

1 **TITLE:**

2 INDIVIDUAL RESPONSE TO DIFFERENT FORMS OF RESISTANCE TRAINING IN
3 SCHOOL AGED BOYS

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5 **BRIEF RUNNING HEAD:** INDIVIDUAL RESPONSE TO RESISTANCE TRAINING IN
6 BOYS

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9 **AUTHORS:**

10 JOHN M. RADNOR ¹

11 RHODRI S. LLOYD ^{1,2}

12 JON L. OLIVER ^{1,2}

13

14 **AFFILIATIONS:**

15 1. Youth Physical Development Unit, School of Sport, Cardiff Metropolitan University, United
16 Kingdom

17 2. Sport Performance Research Institute New Zealand, AUT University, New Zealand

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20 **CORRESPONDENCE**

21 **Name:** John M. Radnor

22 **Address:** Youth Physical Development Unit, School of Sport, Cardiff Metropolitan University,
23 Cyncoed Campus, Cyncoed Road, Cardiff, CF23 6XD

24 **Telephone:** 02920205889

25 **Email:** jradnor@cardiffmet.ac.uk

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27 ABSTRACT

28 The aim of this study was to examine individual responses to different forms of resistance
29 training on measures of jumping and sprinting performance in school-aged boys. Eighty boys
30 were categorized into two maturity groups (pre- or post-PHV) and randomly assigned to a
31 plyometric training, resistance training, combined training, or control group. Intervention
32 groups participated in training twice weekly for six weeks, with measures of acceleration,
33 maximal running velocity, squat jump height and reactive strength index collected pre and post
34 intervention. In the pre-PHV cohort, plyometric training and combined training resulted in
35 significantly more positive responders than the other two groups in both sprint variables
36 (standardized residual values > 1.96). In the post-PHV cohort, significantly more positive
37 responders for acceleration and squat jump height resulted from traditional strength training
38 and combined training groups, compared with other groups. Conversely, plyometric training
39 and combined training resulted in a significantly greater number of positive responders than
40 the other two groups for maximal velocity and reactive strength index. Control participants
41 rarely demonstrated meaningful changes in performance over the six-week period. Irrespective
42 of maturation, it would appear that combined training provides the greatest opportunity for
43 most individuals to make short-term improvements in jump and sprint performance. Taking
44 maturation into account, our data show that a plyometric training stimulus is important for
45 individuals in the pre-PHV stage of development, whether as a standalone method or in
46 combination with traditional strength training, when attempting to improve jumping and
47 sprinting ability. However, individuals in the post-PHV stage require a more specific training
48 stimulus depending on the performance variable that is being targeted for improvement.

49

50 **Key words:** plyometrics, strength training, children, adolescents, youth

51 INTRODUCTION

52 The concept of children and adolescents participating in resistance training has received
53 growing interest among researchers, clinicians and practitioners over recent years. It is well
54 established that developmentally appropriate and properly supervised resistance training
55 programs are safe and effective for children and adolescents (18). Researchers have identified
56 that a range of different resistance training modalities can lead to positive responses in
57 paediatric populations, including traditional strength training, plyometric training,
58 weightlifting, and combined strength and plyometric training (18).

59 Research suggests that the effectiveness of training interventions to enhance sprinting
60 and jumping performance in young boys may be influenced by maturation (21). Lloyd and
61 colleagues (21) reported that boys who were pre-peak height velocity (PHV) benefitted more
62 from plyometric training, while boys who were post-PHV responded more favourably to a
63 combined plyometric and traditional strength training intervention. The authors proposed that
64 these maturity-dependent responses were indicative of “synergistic adaptation”, which refers
65 to the symbiotic relationship between specific adaptations of an imposed training demand and
66 concomitant growth and maturity-related adaptations (21).

67 While many studies have reported that youth respond positively to various resistance
68 training modalities, such studies typically only consider the group response to an intervention.
69 While this is important, the mean change within a training group may conceal a wide range of
70 individual responses, inclusive of high responders, non-responders, and negative responders.
71 Albeit based on adult data, previous research has emphasized individual responses in
72 cardiorespiratory fitness following endurance training, or in combination with resistance
73 training (7,8,13). However, there has been little research on the individual responsiveness to
74 resistance training alone. One such study identified a large range in individual responsiveness
75 in muscle cross sectional area and maximal strength following a 12 week resistance training
76 program (11). These studies indicate that in adult populations, discrepancies exist between

77 individuals who respond and those that fail to respond to certain training methods, but this has
78 yet to be determined in children and adolescents. Considering that the timing and tempo of
79 maturation differs between individuals (5), the large variations in responsiveness to training
80 seen in adults may be more pronounced within a youth population. Therefore, the purpose of
81 this study was to determine the individual responsiveness to different resistance training
82 interventions (traditional strength training, plyometric training and combined strength and
83 plyometric training) on measures of neuromuscular performance (squat jump height, reactive
84 strength index, acceleration, and maximal running velocity) in boys who were pre- or post-
85 PHV.

