The search was carried out in the databases PubMed, Scopus, and CINAHL, PsycINFO/SportDiscus, and Web of Science. Searches were limited to only include studies published up until 04/2023. A total of 137 studies (13 qualitative, 1 quantitative, 9 “mixed-method” studies, reports and reviews) were included in the review.

The identified factors for sustainability should be systematically addressed at an early stage in the conception of cbPAP and further, to inform implementation. The framework by Schell et al. (2013), factors were most frequently reported in domains of organizational levels (21), partnerships (18) and financial stability (16). Additional factors to the framework by Schell et al. (2013), factors were most frequently reported in domains of accessibility for SDI (11), infrastructure (7), partnerships (18) and financial stability (16). Additional factors with a whole-system approach were included.

Results revealed that 5RS was successful in strengthening the equation modelling revealed that group identification mediated the impact of peer leaders’ identity leadership qualities of the appointed peer leaders. Furthermore, multilevel regressions showed that 5RS succeeded in increasing group cohesion and walking activity to a greater similar extent in both conditions. Moreover, multilevel regressions showed that 5RS succeeded in increasing group cohesion and well-being (but not walking activity).

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O2-8 Effects of a 12-week walking football intervention on cardiovascular disease risk factors in an older adult population: a randomised controlled trial in the UK
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Background
Interventions promoting physical activity and improved well-being delivered through professional football clubs have previously produced favourable changes in health in adult males (Hunt et al., 2014). Walking football has proven a popular variant suitable for older adults and studies have reported positive changes in health outcomes (Arnold et al., 2015; Reddy et al., 2017; McEwan et al., 2019). However, studies exploring outcomes following walking football interventions when compared to a control group in an older adult population are scarce. Therefore, the aim of the current study was to explore the effects of a 12-week walking football intervention on cardiovascular disease risk factors and quality of life in an older adult population.

Methods
Following ethical approval, participants (n = 23, one female; 68 ± 8 years old), were recruited through the Drink Wise, Age Well scheme; a local Lottery funded organisation and were invited to take part in a 12-week walking football intervention or control group. Intervention group participants (n = 17), were invited to one 60-minute walking football session per week consisting of a warm-up and small-scale competitive games, whereas control group participants (n = 6), continued with their normal habitual lifestyle. Outcomes measured were weight, resting blood pressure, non-fasting blood lipids, six-minute walk distance, and quality of life. Outcomes were assessed at baseline (week-0), midpoint (week-7) and post-intervention (week-13). Sessional RPE was recorded after each session. Preliminary data were analysed using a repeated-measures ANOVA.

Results
Adherence to the 12-week intervention was 83%. Mean (± SD) attendance for sessions was 68 ± 26% (range; 0-92%). Mean rating of perceived exertion was 6.3 ± 1 (range; 2-8). Analysis revealed a significant reduction in total cholesterol (p = 0.01) and LDL cholesterol (p = 0.19) in the intervention group. However, despite favourable changes in both groups for each variable, no significant difference between groups occurred between baseline, week-7 and post-intervention.

Conclusion
The study outlines the potential for individuals enrolled in a walking football scheme to engage in weekly moderate-to-vigorous PA as well as maintaining and improving a myriad of health outcomes. Engagement in other pre-existing health promotion schemes, such as walking football at other local organisations may have influenced outcome measures.

Keywords: walking football, cardiometabolic disease, community setting, controlled trial

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O3-1 Key factors for sustainable implementation of cbPAP and further, to inform sustainable setting-based health promotion in their activities.

Keywords: community-based physical activity, sustainable implementation, cbPAP, health promotion, community setting