Author’s response to reviews

Title: How can we get more people with long-term health conditions involved in parkrun? A qualitative study evaluating parkrun's PROVE project

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How can we get more people with long-term health conditions involved in parkrun? A qualitative study

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Reviewer/Editor comments (RC/EC)

Author responses (AR)

All amendments/revisions are highlighted in the revised manuscript as tracked changes.

Technical comments

Editor Comments:
-Add email of all authors
- rename 'Findings' heading to 'Results'

- state the role of funding body

AR: Email addresses added. Finding renamed to Results. A statement about the role of the funding body has been added to the Funding section of the manuscript (The funding body (parkrun) were not involved in the conduct of this research or writing of the manuscript. Staff at parkrun approved the final version of this manuscript).

Reviewer 1 (Jessica Piasecki):

RC: This manuscript presents an effectively written piece of qualitative research that is very relevant to the current rise in mass participation events and the increase in participation of parkrun. The authors present, clearly, the aims of the research, the data (being the interviews) and the conclusions from this research. From the interviews it is clear to see the new ambassador initiative within parkrun has the feasibility to increase participation in such events for people with LTC’s, but there still needs to be further input from the likes of public health and medical staff. This is a very nice manuscript and I present only minor revisions.

AR: We thank the reviewer for this positive appraisal of our manuscript.

RC: Line 26-27; please could the authors reconsider the word 'consistently' here as later in the manuscript authors have suggested that the parkrun may not reach certain communities or groups of LTC as effectively due to loss of sight or hearing, therefore it is not consistent.

AR: The word 'consistently' has been changed to: 'in a more structured way'.

RC: Line 49-50; Insufficient is not quite the right terminology to use here, this does not provide adequate comparison, insufficient should be replaced with something such as lower than expected, or reduced compared to what is estimated.

AR: To clarify, the word insufficient has been replaced with: 'low compared to people not living with LTCs'

RC: Line 55-56 explain what health inequalities are, are these linked with the different communities?

AR: This sentence has been changed as follows: 'Whilst community-based physical activity participation could be particularly important for promoting independence among adults with LTCs, a number of health inequalities (e.g., disability) exist that limit involvement by people
living with LTCs. Those living with disabilities are less likely to be active compared to people without disabilities [11].

RC: Line 56; Examples of effective- Please think about rephrasing this, I am not sure 'examples' is required.

AR: 'Examples of' has been deleted from the start of this sentence.

RC: Line 72-74; Is there any evidence to support the notion that parkrun was promoted through word of mouth? If so please provide, and if not please remove this sentence. I do not feel this is the only way parkrun is promoted now given social media, Facebook pages and the news of GP's prescribing physical activity and parkrun.

AR: Numerous internal parkrun surveys have confirmed this statement. With 'word of mouth' being a broad term for hearing about parkrun from others. None of these internal insight findings from parkrun are published, so we have added a web page reference citing a blog that supports our statement, written by Chrissie Wellington, parkrun Global Head of Health and Wellbeing.

RC: Line 80; Is there a reference to support the definition of 'specialist expertise' as used here or is this definition for the purpose of this manuscript? Please specify.

AR: The definition was for the purpose of the manuscript, hence no reference to support. We have changed the phrase to 'specialist interest'.

RC: Line 114; please could the authors detail more how the groups were invited or found or are they already associated with outreach ambassadors.

AR: A sentence has been included to clarify that these condition groups were those targeted by parkrun as part of the PROVE project: 'The current research sought to include Outreach Ambassadors from across the condition groups targeted by parkrun in the PROVE project.'

RC: Line 120-123 please could the authors detail how many people initially got in touch to how many people finally took part in the interview, perhaps a flow diagram of recruitment would be a clear way of displaying this information
AR: The paragraph states that 33 Outreach Ambassadors were invited for an interview and 15 of those gave informed consent to be interviewed. We do not have additional data to populate a flow diagram. Please can the reviewer/editor confirm what further information is required here to help clarify the recruitment process for the reader.

RC: Line 573; would it be important to consider how we would create this wider impact, would parkrun need to create a database and how this would comply with GDPR, this could be a problem parkrun and ambassadors face when trying to widen the reach of parkrun to those with LTC's.

AR: The reviewer raises an interested point, however the 'shared learning' we propose is more about learnings from the delivery of the project, rather than sharing information about individuals (which would have GDPR implications).

RC: Line 591 (and in methods line 160-161) the reflective purpose that is eluded to, could the authors provide some detail as to the types of reflective questions that the researcher used, this will provide reassurance over the potential bias.

AR: We believe reflective practice has been covered in the original manuscript in the 'rigour and reflexivity' section. Additional details have been added to clarify the reflexive process, with examples of the questions asked during the process.

RC: Conclusion; Please could the authors here include that the PROVE project must still ensure it is communicated appropriately to all conditions of LTC to widen its reach, as authors have eluded to in the discussion.