86

87 METHOD

88 **Experimental Approach to the Problem**

89 Participants were divided into one of three training groups (traditional strength training,
90 plyometric training, or combined strength and plyometric training) or a control group (n = 10
91 x pre-PHV and n = 10 x post-PHV per group). The experimental groups participated in their
92 respective training programs twice weekly for 6 weeks, whereas the control group continued
93 with their regular physical education lessons. All participants were tested before and after the
94 6-week intervention for the following independent variables: squat jump height, reactive
95 strength index, acceleration, and maximal running velocity. Smallest worthwhile change was
96 calculated and expressed as a percentage of the group mean. A frequency count was then used
97 to determine the number of individuals that made changes larger than the smallest worthwhile
98 change, and chi-squared (χ^2) analysis was used to investigate between-group differences for
99 the number of positive responders for each performance variable.

100

101 **Subjects**

102 Eighty male school children aged between 12 and 16 years (n = 40 pre-PHV and n = 40 post-
103 PHV) volunteered to participate in the study. Participant characteristics per maturation group
104 and training intervention are presented in *table 1*. All participants had previously been engaged
105 in physical education-based activities; however, they were not involved in any formalized
106 strength and conditioning programs. Parental informed consent and participant assent were
107 obtained in advance of the study. The University Research Ethics Committee, in accordance
108 with the Declaration of Helsinki, granted ethical approval for the research.

109

110 ***Table 1 near here***

111

112 **Procedures**

113 Prior to testing, all participants completed a standardized dynamic warm-up followed by a
114 familiarization session. During this session, participants were allowed to complete as many
115 practice trials of the test protocols as required until they could demonstrate consistent technical
116 execution. Following the warm-up and practice attempts, participants completed the battery of
117 tests in the following order: anthropometrics, squat jump test, 5-maximal rebound test, 10 m
118 and flying 20 m sprint tests. For each test, participants completed three trials, with the best of
119 three trials being used for further analyses. Two- and five-minute rest periods were given
120 between each trial and test respectively to limit the effects of fatigue on consecutive efforts.

121

122 *Anthropometrics.* Standing height (centimeters) and seated height (centimeters) were measured
123 using a stadiometer (SC126; Holtan, Wales), while body mass (kilograms) was measured using
124 a balance beam scale (Seca 700; Seca, Germany). These data were then incorporated into a
125 sex-specific regression equation to predict maturity offset (28). The equation has previously
126 been validated for boys with standard error of estimates reported as 0.57 years [equation 1]

127 (28). This assessment is a non- invasive and practical method of predicting years from PHV as
128 a measure of maturity offset. Pre-PHV participants were categorized as being between -3 years
129 to -1 years from PHV, while post-PHV were between +1 to +3 years from PHV (33).

130

131 Maturity offset = $-[9.236 + 0.0002708 * \text{leg length and sitting height interaction}] -$
132 $[0.001663 * \text{age and leg length interaction}] + [0.007216 * \text{age and sitting height}$
133 $\text{interaction}] + [0.2292 * \text{weight by height ratio}]$

134

135 [equation 1]

136

137 *Jump Protocols.* Using a mobile contact mat (Smart Jump; Fusion Sport, Australia), jump
138 height (cm) was calculated from a squat jump, while reactive strength index (mm/ms) was
139 measured during a 5-maximal rebound test. Both protocols have been shown to be a valid and
140 reliable means of assessing neuromuscular performance in male youth (19). The squat jump
141 was performed starting from an initial semi-squat position (90⁰ knee flexion as determined
142 subjectively by the principal researcher) before jumping vertically for maximum height (19).
143 Hands remained on the hips for the entire movement and participants were instructed to
144 maintain fully extended lower limbs throughout the flight period. Reactive strength index was
145 determined during a 5-maximal rebound test, with participants required to perform five
146 consecutive maximal vertical rebounds on the mobile contact mat. Participants were instructed
147 to maximize jump height and minimize ground contact time (6). The first jump in each trial
148 served as a countermovement jump and consequently was discounted for analysis, whereas the
149 remaining 4 rebounds were averaged for analysis of reactive strength index (19).

150

151 *Sprinting Protocols.* Sprint times were recorded using wireless timing gates (Smart Speed;

152 Fusion Sport, Australia) in an indoor sports hall. Data were instantaneously collected via a
153 handheld PDA (iPAQ; Hewlett Packard, USA). Acceleration was measured over 0–10 m with
154 a stationary start from a line 30 cm behind the first timing gate. Using a flying start, maximal
155 running velocity was measured between 10 and 30 m, giving a value for speed over a 20 m
156 distance.

157

158 **Training Programs**

159 Training took place twice per week for 6 weeks, with sessions designed and implemented by a
160 fully accredited strength and conditioning coach. To be included in the final analyses,
161 participants were required to complete at least 80% of the total training sessions within their
162 respective program. Correct technical execution was stressed at all times and relevant feedback
163 provided on an individual basis when required. Throughout the intervention period, the control
164 group continued with their physical education curricula, consisting of games-based physical
165 education lessons commensurate with the requirements of the United Kingdom national
166 curriculum. A more detailed overview of each training program is included in *tables 2-4*.

167

168 *Traditional Strength Training Group.* Participants completed three sets of 10 repetitions of a
169 barbell back squat, barbell lunge, dumbbell step up, and leg press. To enable the prescription
170 of individualized training intensities, 10 repetition maximum (10RM) loads were calculated
171 for participants in the traditional strength-training group before the start of the training period
172 using a protocol previously identified in the literature (12). In the event of technical failure, the
173 set was stopped to avoid potential risk of injury to the participant. To progressively overload
174 the training stimulus, intensity was increased each week via a 5% increment in external load
175 for all participants on the proviso that technical competency was maintained.

