

Additional File 1

Questions in the baseline survey that were developed by authors

Section 1: Socio-demographic questions

Label	Question	Filter
age	How old were you on your last birthday? [Numeric]	

Label	Question	Filter
gender	Are you...? [SC]	
1	Male	
2	Female	

Label	Question	Filter
ethnic	Which ethnic group do you belong to? [SC]	
1	Chinese	
2	Malay	
3	Indian	
4	Other (please specify: _____)	

Label	Question	Filter
tenure	What type of housing are you living in? [SC]	
1	HDB/ JTC flat (1-2 room)	
2	HDB/ JTC flat (3 room)	
3	HDB/ JTC flat (4 room)	
4	HDB/ JTC flat (5 room and above/ HUDC/ Executive)	
5	Condominium/ Private flat	
6	Bungalow/ semi-detached/ terrace house	
7	Shophouse	
8	Other (please specify: _____)	

Label	Question	Filter
hincome	Please tell me which letter best describes your household's total income from all sources , after tax and compulsory deductions? [SC]	
	Monthly	Yearly
1	Below \$1,000	Below \$12,000
2	\$1,000-\$1,999	\$12,000-\$23,999
3	\$2,000-\$2,999	\$24,000-\$35,999
4	\$3,000-\$3,999	\$36,000-\$47,999
5	\$4,000-\$4,999	\$48,000-\$59,999
6	\$5,000-\$5,999	\$60,000-\$71,999
7	\$6,000-\$6,999	\$72,000-\$83,999
8	\$7,000-\$9,999	\$84,000-\$119,999
9	\$10,000 and over	\$120,000 and over
999	Prefer not to say	
777	Don't know	

Label	Question	Filter
chclass	Which grade do you study in? [SC]	
1	Secondary 1	
2	Secondary 2	
3	Secondary 3	
4	Secondary 4	

Label	Question	Filter
odwd	On a typical school day, how many hours do you spend outdoors? [Numeric]	GO TO odwe IF '0'

Label	Question	Filter
odwdsport	WHILE OUTDOORS , for how long do you play sports or exercise (including school co-curricular activities) [SC]	
1	Not at all	
2	< 1 hour	
3	> 1 hour (please specify number of hours: _____)	

Label	Question	Filter
odwe	On a typical weekend, how many hours do you spend outdoors in a day? [Numeric]	GO TO allow IF '0'

Label	Question	Filter
odwesport	WHILE OUTDOORS , for how long do you play sports or exercise (including school co-curricular activities) [SC]	
1	Not at all	
2	< 1 hour	
3	> 1 hour (please specify number of hours: _____)	

Questions in the end-of-study survey that were developed by the authors

Section 6: Evaluation questionnaire

Label	Question	Filter
oversat	Overall, how satisfied are you with the FIT-TEEN study? [SC]	
1	Very satisfied	
2	Somewhat satisfied	
3	Somewhat dissatisfied	
4	Very dissatisfied	

Label	Question	Filter
pedfreq	How often did you wear your Fitbit in the past 4 months during the study? [SC]	
1	Nearly every day	
2	More than half the days	
3	Less than half the days	
4	Rarely wore it	
5	Never wore it	

Label	Question	Filter
smscheck	How often did you check the weekly ranking information that was sent to you by SMS during the study?	
1	Every week	
2	Almost every week	
3	Some weeks	
4	Only a few weeks	
5	Never	

Label	Question	Filter
pedacc	How often did you log into your Fitbit account page to check your stats in the past 4 months during the study? [SC]	
1	Nearly every day	
2	2 -3 times a week	
3	Once a week	
4	Once a month	
5	Rarely checked it	
6	Never checked it	

Label	Question	Filter
studyacc	How often did you log into your FIT-TEEN account page to check your stats in the past 4 months during the study? [SC]	
1	Nearly every day	
2	2 -3 times a week	
3	Once a week	
4	Once a month	
5	Rarely checked it	
6	Never checked it	

Label	Question	Filter
samegr	Do you know anyone in the same FIT-TEEN group as you?	
1	Yes	
2	No	

Label	Question [If yes to samegr]	
nsame	How many participants do you know in your FIT-TEEN group?	

Label	Question	
knowso	Do you know anyone participating in the FIT-TEEN study but not in your group?	
1	Yes	
2	No	

Label	Question [If yes to knowso]	
nso	How many participants do you know in the FIT-TEEN study but not in your group?	

Label	Question	1	2	3	4	5
Feeltop	How did you feel on the weeks when you found out that you were ranked in the top 5?	Strongly Disagree	Disagree	No opinion	Agree	Strongly Agree
1	I felt accomplished					
2	I felt good					
3	I felt proud					
4	I thought it was no big deal					
5	I did not care					
6	I have never made it to top 5					

Label	Question	1	2	3	4	5
Feelbottom	How did you feel on the weeks when you found out that you were ranked in the bottom 5?	Strongly Disagree	Disagree	No opinion	Agree	Strongly Agree
1	I felt I failed					
2	I felt bad					
3	I felt disappointed					
4	I thought it was no big deal					
5	I did not care					
6	I was never at the bottom 5					