Research Project Information Sheet

Assessing parkrun for walking rehabilitation for people living with, and beyond, cancer: acceptability, adherence, social support and physical function

Ethics Approval Number: **A221818**

Research Team Contact Details

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Project Description

The purpose of this research project is to assess whether cancer survivors enjoy doing parkrun walk-run events for exercise, and whether this type of physical activity is sustainable and improves physical function, mental health and social connection. If you have been diagnosed with cancer of any type, are over 18 years of age and have medical clearance to walk, you are invited to participate in this research project. The project will run over 9 months.

Participation

If you agree to participate in this research project, you will be asked to do all of the following: in-person screening and other data collection at 4 timepoints; participate in parkrun events when able; complete 4 short surveys (anxiety/depression, quality of life, physical activity, diet) and 2 post-study surveys. Please see details below.

Your participation is voluntary and you can withdraw from the study at any time without penalty. Your participation, or not, will not affect your relationship with USC or members of the research team.

What will you do?	**Physical Function Data**	**Surveys**	
Time Required	1 hour	15 minutes	25 + minutes per event
Data collection	One-on-one screening for cardiovascular risk, medical history and physical function data.	Hard copy or emailed surveys (QoL, HADS, IPAQ-SF, MEDAS) completed at 4 time points Participant surveys post-intervention & at follow-up	Join in parkrun walk-run events when able (e.g. weekly, once-a month). Number of events in 6-months and finish times
Example questions/activities	Height; blood pressure; heat rate; walk test	Cancer Quality of Life-30 questionnaire Hospital Anxiety & Depression Scale What did you enjoy about doing parkrun?	Join in parkrun events as able; do at own pace

Consent	Written consent	Written consent	Register online with parkrun
Withdrawal	At any time	At any time	At any time

Consent

Consent is for your data and information to be collected in an identifiable/re-identifiable format, stored in an identifiable/re-identifiable/non-identifiable format, and used in analysis and publications in a non-identifiable format. Consent is sought for this research project; however de-identified data may be made available for future ethics approved projects. Your identity will not be revealed..

Risks and Benefits

There are some risks associated with your participation, which may include muscle stiffness if you are unused to walking, and environmental risks (sunburn, dehydration). Parkrun events are monitored by volunteers who can assist participants and we encourage everyone to pace their walking/jogging, wear comfortable shoes and sunscreen and bring a water bottle. If you feel unwell with onset of cancer or treatment symptoms, there is no need to do a parkrun event. Wait until you feel better.

Your study data will be analysed using your parkrun ID as a numerical identifier; data will be de-identified and kept confidential and secure. We will only keep your contact details for purposes of posting or emailing material to you.

Thinking about some themes discussed in the surveys may create uncomfortable or distressing feelings. You are not required to answer questions you don't want to and you may discontinue or pause a survey at any time. If you need to talk to someone you may wish to contact family or friends/your General Practitioner/your Employee Assistance Program//Lifeline (131114)/Beyond Blue (1300 224 636) /other participant specific resource or service.

This research project may directly benefit you by improving physical function and providing group support and social interaction. We appreciate your input to help provide evidence for clinical practice and exercise guidance for cancer survivors.

Privacy, Confidentiality and Results

Any data collected as a part of this research project will be stored securely as per USC's Research Data Management Procedures. All comments and responses will be treated confidentially unless required by law.

The research team will be able to identify you if you choose to participate but project data and results will be de-identified. Data, including transcriptions/recordings, will be de-identified and stored in a re-identifiable format. Participation status or individual comments will not be shared with funding body/employer/other.

- You can participate in the project without being recorded by doing the project interviews on paper. Participants who prefer to give recorded answers can review/approve the transcript to verify their comments
- All data including recordings will be kept securely for a period of 5 years and then destroyed
- The identifiability of the stored data/transcripts (e.g. re-identifiable by researchers using participant ID)
- Recorded interviews will not be used for any other purpose
- Only the research team will have access to recordings and transcripts

The collective, de-identified results of this research project may be presented at external or internal conferences or meetings, or by publication. If you would like a summary of findings of this research project for yourself or your treating physician, please contact the Chief Investigator.

Concerns or Complaints

If you have any concerns or complaints about the way this research project is being conducted you can raise them with the Chief Investigator (listed above). If you prefer an independent person, you may contact the Chair of the USC Human Research Ethics Committee: (c/- Office of Research, University of the Sunshine Coast, Maroochydore DC 4558; telephone (07) 5430 2823; email humanethics@usc.edu.au).

Please save the information above if you choose to participate.

Consent – Written

Consent to Participate in Research

Assessing parkrun for walking rehabilitation for people living with, and beyond, cancer: developing physical function, wellness and group support

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- ☐ I have read, understood, and kept a copy of the Research Project Information Sheet. Any questions I have about my participation have been answered and I consent to participate.
- ☐ I have been informed that I have the option of having copies of my post-study survey responses sent to me and that I can make changes to my responses before data is finally analysed
- ☐ I understand that I am free to withdraw from this project at any time.
- ☐ I consent to the research team retaining my contact details so that I can be sent a summary of the study findings and I may also be invited to participate in future related research.
- ☐ I understand that the research team can send a summary report of my results to my medical practitioner if I request them to do so.

OPTION: please tick ONE of the options below:

- ☐ I consent to participate and that my data will be used for this project only OR
- ☐ I consent to participate and that my data will be used for this project and potentially future related ethics approved projects, which I understand may be undertaken by other research teams who would be provided with de-identified data only. My identity will not be revealed at any time.

Participant

Name	Signature	Date

Parent/Guardian/Caregiver/s if relevant

Name	Signature	Date