176

177 *Plyometric Training Group.* Training prescription included a combination of exercises that
178 were geared toward developing both safe jumping and landing mechanics (e.g., drop landings,
179 vertical jumps in place, single-leg forward hop and stick) and also to stress stretch-shortening
180 cycle activity (e.g., pogo hopping, drop jumps, multiple horizontal rebounds). Within each
181 session, participants were exposed to multiple sets of four exercises to provide repetition for
182 motor control development. The plyometric training program was progressed conservatively
183 and never at the expense of technical competency. Foot contacts were monitored throughout
184 the training intervention and increased at a conservative rate (week 1 foot contacts = 74 per
185 session, week 6 foot contacts = 88 per session).

186

187 *Combined Training Group.* The combined training program involved exposure to two
188 traditional strength-training exercises (barbell back squat and barbell lunge) and two varied
189 plyometric exercises taken from the plyometric training program, per session. As per the
190 traditional strength-training group, individualized training intensities were prescribed based on
191 baseline 10RM loads. Similarly, a 5% increment in external load was selected to progressively
192 overload the traditional strength training exercises, while plyometric exercises were progressed
193 according to total foot contacts per exercise, per session.

194

195 ***Tables 2-4 near here***

196

197 **Statistical Analysis**

198 The group change in performance was examined for each maturity group using a 4 x 4 mixed-
199 model ANOVA (intervention group x test variable). Where Mauchly's test revealed a violation
200 of the assumption of sphericity, the Greenhouse-Geisser adjustment was used. All post-hoc
201 testing employed a Bonferroni adjustment. Homogeneity of variance between groups was

202 examined using Levene's test of equality of variance. Percentage change from baseline testing
203 was calculated for all individuals in each of the performance variables. To facilitate
204 examination of individual responsiveness to training, the smallest worthwhile change (SWC)
205 was calculated as 0.2 of the between-subject standard deviation for the total sample of pre-
206 PHV (n=40) and post-PHV (n = 40), using pre-intervention data (10). The SWC was expressed
207 as a percentage of the group mean and a frequency count was then used to determine the
208 number of individuals that made changes greater than the SWC, with this being used to identify
209 individuals that made a "positive response" in performance. Chi-squared (χ^2) analysis was used
210 to investigate between-group differences for the number of positive responders for each
211 performance variable. In the Chi-Squared test, analysis of the standardized residuals was
212 completed to identify frequencies that would be considered larger in magnitude than might be
213 expected by chance (35). Standardized residual values were interpreted using the > 1.96
214 criteria, whereby cell residuals that are greater than what might be expected by chance (22).
215 Additionally, if a difference of > 1.96 between groups from the chi-squared analysis was
216 revealed, it was treated as significantly different. Statistical significance for all tests was set at
217 alpha level $p < 0.05$.

218

219 RESULTS

220 The mean group response to each intervention is shown in *table 5*. Interaction effects for
221 intervention x variable were observed for both pre ($F = 6.01, p < 0.001$) and post-PHV ($F =$
222 $15.34, p < 0.001$) groups. Significant between group differences in percentage change for all
223 performance variables are displayed in *table 5*.

224

225 ***Table 5 near here***

226

227 The individual percentage change for each participant in acceleration, maximal running
228 velocity, squat jump height and reactive strength index is shown in *table 5* and *figures 1-4*.

229 For the pre-PHV cohort, chi-squared analysis revealed significant differences between
230 training groups for the number of positive responders across all sprinting and jumping
231 variables. For both sprint variables, there were significantly more positive responders from the
232 plyometric and combined training groups than the traditional strength training and control
233 group. While all training groups resulted in significantly more positive responders for squat
234 jump height than the control group, the only training method that resulted in significantly more
235 positive responders than the control group for reactive strength index was plyometric training.
236 Only in 3 instances did one of the four performance variables show a positive response from a
237 member within the control group.

238 In the post-PHV cohort, chi-squared analysis revealed significant differences between
239 training groups for the number of positive responders across all sprinting and jumping
240 variables. For acceleration and squat jump height, there were significantly more positive
241 responders from traditional strength training and combined training than the other two groups.
242 Conversely, plyometric training and combined training resulted in significantly more positive
243 responders than the other two groups for maximal velocity and reactive strength index. Akin
244 to the pre-PHV group, only in 3 instances did one of the four performance variables show a
245 positive response from a member within the control group.

246

247 ***Figures 1-4 near here***

248

249 In the pre-PHV cohort, 30% and 50% of individuals made improvements greater than the SWC
250 across all performance variables in the plyometric training and combined training groups
251 respectively, whereas no individuals from the traditional strength training group showed a

252 comparable response. In the post-PHV cohort, 10% of the plyometric training group and 40%
253 of the combined training made changes greater than the SWC for all performance variables,
254 but as per the pre-PHV cohort, no individuals from the traditional strength training group made
255 changes above the SWC across all variables.

