

Can a school-based lunchtime physical activity program improve mental health among autistic adolescents and their peers with ADHD in Hong Kong?

Submission date 25/08/2026	Recruitment status No longer recruiting	☐ Prospectively registered
Registration date 27/08/2026	Overall study status Completed	☐ Protocol
Last Edited 27/08/2026	Condition category Mental and Behavioural Disorders	☐ Statistical analysis plan
		☐ Results
		☐ Individual participant data
		☒ Record updated in last year

Plain English summary of protocol

Not provided at time of registration

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Additional identifiers**Research Grants Council project number**

14619720

Study information**Scientific Title**

A cluster randomised controlled trial of a 12-week school-based lunch break physical activity intervention versus usual school practice for improving mental health and reducing risk behaviours in autistic adolescents and their peers with attention-deficit/hyperactivity (ADHD) in Hong Kong

Study objectives

1. Examine the immediate, short- and longer-term effects of a school-based physical activity intervention on mental health (psychological ill-being: stress, anxiety, depression; psychological well-being: resilience, self-concept) and risk behaviours (aggression, suicidal ideation) in autistic adolescents and their peers with ADHD.
2. Assess the potential influence of moderating variables (gender, neurodevelopmental disorder [NDD] types) on the intervention effects.

Ethics approval required

Ethics approval required

Ethics approval(s)

Approved 15/01/2021, Joint Chinese University of Hong Kong New Territories East Cluster Clinical Research Ethics Committee (8/F, Lui Che Woo Clinical Sciences Building Prince of Wales Hospital Shatin, Hong Kong, 000000, Hong Kong; +852 (0)35053935; crec@cuhk.edu.hk), ref: 2020.451

Primary study design

Interventional

Allocation

Randomized controlled trial

Masking

Blinded (masking used)

Control

Active

Assignment

Parallel

Purpose

Prevention

Study type(s)**Health condition(s) or problem(s) studied**

Autism; attention-deficit/hyperactivity disorder (ADHD); adolescent mental health, including stress, anxiety, depression, resilience and self-concept; aggression and suicidal ideation

Interventions

The 12 participating secondary schools will be randomly allocated within geographic territory, using cluster randomisation at the school level, to either the school-based physical activity programme or a usual-practice control condition. Participants will enter the group allocated to their school and will not be individually randomised.

Participants in intervention schools will attend group-based physical activity sessions in a school hall or gymnasium during lunch breaks. Each session will last 15 minutes and will be delivered three times per week for 12 weeks, providing 36 sessions and 540 minutes of physical activity in total. A certified fitness instructor, assisted by a trained research assistant, will deliver the sessions at an approximate staff-to-participant ratio of 1:10. Sessions will include moderate-intensity aerobic activities such as jumping, skipping and jogging. Participants will exercise at approximately 50% to 60% of their estimated maximum heart rate, calculated as 220 minus age, and their exercise intensity will be monitored using a Polar heart-rate monitor.

Participants in control schools will receive no additional physical activity programme during the 12-week period and will continue their regular school routines and usual practices.

All participants will complete assessments at baseline, immediately after the 12-week intervention, 3 months after the intervention and 12 months after the intervention. Outcome assessors will be blinded to school allocation and participants' diagnostic group. Participants will be involved in the study for approximately 15 months.

Teachers in intervention schools will also receive two 3-hour training workshops, a training manual and access to educational materials and instructional videos to support future programme delivery.

Intervention Type

Behavioural

Primary outcome(s)

1. Psychological ill-being (stress, anxiety, depression) measured using the Chinese Depression Anxiety Stress Scale-21 (DASS-21) at baseline (T0), immediately after the 12-week intervention (T1), 3 months after the intervention (T2) and 12 months after the intervention (T3)

2. Stress biomarker (salivary cortisol levels) measured using cortisol ELISA kit at baseline (T0), immediately after the 12-week intervention (T1), 3 months after the intervention (T2) and 12 months after the intervention (T3)

3. Psychological well-being (self-concept) measured using the Physical Self-Description Questionnaire (PSDQ) at baseline (T0), immediately after the 12-week intervention (T1), 3 months after the intervention (T2) and 12 months after the intervention (T3)

Key secondary outcome(s)

1. Aggression measured using the Chinese 12-item Aggression Questionnaire (AQ) at baseline (T0), immediately after the 12-week intervention (T1), 3 months after the intervention (T2) and 12 months after the intervention (T3)

2. Suicidal ideation measured using the Chinese version of the Reynolds Suicidal Ideation Questionnaire (SIQ) at baseline (T0), immediately after the 12-week intervention (T1), 3 months after the intervention (T2) and 12 months after the intervention (T3)

Completion date

31/12/2023

Eligibility

Key inclusion criteria

1. Aged 12 to 18 years at enrolment and attending Forms 1 to 6.
2. Attending one of the participating co-educational mainstream secondary schools in Hong Kong.
3. Has a clinical diagnosis of autism or ADHD, including a possible co-occurring diagnosis, according to DSM-5 criteria. Confirm the acceptable diagnostic documentation and who verifies eligibility.
4. Provides participant assent and consent and has written parent or guardian consent in accordance with the approved ethics documents.

Healthy volunteers allowed

No

Age group

Mixed

Lower age limit

12 Years

Upper age limit

18 Years

Sex

All

Total final enrolment

170

Key exclusion criteria

1. Neurological impairment that prevents or materially limits safe participation in the intervention or assessments.
2. Intellectual impairment that prevents participation under the protocol.
3. Any other medical condition that limits participation in the physical activity programme.

Date of first enrolment

15/05/2021

Date of final enrolment

31/12/2022

Locations**Countries of recruitment**

Hong Kong

Study participating centre

Department of Sports Science and Physical Education, The Chinese University of Hong Kong
Shatin, New Territories, Hong Kong SAR, China.

Hong Kong

Hong Kong

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Sponsor information**Organisation**

Chinese University of Hong Kong

ROR

<https://ror.org/00t33hh48>

Funder(s)**Funder type****Funder Name**

Research Grants Council, University Grants Committee

Alternative Name(s)

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Funding Body Type

Private sector organisation

Funding Body Subtype

Universities (academic only)

Location

Hong Kong

Results and Publications

Individual participant data (IPD) sharing plan**IPD sharing plan summary**

Not expected to be made available