

Vlogging for Youth with Type 1 Diabetes (T1D): A No or a Go?

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Objectives. Behavioral interventions for youth with T1D have largely targeted adolescents and parents. Less work has focused on pre-adolescents. The purpose of this pilot was to test the feasibility of youth-focused video-blogging (“vlogging”), a developmentally appropriate and interactive social support activity, as a potential intervention component. We report on feasibility, acceptability, and considerations for incorporation into a larger multi-component intervention.

Methods. Participants were youth with T1D, ages 9-14 (mean age 11.8 ± 1.9 yrs; 67% female; 33% Non-Hispanic White; mean $A1c = 8.3 \pm 1.7\%$) and their parents. Parents and youth were interviewed about their thoughts on viewing and sharing videos about living with T1D. Next, youth were encouraged to make videos about what they are doing well with diabetes. Staff provided an idea flyer and a non-diabetes example video. Youth shared/viewed videos via a private HIPAA-compliant platform. Parents and youth completed follow-up interviews about their experiences with the vlogs, whether or not they made/viewed videos. Participants were compensated for interviews.

Results. Of 24 families invited, nine (38%) enrolled and completed initial interviews. Four (44%) uploaded videos and six (67%) viewed other participants’ videos. Eight families (89%) completed follow-up interviews. Follow-up feedback included: youth enjoyed participating in the vlog and were interested in seeing more videos (e.g., day-in-the-life, snack recipes, crafts/decorating T1D supplies). Parents recognized benefits of vlogging and had no privacy concerns, but had difficulty using the video-sharing platform. Youth and parents said some pre-adolescents were less comfortable making videos or prioritizing this activity over other demands.

Conclusions. Although participants verbally expressed interest in vlogs, engagement rates told a different story. Rates of enrollment, vlog creation/sharing, watching others’ videos, and follow-up were relatively low. Vlogging may be too demanding, but a low-burden video-based intervention component where pre-teens with T1D can view videos made by others may be of interest and have fewer barriers to engagement.