256

257

258 DISCUSSION

259 The major finding of the current study was that individual responses to resistance training in a
260 group of school-age boy appear to be dependent on the mode of resistance training and maturity
261 status. Irrespective of maturation, combined training resulted in a significantly greater number
262 of positive responders than the control group in most performance variables. Within the pre-
263 PHV group, plyometric training and combined training resulted in significantly more positive
264 responders than traditional strength training in both sprinting variables. Analysis of the post-
265 PHV group demonstrated that the number of individuals achieving positive responses from
266 each training group was dependent on the performance variable measured. Combined training
267 and traditional strength training resulted in a greater number of positive responders for tasks
268 that placed a high demand on concentric strength (acceleration and squat jump), whereas
269 combined and plyometric training groups resulted in significantly more positive responders in
270 tasks that required higher levels of reactive strength (maximal running velocity and reactive
271 strength index).

272 Examination of the pre-PHV group mean data showed that the combined training and
273 plyometric training interventions resulted in significantly greater percentage improvements in
274 acceleration and maximal running velocity compared to the control group, while combined
275 training also elicited a significantly greater percentage change than traditional strength training
276 alone. While percentage improvements in squat jump height were significantly greater

277 following all training interventions when compared to the control group, plyometric training
278 also resulted in significant percentage improvements in reactive strength index. Similar
279 maturity-related outcomes have been reported in previous literature, with meta-analysis data
280 showing that plyometric training leads to the greatest improvements in sprint speed for young
281 boys (34). Furthermore, recent research highlights the effectiveness of plyometric training over
282 other forms of resistance training when aiming to improve sprinting and jumping ability in
283 boys that are pre-PHV (21).

284 The current study revealed that combined training and plyometric training resulted in
285 significantly more pre-PHV individuals making positive responses in acceleration and
286 maximal running velocity when compared against traditional strength training and control
287 groups. In comparison to the control group, all forms of resistance training resulted in a
288 significantly higher number of positive responders for squat jump height following the
289 intervention. However, only plyometric training group showed a significantly higher number
290 of positive responders for reactive strength index in comparison to the control group.
291 Interestingly, 50% of individuals from the combined training group and 30% of individuals
292 from the plyometric training group achieved positive changes across all performance variables,
293 whereas no individuals from the traditional strength training group demonstrated a similar
294 response. Cumulatively, these findings highlight the importance of a plyometric training
295 stimulus for boys that are pre-PHV, whether as a standalone method or in combination with
296 traditional strength training. Intuitively, this may be due to the fact that children experience a
297 natural increase in neural coordination and central nervous system maturation during childhood
298 (23,29), which in combination with the fast contraction velocities demonstrated during
299 plyometric training may provide an augmented training response, recently termed ‘synergistic
300 adaptation’ (21).

301 The group response in the post-PHV cohort demonstrated the importance of combined
302 training, as this was the only intervention group that achieved significantly greater percentage
303 improvements than the control group for all performance variables. In terms of acceleration
304 and squat jump height, traditional strength training elicited significantly greater percentage
305 change than the plyometric training and the control group. Conversely, plyometric training
306 resulted in significantly greater percentage improvements than the traditional strength training
307 group for reactive strength index. Cumulatively, these results support previous findings
308 demonstrating the importance of a varied resistance training stimulus for improving jumping
309 (21) and sprinting (21,34) abilities in boys that have already experienced PHV.

310 In terms of the individual response in the post-PHV cohort, combined training and
311 traditional strength training resulted in significantly more positive responders than the other
312 groups for acceleration and squat jump height. Conversely, the number of individuals who
313 improved maximal running velocity and reactive strength index was significantly greater
314 following plyometric and combined training compared with traditional strength training. Thus,
315 individual responsiveness appears to be training mode dependent, whereby adaptations are
316 specific to the nature of the training stimulus (36). Traditional strength training typically
317 involves relatively slower movement velocities involving both concentric and eccentric
318 contractions (36), whereas the plyometric training program in the current study incorporated a
319 number of exercises which stressed the stretch-shortening cycle, a rapid muscle action which
320 uses eccentric-concentric coupling (14). Both acceleration and squat jump performance are
321 reliant on concentric strength (17,37), which may explain the lack of positive responders from
322 the post-PHV plyometric training group, as this mode of training may not have adequately
323 increased concentric strength enough to improve acceleration and squat jump performance.
324 Similar results have been noted in previous studies, where plyometric training did not improve
325 squat jump height (26) or acceleration (4) in young boys. Specific adaptations to the imposed

326 training demand was also evidenced by the combined and plyometric training resulting in a
327 significantly greater number of positive responders in maximal running velocity and reactive
328 strength index than the traditional strength training group. For these performance variables,
329 there is a larger emphasis on the need for reactive strength and high rates of force development
330 (9), both of which have been significantly improved in response to plyometric training in boys
331 (20,24). These findings support previous studies where combined plyometric and strength
332 training was found to result in the greatest improvements in sprint speed for boys that are post-
333 PHV (34). While no individuals from the traditional strength training group and only 10% of
334 individuals in the plyometric training group showed positive responses across all performance
335 variables, 40% of the individuals in the combined training achieved this feat. Cumulatively,
336 this demonstrates that the varied stimulus from the combined training group was able to
337 increase a wider range of performance variables in post-PHV boys; whereas improvements
338 from independent forms of plyometric training or traditional strength training appeared to be
339 more task specific.

