# Extended Abstract Title

The title should be concise, omitting terms that are implicit and, where possible, be a statement of the main result or conclusion presented in the manuscript. Abbreviations should be avoided within the title.

*Author 1 First name Last name1, Author 2 First name Last name2, Author 3 First name Last name3, Author 4 First name Last name4\**

1Institute X, Department X, Organization X, City X, State/Province XX, Country

2Institute X, Department X, Organization X, City X, State/Province XX, Country

3Institute X, Department X, Organization X, City X, State/Province XX, Country

4Institute X, Department X, Organization X, City X, State/Province XX, Country

\*Correspondence:

Corresponding author name

Email: [email@uni.edu](mailto:email@uni.edu)

# Introduction

Upon the approvals from the Committee, authors will be invited to submit their research brief. Research brief is an extended form of abstract submitted to SEAPAC2025 where the authors are allowed to explain their research in more details, but not over than 2000 words (excluding reference, table, and figures). Extended abstract should be typed in document processing formats (doc, docx), single spaced, justified, and normal margin (2.5 inch) in all sides.

The introduction should consist of a summary of the existing literature, the justification of the study - why this study is important, the magnitude of the problem, the gaps in the knowledge and policy and its contribution to the field. Please also add objective(s) at the end of introduction part.

Authors should use APA7th referencing and in-text citation style. See example:

Health-promoting physical activity (PA) is beneficial for the population of all ages. The new 2020 WHO guidelines on PA and sedentary behavior (SB) recommended an average of 150-300 min of moderate intensity or 75-150 min of vigorous intensity per week for adults to obtain the optimal benefit of PA, particularly in averting all-cause or cardiovascular-related mortality and reducing the incidence of diabetes and cancer (Bull et al., 2020).

# Methods

Methods should comprise of the study design, population and sample, sampling technique, number of samples included, and criteria of inclusion. Please also include data collection methods, measurement of variables and data analysis.

Sub-headings are recommended to be used.

### Study design or data being used

If the research employing a secondary data for the analysis, permission to use the data from the data owner should be explicitly written.

### Population and sample

Explain the sampling design, number of samples, and criteria of inclusion or exclusion in selecting sample.

### Data collection methods

Describe whether the study employing face-to-face interview, online interview, or self-administered. Procedures in data collection – particularly when the data was collected during the pandemic – should be briefly stated. If the study was an intervention research, procedures of research and intervention should be described in detail.

### Measurements

Measurement of each variable should be described in brief.

### Data analysis

Data analysis being used should be described in brief.

### Ethical approvals

If the research includes human subject, an ethical approval statement is necessary to be written at the end of method section. State the institution that provide approval, year of approval, with the registration number as reference.

# Results and discussion

Briefly explain and discuss the main findings, descriptive statistics, univariate, bivariate and multivariate analysis results. Reporting bivariate should be accompanied by the degree of association and significance (t=xxx, p-value<0.000). Results from multivariate analysis should be accompanied by the strength of association and significance (OR=xxx, p-value<0.000, CI lower-upper). Discussion part will be incorporated with the findings.

Whenever possible, organize the results in several sections by using sub-headings.

## Sub-heading level 1

### **Sub-heading level 2**

A maximum of 2 tables and 2 figures are allowed to be displayed in research brief. Table should be placed immediately after the text corresponds to it. Abbreviation and notes should be placed as table foot notes. Please see example.

**Table 1. Demographic and other characteristics of participants in the Thailand’s Surveillance of Physical Activity (SPA) 2019 and 2020. (Data presented as %(*n*))**

|  |  |  |
| --- | --- | --- |
| Variable | SPA 2019  (*n* = 4460) | SPA 2020  (*n* = 4482) |
| **Gender** |  |  |
| Male | 50.0 (2230) | 53.4 (2395) |
| Female | 50.0 (2230) | 46.6 (2087) |
| **Age group (year)** |  |  |
| Young adults (18–39) | 43.6 (1946) | 68.8 (3082) |
| Middle-aged adults (40–64) | 56.4 (2514) | 31.2 (1400) |
| **Education level** |  |  |
| Lower and primary education | 35.1 (1567) | 8.4 (377) |
| Secondary education | 18.2 (809) | 12.5 (561) |
| Post-secondary education | 46.7 (2084) | 79.1 (3544) |
| **Occupation** |  |  |
| Student | 3.6 (162) | 6.2 (280) |
| Formal sector | 24.1 (1073) | 21.7 (970) |
| Informal sector | 19.3 (862) | 34.9 (1562) |
| Private enterprise | 20.9 (931) | 21.2 (950) |
| Agriculture | 15.9 (708) | 5.8 (262) |
| Unemployed | 16.2 (723) | 8.6 (387) |
| No answer | 0.0 (1) | 1.6 (71) |
| **Chronic disease(s)** |  |  |
| Yes | 24.6 (1095) | 24.1 (1081) |
| No | 75.4 (3365) | 75.9 (3401) |
| **Area of residence** |  |  |
| Urban | 53.8 (2398) | 66.2 (2966) |
| Rural | 46.2 (2062) | 33.8 (1516) |
| **COVID-19 risk zones (as of March, 2020)** | |  | |
| Red | － | 34.1 (1529) |
| Orange | － | 21.2 (951) |
| Green | － | 44.7 (2002) |
| **Exposed to the Fit from Home campaign** | |  | |
| Yes | － | 25.6 (1148) |
| No | － | 74.4 (3334) |
| **Type of restrictive measure in one’s location** |  |  |
| Lockdown | － | 46.6 (2088) |
| Relaxed curfew | － | 53.4 (2394) |
| **Having sufficient MVPA** | |  | |
| Yes | 74.6 (3329) | 54.7 (2452) |
| No | 25.4 (1131) | 45.3 (2030) |

Notes: Red zone: more than 10 confirmed positive cases. Orange zone: 1–10 confirmed positive cases. Green zone: no infection has been reported. Lockdown period: during maximum curfew enforcement (March 29–May 2). Relaxed curfew: after May 2. Sufficient MVPA: an accumulation of 75 min of vigorous intensity PA per week or a 150-min combination of vigorous- and moderate-intensity PA per week. Abbreviations: MVPA = Moderate-to-Vigorous Physical Activity; SPA = Surveillance on Physical Activity.

Figures should be placed immediately after text in TIFF or editable format. Figure title should be placed below and centered. Colored figures are recommended instead of pattern or gray-scale. See example:

**Figure 1: Prevalence of sufficient MVPA of Thai adults: 2012-2019**

# Implications for Research/Policy

Please outline here the implications for research/policy.

# References

Reference should follow APA7th style.

All in-text citations must have a corresponding entry in the reference list.

All sources in the reference list must have a corresponding in-text citation.

See example for in-text and reference list following APA style:

<https://guides.lib.monash.edu/ld.php?content_id=49402325>

<https://aut.ac.nz.libguides.com/ld.php?content_id=49292669>