

The Effects of a Digital Wellness Curriculum Intervention in Family and Consumer Sciences Secondary Classrooms

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This manuscript describes high school family and consumer sciences (FCS) students' active and passive technology use as a component of quasi-experimental research that examined the impact of the Intentionally Unplugged™ curriculum (Roland, 2020) on students' attitudes and behaviors toward their technology use. One hundred and ninety-one students in five FCS teachers' classrooms participated in the study. Pre-testing showed a connection between the time spent on electronic devices and depression. No significant differences were found between levels of depression before and after the Intentionally Unplugged™ curriculum was used by students in the classrooms included in the study.

Keywords: *adolescent technology usage, social media, social and emotional development, digital wellness curriculum*

Background

High school teachers are currently working with students who have never known a time without electronic devices, which has led to changes in many developmental domains. According to Madigan et al. (2019), excessive screen time can hinder a child's optimal development, affecting physical, behavioral, and cognitive outcomes. Additionally, higher levels of depression and anxiety are a concern (Twenge & Campbell, 2018; Twenge, 2019). Increased device usage can impact teens' social-emotional health—particularly if they lack positive coping mechanisms and already suffer from depressive symptoms (Rideout & Robb, 2019; Schmitt, 2021).

Not only is the amount of screen time a factor in health, but the types of activities adolescents engage in on their devices also play a role. By analyzing both productive and unproductive uses of screen time, we can better understand its impact on overall social-emotional health. While many studies have explored the effects of screen time amounts on adolescent health (Boers et al., 2019; Twenge & Campbell, 2018; Twenge, 2019),

fewer have delved into the types of screen time activities (active versus passive) (Moreno et al., 2020).

Active screen time involves engaging in reciprocal activities like video gaming, chatting, and working on a computer (Kim et al., 2020). In contrast, passive screen time involves passively receiving information, such as watching TV, videos, or movies (Kim et al., 2020). Passive screen time does not encourage physical, social, emotional, or cognitive engagement, leading the viewer to absorb information passively. Understanding this distinction is crucial in comprehending the impact of technology use on adolescent health, making our research topic highly relevant and significant.

Theoretical Framework

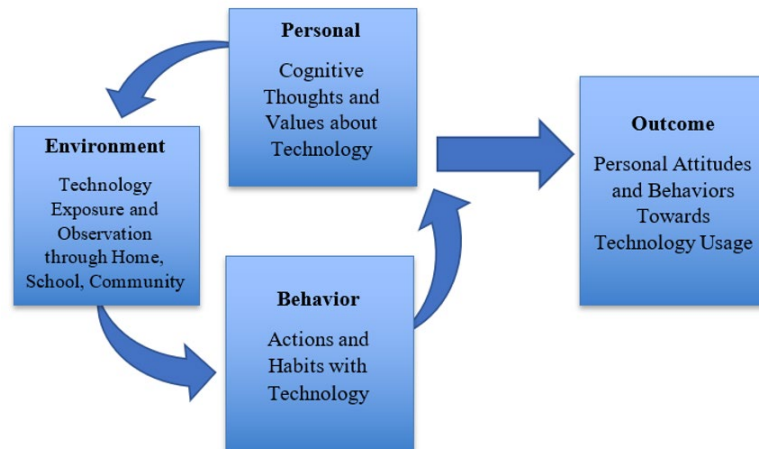
Bandura's Social Learning Theory (SLT) explains human behavior as a three-way, dynamic reciprocal model, including personal factors, environmental influences, and behavior that continually interact (Social Work Degree Center, 2020). Three aspects of SLT are especially important as the impact of technology on high school students is considered:

Learning Through Observation: High school students often mimic behaviors they observe, whether through social media, online videos, or other digital interactions. Understanding this aspect helps in analyzing how digital content influences their actions and attitudes.

Internal Mental States: Internal mental states, such as motivation and cognitive processes, are crucial for learning. Technology can significantly affect these internal states, impacting students' engagement and how they process information.