340 Research has shown that responses to resistance training are influenced by the intensity,
341 frequency, and volume of training in both children and adults (2,16,30). Additionally, recent
342 research has identified that growth and maturation (27) and the training method (21) can both
343 influence the training response in children. However, individual responsiveness to training is
344 complex, and the factors affecting the training response are less clear. Variation in individual
345 responses to training could potentially be explained by the variation in timing, tempo and
346 magnitude of maturation (5). While all subjects were grouped as pre- and post-PHV, the tempo
347 of maturation will likely differ within these specific groups. As maturation has been shown to
348 influence natural development (32) as well as trainability of jumping and sprinting ability (27),
349 the rate at which these individuals are experiencing maturation may in part explain the variation
350 in individual responsiveness to training. Additional factors influencing the individual response

351 to training that have been determined in adult studies, include; genetics (3), baseline fitness
352 (7), perception of training intensity (25), individual recovery rates (15), training status (31),
353 and stress (1). While these influencing factors have been established in adults, there remains a
354 dearth of empirical evidence within pediatric-based research.

355

356 PRACTICAL APPLICATIONS

357 Data from the current study show that a plyometric training stimulus is important for
358 individuals in the pre-PHV stage of development, whether as a standalone method or in
359 combination with traditional strength training, when attempting to improve jumping and
360 sprinting ability. As with all forms of resistance training, plyometric exercises should never be
361 progressed at the expense of technical competency, and that qualified strength and conditioning
362 coaches need to be present to monitor technique and training volume. Individuals in the post-
363 PHV stage may require a more specific training stimulus depending on the performance
364 variable that is being targeted for improvement. Results from the current study show that a
365 form of traditional strength training is required when aiming to improve tasks that place a high
366 demand on concentric strength, whereas plyometric training is necessary for tasks that require
367 higher levels of reactive strength. Given the short-term nature of the current study, it
368 should be stressed that the resistance training stimulus should be changed periodically
369 in order to facilitate continued progressive neuromuscular adaptation. Thus, while a
370 focus on plyometrics may initially provide a preferential training response for pre-PHV
371 boys, practitioners should routinely change the primary training mode to facilitate long-
372 term adaptation. Additionally, the wide range of individual responsiveness demonstrated in
373 this study highlights the need to monitor the response to training on an individual basis.

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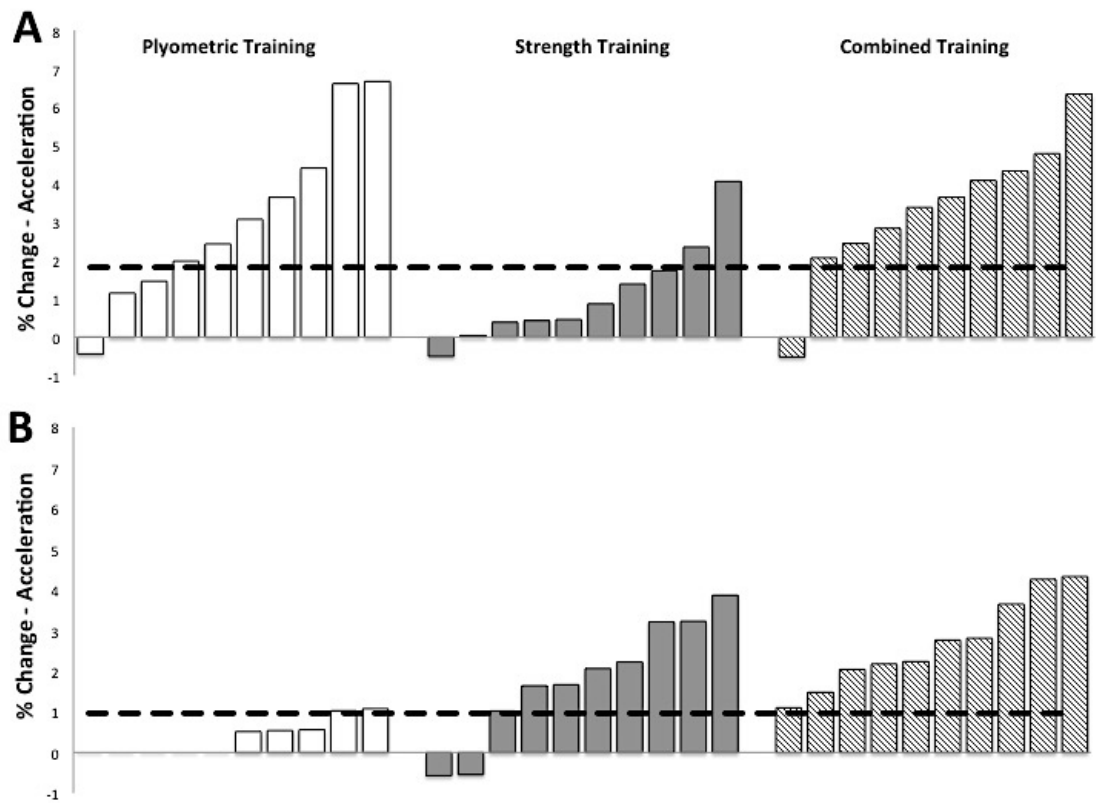


FIGURE 1 – Individual percentage change in acceleration in response to plyometric, strength training and combined training for pre-PHV (A) and post-PHV (B) subjects. Horizontal line represents the smallest worthwhile change (SWC) for all training groups combined.