AR: 'communicated appropriately' has been added to the concluding sentence.

Reviewer 2 (Mary L Greaney):

RC: I enjoyed this paper, and found it easy to read while providing interesting information. I think the focus is more on the PROVE program versus the overall parkrun program, and suggest the title, abstract, and introduction be edited to reflect this. Specific comments are below, and thank you for the opportunity to read this manuscript.
AR: We thank the reviewer for this appraisal of our manuscript. The revised manuscript has been edited to ensure that it is clearer that the PROVE project is the focus. We have made amendments throughout the manuscript to support this (see tracked changes), and have added details to be more explicit and transparent about the project. The title has been revised to the following with the additional red text highlighting that the focus of this paper is the PROVE project; How can we get more people with long-term health conditions involved in parkrun?: A qualitative study evaluating parkrun's PROVE project

RC: Abstract:

1. Suggest adding description before self-management

2. For the second sentence, suggest capitalizing parkrun, even in not usually done as it is the start of the sentence (or revise sentence). Also, suggest adding some information/descriptor about "long-term health conditions" and the location of parkrun (e.g., city, country).

3. Suggest describing PROVE project (after reading the paper, this is essential).

4. The Outreach Ambassadors have long-term health conditions? I would suggest adding this information.

5. I now see the location of the parkrun. I recommend moving London earlier in the sentence or earlier in the abstract

6. The second sentence in the methods is not quite clear to me. Who are the critical friends? Additional detail would be useful if space limits allow.

7. Given that the results and conclusion focus on the PROVE project, the authors really should consider adding information about this project.

AR: 1. Added 'of their condition' after self-management

2. Sentence revised, as parkrun is always a lower case 'p', even at the start of sentences. We have added the location (England) and 'a variety of' added before long term health conditions.

3. Description of PROVE added to the abstract

4. Added 'with a specialist interest in the health condition' after Outreach Ambassadors

5. See response to point 2.

6. For clarity and for brevity, 'as critical friends' has been removed from the abstract and a description is provided in the main text.

7. See response to point 3.
RC: Introduction

1. The introduction paragraph, I think, would benefit from a larger discussion regarding self-management vs. as the paragraph seems to be equating self-management to physical activity, one component of self-management.

2. An expanded discussion of barriers to active lifestyles would be useful, I think.

3. The parkrun description is very nice.

4. Suggest adding the percent of adults in UK have a disability where you provide this information about parkrun attendees.

5. The only underrepresented group that is the focus of the PROVE project is people with LTCs? Based on the first sentence, I had assumed, the focus would be on a number of underrepresented groups.

6. Line 77: only the p of parkrun needs to be in bold font.

7. Line 87: the interventions are implemented as part of parkrun

8. Information about how the Outreach Ambassadors are identified and what training they receive would be useful.

9. Line 96: Maybe add research to "This found".

10. Line 100: the insights for people with LTC was specific to people with mental health difficulties? And these insights are what was discussed in the prior sentence?

AR: 1. 'As one part of self-management' has been added to clarify that we are not equating self-management to physical activity only.

2. Examples of barriers have been added to the sentence.

3. n/a

4. Having considered this recommendation, we have not made the change due to our belief that it would negatively affect the flow of the introduction

5. We have added 'such as those living with LTCs and disabilities' for clarity

6. Changed so only the p of parkrun is in bold

7. This is correct - the interventions are implemented by parkrun. Sentence changed to: 'Recognising this, the parkrun management team implement targeted attempts to increase reach and engage underrepresented groups.'
8. Details about how the Outreach Ambassadors were appointed has been added. Outreach Ambassadors received no formal training - this has also been added.

9. Changed to: 'this study found'

10. The sentence has been clarified: 'In this research, Morris and Scott (2018) have made important advances into uncovering the experience of parkrun for people living with health conditions. More research into a wider range of LTCs will enable parkrun and policy-makers to recognise and respond to the specific adaptations that must be embedded in communities in order to make physical activity safe and accessible for people with LTCs'

RC: Methods

1. I had expected the conditions to be health-related, and would not have included learning disabilities, but I could be wrong about this.

2. Suggest adding the percent after you provide the sample size.

3. Suggest adding references for thematic analysis and expanding the description of thematic analysis.

4. Lines 152-153, this should be expanded as it is a novel approach, and the description is not quite clear (at least to me).

5. Were data coded by one or multiple researchers?

6. How was Reflexivity explored, examined?

7. How were potential bias addressed (page 160)?

AR: 1. In the context of parkrun's PROVE project and this manuscript, learning disabilities are considered within scope of long-term health conditions. This is consistent with the terminology used in England, especially by the NHS. See here for an example of how this terminology is commonly used for similar conditions: https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6181081/

2. Percentage (45%) added after sample size in the revised manuscript.

3. Braun & Clarke reference added for thematic analysis. Further details added to the 'data analysis' section.

4. Reflexivity has been expanded upon in the revised manuscript (see response to Reviewer 1 comments).
5. Data were collected by one researcher. This has been clarified in the revised manuscript.