Behavior and Change: Learned behavior does not always lead to immediate change. This aspect underscores the complexity of behavior modification and how repeated exposure to certain types of content might gradually influence students' actions over time. By considering these aspects of SLT, we can better understand and address the multifaceted effects of technology on high school students' development and behavior (Kelland, 2015; LaMorte, 2019). Figure 1 further illustrates applying the Social Learning Theory to technology use.

Figure 1



Social Learning Theory Examples

Social Learning Theory examples are evident in everyday life. The theory is particularly apparent in children, as they learn from a young age through observing and imitation. As youth reach adolescence, this imitating behavior is also evident as they seek approval and acceptance from others. Technology is a perfect example of how people use the SLT daily. Social media presents plenty of social learning examples explicitly. Time spent with youth often shows them imitating others whether copying dance moves from a video (TikTok) or even attempting social media challenges that are currently posted (Social Work Degree Center, 2020). This behavior is typically initiated by the adolescent desire to be socially accepted or liked. Both positive and problematic behaviors can be imitated. Therefore, it is important to educate youth on distinguishing between healthy and unhealthy behaviors related to technology usage and responsibility.

Implementing Digital Wellness into FCS Programs

When looking at how technology affects the lives of adolescents, FCS educators already teach many courses in which a digital wellness curriculum can be implemented. Recommendations would include those which address human growth and development, as well as family and relationship dynamics. Suggestions for practical application in the FCS program include the following:

Integrate into Existing Courses:

- **Human Growth and Development:** Introduce topics on how excessive screen time affects physical, behavioral, and cognitive development. Use case studies or real-life examples to show the positive and negative outcomes of technology use.
- **Family and Relationship Dynamics:** Discuss how technology influences family interactions and relationships. Use role-playing activities to demonstrate effective communication skills in both online and offline settings.

Utilize Specific Curriculum Guides:

- Use a curriculum such as *Intentionally Unplugged™*, which aligns with FCS National Standards, to provide structured lessons and activities. This curriculum includes various interactive elements like discussions, group projects, and reflective journaling.

Practical Activities and Projects:

- **Screen Time Diaries:** Have students maintain a diary of their screen time usage, categorizing it as productive or unproductive. Discuss the results in class, focusing on how different types of screen time affect their daily lives.
- **Digital Detox Challenges:** Organize weekly challenges where students reduce their screen time and engage in alternative activities like outdoor sports, reading, or face-to-face socializing. Reflect on the impact of these activities on their well-being.

Discussions and Reflections:

- Hold regular class discussions about the impact of technology on social-emotional health. Use guided questions to encourage students to think critically about their technology use and develop healthy habits.
- Incorporate reflective journaling where students write about their experiences and insights gained from various activities related to digital wellness.

Leverage Free Resources:

- Use free programs and resources available online, such as digital wellness modules, to supplement the curriculum. These programs often offer age-appropriate content and activities that can be easily integrated into lesson plans.

Continuous Assessment and Feedback:

- Regularly assess students' understanding and application of digital wellness principles through quizzes, group discussions, and practical projects.
- Provide feedback and support to help students make informed decisions about their technology use and develop positive coping mechanisms.

By implementing these practical steps, FCS educators can effectively teach digital wellness, helping students navigate the challenges of technology use and promoting their overall well-being.

***Intentionally Unplugged™* Curriculum**

The *Intentionally Unplugged™* curriculum was developed by an FCS teacher, Denise D' Angelo Roland (2020). Roland indicated that the purpose of the curriculum was launched in 2020 and is accessible to any teacher who wants to use it. The aim of the *Intentionally Unplugged™* curriculum is "to educate and guide open conversations with students about the importance of digital wellness while providing them with the tools they need to carve out quality time in a digital world" (Roland, 2020, p. 2). This is not an antitechnology curriculum— instead, a tool to better educate students about the healthy usage of technology.

There are seven main objectives for the curriculum. These include (Roland, 2020):

- Introducing the concept of "screen time."
- Discussing healthy and unhealthy screen habits.
- Introducing alternatives to screen time and their benefits.
- Identifying personal and family use of screens.
- Identifying potential benefits of decreasing screen time.
- Identifying healthy alternatives to screen time.

