


# **YES! *Sí Se Puede*: Preliminary Results from an Urban Latinx Youth Development Program**

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## ABSTRACT

**Background:** Latinx persons are America's largest and the fastest-growing ethnic minority, however they are at risk for poor academic and health outcomes. The challenges presented by urbanization are best addressed by collaborative community partnerships.

**Objectives:** Share implementation and preliminary results of a partnership-driven program for positive youth development of at-risk youth.

**Methods:** The YES! *Sí Se Puede* project aimed to reduce academic and health disparities among Latinx youth through a university-middle school-community organization alliance. A sample of 134 middle school students (across three cohorts) from southern California participated in a youth development intervention across one year (2010-2013). Data were collected at baseline, post-program, and 6-month follow-up.

**Results:** Computer knowledge ( $p=.006$ ), academic self-esteem ( $p=.010$ ), and friend social support for physical activity ( $p=.002$ ) significantly increased.

**Conclusions:** While data show partial success, the long-term investment of attention and quality programming for underserved youth and families will likely provide benefits for years to come.

**KEYWORDS:** youth empowerment, Latinx youth, school-based, community collaboration

Nearly one-third of United States (U.S.)-born Hispanic/Latinx (hereafter Latinx) people are younger than 18.<sup>1</sup> Latinx people are the largest racial/ethnic minority in the U.S. (19.1%),<sup>2</sup> the health and well-being of Latinx youth is critical to the overall well-being of the nation. Hence, youth support programs are imperative for the nation's future.

Educational attainment Latinx youth is lower than their non-Hispanic White and Black counterparts.<sup>3</sup> They also experience higher rates of obesity, physical inactivity and violence.<sup>4-6</sup> Negative health behaviors tend to track into adulthood and increase one's risk for future chronic diseases and poor health outcomes.<sup>4,7,8</sup> Urbanization (the increasing volume, concentration and diversity of people and entities in a city)<sup>9</sup> negatively impacts youth, including the aforementioned disparities.<sup>10</sup> For example, exposure to community violence in the U.S. has put Latinx and Black adolescents at high risk for death by homicide.<sup>11</sup> Community programs can use assets-based approaches to promote positive youth development in psychosocial, health and cognitive domains, and are strengthened by partnerships with researchers.<sup>12</sup>

Positive youth development programming has been widely used to improve educational outcomes and wellness.<sup>13</sup> Participation of Latinx youth in after-school positive youth development programs is limited, often due to the lack of culturally nuanced, assets-based programming.<sup>14,15</sup> Thus, there is a need for Latinx-focused programming that is culturally tailored to Latinx experiences and that promotes positive Latinx cultural identity.<sup>15</sup> The Youth Empowerment for Success (YES!): *Sí Se Puede* [Yes You Can] Project engaged urban Latinx youth to improve their well-being and educational attainment through an academic-community partnership. YES! aimed to promote the short- and long-term health and resiliency of Latinx youth to increase health equity and foster development into thriving community members. Year-long program activities supported academic enrichment, personal development and wellness,

culturally and linguistically resonant family outreach and educational activities, career development, and cultural enrichment/cultural asset recognition.

The Critical-Positive Youth Development Model<sup>16</sup> guided evaluation. This model focuses on strong social support from adult and institutional environments, opportunities for development, and the recognition of youth as assets and resources. Cultural adaptations for YES! centered on people, language, and affirming traditions: key partners engaged Latinx young adults as role models; families were invited to enrichment workshops; materials and activities were available in Spanish and English; workshops were based on Latinx cultural assets, such as *familismo*. Given the intervention-only design, the intervention is considered a pilot program with preliminary results. The purpose of this paper is to report on the evaluation outcomes, including variables related to technology (e.g., computer knowledge), psychosocial factors (e.g., self-esteem, depressive symptoms, cultural acceptance) and health behaviors (e.g., activity levels).

## **Method**

### **Participants**

A largely-Latinx public middle school from an area of high socioeconomic need was the intervention site. Three annual cohorts (enrolled each year in 2010, 2011, and 2012) of 6th-8th grade at-risk youth were recruited via parent/family informational sessions, principal/teacher/staff referrals, and flyers. Eligibility criteria included: 1) being of Latinx descent; 2) one or more vulnerability/risk factors (academic, behavioral, health, family dynamic and/or transition year); and 3) commitment to year-long program. Youth with multiple risk factors were given priority, as were 6th graders since transition to middle school is a difficult period.<sup>17</sup> Students not fitting inclusion criteria could attend free, on-site, after-school

programming offered by the school (dosage and type of services were similar, except no summer services offered). Parental consent and youth assent were completed. The California State University, Long Beach (CSULB) Institutional Review Board approved all study procedures.