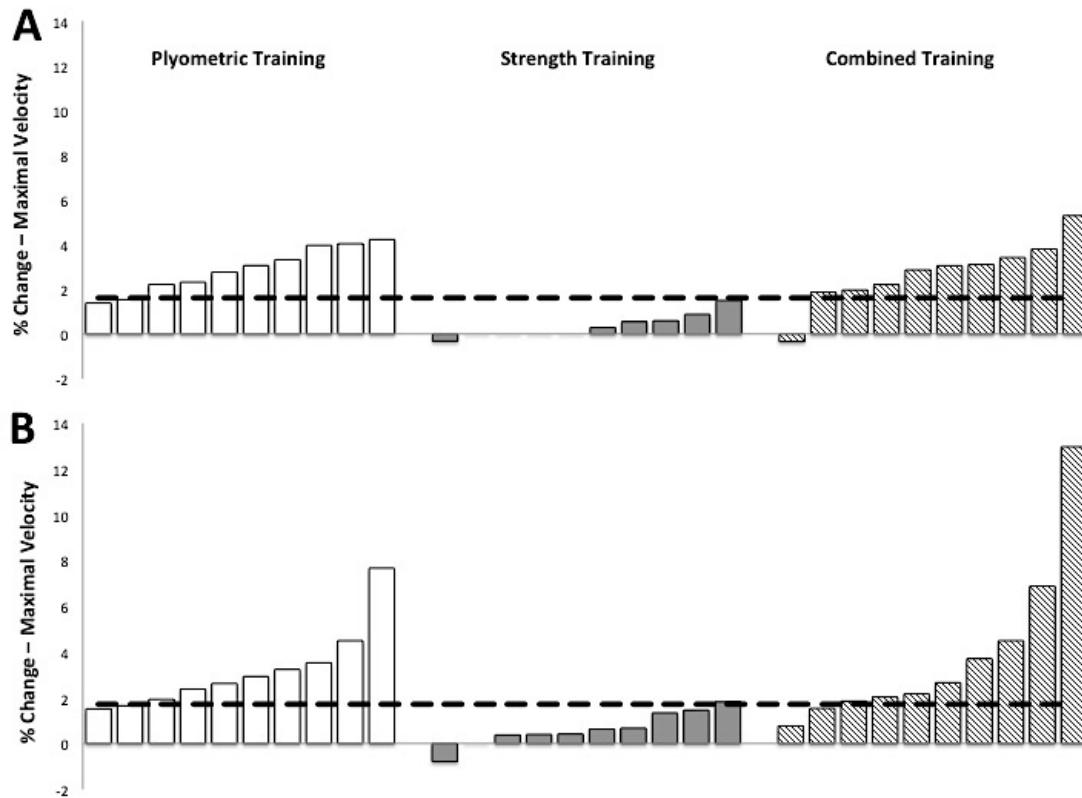


FIGURE 2 – Individual percentage change in maximal running velocity in response to plyometric, strength training and combined training for pre-PHV (A) and post-PHV (B) subjects. Horizontal line represents the smallest worthwhile change (SWC) for all training groups combined.

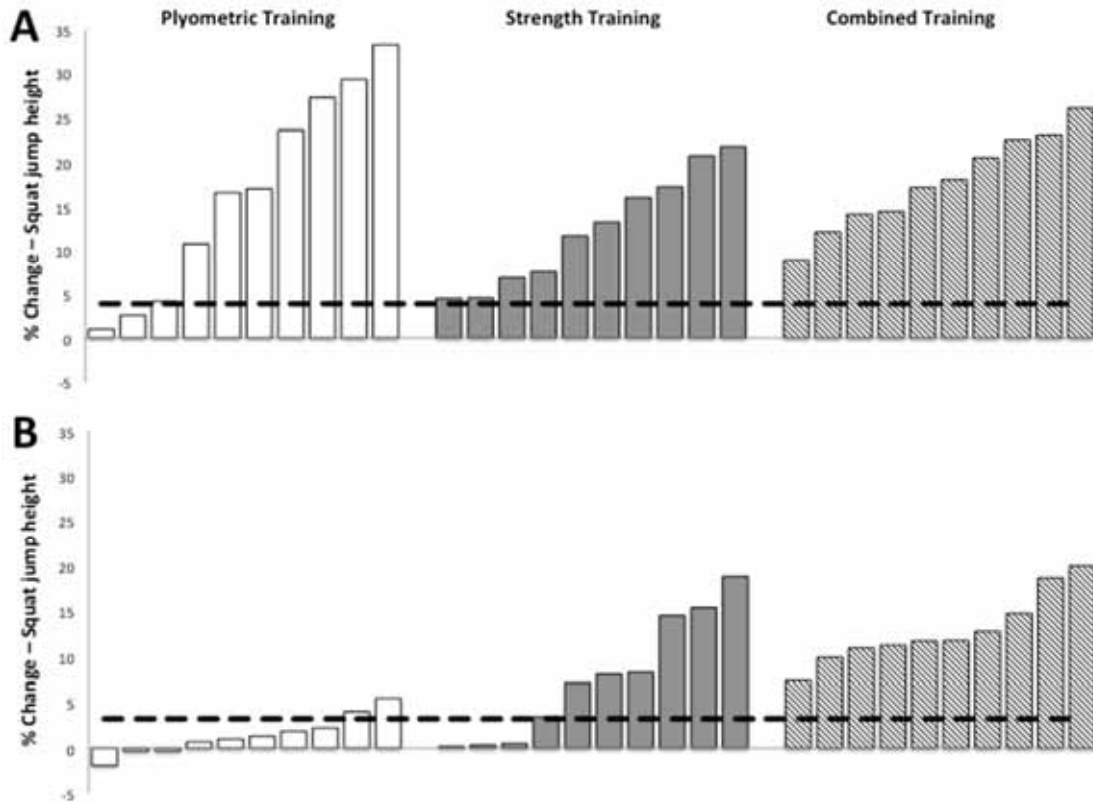


FIGURE 3 – Individual percentage change in squat jump height in response to plyometric, strength training and combined training for pre-PHV (A) and post-PHV (B) subjects. Horizontal line represents the smallest worthwhile change (SWC) for all training groups combined.