- Setting goals for screen time reduction.

This curriculum includes different presentation options and consists of all needed links to lesson activities. An additional document includes a printed packet divided by section or lesson. Suggestions about time requirements are given so teachers can gauge how much time they can expect to commit to completing the curriculum. The curriculum is divided into three sections, each containing three lessons. See Appendix A for a detailed description of the curriculum content.

Roland (2020) also highlights how the *Intentionally Unplugged*[™] curriculum is tied to specific FCS National Standards in the teacher guide. These include (LEADFCS ED, 2018):

- 1.0: Career, Community, and Family Connections (Content Standard)
 - 1.3: Evaluate the reciprocal effects of individual and family participation in community and civic activities (Competency).

2.0 Consumer and Family Resources

- 2.4 Evaluate the effects of technology on individual and family resources in a global context.

4.0 Education and Early Childhood

- 4.2 Analyze developmentally appropriate and culturally responsive practices to plan for early childhood, education, and services.
- 4.5 Demonstrate skills for building and maintaining positive collaborative relationships with children, youth, and adults in their family and community environments, considering gender, ethnicity, geographical, cultural, and global influences.

12.0 Human Development

- 12.1 Analyze principles of human growth and development across the lifespan.
- 12.2 Analyze conditions that influence human growth and development.
- 12.3 Analyze strategies that promote growth and development across the lifespan.

13.0 Interpersonal Relationships

- 13.2 Analyze personal needs and characteristics and their effects on interpersonal relationships.
- 13.3 Demonstrate communication skills that contribute to positive relationships.
- 13.5 Demonstrate teamwork and leadership skills in the family, workplace, and community.
- 13.6 Demonstrate standards that guide behavior in interpersonal relationships.

14.0 Nutrition and Wellness

- 14.1 Analyze factors that influence nutrition and wellness practices across the lifespan.
- 14.5 Evaluate the influence of science and technology on food, nutrition, and wellness.

Methodology

This study's researchers examined screen time quantity and quality to determine their relationship to adolescent health (See Figure 2). They also explored attitudes and behaviors toward screen time following exposure to the digital wellness curriculum, *Intentionally Unplugged*[™]. A quasi-experimental method was used to test the effectiveness of digital wellness

curriculum implementation in FCS classrooms (treatment) compared to no curriculum implementation (control). Post-surveys for both conditions were compared for differences (See Figure 3). A human subjects review for the study was submitted and approved by the Institutional Review Board of Texas Tech University prior to data collection.

Recruitment

Teachers were introduced to the study by information sent out through their FCS teacher listserv and their FCS Facebook page. Additionally, a Google Form was used to gather data from interested teachers. Those who filled out information on the Google Form were invited to attend a Zoom session where they were briefed about the study's logistics and given more details about the *Intentionally Unplugged™* curriculum. They were also asked to join a specific Google Classroom class, which housed all the necessary information sheets, consent forms, assent forms, and curriculum for the study. Although the curriculum does not require any prior training, the time taken to gather consent and assent, implement surveys, and utilize digital wellness materials in class was essential to consider. Because of this time investment, the researchers decided the participants would be compensated using a two-phase approach. Gift cards for the study were purchased and provided by the dissertation study's author.

Figure 2
Effects of Screen Quantity and Quality on Adolescent Social-Emotional Health
 Study Part 1A

