated from my friends"

ONLINE SCHOOL

COVID-19

MENTAL HEALTH

ISOLATION

MOTIVATION

EMPLOYMENT

"My biggest challenges from this year have been overcoming the loneliness associated with isolation."

MYVO!CE

Youth were surprised by the impacts of the pandemic.

"Being able to get a vaccine and how fast it went!"

"How divisive the country can be. I honestly never thought things would get to the point that people are storming the capitol and genuinely believing a vaccine is the mark of the beast."

COVID-19

CLOSURES

PREVALENCE

VACCINATION

PASSAGE OF TIME

POSITIVES

DEVELOPMENT

COMMUNITY

RESILIENCE

"I'm capable of more than I thought, I actually got a job"

NEGATIVES

DIVISION

IGNORANCE

Youth reported SLOWED, NEGATIVE, and POSITIVE impacts on both personal and professional growth during the past year.

"Personally I have grown an incredible amount with understanding who I am and being comfortable, despite the lack of social interaction"

"Oh it's been a totally different experience. Much more difficult, stressful and intimidating"

Youth report a wide range of feelings about the upcoming year.

OPTIMISTIC OR HOPEFUL

PREPARED OR CONFIDENT

UNCERTAIN OR NEUTRAL

DRAINED OR EXHAUSTED

NERVOUS OR APPREHENSIVE

UNPREPARED OR UNCONFIDENT

"I'm optimistic that we will return to normalcy. I have a lot of things lined up for myself that I'm looking forward to"

"I'm excited! it's a new start! I'm moving and starting college"

"I feel slightly uneasy because I feel I'm not as far along or as accomplished as I should be for someone my age"

Conclusions

- Youth have experienced numerous **positive and negative impacts** from the COVID-19 pandemic

- In challenging times, youth were **surprised by their own resilience** and that of others

- Emotions for the future vary, but many youth report **feelings of hope and excitement** for new times
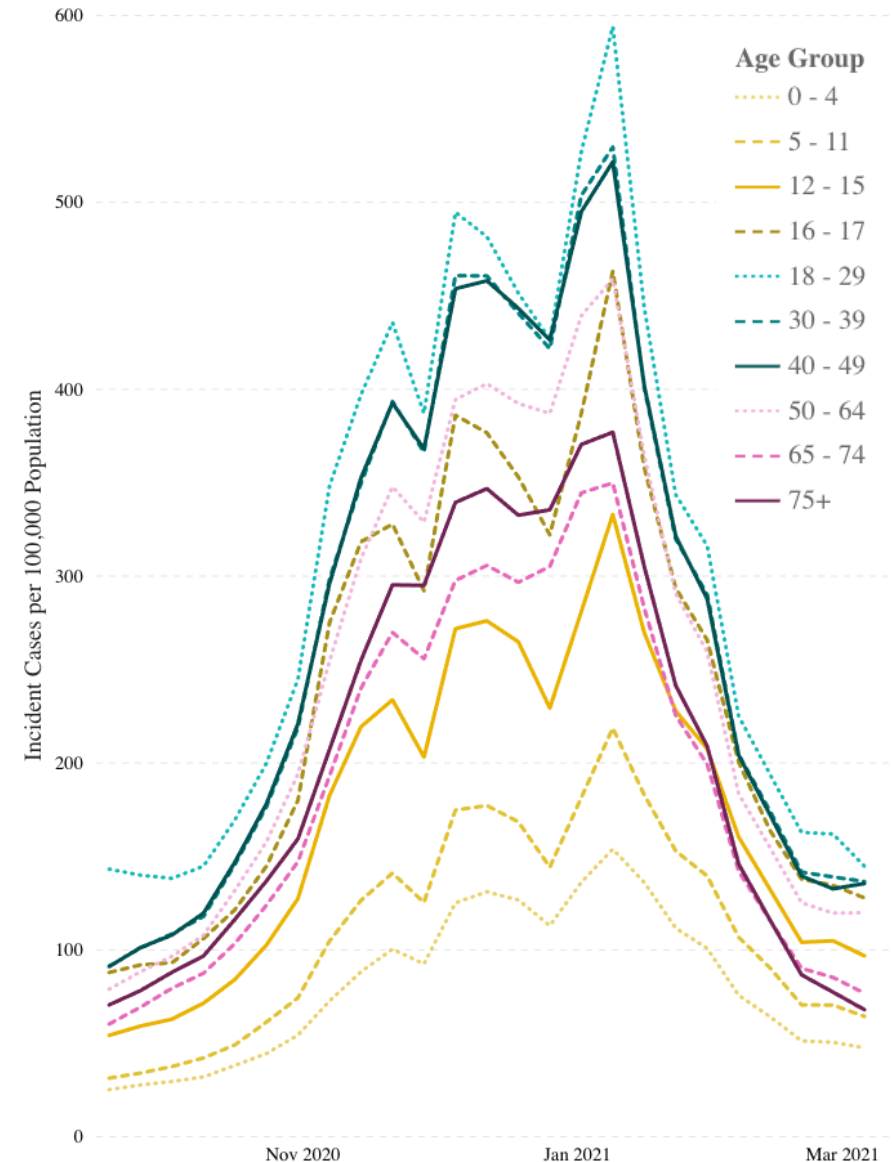
Youth perceptions of vaccination for COVID-19 in the United States