## **Measures**

### ***Activity Levels***

The Godin leisure-time exercise questionnaire<sup>18,19</sup> assessed physical activity. Three items ask the number of times per week persons engage in strenuous, moderate and mild activity, which are then multiplied by 9, 5, and 3, respectively. The final score is the sum of the products of each activity level. Two items measured hours of TV watching and computer use not for schoolwork. The stem question was: “On an average school day, how many hours do you...,” with 7 ordinal response options ranging from *I do not* to *5 or more hours per day*.

### ***Career & Educational Goals***

College major interest was asked by: “One thing I would like to study in college or university is:” and career interest was asked by: “One career I am interested in knowing more about is:” where students wrote in a response. Five single items collected data on educational goals. One item asked, “How far do you want to go in school?” (response options: School is not for me, Graduate high school or get my GED, College/university, and Job training after high school). Four items with 6-point response options (1=*False* 2=*Mostly false*, 3=*More false than true*, 4=*Mostly true*, 5=*True*) were also included. Example: “I see myself graduating from college or a university.” Items were developed specifically for the project by the principal investigator, project coordinator and evaluator to address specific program objectives.

### ***Cultural Acceptance***

A 6-item scale, adapted from the Young Men's Christian Association (YMCA) Youth

Institute Survey,<sup>20</sup> measured cultural acceptance (previously used to evaluate a youth development program in the same area, including Latino children). Response options ranged from *Strongly disagree* (1) to *Strongly agree* (4). Sample item: “I have respect for teens of other cultures or ethnic groups.” A mean scale score was calculated ( $\alpha=.746$ ).

### ***Depressive Symptoms***

The Patient Health Questionnaire (PHQ)-9,<sup>21</sup> previously used successfully for depression screening in Latinx adolescents,<sup>22</sup> is comprised of nine items with response options ranging from *Not at all* to *Nearly every day*. Scale items ask how often a problem has bothered the respondent in the past two weeks, such as “Feeling down, depressed, or hopeless.” A sum score was calculated ( $\alpha=.911$ ).

### ***Determinants of Physical Activity***

Self-efficacy to for physical activity<sup>23,24</sup> was assessed via eight items with a 5-point Likert response scale, ranging from *Disagree a lot* to *Agree a lot*. A sample item was: “I can be physically active during my free time on most days.” The mean of all items was computed to create a scale score ( $\alpha=.847$ ).

Friend social support for physical activity,<sup>25</sup> validated in a sample with Latino middle school students,<sup>26</sup> included 13 items asking how often friends engaged in activities in the past three months. Example: “Offered to exercise with me.” Response options ranged from *None* (1) to *Very often* (5). A mean scale score was calculated ( $\alpha=.936$ ).

### ***Self-Esteem***

The General School subscale of the Self-Description Questionnaire (SDQ)<sup>27</sup>, previously used with Latino youth,<sup>28</sup> assessed academic self-esteem via ten items; example: “I’m good at most school subjects.” The General Self subscale of the SDQ<sup>27</sup> assessed general self-esteem;

comprised of ten items; example: “I can do things as well as most people.” Both subscales used a 6-point Likert response format, ranging from 1=*False* to 6=*True*. Negatively stated items were reverse scored so that higher scores indicated higher self-esteem. Scale sum scores were calculated ( $\alpha=.778$ ,  $\alpha=.806$ , respectively).

### ***Supportive Adult***

Eight items from the California Healthy Kids Survey<sup>29</sup> measured whether participants had a supportive adult in their life, outside of home or school. This survey was used successfully with children of diverse racial/ethnic backgrounds across the state. Participant responses ranged from 1=*Not at all true* to 4=*Very much true*; sample item: “Outside of my home and school, there is an adult who listens to me when I have something to say.” A mean scale score was calculated ( $\alpha=.828$ ).

