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# Walk with me study: is a peer-led walking programme to increase physical activity in inactive older adults effective?

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| **Submission date** 09/11/2021 | **Recruitment status** No longer recruiting | [X] Prospectively registered<br>[_] Protocol<br>[_] Statistical analysis plan<br>[_] Results<br>[_] Individual participant data<br>[_] Record updated in last year |
| **Registration date** 04/07/2022 | **Overall study status** Completed | |
| **Last Edited** 04/07/2024 | **Condition category** Other | |

## Plain English summary of protocol

Background and study aims

Many older adults would benefit from being more physically active, especially those living in areas of socioeconomic disadvantage. Interventions delivered by peer mentors (trained members of the public) have shown promise at increasing people's physical activity levels in previous research, but their effectiveness in this population was unknown. 'Walk with Me' is a 12-week peer-led intervention developed to enable older adults from areas of socioeconomic disadvantage to become more active. The intervention was developed using guidance from previous successful interventions and with input from older adults who lived in these communities. They indicated that despite having 'busy' lives, having a peer mentor to walk with would help them become more active. In a pilot study, 50 people aged 60–70 years agreed to take part. Participants that were interviewed following the intervention rated it favourably and reported increasing their activity. The study showed that it would be possible to conduct a larger study to test if a walking intervention delivered by peer mentors can increase older adults' physical activity. The aim of the proposed project is to further examine if a peer mentor can help older adults increase their physical activity over 1 year compared to a control group. We hope to find out the costs and benefits to the health service and the experiences of people taking part.

Who can participate?

348 inactive older adults aged 60 years and over living in socio-economically disadvantaged communities, mainly through General Practices as this approach worked best previously in the pilot study, but also through community groups.

What does the study involve?

Participants will be allocated by chance to one of two groups. One group will be paired with a peer mentor for a 12-week walking programme. The other group will be a 12-month wait list group. The peer mentor will meet with the participant each week with the aim of supporting them to increase their activity and find opportunities in the local community to engage in other programmes so they can maintain their activity. We will measure if the programme works using

an activity monitor. All participants will be asked to wear this for one week at the start and end of the programme and after 12 months. We will also discuss the impact of the programme with some participants and peer mentors to understand their views of the Walk with Me programme.

What are the possible benefits and risks of participating?
Regular physical activity has been shown to benefit both physical and mental health. Participants will receive information or support to help them become more active. Also, all participants will have their health and wellbeing measured over the course of the study. Walking is considered a very safe form of activity, therefore there are no significant risks from taking part.

Where is the study run from?
Ulster University (UK)

When is the study starting and how long is it expected to run for?
March 2022 to February 2025

Who is funding the study?
The study is funded by the National Institute for Health Research (NIHR) Public Health Research (PHR) Programme (ref no. NIHR131550) and the HSC Research and Development Division, Public Health Agency (UK)

Who is the main contact?
Professor Mark Tully, walkwithme@ulster.ac.uk

# Contact information

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Scientific

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# Additional identifiers

### EudraCT/CTIS number
Nil known

### IRAS number
305144

### ClinicalTrials.gov number
Nil known

### Secondary identifying numbers
NIHR131550, IRAS 305144

# Study information

### Scientific Title
Effectiveness and cost-effectiveness of a peer-led walking programme to increase physical activity in inactive older adults: “Walk With Me Study”

### Acronym
WWM

### Study objectives
What is the effectiveness and cost-effectiveness of a peer-led walking programme to increase moderate-to-vigorous physical activity in adults aged 60 years and over living in socioeconomically disadvantaged communities?

### Ethics approval required
Old ethics approval format

### Ethics approval(s)
Approved 25/05/2022, North of Scotland Research Ethics Committee (Summerfield House, 2 Eday Road, Aberdeen, AB15 6RE, UK; +44 (0)1224558458; nosres@nhs.net), ref: 22/NS/0056

### Study design
Single blind randomized controlled trial

### Primary study design
Interventional

### Secondary study design

Cluster randomised trial

## Study setting(s)
Community

## Study type(s)
Prevention

## Participant information sheet
See additional files

## Health condition(s) or problem(s) studied
Physical activity in older persons

## Interventions
The 'Walk With Me' intervention is a peer led 12-week walking programme in community dwelling older adults. Eligible participants will be randomised on a 1:1 ratio to either an intervention group (peer-led walking programme) or control condition. An independent statistician from the Northern Ireland Clinical Trials Unit (NICTU) will generate the randomisation sequence using NQuery Advisor (v7) and randomly permuted blocks of mixed size.

Individuals allocated to the (waitlist) control group will be contacted by the peer mentor manager regularly during the trial period (12 weeks, 6 months, and 12 months post baseline data collection, for follow-up assessments). After the final data collection point, they will be given the opportunity to discuss with a member of the research team the availability of local physical activity opportunities (e.g., local walking groups). In line with approaches used in our pilot study and other interventions in older adults, they will also be offered a pedometer and physical activity diary during this meeting.

Eligible individuals allocated to the intervention group will have regular contact with a peer mentor and be encouraged to increase their time spent in moderate intensity physical activity. 35 peer mentors will be recruited. They will be paired with participants of the same sex and from a similar community.