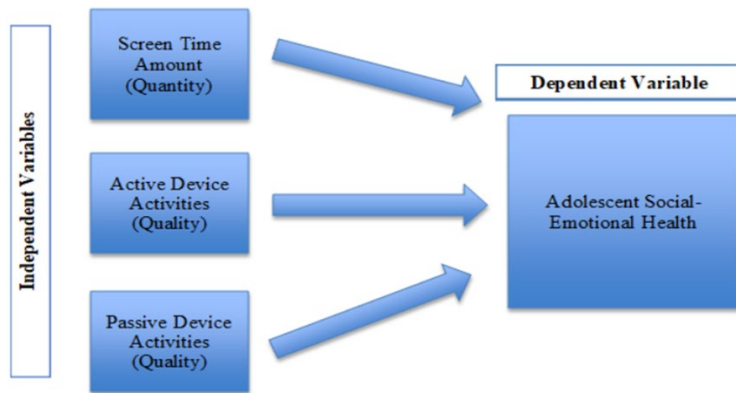
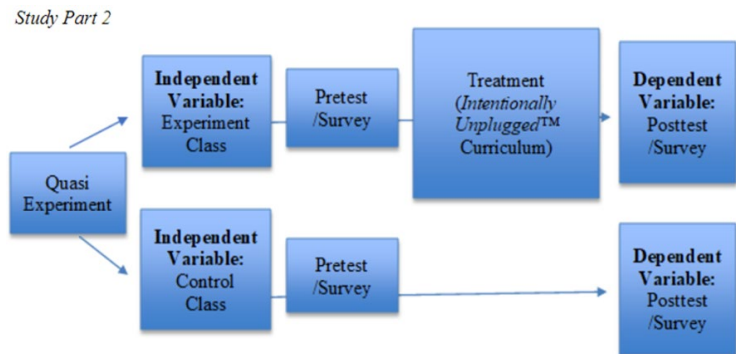


Figure 3
Effects of Digital Wellness Curriculum Intervention on Change in Adolescent Attitude and Behavior Related to Technology Usage



Study Phase 1

Phase 1 of the study included the following teacher responsibilities:

- Supply the researchers with administrator contact information to acquire permission to participate in the study.
- Distribute and collect consent and assent forms.
- Complete the teacher consent form.
- Fill out a Google Form confirming all the above steps were completed so the researchers can release pre-survey links.
- Distribute pre-survey links to eligible participants.
- Fill out the teacher pre-survey.

Those teachers who completed Phase I were compensated with a \$25 Amazon card.

Study Phase 2

Phase 2 of the study included the following teacher responsibilities:

- Choose two courses to utilize for the study—one for the control and one for the intervention. Implement the digital wellness curriculum in the intervention class.
- Let the researchers know when the curriculum has been completed so post-survey links can be released.
- Distribute post-survey links to eligible participants for both the control and intervention classes.
- Fill out the teacher post-survey.

Teachers who completed Phase 2 were compensated with a \$100 Amazon gift card. Both administrators and teachers were made aware of these incentives when teachers were recruited.

Participants

Five secondary FCS teachers from Arkansas participated in the study to help gather student data. The participants were all Caucasian female teachers. The researchers also asked teachers about their age ranges according to generational divides. Participants were relatively evenly divided—one participant from iGen/Generation Z, one from the Millennial generation, two from Generation X, and one from the Baby Boomer generation. Three teachers had a master's degree, and two had a bachelor's degree as their highest degree attainment. Most had ten years of teaching experience or less (80%), while one had over 20 years of teaching experience (20%).

The demographics of student respondents are listed in Table 1. The total number of pre-intervention surveys included 191, while the total number of post-intervention surveys included 154. Student participation was relatively evenly distributed among males (45.8%) and females (47.7%) for the pre-intervention survey. Although some participation was lost between the pre- and post-surveys, gender was still consistently even among males (47.7%) and females (44.5%). Many of the student participants came from one school with a large population of 7th (40.8%; 44.5%) and 8th graders (30.3%; 37.5%) who agreed to participate. The remainder of the student participants (29%; 18%) were 9th-12th graders. Most participants were Caucasian (71.2%, 73.2%). Data analysis and refinement determined a final sample of student participants. Pre-intervention surveys ($n = 191$) were matched through a unique ID to post-surveys ($n = 154$). Participants' surveys with at least a 99% completion rate were kept for the final analyses: control group ($n = 30$) and intervention group ($n = 16$).

Instruments

The study's research design was an embedded mixed-methods intervention design which involved collecting qualitative and quantitative data before and after the intervention phase of the study from all population groups. According to Creswell and Plano Clark (2009), this type of design involves one data set providing a supportive, secondary role in a study based primarily on the other data type. The researchers believed one data set would not be sufficient. Therefore, qualitative survey questions were embedded into a primarily quantitative survey.