6. This has been addressed in the revised manuscript (see response to Reviewer 1 comments).

7. Added: 'Reflective practice enabled the lead researcher to address these biases'

**RC: Findings**

1. Were differences by interviewer categories examined? Also, information regarding the number of people invited to participate by category in the recruitment text would be useful.

2. Is there information available regarding length of time being an Ambassador?

3. The authors could consider adding sample quotes to Table 1.

4. Sub-theme 1b: needs additional detail for clarity. It seems like, at least two me, that there are 2 things: 1) maybe limited/no support, 2) lack of structured support. Also, it may be useful to clearly state that this is support at parkrun (I think) and not regarding efforts to get people to parkrun.

5. Did the PROVE project (line 217) explore needs of people with LTC who did/did not attend parkrun? This is not quite clear to me. I do not think that the Ambassadors did this, but perhaps they do this informally?

6. Line 226: Seems like a different theme to me.

7. Suggest dividing subtheme 1c into two. I also would suggest a reordering of themes. For example, subtheme 3b seems like it should be presented before the them about PROVE project sustainability.

**AR:** 1. The reviewer raises a good point. Differences by interviewee categories were not examined as this was not the aim of the research. Presenting the verbatim data (quotes) with a label (e.g., carer / specialist / living with the LTC) enables the reader to draw conclusions about any differences between interviewee categories. Given that this is a limitation of the current research, we have added it as a limitation in the revised section (see 'evaluation' section). We do not have data regarding the number of people invited by category. Invitation for interview was not systematically/strategically, but rather purposefully based on the existing PROVE Ambassadors.

2. The following detail has been added to the revised manuscript: 'Precise data about the length of time as Outreach Ambassador was not available, but it was intended that all interviewees were within two months of being appointed to their role.'

3. Sample quotes have been added to a third column in Table 1.
4. Clarified subtheme 1b name: 'Support from parkrun to engage those with LTCs could be more structured and consistent'

5. 'and consistent' has been removed from the theme name to help with the clarity of this theme.

6. We have clarified that this is part of the strategic priorities of PROVE, thus supporting the theme.

7. We have made minor adjustments to the theme name for Subtheme 2c to help clarify that this is a perception of what success would look like for the PROVE project (theme 2), rather than a contributor to PROVE success (theme 3).

RC: Discussion:

1. This sentence, to me, is overstating findings: "It also demonstrates the specific benefits that parkrun has for people living with LTCs." It identified perceived benefits.

2. Line 531: "self-managed physical activity." In the introduction, the authors talked about self-management of LTC, but the only management issued explored in physical activity. Therefore, suggest revising introduction.

3. Line 539: the authors may want to expand discussion of social capital

4. The discussion section is at times redundant with results. A more depth discussion of explanation of finings would be useful or as to how findings agree/disagree with other work.

5. Study limitations include a small sample that did not allow for differences by respondent category to be investigated (e.g., person with TLC, carer), as is having one person code the data, although the use of critical friends is interesting.

AR: 1. The sentence has been revised: 'It also demonstrates the perceived benefits that parkrun's PROVE project has had for people living with LTCs'

2. Deleted 'self-managed' here for clarity, as it was redundant and misleading for the reader.

3. It is beyond the scope of this manuscript to explore social capital. Rather, we wish to raise an important point about the potential for future research to further explore the social potential of parkrun for people living with LTCs. We have made some minor revisions to help clarify what we mean by social capital in this context.

4. It would be beneficial to have some guidance from the reviewer/editorial team about where further depth in discussion is required. We have reviewed and made minor revisions to the discussion.
5. These limitations, if not already mentioned in the original manuscript, have been added to the 'evaluation' section.

Additional revisions made by the authors to enhance the clarity and position of the revised manuscript:

• Any figures relating to parkrun statistics have been updated.
• Line 252-254 deleted to help protect the anonymity of the participant the quote relates to.
• Since writing the original manuscript, the PROVE project has finished. This has been clarified in the revised manuscript. Some tense has been changed to past tense now that the PROVE project has ended.
• Reference to specific health conditions (e.g., 'diabetes') deleted to protect the anonymity of the participants involved in this research.
• 'parkrunners' changed to 'parkrun participants' for clarity for the reader.
• Since writing this publication, our evaluation of the PROVE project has been completed. The research team plan to publish/disseminate the final evaluation results, so have added a statement explaining this in the revised manuscript (see lines 127-128).
• Lines 612-615. We have added a brief description of another parkrun initiative called 'parkrun practice' that aims to work closely with healthcare professionals in primary care to promote the 'social prescription' of parkrun to patients.