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## **Walking for Wellbeing in the West - Maximum versus minimum intervention**

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### **Purpose**

Walking for Well-being in the West is a multi-disciplinary community based walking intervention. Low active men and women were randomised into two groups: Group 1: maximum intervention (walking programme; pedometer as a motivational aid; series of physical activity consultations); Group 2: waiting list control for 12 weeks followed by a minimal intervention (walking programme; pedometer as a motivational aid). Here we present a comparison between the maximum and minimum interventions over 12 months.

### **Methods**

Physical activity was measured using 7-day step counts from sealed pedometers. Step count data were analysed on an intention to treat basis.

### **Results**

N=79 (49±9 years) were randomly assigned to Group 1 (n=39, 31 women) or Group 2 (n=40, 32 women). RM ANOVA (group by time; Group 1 steps at baseline, 12 wks, 24 wks and 48wks (n=24@48wks); Group 2 steps at baseline, 24 wks, 36 wks and 60wks (n=23@60wks)) showed a significant effect of time on steps/day (F (3,231)=19.60, p<0.001) and no significant difference or interaction between groups (F (1,77)=0.62, p=0.434 and F(3, 231)=1.51, p=0.213 respectively). Paired t tests found a significant increase in steps/day for both groups between baseline and 48/60 weeks (t(38)=-3.33, p=0.002 and t(39)=-3.08, p=0.004 respectively). There was no significant difference between groups of the number of participants who achieved a weekly step increase of ≥15,000 steps at 12 months (Group 1 13/24 (54%); Group 2 9/23 (39%);  $\chi^2 = 1.07$ , p=0.302).

### **Conclusion**

Both interventions encouraged low active participants to increase and maintain walking behaviour.

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