Quantitative data were collected using Likert scale questions on pre- and post-surveys, while qualitative data were collected using open-ended response questions on the same pre- and post-surveys.

Qualtrics surveys were distributed to the teacher participants through links in the Google Classroom class developed for the study. Teachers could then post these links in their own school Learning Management System (LMS) for the students to access the surveys. The instruments included pre-developed and researcher-developed multiple-choice and open-response items administered to secondary FCS students before and after a digital wellness curriculum intervention.

Table 1

Demographics of Population 1: Students (N = 191); (N = 154)

| Characteristics | Pre-intervention survey | | Post-intervention survey | |
|--------------------------|-------------------------|------|--------------------------|------|
| | <i>n</i> | % | <i>n</i> | % |
| Gender | | | | |
| Male | 70 | 45.8 | 61 | 47.7 |
| Female | 73 | 47.7 | 57 | 44.5 |
| Non-binary/ third gender | 6 | 3.9 | 6 | 4.7 |
| Prefer not to say | 4 | 2.6 | 4 | 3.1 |
| Grade Level | | | | |
| 7 th grade | 62 | 40.8 | 57 | 44.5 |
| 8 th grade | 46 | 30.3 | 48 | 37.5 |
| 9 th grade | 5 | 3.3 | 5 | 3.9 |
| 10 th grade | 8 | 5.3 | 6 | 4.7 |
| 11 th grade | 12 | 7.9 | 4 | 3.1 |
| 12 th grade | 19 | 12.5 | 8 | 6.3 |
| Ethnicity | | | | |
| Asian | 3 | 1.9 | 1 | .8 |
| Black/African American | 14 | 9.2 | 9 | 7.1 |
| White/Caucasian | 109 | 71.2 | 93 | 73.2 |
| Hispanic | 16 | 10.5 | 15 | 11.8 |
| Native American | 5 | 3.8 | 3 | 2.4 |
| Other | 6 | 3.9 | 6 | 4.7 |

Pre-developed survey items were adapted from:

- Adapted Greenfield Test (Are Your Children Too Connected?) (Greenfield, 2017)
- 2021 Youth Risk Behavior Survey (CDC, 2021)
- Problematic and Risky Internet Screening Scale (PRIUSS) (Jelenchick et al., 2014)

- Center for Epidemiologic Studies Depression Scale* (NIMH, n.d.)

A decision was made that students would not self-disclose medical information about any prior diagnosis of mental health issues. Still, the researchers felt it beneficial to have students use a self-report scale because this could indicate behaviors and attributes that might contribute to depression. Other survey items included:

- Screen Time Amounts and Activities Items
- Adolescent Social and Emotional Health Perceptions Items
- Curriculum Participation, Effectiveness, and Activities Items (Post-Survey Only)

Reliability ratings were given for the separate instruments from previous studies. The researchers also ran reliability analyses on this study's items, as four different instruments were combined to make the study's surveys.

Results

RQ 1 Results

Linear regressions were used to address research question one—whether there is a relationship between adolescents' time on a device and their mental health. Regression analysis of pre-survey data showed time on a device was a significant predictor of depression ($p = .008$). For every hour spent on a device, depression increased by .100. (See Table 2)

Table 2

Regression Analysis Summary by Screen Time Predicting Adolescent Depression (Pre-Survey)

| Variable | <i>B</i> | <i>SE B</i> | β | <i>t</i> | <i>p</i> |
|--------------------|----------|-------------|---------|----------|----------|
| (Constant) | 1.417 | .171 | | 8.290 | .000 |
| Screen time amount | .100 | .037 | .217 | 2.710 | .008* |

* $p < .05$

Note. Adjusted $R^2 = 0.41$.

Post-survey data showed no significant difference (See Table 3). The adjusted R^2 was .001 or .1% of the variance accounted for, and hours on a device were found not to be a significant predictor of depression in the post-survey ($p = .966$), nor was control versus intervention a significant predictor ($p = .172$). Although there was no significance in the post-data regarding screen time and its' effect on depression, hopefully, this might be attributed to students making better use of the time spent on their devices.