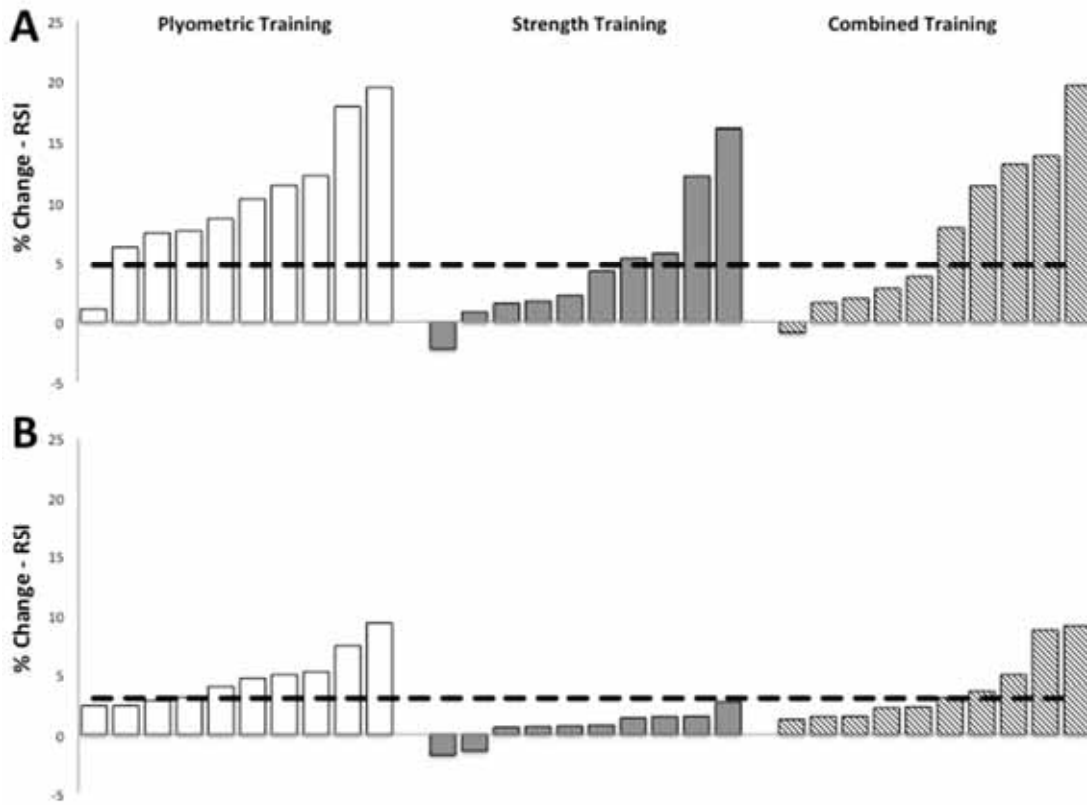


FIGURE 4 – Individual percentage change in reactive strength index (RSI) in response to plyometric, strength training and combined training for pre-PHV (A) and post-PHV (B) subjects. Horizontal line represents the smallest worthwhile change (SWC) for all training groups combined.

Table 1. Descriptive statistics for anthropometrics per group (Mean \pm SD)*

Maturation Stage	Group	Number	Age	Height (cm)	Body Mass	PHV
Pre-PHV	PT	10	12.67 \pm 0.27	159.64 \pm 8.85	56.00 \pm 11.02	-1.5 \pm 0.4
	RTST	10	12.61 \pm 0.25	156.87 \pm 6.30	50.28 \pm 14.38	-1.4 \pm 0.6
	CT	10	12.73 \pm 0.29	158.34 \pm 7.60	53.47 \pm 10.65	-1.5 \pm 0.7
	Control	10	12.78 \pm 0.21	156.95 \pm 9.22	54.90 \pm 10.61	-1.5 \pm 0.6
Post-PHV	PT	10	16.36 \pm 0.24	179.54 \pm 5.67	67.78 \pm 6.13	1.3 \pm 0.3
	RTST	10	16.27 \pm 0.31	177.49 \pm 5.28	64.85 \pm 5.29	1.3 \pm 0.3
	CT	10	16.23 \pm 0.27	178.32 \pm 5.39	65.34 \pm 7.18	1.3 \pm 0.6
	Control	10	16.24 \pm 0.32	179.04 \pm 5.23	67.18 \pm 8.43	1.2 \pm 0.4

* PHV = peak height velocity; PT = plyometric training; TST = traditional strength Training; CT = combined training; CON = control group

