"It’s Pretty Hard to Make Friends over a Zoom Meeting Room": Understanding the Recreational Experiences of Youth with Type 1 Diabetes During COVID-19

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“It’s pretty hard to make friends over a Zoom meeting room”: Understanding the recreational experiences of youth with type 1 diabetes during COVID-19

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Type 1 Diabetes (T1D)

- Second most common chronic illness, most common autoimmune disease facing teens (Borus, & Laffel, 2010; Lerner & Lerner, 2001)

- Most psychologically and behaviorally demanding disease for youth (Borus, & Laffel, 2010)

- Significantly more mental, social, and academic problems than nondiabetic peers (Pinquart & Shen, 2011).
Recreate, Educate and Climb Higher (REACH)

REACH is an Out of School (OTS) program that offers youth with type 1 diabetes the chance to participate in fun activities and to bond with peers who share the same chronic condition.
COVID-19 and Virtual REACH Sessions

What will we do on Zoom?
- Fitness activities (similar to Diabetes Camp)
- Virtual games
- Socialize
- Have fun!

Benefits
- Talk with friends, medical staff, recreation professionals, and college students
- Learn about proper nutrition
- Learn skills to overcome adversity

“The purpose of this study was to explore how youth with T1D cope in an altered recreation environment as a result of COVID-19”
Resilience Theory

“Camps for children and youth focused on diabetes are invaluable” (American Diabetes Association, 2012, p. 75)

“Significantly face more mental, social, and academic problems than nondiabetic peers” (Pinquart & Shen, 2011).
Methods

Interpretive Phenomenological Analysis (IPA)

Step 1- Re-reading of the participants transcripts and initial noting.
Step 2- Looking for connections between emergent themes.
Step 3 - Completing step one and two for all remaining cases & identifying patterns across all cases.

Interviewing youth with type 1 diabetes
-1 Female
-2 Males
Results

The four constructed themes that described the youth’s experience.

1. **Navigation of the virtual school environment** - “It's kinda, it's exactly the same as in person school just like on a computer. And like we don’t have like worksheets and stuff. It's just all like PDFs on the on our school computers, so it's very similar just at home.”

2. **An increase of independence** - “Before COVID-19, you really didn’t have that much independent time. But now you do.”

3. **The role of relationships** - “I've been able to maintain the rest of my relationships, just because I've been able to grab a cell phone... it’s pretty hard to make some friends over Zoom meeting.”

4. **The accessibility of technology** - “I mean, I've kind of gotten used to it now, and I'm not going to see them, and I’ll text them every now and then.”
Discussion

- Research of non-medical specialty camps has demonstrated lower gains using the same measure compared to medical specialty camps (Hill, Holt, Ramsing, 2007; Goff, 2016)
- Camps nationwide are a driving force for positive youth development (Sibthorp, Bialeschki, Morgan, & Browne, 2013)
- Protective mechanisms, such as family support, engagement in positive relationships, increased independence within an altered environment
- These programs give the participants the opportunity to learn about manual glucose monitoring, proper nutrition, injection control, and it gives them the chance to participate in fun physical activities.


American Diabetes Association. (2012). Diabetes care in the school and daycare setting. https://care.diabetesjournals.org/content/35/Supplement_1/S76.full

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