Steve Gorga, MD

MY VOICE

Study Context

- Increased SARS-CoV-2 infections in youth

- Vaccines uptake important for community protection

- Vaccine hesitancy may be a barrier

- Unknown impact of mass vaccination campaign on US youth

Case Earliest Date by End of Week*
covid.cdc.gov, through March 12, 2021

What were **perceptions of the COVID-19 vaccine** among youth after the US underwent a mass vaccination campaign?

Data Collection and Analysis

- Five questions posed to MyVoice youth on March 12, 2021

- Codebook developed through thematic analysis of responses
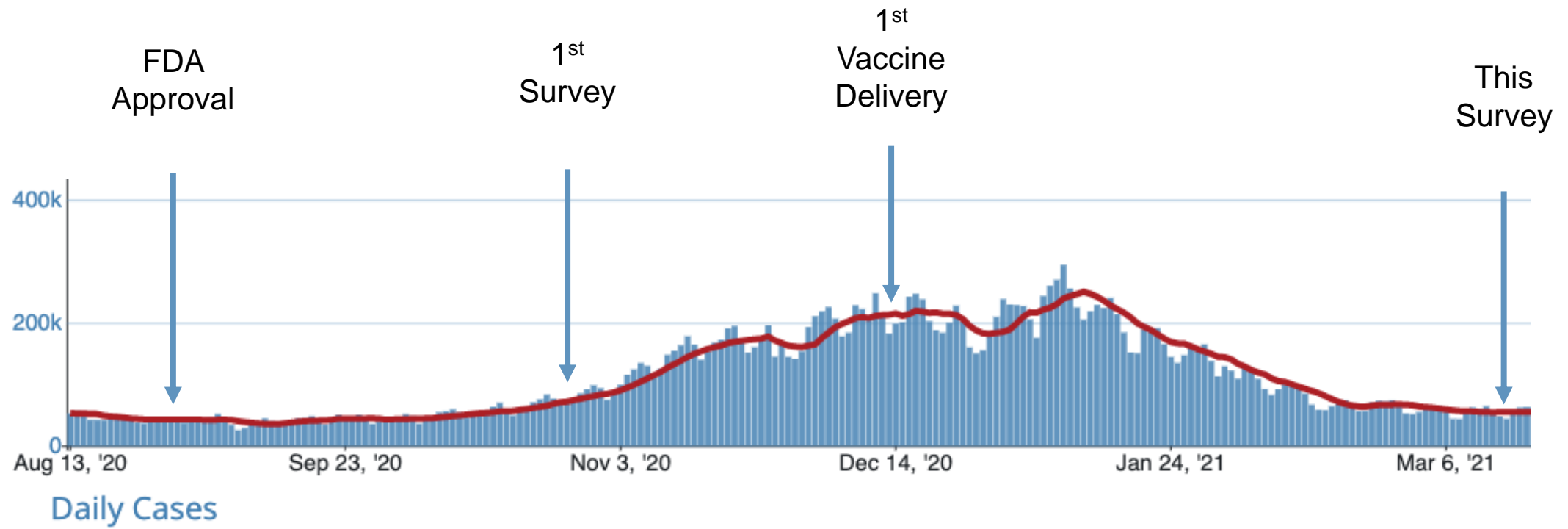
When a COVID-19 vaccine becomes available to you, will you get it? Why or why not?

What concerns, if any, do you have about getting a COVID-19 vaccine?

Do you think that COVID-19 vaccines are safe and effective? Why or why not?

What would make it easier for you to get vaccinated once you are eligible?

If you were to get vaccinated, would it change your behaviors/habits? How?