### ***Technology***

Single items measured access to computers and to the internet; response options included 1=*Never*, 2=*Once per month or less*, 3=*Weekly* and 4=*Daily*. Using this response format, computer use was assessed with the stem question: “In the last month, how often did you use computers to...,” followed by 16 items, such as “complete school assignments.” A mean scale score was created ( $\alpha=.878$ ). Computer knowledge was measured with 6 items; responses ranged from 1=*No knowledge* to 4=*Excellent knowledge*; example: “I can use software to create presentations;” a mean score was computed ( $\alpha=.842$ ). Items were adapted from the YMCA Youth Institute Survey.<sup>20</sup> Technology items were those that were readily accessible to low-income youth at the time of study (i.e., smart phones and tablets were not yet widely used by the general population, particularly among those from low-income areas, therefore items such as these were not included on the instrument).



## **Procedure**

### ***Project Partnership***

The intervention delivered year-round services through a collaboration of five partners (established during developing of the funding proposal), the CSULB Center for Latino Community Health, Evaluation, and Leadership Training (CLC), Hamilton Middle School (HMS; location of the YES! *Sí Se Puede* Center), CSULB summer camps, the Fairfield Family YMCA (FF YMCA), and YMCA Youth Institute. The CLC led evaluation and coordination of project partners and volunteers. HMS hosted the program and were the principal recruiters. Program participants attended standard CSULB summer academic and sport camps. The two YMCAs implemented the academic year program: Youth Institute provided monthly digital media training; FF YMCA provided staff to oversee implementation of program components. All partners contributed to the study design as all had experience in youth leadership development. This entailed involvement during the grant-writing stage, discussing various options for the design based on their areas of expertise, including findings from their previous studies. All partners remained for the entire program. Data were shared consistently among all, and various partners (YMCAs, HMS) contributed to conference poster presentations. The CLC led development of the current paper.

### ***Intervention***

See Table 1 for overview of activities. Academic enrichment activities were integrated into all activities. Digital media sessions instructed youth on creating health-related digital videos, posters, and public service announcements (PSAs) to promote health and wellness. Monthly enrichment workshop topics included nutrition, physical activity, mental health, careers, college pathways, and professional etiquette, among others. Each workshop was based on Latinx

cultural strengths; e.g., healthy Latinx recipes were used; Latinx professionals from the community spoke about their careers. Parents and families were invited to all enrichment workshops (provided in Spanish and English). Intervention dosage ranged from 6-9 hours per week during the academic year. In summer, youth attended 20 days of Academic Enrichment Camp (4.5 hours/day) and 49er Sports Camp (4.5 hours/day) at CSULB, exposing youth to a university setting. The program culminated with an annual year-end event for youth and their families. Participants were recognized, dinner was provided, and students' PSAs were shown on the big screen in the school auditorium, decorated in red-carpet event style. All program partners attended.

### ***Data Collection***

A quasi-experimental single-group pre-post-test evaluation design assessed baseline, immediate post-program, and 6-month follow-up data. Survey data were collected in a group setting (~45 minutes) using self-report, confidential surveys (in preferred language of participant, English or Spanish). Students no longer at HMS and the entire final cohort completed the follow-up survey by phone.

### **Statistical Analyses**

Frequencies were calculated for open-ended items on academic and career interests. Repeated measures analysis of variance (ANOVA) assessed changes in continuous outcomes, with Bonferroni-corrected post hoc tests. Huynh-Feldt (HF) corrected estimates were reported when sphericity was violated. Marginal homogeneity tests assessed pre-to-follow-up changes for single-item ordinal variables. IBM Statistical Package for the Social Sciences (SPSS) v.25<sup>30</sup> was used for all analyses.

## **Results**

See Table 2 for demographics. During the academic year, students attended 65% of sessions. Among the 75 students that attended summer camp, average session attendance was 37%. The overall attrition rate was 32%. Reasons for dropout included moving and competing activities, such as soccer. Some reasons that students did not attend camp were that parents did not want them to, traveling to home country during break, and caring for siblings. There were no significant differences in age, gender, or years in the U.S. between those who dropped out and those who completed the program nor between those that attended camp vs. those who did not.

Across pre, post, and follow-up assessments, there was a statistically significant increase in computer knowledge ( $F(2,108)=5.35, p=.006$ ), academic self-esteem ( $F(2,84)=4.89, p=.010$ ), and friend social support for physical activity ( $F(2,56)=6.70, p=.002$ ). See Table 3 for post hoc results. There were no significant changes in computer use ( $p=.557$ ), general self-esteem ( $p=.115$ ), having a support adult around ( $p=.613$ ), cultural acceptance ( $p_{HF}=.313$ ), depressive symptoms ( $p=.662$ ), self-efficacy to engage in physical activity ( $p_{HF}=.081$ ), physical activity score ( $p=.977$ ), or sedentary behavior ( $p=.230$ ).