Table 3

Regression Analysis Summary by Screen Time Predicting Adolescent Depression (Post-Survey)

| Variable | <i>B</i> | <i>SE B</i> | β | <i>t</i> | <i>p</i> |
|----------------------|----------|-------------|---------|----------|----------|
| (Constant) | 1.421 | .421 | | 3.373 | .002 |
| Control/Intervention | .293 | .211 | .209 | 1.389 | .172 |
| Screen Time Amount | -.003 | .077 | -.006 | -.043 | .966 |

* $p < .05$

Note. Adjusted $R^2 = .001$.

RQ 2 and 3 Results

Research questions two and three were similar. One looked at the relationship between active activities (screen use that encourages physical, social, emotional, or cognitive engagement) adolescents participate in and how these affect social-emotional health. The other looked at the relationship between passive activities (screen use that does NOT encourage physical, social, emotional, or cognitive engagement—the viewer passively absorbs information) adolescents participate in and how those affect social-emotional health.

ANOVA was performed to determine the difference in the quality of the activity and the impact on social-emotional health (depression). Analyses revealed no significant difference in the quality of screen time (what the student spent their time doing) for depression in both the pre- and post-survey data ($p = .366$). (See Table 4)

Table 4

One-Way Analysis of Variance Summary Table for the Effects of Quality of Screen Time on Depression

| | <i>df</i> | <i>SS</i> | <i>MS</i> | <i>F</i> | <i>p</i> |
|----------------|-----------|-----------|-----------|----------|----------|
| Between Groups | 4 | 2.006 | .501 | 1.108 | .366 |
| Within Groups | 41 | 18.559 | .453 | | |
| Total | 45 | 20.565 | | | |

* $p < .05$

Note. DV: Depression

Qualitative data were also revealed through open-response survey questions. One of the questions on the student surveys asked participants to list active and passive activities they currently use their devices for. Data were analyzed using the Qualtrics "Text IQ" feature, and the researchers created frequency counts of how often certain words or apps were mentioned in responses. The most popular answer was TikTok, which could be considered active or passive, depending on its use. Video games were also a popular answer, and again, the quality of experience with this application of technology depends on its use. However, most video games are usually interactive and considered active activities. The rest of the answers with very high frequencies included video streaming services like Netflix and YouTube. According to the definition given in the study survey, these activities would most often be regarded as passive since the user passively views with no interaction. See Figures 3 and 4 for results of the self-reported active and passive activities based on the provided definitions in the survey.

Figure 3

Qualitative Word Cloud: Self-Reported Adolescent Active Device Activities



**Note: The frequency of self-reported answers is indicated by the size of the text in the word cloud.*

Figure 4

Qualitative Word Cloud: Self-Reported Adolescent Passive Device Activities



**Note: The frequency of self-reported answers is indicated by the size of the text in the word cloud.*

RQ 4 Results

Research question four examined adolescent perceptions of the change in attitude and behavior related to technology usage before and after participating in a digital wellness curriculum. Paired sample *t* tests were performed to determine differences in pre- to post-means in both groups. Pre- and post-attitude and behavior for the control group were nonsignificant ($p = .745$). Pre- and post-attitude and behavior for the intervention group were also nonsignificant ($p = .541$). See Figure 5 for a breakdown of the attitude and behavior variables' survey items.

Digital Wellness Curriculum Effectiveness

Both students and teachers had the opportunity to answer open-ended questions regarding the curriculum intervention, *Intentionally Unplugged*TM.

What They Liked

One of the open-response questions asked participants to think of parts of the curriculum they found to be most engaging. Some of the responses received included:

- Discussing the differences between active and passive screen time activities.
- Discussing personal stories about communication barriers and distractions screens have caused in their relationships.
- Looking at personal screen time averages and comparing them among the class.
- "Still-Face Paradigm" Lesson
- "Life Before Screens" Lesson
- Discussing ways to "detox" from screens.
- Discussing how screen use affects us mentally and socially.
- Videos and articles (some students liked these, and some did not).

