### 1 Supplemental Content 2. *Characteristics of Included Research Studies*

Study	Population	Intervention Design, Duration of	<b>Exercise/PA Prescription and</b>	<b>Results and Follow Up</b>
		Phases, Specific Aims	Primary Measurement	
Fitterling et al.,	N=5, 33-56	Design: Changing Criterion	F: 3 days/week	Results:
1988	years, all		I: N/R	-5 participants increased aerobic exercis
	female,	Baseline: 6 weeks	T: N/R	levels
	various	Intervention: 12-13 weeks	T: Aerobic Exercise (stationary cycle,	-Cooper Points/week increased from 0.8
	medication	Follow Up: 3 and 6 months post-	walking, jogging)	to 23.6
	regimens to	intervention	V: N/R	
	control		P: Goals increased when exercise	Follow Up:
	vascular	Specific Aims: Examine the	consistently met criterion for 3 data	-4 subjects maintained exercise behavio
	headache pain	efficacy of a behavioral adherence	points	3 (14.9 Cooper Points/week) and 6
	and	package for modifying aerobic		months (9.0 Cooper Points/week) post-
	occurrence	exercise behavior in vascular	Measurement: Cooper Points in	intervention
		headache sufferers	relation to headache frequency	
Gorczynski et al.,	N=4, ≥18	Design: ABA	<b>F:</b> N/R	Results:
2014	years,		I: N/R	-3 participants progressed in the stages
	Schizophrenia	Baseline: N/R	T: N/R	of the Transtheoretical Model
	, BMI <u>&gt;</u> 25, in	<b>Intervention:</b> 2 months	T: Gym visits, walking, biking	-PA decreased across all 4 participants,
	the	Follow Up: N/R	V: N/R	significantly for 1 participant (t=3.26,
	Preparation/		<b>P:</b> N/R	p<0.05)
	Contemplation	Specific Aims: Examine the		-Non-significant increases in self-
	Stages of the	feasibility and acceptability of	Measurement: Minutes of MVPA	efficacy across all 4 participants (t=0.92
	Transtheoretic	exercise counseling on the	(accelerometry)	p=0.40)
	al Model	psychological mediators of physical		
		activity behaviors and levels of		Follow up:
		MVPA in obese adults with		-Interviews report participants enjoyed
		schizophrenia		exercise counseling and found it helpful
		-		-3 participants self-reported they had
				increased PA.
Kurti and	Experiment	Design: Changing Criterion	F: <u>&gt;</u> 3 days/week	Results:
Dallery,	1: N=6, 5		I: N/R	-All participants reached the goal of
2013 (1)	females, 50-71	Baseline: 5-9 days	T: N/R	10,000 steps
. ,	years,	Intervention: 25-65 days	T: Walking	
	sedentary	Follow Up: None	V: Step count/day within 5-day block	No Follow Up

		Specific Aims: Test the feasibility,	<b>P:</b> >1,000 steps above baseline or	
		acceptability, and efficacy of an	current goal/day within 5-day block	
		Internet-based intervention to		
		increase walking behavior in	Measurement: Step counts in relation	
		sedentary adults	to money earned	
Kurti and	Experiment	Design: Changing Criterion	F: ≥3 days/week	Results:
Dallery,	<b>2:</b> N=6, 5		<b>I:</b> N/R	-5 participants reached the goal of
2013 (2)	females, 60-67	Baseline: 5-9 days	T: N/R	10,000 steps
	years,	Intervention: 25-65 days	T: Walking	
	sedentary	Follow Up: None	V: Step count/day within 5-day block	No Follow Up
			<b>P:</b> >1,000 steps above baseline or	
		Specific Aims: Test the feasibility,	current goal/day within 5-day block	
		acceptability, and efficacy of an		
		Internet-based intervention to	Measurement: Step counts only	
		increase walking behavior in		
		sedentary adults		
Irons et al.,	N=7, 6	Design: Mixed Methods	F: 3 days/week	Results:
2013	female,		I: 50-85% HR max (2 weeks)	-All participants exercised $\geq$ 30 min for
	physically	Baseline: 6-12 days	T: 5-30+ minutes of treadmill	days/week by the end of the study
	inactive	Intervention: 4 weeks	T: Walking/Running on treadmill, free	-Significant decrease in body fat %
	undergraduate	Follow Up: 2 weeks post-	weights	
	students,	intervention	V: 5-30+ minutes of treadmill, and free	Follow Up:
	BMI=18.5-		weights	-6 participants self-reported maintainin
	29.9	Specific Aims: Test the feasibility	P: Weeks 1 and 2 – increase treadmill	PA levels above baseline
		of employing contingency	time by 5 min/session, Weeks 3 and 4 $-$	
		management to determine if a	maintain HR between 50-85% HR max	
		behavioral intervention would be	for 30 min/session	
		successful in increasing exercise		
		among physically inactive, healthy	Measurement: Observed minutes of	