Between pre-to-follow-up, there were no changes in educational goals ( $p=.439$ ), the number of students who reported enjoying learning new things ( $p=.109$ ), wanting to go to college/university ( $p=.180$ ) or seeing themselves graduating from college/university ( $p=.414$ ). Students were interested in learning about the arts (11% at baseline; 7% at post; 9% at follow-up), STEM (19% at baseline; 29% at post; 20% at follow-up), medical/health (24% at baseline; 27% at post; 30% at follow-up), and law/law enforcement (20% at baseline; 18% at post; 16% in college). At each time point, at least half of STEM interest was in engineering/computer science/technology and a quarter of medical interest was in veterinary medicine. While the areas of career interest remained the same across assessments, similar to college major above, the

proportions of youth expressing interest in a particular area changed across baseline, post and follow-up assessments, respectively: arts (11%, 8%, 6%), STEM (7%, 10%, 25%), medical/health (33%, 33%, 23%), and law/law enforcement (13%, 23%, 15%).

### **Discussion**

Preliminary results of the YES! pilot were mixed. There was a significant increase in academic self-esteem between baseline and post-assessment as well as improvements in computer knowledge, academic self-esteem, and friend social support for physical activity from baseline to follow-up. However, no significant changes were found for general self-esteem, depressive symptoms, activity levels, or their psychosocial correlates (e.g., self-efficacy). The significant findings map onto the three areas (social support in environment, opportunities for development, and recognition of youth as assets) of the Critical-Positive Youth Development Model.<sup>12</sup> Strong social support from adults and institutional environments were the likely drivers of increased academic self-esteem.<sup>31,32</sup> Hands-on opportunities for development, particularly using computers and related technology, increased significantly, affirming learning outcomes reported in similar studies.<sup>33</sup> The third area, recognition of youth as assets and resources, was proxied by a measure of cultural acceptance. While there was no change in this area, this construct is likely better captured qualitatively than quantitatively, as has been done in studies of identity construction of immigrant children,<sup>34</sup> particularly given that the influence of cultural capital on early adolescents is a relatively new area of investigation. These results support continued use of this integrated model<sup>12</sup> to underscore the complex and interacting factors that support youth development and well-being.

A probable reason for the significant increase in academic self-esteem was the program's provision of a congruent encouraging environment and meeting students *where they were at* for

learning. For example, near-peer mentors helped English language learners while emphasizing that Spanish was an asset, not a detriment. Given that the program focused on students who needed academic support, we likely met a clear need in this aspect. Students used several computer programs (for video editing, adding music, visual editing) to create their PSA films, engaging them in novel use of computers. This likely drove the increase in computer knowledge. Since the students participated in cohorts (*familias*), they likely built friendships with their program peers during all activities, which may have lent to the increased sense of friend support for physical activity.

The lack of change in other areas may be because the bases for the Critical-Positive Youth Development Model (e.g., having at least one supportive adult) were already in place. Positive parenting has been related to resilience in rural Latinx youth.<sup>35</sup> At least one parent of each participant completed program interviews, some attended monthly workshops, and the yearly red-carpet film event was well attended by families. Parent/family participation in these activities suggests that they provide the support youth need.

With respect to cultural asset recognition and cultural enrichment, Latinx youth, particularly Mexican American, were the majority at the school. Families' and students' sense of belonging appeared to increase as a result of their participation, based on informal interactions during program activities (i.e., during workshops and comments made to program staff). Despite claiming pride in their cultural heritage, prior to their participation, youth knew few details of cultural traditions, so rather than developing a more global or cross-cultural enrichment, the activities centered on deepening the understanding of Latinx traditions and culture as a springboard for appreciation for other cultural practices. These activities may have thus strengthened knowledge of their own culture(s), providing an opportunity for enhanced cultural

appreciation as they mature. The importance of learning about one's own culture is supported in research with Latinx families.<sup>36</sup>

Floor and ceiling effects may explain other null findings. Depressive symptoms were low at baseline, reducing the ability to improve. Career development did not change, possibly since ratings were very high for all these measures at baseline, ranging from 87-96% agreement with statements about interest in attending and graduating from college. With only one workshop dedicated to career pathways, most participants' views still mirrored those of adults they knew working in those fields. Given the consistent engagement in physical activity across the program, it was surprising not to find changes in activity levels. However, the self-report physical activity measure did not capture actual time spent in physical activity, and increased activity may not impact sedentary behavior, which queried only TV and computer use.