Figure 5
Attitude and Behavior Survey Items

| | | |
|--|---|---------|
| Attitude and Behavior Items (Mean Score) | <ul style="list-style-type: none"> • I have found that I spend more time online or on digital devices (computer, laptop, tablet, or smartphone) than I seem to realize. • I find myself mindlessly passing time on a regular basis by staring at my smartphone, tablet, or computer--even when there might be better or more productive things to do. • I have found that I seem to lose track of time when I am on devices such as a smartphone, tablet, or computer. • I wish that I could be less wired or connected to digital devices such as smartphones, laptops, tablets, the Internet, or video games. • I sleep with my Smartphone ON under my pillow or next to my bed. • I lose sleep due to nighttime internet use. • I find myself viewing and answering texts, tweets, and emails at all hours of the day and night--even when it means interrupting other things I am doing. • I choose to socialize online instead of in-person. • I have problems with face-to-face communication due to my internet use. • I experience increased social anxiety due to my internet use. • I fail to create real-life relationships because of the Internet. • I skip out on social events to spend time online. • My offline relationships suffer due to my internet use. • I feel irritated when I am not able to use the Internet. • I feel angry when I am not able to use the Internet. • I feel anxious when I am not able to use the Internet. • I feel vulnerable when the Internet is not available. • I experience feelings of withdrawal from not using the Internet. • I put internet use in front of important, everyday activities. • I avoid other activities to stay online. • I neglect responsibilities because of the Internet. • I lose motivation to do other things that need to get done because of the Internet. • I feel like my use of technology decreases my academic productivity. • I feel like my use of technology decreases my real-time socialization. • I feel like my use of technology decreases my family participation. • I feel like my use of technology decreases my physical activity. • I feel like I am reluctant to be without my smartphone or other digital devices, even for a short time; when I leave the house, I always have my smartphone or digital device with me. • If someone tries to limit or remove my use of digital technology, I have a strong emotional or physical reaction. | Student |
|--|---|---------|

What They Did Not Like

- Just like the opportunity to respond with activities that created more engagement in the classroom, participants also had the chance to share about activities they did not enjoy in the curriculum. These included the following:
 - Ted Talk speaker—students did not enjoy passively watching the video.

- Some of the articles were long and challenging to keep students engaged. Some seemed to be on too high of a reading level for some participants.
- Repetition on some of the slides and questions related to lesson topics—active vs. passive activities, two still-face videos.
- The slideshows were long.
- Some students felt the curriculum was one-sided or biased—only against screen time.

Overall, primarily positive feedback was provided about the curriculum and its activities. Although some students felt the information was long and repetitive, many seemed to enjoy the discussions the content created. The information was relevant to them and caused them to be more aware of how they use their devices.

Conclusions, Limitations, and Recommendations

Although there was no significance in the post-data regarding screen time and depression, it is possible that participants made more informed use of their screen time. Questions regarding screen time activity (quality) were limiting since some activities could be considered active or passive depending on the use of the application. Streamlining and more clarity in the researchers' questioning techniques could improve the reliability of the results. Also, seeing a genuine change in attitude and behavior was limited due to the short period of the study. Better evidence would require a longitudinal study, more time, and additional teacher training to provide more consistency in curriculum implementation for future studies.

Other recommendations include working with the digital wellness curriculum creator to improve weaknesses found during the study. Updates would also be helpful, as this curriculum was released during the COVID-19 pandemic and includes content related to that time. Given the frequency of change in popular technology and issues, this content would need to be constantly updated. A section on Artificial Intelligence (AI) and its responsible use would be a relevant addition.

Implications

Research shows that children are exposed to technology in the home during the most critical years of life (Hutton et al., 2020; Madigan et al., 2019). Are today's youth attempting to fulfill the needs of love and acceptance, safety and security, and esteem through their devices, or are these needs being met by educated, well-informed parents or adults in the home? As technology adds complexity to living and working, professionals can contribute by exhibiting the importance of meeting basic human needs.

