



Summary of Community Preventive Services Task Force Recommendation*

The Community Preventive Services Task Force (CPSTF) recommends digital health interventions to assist adolescents with overweight or obesity with weight management. Evidence shows these interventions lead to small but meaningful weight reductions in adolescents with overweight or obesity.

Key Findings*

The CPSTF recommendation is based on a [systematic review](#) of 11 studies published through March 2019.

- Adolescents who participated in interventions experienced small decreases in weight or adiposity as measured by Body Mass Index (BMI) z-scores, percent body fat, and BMI.
- While the changes were small, they were considered meaningful.
- Interventions decreased depressive symptoms among adolescents in the four studies that measured this outcome.



What are digital health interventions for adolescents with overweight or obesity?*

These interventions are for adolescents aged 12-18 years who have overweight or obesity. They combine self-monitoring and goal setting using digital health (e.g., websites, mobile apps, or wearable devices) to increase adolescents' awareness of healthy dietary or physical activity behaviors that help with weight management. Trained personnel moderate programs with oversight by healthcare providers including psychologists, health counselors, dietitians, nurses, and pediatricians.

Facts about Adolescents with Overweight or Obesity

- Obesity prevalence in the United States is 20.6% among youth aged 12 to 19 years.¹
- In 2018, 95% of teens had access to a smartphone.²
- Adolescent obesity is related to anxiety, depression, lower self-esteem, lower self-reported quality of life, social problems such as bullying and stigma, and type 2 diabetes, dyslipidemia, and hypertension.³⁻⁷

Learn More

***Read a complete summary of the systematic review and CPSTF Finding**

<https://www.thecommunityguide.org/findings/obesity-prevention-and-control-digital-health-interventions-adolescents-overweight-obesity>

CDC, Overweight and Obesity
www.cdc.gov/obesity

¹ Hales CM, Carroll MD, Fryar CD, et al. Prevalence of obesity among adults and youth: United States, 2015–2016. NCHS data brief, no 288. National Center for Health Statistics, Hyattsville(MD): 2017.

² Pew Research Center, May 2018, "Teens, Social Media & Technology 2018"

³ Morrison KM, Shin S, Tarnopolsky M, et al. Association of depression and health related quality of life with body composition in children and youth with obesity. *Journal of Affective Disorders* 2015;172:18–23.

⁴ Halfon N, Kandyce L, Slusser W. Associations between obesity and comorbid mental health, developmental, and physical health conditions in a nationally representative sample of US children aged 10 to 17. *Academic Pediatrics* 2013;13.1:6–13.

⁵ Beck AR. Psychosocial aspects of obesity. *NASN Sch Nurse* 2016;31(1):23–7.

⁶ Li L, Perez A, Wu L, et al. Cardiometabolic risk factors among severely obese children and adolescents in the United States, 1999–2012. *Childhood Obesity* 2016;12(1):12–9.

⁷ Skinner AC, Perrin EM, Moss LA, et al. Cardiometabolic risks and severity of obesity in children and young adults. *NEJM* 2015;373:1307–17

Established in 1996 by the U.S. Department of Health and Human Services, the Community Preventive Services Task Force (CPSTF) is an independent, nonfederal panel of public health and prevention experts whose members are appointed by the director of CDC. The CPSTF provides information for a wide range of decision makers on programs, services, and other interventions aimed at improving population health. Although CDC provides administrative, scientific, and technical support for the CPSTF, the recommendations developed are those of the CPSTF and do not undergo review or approval by CDC. Find more information at www.thecommunityguide.org.