While the program was holistic and year-long, a limitation was that dosage for any given topic was limited. Those areas with greater dosage (e.g., academic support, computer activities) had significant results, except for physical activity. Since the physical activity measure asks about leisure time activity, perhaps students did not consider the time being active during the program as leisure. Physical activity data were also self-reported, a significant limitation. Noting that there were data reporting errors among the first cohort, the instrument was simplified for the remaining cohorts, but remained somewhat difficult to answer reliably.

The generalizability of this study is limited to samples with predominantly Mexican American youth who live in dense, highly urban environments. The considerable amount of time since completion of the project and publication of findings may further impact external validity, given changes in social and behavioral trends. Internal validity is also impacted given that a randomized control design was not implemented (due to funding constraints). Another after-

school program at HMS was available to low-income students, opening the possibility that other youth development programs may have been offered within the community, potentially impacting program effects.

The 32% attrition rate is relatively large and limited power to detect changes across time, particularly given the low numbers of follow-up data. Higher dropout and loss-to-follow up may have been due to realities of working with a high-risk, highly mobile population. Students may already be struggling with keeping up with usual school activities, so attending activities beyond the normal school day may have been particularly challenging. Due to financial issues, these families may also change residence suddenly.

Successful improvements in technology-related knowledge, academic self-esteem and friend support for physical activity illustrate the potential for youth development programs to support the well-being of underserved youth. Results imply that regular and sufficient doses of intervention activities may lead to expected changes. Findings also indicate that hands-on learning and educational support strategies may be effective in supporting youth development.

This pilot helped identify strategies to improve programming. Given the floor and ceiling effects encountered, a more tailored approach may be needed, such as initial screening data to refine the intervention and outcomes assessed, based on reported needs. Increasing dosage of career and culturally oriented activities may have supported changes in these areas. The cultural activities helped to increase pride and resonance with YES!; therefore, increased dosage may result in lower attrition. Another adjustment to the program would be to use a specific physical activity curriculum, such as Play Works (<https://www.playworks.org/>) to increase fun and engagement. The majority of participants were not sports-oriented but enjoyed games, particularly dodgeball. By increasing the variety and perception of physical activities as fun,

increased participation may have occurred. Although we addressed structural issues such as transport and lunch, specifying that summer camp was a required component may have resulted in higher attendance.

In order to better capture more nuanced program effects not readily assessed through surveys, an important evaluation component for future studies would be to collect qualitative data from students and families. Although a proposal for a randomized control trial was developed to further test the intervention in various schools, funding was not awarded. Future larger scale experimentally designed tests of program efficacy are warranted.

While the data paint a picture of partial success, long-term investment of attention and quality programming for underserved youth and families will likely reap rewards in years to come, which could not be evaluated. A strong sense of appreciation of YES! as a worthwhile investment was shared by volunteers, employees, and community members alike. Had measures of positive well-being or other asset-based constructs been implemented, these sentiments may have been captured in the data analyses. Dolores Huerta reminded us that "...Every minute [is] a chance to change the world,"<sup>37</sup> and that is what the YES! Project offered in each hour and activity, as can be seen in the final video produced for the project available at:

<https://www.marquette.edu/youth-empowerment-program/california.shtml>.

The implementation and evaluation of YES! provides insights into promising approaches to improve the physical and mental well-being of Latinx youth and their families, warranting replication with a robust design. Though preliminary, results indicate the potential utility of collaborative, community-based youth development programs that are culturally congruent and engage families to advance knowledge and best practices to support psychological wellness as well as healthy social and academic outcomes for Latinx adolescents from under resourced



communities. Given the value of the effort and results from the YES! pilot, it is still a work in progress. As noted above, a randomized control trial was developed, however, financial support to continue the work is still being sought. While the needed funding has not come, the time has allowed for additional improvement of the program, based on continuing community-based research with youth and their families, which will support the success of the full-scale trial when it comes to fruition.