McFadden et al.,	N=5, 19.5	Design: Multiple Baseline	F: N/R	Results:
2017	years, all		<b>I:</b> N/R	-Depression levels decreased in 3
	female, mild	Baseline: 10 days	T: N/R	participant
	to severe	Intervention: 2 months	T: Running, walking, cycling,	-Self-reported PA increased in
	Depression,	End Phase: 10 days	swimming, tennis, handball	participants
	insufficiently	Follow Up: 1 month post-	V: N/R	-Overall trends indicate decreases in
	to moderately	intervention	<b>P:</b> N/R	depression across all subjects with
	active			increased PA
		Specific Aims: Examine the effects	Measurement:	
		of a two-month PA counseling	>Self-reported level of PA (Godin	Follow Up:
		intervention on depressive	Leisure-Time Exercise Questionnaire)	-Depressive symptoms remained lower
		symptoms and PA in female	>Step counts via accelerometry	than baseline, while PA levels remained
		undergraduate students with		higher
		depression		
Nijs et al.,	N=5,18-65	Design: ABA	F: N/R	Results:
2009	years, all		<b>I:</b> N/R	-Significant decrease in time spent doin
	female,	Baseline 1: 1 week	T: N/R	light PA
	Chronic	Intervention: 3 weeks	T: N/R	-No changes in moderate, vigorous, or
	Fatigue	Baseline 2: 1 week	V: N/R	total PA
	Syndrome		P: N/R	
	(CFS),	Specific Aims: Examine the effects		No Follow Up
		of pacing self-management on	Measurement:	
		physical behavior and health status	>Minutes of PA (light, moderate,	
		in patients with chronic fatigue	vigorous, and total)	
		syndrome	>Activity counts (accelerometry)	
Normand,	N=4, ≥18	Design: Mixed Methods	F: N/R	Results:
2008	years, 3 male,		<b>I:</b> N/R	-Step counts increased during
	healthy, non-	Baseline 1: 10-22 days	T: N/R	intervention, decreased during return to
	obese,	Intervention 1: 31-46 days	T: Walking	baseline
	exercise	Baseline 2: 5 days	V: N/R	-No change in weight
	regularly/semi	Intervention 2: 7-15 days	P: Daily step goal increased if average	-All subjects indicated the intervention
	-regularly		step goal from previous week was met	increased PA and found the intervention
		Specific Aims: Evaluate whether a	for at least 4 days	useful
		package intervention could increase		
		daily step counts with suggestions	Measurement: Daily steps	No Follow Up
		of preventing adult weight gain	(accelerometery)	

Thyer et al.,	N=2, 1 male	Design: ABAB	F: N/R	Results:
1984	(37 years,		I: N/R	-Distances biked increased in both
	IQ=64,	Baseline 1: 7 days	T: N/R	subjects during the intervention phases
	unspecified	Intervention 1: 7 days	T: Indoor cycling	compared to both baselines
	schizophrenia	Baseline 2: 7 days	V: N/R	
	complicated	Intervention 2: 7 days	<b>P:</b> N/R	Follow Up:
	by	Follow Up: 50 days post-		-Distances biked improved for both
	alcoholism), 1	intervention	Measurement: Miles biked per day	subjects
	female (53			-Reinforcement intervention was still in
	years, normal	Specific Aims: Investigate the		operation at follow up
	intelligence,	effectiveness of a contingency-		
	paranoid	management program on the		
	schizophrenia,	exercise behavior schizophrenic		
	), both under	patients living in a residential		
	medication	group-home		
Wysocki et al.,	N=12, 20-33	Design: Multiple Baseline	<b>F:</b> N/R	Results
1979	years, 7 male,		I: N/R	-7 subjects aerobic point earnings
	undergraduate	Baseline 1: 1-3 weeks	T: N/R	increased
	and graduate	Intervention 1: 4-6 weeks	T: Running, walking, cycling,	-1 subject failed to meet terms and
	students,	Baseline 2: 1 week	swimming, tennis, handball	withdrew during the intervention
	recurring	Intervention 2: 2 weeks	V: N/R	
	failure to	Follow Up: 1 year post-intervention	<b>P:</b> N/R	Follow Up:
	engage in			-7 subjects reported earning more
	regular	Specific Aims: Examine the	Measurement: Cooper Points earned	Cooper Points than at baseline
	exercise	effectiveness of behavioral	by groups of participants	
		contracting on encouraging exercise		

2 N/R – not reported; study conducted element but did not report

3 FITT-VP – The FITT-VP Principle; method of prescribing exercise based on the frequency (F) of the activity or exercise, its intensity

4 (I), the time (T) it takes to complete, the type (T) of activity or exercise, the volume (V) of the exercise bouts, and the progression (P)

5 of exercise through time