FCS National Standards emphasize competencies encouraging students to make informed decisions regarding their use of technology. Educators can integrate responsible and informed technology use into their lessons to reinforce core concepts and promote healthier, more productive ways of using technology. Additionally, it is important to address the impact of device usage on relationships and development throughout the life cycle, ensuring that technology enhances rather than replaces human connections, which are vital for development and well-being.

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Appendix A

Overview of Intentionally Unplugged™ Curriculum

| Overview of <i>Intentionally Unplugged</i>TM Curriculum Lessons | | | |
|---|---|---|-------------------------------------|
| Section | Lesson | Overview | Approximate Time Required |
| Section 1: The Rise of the Digital Era | Lesson 1: Life Before Screens | In this lesson, students will make important observations about how screens have changed how we spend time together. Additionally, students will be encouraged to reflect upon their screen use and how it influences their relationships. | 1-2 class periods (45-60 minutes) |
| | Lesson 2: Still Face Paradigm | Using Dr. Tronick's Still-Face Paradigm Experiment, this lesson aims to help students understand the critical distinction between being physically present vs. emotionally present. Most importantly, the lesson aims to highlight the negative social and emotional impacts that screens can have, as they interfere with our ability to be fully present with one another. | 2 class periods (80-90 minutes) |
| | Lesson 3: Maslow's Hierarchy of Needs | This lesson will serve to provide students with a basic understanding of Abraham Maslow's Hierarchy of Needs. Based on this theory of human motivation, students will identify, discuss, and analyze how screens may be positively and/or negatively influencing their own needs and happiness. | 2 class periods (40-60 minutes) |
| Section 2: Not All Screen Time is Created Equal | Lesson 1: Active and Passive Screen Use | Not all screen time is considered equal, and this lesson emphasizes that fact. This lesson serves to identify the important distinctions between "active" and "passive" screen use and encourages young people to start giving thought to their types of screen use. Perhaps the most eye-opening portion of this lesson is spent calculating the actual time spent on screened devices. This lesson should be introduced with the concept of "digital nutrition" as a metaphorical way of identifying the "nutritional values" of different types of screen use. Students should be able to compare "active" screen use as the more nutritional and preferred type of use while comparing "passive" screen use to a less healthy diet. | 2-3 class periods (80-120 minutes) |
| | Lesson 2: The Emotional Effects of Screen Use | This lesson will explore the emotional side effects of screen use and how obsession (or screen addiction, as many experts now refer to it) start to come into play. Students will use various resources (i.e., articles and video, interviews) to investigate how screens impact their ability to be present and connected to their relationships and real-life experiences. | 3-4 class periods (120-160 minutes) |
| | Lesson 3: Social Media Mindfulness | This lesson serves to address the relationship between social media and teen mental-emotional well-being. Through a series of teacher-facilitated activities, students will identify reasons for becoming more intentional and mindful with their social media use. Most importantly, they will brainstorm healthy practices to adopt going forward. | 1-2 class periods (40-60 minutes) |
| Section 3: Exploring Your Digital Wellness | Lesson 1: Establishing Healthy Boundaries | In this lesson, teachers will facilitate important conversations to get students thinking about how to establish healthy boundaries around their technology use. Next, they will examine different examples of screen use agreements before moving on to create their own. Lastly, they will reflect upon how setting healthy boundaries can result in personal benefits. | 1-2 class periods (40-80 minutes) |
| | Lesson 2: How to Connect to What Counts | In these lessons, students will have a chance to start putting all the pieces together. With all that they have learned, this lesson will encourage them to think about what it means to connect to what counts and how to start putting quality human connection into practice. Best of all, the culminating activity in this lesson will get them spreading the word to others! | 1-2 class periods (40-80 minutes) |
| | Lesson 3: Reflection and Insight | Congratulations! You've made it to the FINAL LESSON of this curriculum. As expected, this lesson serves to tie it all together—we've covered so much! When students walk away from this lesson, they should feel confident that they know how to use technology as a tool that serves them well without negatively impacting their mental/emotional well-being. | 1 class period (40 minutes) |

Note

Roland, D. (2020). *Intentionally Unplugged Teacher's Guide* [PDF].