Participants

1074 (93%)

19.4 years

49% male

62% non-Hispanic white

42% high school

40% some college/tech

18% college/tech grad

32% Midwest

27% South

22% West

19% Northeast

MY VO!CE

Most youth want the vaccine

Question/theme	No. (%)[a]	Representative quote
When a COVID-19 vaccine becomes available to you, will you get it? Why or why not? (n = 1068)		
Yes (includes already received)	797 (74.6)	
Protect self	279 (35.0)	"I work in a hospital so it's important for me to protect myself…"
Normalcy	200 (25.1)	"Yes! I want to go back to normal life!"
Protect others	184 (23.1)	"I'll take it because then I can protect my family and community"
No	173 (16.2)	
Adverse effects	45 (26.0)	"No, because it has a lot of side effects"
Rushed	36 (20.8)	"No because it's not well tested yet."
Does not trust the vaccine	27 (15.6)	"No. I don't trust it."
Uncertain	90 (8.4)	
Safety concerns	40 (44.4)	"I'm not sure. I'm afraid of the possible side effects."

Adverse effects concern US youth

Question/theme	No. (%)ᵃ	Representative quote
What concerns, if any, do you have about getting a COVID-19 vaccine? (n = 1009)		
None	324 (32.1)	"None, if the science is good then so am I"
Adverse effects	422 (41.8)	"...the commonly known and explicitly mentioned side effects, as well as the aforementioned possible unknown negative long term side effects."
Not effective	118 (11.7)	"I am concerned that it will be less effective when more variants emerge"
Safety	84 (8.3)	"That it's unsafe in some way"
Rushed	56 (5.6)	"I just feel the vaccine is not that well developed yet"
Availability	52 (5.2)	"Maybe the vaccine will be delayed to my area"
Do you think that COVID-19 vaccines are safe and effective? Why or why not? (n = 990)		
Yes	721 (72.8)	"I think they are safe, yes"; "Yes, they are something like 93% effective"
Data and testing	221 (30.7)	"I think so, trials have shown that they are"
Trust the science	145 (20.1)	"Safe because I believe in science"
Trust the government	95 (13.2)	"Yes, I trust the govt organizations that approved it"
No	104 (10.5)	"I don't think it's safe bc of possible later on effects"; "Not really. A new strain of covid has just been discovered"
Not well tested	26 (25.0)	"No I don't think they have been through enough trials"
Too new	24 (23.1)	"No I don't trust how they just made it out of no where"
People hurt	19 (18.3)	"No. More people died from the vaccine than from plain covid"
Depends	90 (9.1)	"Possibly? I think they work but I'm not sure how safe they are"

Conclusions

75% want the vaccine
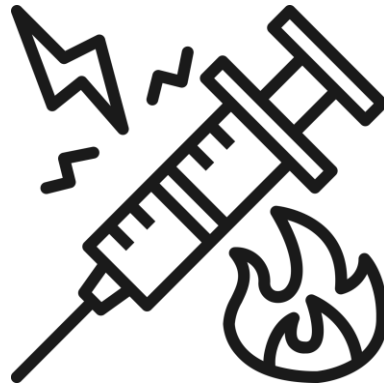
Concerns about side effects exist

Return to everyday life is important

Youth perspectives on weight/shape control behaviors related to the COVID-19 pandemic

Kendrin Sonneville, ScD, RD

MY.
VOICE

Study Context

- Significant **increase in eating disorder** admissions were seen among adolescents **during the COVID-19 pandemic**

- **Situational factors** associated with the pandemic **may have precipitated disordered eating**

  o Emotional distress

  o Isolation

  o Social media use

    - **Glorification of thinness** and stigmatization of fatness

    - COVID-related discourse related to **impact of the pandemic on body weight** (i.e., the "quarantine 15")

Otto et al., 2021; Vitagliano et al., 2021; Simone et al., 2021; Cooper et al., 2020; Rodgers et al., 2021; Singh et al., 2020; Pearl, 2020; Chou et al., 2014

MY V O ! C E

To evaluate impacts of the pandemic on weight/shape control behaviors among adolescents and young adults in the U.S, as well as perceived changes to social media content related to weight/shape

Data Collection and Analysis

- Two open-ended questions posed to MyVoice youth on September 5, 2020

- Iterative codebook development with 2 independent coders

- Summary statistics and themes assessed

Since the pandemic, have you changed your eating or exercise habits because you were worried about your weight/shape? Tell us about it.

What have you seen people posting on social media about weight/shape during the COVID-19 pandemic? What do you think about these posts?