During the trial, peer mentors will be managed by a peer mentor manager (public health improvement coordinator (PHIC)) for training/advice/support. They will be contacted by the PHIC at least once per fortnight, to maintain a regular line of contact and identify any problems with the programme delivery or participant contact and engagement.

The intervention will begin with a first face-to-face meeting between the peer mentor and participant. The programme will then involve a phased approach, with an initial period of trust building, identifying current levels of physical activity and facilitators and barriers to increasing activity, and identifying strategies to overcome these barriers and increase activity (e.g., discussing opportunities in the local environment). This is followed by individually tailored goal setting, where weekly targets are discussed, agreed, and reviewed. This will be done using pedometers to set individually tailored goals and self-monitor progress using weekly step diaries, as in previous peer-led physical activity interventions. After 12 weeks, the formal peer-led component will finish, and participants in the intervention group will be signposted to other activity programmes in the community to encourage maintenance of their activity level.

## Intervention Type

Behavioural

### Primary outcome measure
Time spent in moderate-to-vigorous physical activity is measured using a waist-worn Actigraph accelerometer at baseline, 12 weeks, 6 months, and 12 months.

### Secondary outcome measures
1. Quality of life measured using SF-12 at baseline, 12 weeks and 12 months.
2. Health-related quality of life measured using EQ5D-5L at baseline, 12 weeks and 12 months.
3. Mental wellbeing measured using Warwick-Edinburgh Mental Well-Being Scale at baseline, 12 weeks and 12 months.
4. Resting blood pressure measured using a digital sphygmomanometer at baseline, 12 weeks and 12 months.
5. Body mass index and waist circumference measured at baseline, 12 weeks and 12 months.
6. Social engagement measured with the UCLA Loneliness Scale and the Lubben Social Network Scale measured at baseline, 12 weeks 12 months.
7. Physical functioning measures using short physical performance battery test at baseline, 12 weeks 12 months.
8. Use of self-regulation techniques measured using physical activity self-regulation scale at baseline, 12 weeks 12 months.
9. Physical activity and social activity self-efficacy measured using physical activity and social activity self-efficacy scales at baseline, 12 weeks 12 months.
10. Physical activity and social activity outcome expectancy measured using physical activity and social activity outcome expectancy scales at baseline, 12 weeks 12 months.
11. Cost-effectiveness measured using health service use questionnaire at baseline, 12 weeks 12 months.

### Overall study start date
01/03/2022

### Completion date
30/04/2025

## Eligibility

### Key inclusion criteria
1. Living in socio-economically disadvantaged community, defined as the most disadvantaged quartile of electoral wards in NI according to the NIMDM
2. Able to communicate in English and live independently in the community (i.e. at home).
3. For individuals not in employment at the outset, they will be included as long as they are not planning on returning to work over the following 12 months
4. Males or females aged 60 years or over
5. Score of 24 or higher on the Mini-Mental State Exam
6. Score of <3 on the PRISMA-7 frailty questionnaire
7. Not currently physically active (assessed using the General Practice Physical Activity Questionnaire)
8. No recent medical history in the last six months that would limit the ability to participate in a walking programme
9. Able to communicate in English

### Participant type(s)

Healthy volunteer

### Age group
Senior

### Lower age limit
60 Years

### Sex
Both

### Target number of participants
348

### Key exclusion criteria
1. Individuals who do not meet the inclusion criteria
2. Individuals who decline to participate
3. Individuals with learning disabilities will be excluded
4. Individuals unwilling to give informed consent
5. Unable to communicate in English

### Date of first enrolment
01/08/2022

### Date of final enrolment
30/04/2024

## Locations

### Countries of recruitment
Northern Ireland

United Kingdom

### Study participating centre
### School of Health Sciences
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## Sponsor information

### Organisation

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### Sponsor type
University/education

### Website
https://www.ulster.ac.uk/departments/research/research-governance

### ROR
https://ror.org/01yp9g959

## Funder(s)

### Funder type
Government

### Funder Name
National Institute for Health Research

### Alternative Name(s)
National Institute for Health Research, NIHR Research, NIHRresearch, NIHR - National Institute for Health Research, NIHR (The National Institute for Health and Care Research), NIHR

### Funding Body Type
Government organisation

### Funding Body Subtype
National government

### Location
United Kingdom

### Funder Name
Public Health Agency

### Alternative Name(s)
PHA

### Funding Body Type
Private sector organisation

### Funding Body Subtype
Other non-profit organizations

### Location
United Kingdom

# Results and Publications

### Publication and dissemination plan
We will produce a range of outputs for different audiences, including a study website with regular updates, newsletters for participants, stakeholders and policy makers, lay summaries of evidence, peer reviewed publications in high impact journals and conference presentations at national and international conferences.

### Intention to publish date
31/12/2025

### Individual participant data (IPD) sharing plan
The data-sharing plans for the current study are unknown and will be made available at a later date

### IPD sharing plan summary
Data sharing statement to be made available at a later date

### Study outputs

| Output type | Details | Date created | Date added | Peer reviewed? | Patient-facing? |
|---|---|---|---|---|---|
| Participant information sheet | version 1 | 25/04/2022 | 28/06/2022 | No | Yes |
| HRA research summary | | | 28/06/2023 | No | No |