Table 2. Overview of the plyometric training program

Week	Exercise	Sets	Reps
1	Drop Lands (20 cm box)	3	6
	Vertical Jump in place (stick landings)	3	6
	Broad Jump (stick landings)	3	6
	SL (<u>Single Leg</u>) Hop in place (stick landings)	2	10
2	Drop Lands (20 cm box)	3	6
	SL Forward hop (stick landings)	2	10
	Split Squat drop lands (20 cm box)	3	6
	SL Lateral hop and stick	2	10
3	Box Jumps	3	6
	Pogo Hopping	3	8
	Multiple bilateral bounds (low intensity)	4	3
	Ankling	3	8
4	Power Skipping	3	10
	Unilateral pogo hops	2	10
	Multiple bilateral bounds	5	3
	Multiple bilateral bounds (w/hurdles)	5	3
5	Unilateral pogo hops	2	10
	Alternate leg bounds	3	8
	Multiple Unilateral bounds	3	8
	Multiple bilateral bounds (w/hurdles)	5	3
6	Drop Jumps (20 cm box)	4	4
	Alternate leg bounds	3	8
	Power Skipping (w/hurdles)	3	8
	Multiple Unilateral bounds	3	8

Table 3. Overview of the resistance training program

Week	Exercise	Sets	Reps	Load
1-6	Back Squat Barbell Lunge DB (Dumbbell) Step Up Leg Press	3	10	Increased each week by 5%

Table 4. Overview of the combined training program

Week	Exercise	Sets	Reps
1	Back Squat	3	10
	Drop Lands (20 cm box)	3	6
	Barbell Lunge	3	10
	Broad Jump (Stick Landing)	3	6
2	Back Squat	3	10
	SL (Single Leg) Forward Hop and stick	2	10
	Barbell Lunge	3	10
	Split Squat Drop Lands (20 cm box)	3	6
3	Back Squat	3	10
	Pogo Hopping	3	8
	Barbell Lunge	3	10
	Multiple Bilateral bounds (low intensity)	4	4
4	Back Squat	3	10
	Multiple Bilateral bounds (w/hurdles)	5	3
	Barbell Lunge	3	10
	Power Skipping	3	10
5	Back Squat	3	10
	Alternate leg bounds	3	8
	Barbell Lunge	3	10
	Unilateral pogo hopping	2	10
6	Back Squat	3	10
	Drop Jumps (20 cm box)	4	4
	Barbell Lunge	3	10
	Power Skipping (w/hurdles)	3	8

Table 5. Percentage changes in running speed and jump performance for both maturity groups.

Pre-PHV								
	Acceleration		Maximal Velocity		SJ		RSI	
	Group % Change	n > SWC	Group % Change	n > SWC	Group % Change	n > SWC	Group % Change	n > SWC
Plyometric Training (PT)	3.10 ± 2.30 ^a	7 ^{ac\$+}	2.88 ± 1.02 ^{ac}	8 ^{ac\$+}	16.56 ± 11.70 ^{al23}	8 ^{±+}	10.21 ± 5.43 ^{al2}	9 ^{±+}
Traditional Strength Training (TST)	1.12 ± 1.33	2	0.35 ± 0.54	0	12.42 ± 6.44 ^{al23}	10 ^{±+}	4.76 ± 5.53 ²	4
Combined Training (CT)	3.34 ± 1.83 ^{ac}	9 ^{*ac\$+}	2.72 ± 1.47 ^{ac}	9 ^{*ac\$+}	17.70 ± 5.42 ^{al23}	10 ^{±+}	7.50 ± 6.71 ²	5
Control Group (CON)	-0.06 ± 0.26	0	0.12 ± 0.74	0	0.86 ± 2.85	1	1.10 ± 2.77	2
Post-PHV								
	Acceleration		Maximal Velocity		SJ		RSI	
	Group % Change	n > SWC	Group % Change	n > SWC	Group % Change	n > SWC	Group % Change	n > SWC
Plyometric Training	0.37 ± 0.43	2	3.20 ± 1.81 ^{al}	8 ^{ac\$+}	1.41 ± 2.15	2	4.64 ± 2.25 ^{ac1}	7 ^{*ac\$+}
Traditional Strength Training	1.78 ± 1.50 ^{ab}	8 ^{bc\$+}	0.63 ± 0.76	1	7.68 ± 6.76 ^{ab123}	7 ^{ab\$+}	0.67 ± 1.35	0
Combined Training	2.68 ± 1.10 ^{ab}	10 ^{bc\$+}	3.91 ± 3.64 ^{ac}	8 ^{ac\$+}	12.93 ± 3.89 ^{abc123}	10 ^{*ab\$+}	3.84 ± 2.90 ^{a,c}	5 ^{ac\$+}
Control Group	0.15 ± 0.76	1	-0.17 ± 0.72	0	-0.01 ± 1.42	0	0.19 ± 1.56	2

^a significantly greater than CON ($p < 0.05$)

¹ significantly greater than acceleration ($p < 0.05$)

^{*} significantly greater than expected count ($p < 0.05$)

^b significantly greater than PT ($p < 0.05$)

² significantly greater than maximal running velocity ($p < 0.05$)

^Δ significantly greater than PT ($p < 0.05$)

^c significantly greater than TST ($p < 0.05$)

³ significantly greater than RSI ($p < 0.05$)

^{*} significantly greater than expected count

³ significantly greater than RSI ($p < 0.05$)

^{\$} significantly greater than TST ($p < 0.05$)

⁺ significantly greater than CON ($p < 0.05$)

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