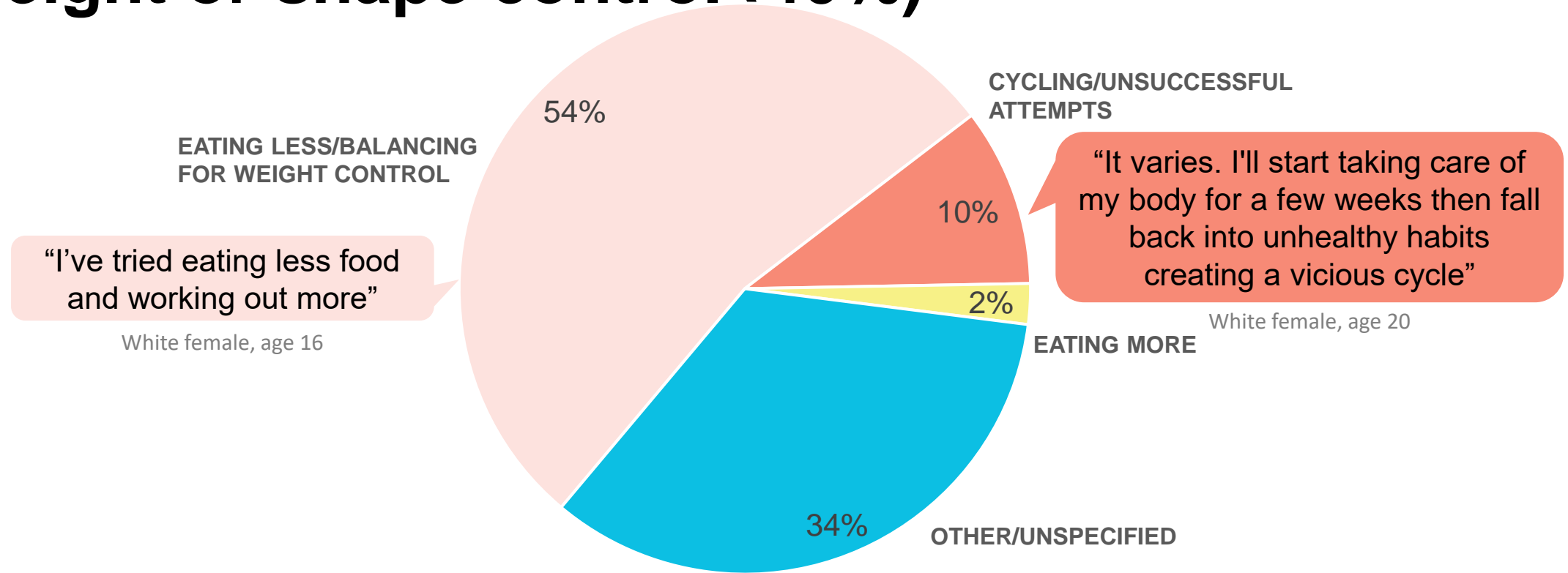# Participants

938 (81.4%) respondents
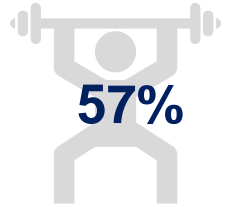
Average age of participants 18.9 ± 2.7
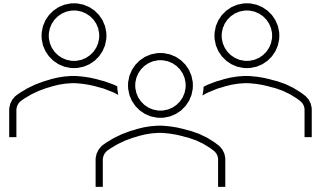
47.6% female, 44.2% male, 8.2% other gender

57.2% Non-Hispanic white

MY VO!CE

Many respondents indicated a change in diet and/or exercise for the explicit purpose of weight or shape control (40%)

EATING LESS/BALANCING FOR WEIGHT CONTROL — 54%

CYCLING/UNSUCCESSFUL ATTEMPTS — 10%

EATING MORE — 2%

OTHER/UNSPECIFIED — 34%

"I've tried eating less food and working out more"
White female, age 16

"It varies. I'll start taking care of my body for a few weeks then fall back into unhealthy habits creating a vicious cycle"
White female, age 20

Schmid et al, Eating Behaviors, *under review*

Common social media themes

57% Attempts to change body/behaviors

25% Weight gain/eating more

18% Body positivity, acceptance, or neutrality

Schmid et al, Eating Behaviors, *under review*

"I saw some people saying there's 'no excuse' for being out of shape now with all the free time. I don't agree with that, and think it can be harmful."

"Attempts to change body/behaviors" and "weight gain/eating more" posts were often associated with negative feelings (e.g. shame, guilt)

"I've seen a lot of people worrying about weight gain and getting out of shape, it makes me sad and a little more self-conscious"

"There have been people posting about not defining yourself by your body, as well as to use the newfound time to improve yourself. I find them a positive role model"

"Body positivity, acceptance, or neutrality" posts were often perceived as motivating/inspirational or reassuring/comforting

"I follow a lot of body positive accounts who have been really inclusive and comforting"

Schmid et al, Eating Behaviors, *under review*

Conclusions

"Things talking about the quarantine 15 and posts like those really just freak me out"

- Weight/shape concerns among adolescents and young adults in the U.S. may be heightened due to the COVID-19 pandemic

- Concerns about body changes and/or weight gain during COVID may be reinforced by social media content about pandemic weight gain and promotion of weight/shape control behaviors

- Some social media content may have a positive effect

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