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**Table 1**

*YES! Sí Se Puede Intervention Activities*

Type	Academic	Personal	Career & Skill	Enrichment
	Enrichment	Development	Development	Workshops
Location	YES! <i>Sí Se Puede</i> Center	YES! <i>Sí Se Puede</i> Center	YMCA Youth Institute	CSULB
Frequency & duration	2 days/week 90 mins/session	2 days/week 90 mins/session	2 days/month 120 mins/session	1 day/month 150 mins/session
Activities	academic tutoring & mentoring by CSULB mentors	mentor-led basketball, soccer, football, volleyball & other active games	digital media instruction	reinforced Latino cultural assets & life skills

**Table 2**

*Demographic Characteristics of the Sample (N=134)*

	n	%
Males	84	60.4
Age (range: 10-16 years)*	11.99	0.88
Grade in school		
6 <sup>th</sup>	96	69.6
7 <sup>th</sup>	33	23.9
8 <sup>th</sup>	9	6.5
Country of birth		
El Salvador	2	1.6
Mexico	21	14.7
U.S.	105	82.0
Time in U.S. (range: 9 months-10 years)*	5.25	3.20
Speak English and Spanish	109	84.5

\* Mean and standard deviation reported for continuous variables



**Table 3**

*Pre-post-follow-up Changes in Outcomes*

Variable	Mean (SE)			p-value		
	Pre	Post	FU	Pre vs Post	Post vs. FU	Pre vs. FU
Computer use (n=40)	2.21 (.010)	2.31 (0.12)	2.20 (0.09)	1.000	1.000	1.000
Computer knowledge (n=55)	2.63 (0.11)	2.86 (0.11)	3.02 (0.08)	.183	.523	<b>.007</b>
Academic self-esteem (n=43)	44.26 (1.15)	44.86 (1.30)	48.70 (1.48)	1.000	<b>.035</b>	<b>.045</b>
General self-esteem (n=41)	46.63 (1.64)	47.93 (1.34)	49.76 (1.33)	1.000	.419	.208
Supportive adult (n=55)	3.38 (0.09)	3.43 (0.09)	3.32 (0.10)	1.000	1.000	1.000
Cultural acceptance (n=50)	3.23 (0.07)	3.31 (0.09)	3.38 (0.08)	.935	1.000	.283
Self-efficacy for PA (n=54)	3.62 (0.12)	3.90 (0.10)	3.85 (0.09)	.133	1.000	.339
Friend social support for PA (n=29)	19.62 (1.82)	24.66 (2.21)	27.69 (1.85)	.161	.450	<b>.002</b>
PA score (n=33)	60.00 (4.87)	58.61 (6.38)	59.67 (4.85)	1.000	1.000	1.000
Sedentary screen time (n=51)	2.21 (0.18)	2.52 (0.17)	2.53 (0.16)	.483	1.000	.518
Depressive symptoms (n=43)	7.30 (0.89)	8.09 (1.15)	7.09 (1.04)	1.000	1.000	1.000

Notes. FU=follow-up; PA=physical activity; bolded items indicate statistically significant results.

Computer use - possible range: 1-4; response options: 1=Never, 2=Once per month or less, 3=Weekly, 4=Daily

Computer knowledge - possible range: 1-4; response options: 1=No knowledge, 2=Little knowledge, 3=Average knowledge, 4=Excellent knowledge

Academic self-esteem - possible range: 1-5; response options: 1=False 2=Mostly false, 3=More false than true, 4=Mostly true, 5=True

General self-esteem - possible range: 1-5; response options: 1=False 2=Mostly false, 3=More false than true, 4=Mostly true, 5=True

Supportive adult - possible range: 1-4; response options: 1=Not at all true, 2=A little true, 3=Pretty true, 4=Very much true

Cultural acceptance - possible range: 1-4; response options: 1=Strongly disagree, 2=Disagree, 3=Agree, 4=Strongly agree

Self-efficacy for PA - possible range: 0-5; response options: 1=Disagree a lot, 2=Disagree, 3=Neither, 4=Agree, 5=Agree a lot

Friend social support for PA - possible range: 1-5; response options: 1=*None*, 2=*Rarely*, 3=*A few times*, 4=*Often*, 5=*Very often*

PA score - possible range: 0-119

Sedentary screen time - possible range: 1-5; response options: 1=*I do not*, 2=*Less than 1 hour per day*, 3=*1 hour per day*, 4=*2 hours per day*, 5=*3 hours per day*, 6=*4 hours per day*, 7=*5 or more hours per day*

Depressive symptoms - possible range: 0-27; response options: 1=*Not at all*, 2=*Several days*, 3=*More than half the days*, 4=*Nearly every day*