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### **Infographic. Walking on sunshine**

Scoping review of the evidence for walking and mental health

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1 **TITLE**

2 Infographic: Walking on sunshine: scoping review of the evidence for walking and mental  
3 health

4

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19 **Word Count**

20 408

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1 The link between physical activity and better mental health is well established.<sup>1 2</sup> However,  
2 substantially less is known about the relationships between walking and mental health.<sup>3</sup>  
3 Morris and Hardman identified this gap in their seminal “Walking to Health” paper in 1997  
4 and stated that “The pleasurable and therapeutic, psychological and social dimensions of  
5 walking, whilst evident, have been surprisingly little studied”.<sup>4</sup>

6  
7 Walking is an accessible, population level behaviour conducted by persons of all ages and  
8 sexes, and as such one with great public health potential.<sup>5 6</sup> Understanding the extent that  
9 walking is associated with better mental health is important for focussing health promotion  
10 efforts.

11  
12 Therefore, we aimed to scope the literature to provide an overview of what has been learned  
13 since “Walking to Health” in 1997 in regard to preventing mental ill-being, promoting mental  
14 well-being, and the effects of walking interventions. We also aimed to highlight current evi-  
15 dence gaps and research priorities.

16  
17 Our scoping review identified 5 systematic reviews and 50 individual papers that addressed  
18 walking and mental health, showing that the evidence base had grown steadily since 1997.<sup>7</sup>  
19 The main findings are presented in this Infographic. For depression, systematic review evi-  
20 dence showed consistent preventive and intervention effects. For anxiety there were no sys-  
21 tematic reviews, but multiple studies showed consistent preventive and intervention effects.  
22 For these outcomes there may be sufficient evidence to promote walking to prevent and treat  
23 these conditions.

24

1 Evidence for psychological stress, psychological well-being, subjective well-being and social  
2 isolation and loneliness was more fragmented and varied in volume and nature of studies, and  
3 effectiveness of walking, but no harmful effects were identified. There were no studies for  
4 walking and resilience. It was apparent that there has been more research on the negative  
5 disease based outcomes (such as depression and anxiety) than for the positive well-being  
6 outcomes (such as happiness or subjective well-being).

7

8 The setting and context of walking seem to be important variables. The evidence base  
9 suggests that across the mental health outcomes there are additional benefits from walking  
10 outdoors in natural environments compared to indoor, treadmill based walking.<sup>7</sup> Importantly,  
11 the traditional descriptors of physical activity dosage (i.e. frequency, intensity, duration) may  
12 not be the only determinants of mental health outcomes when considering walking.

13

14 We anticipate that this scoping review will stimulate more research in the area of walking and  
15 mental health. Policy, national guidelines, and practitioners should promote the known men-  
16 tal health benefits of increased walking, and future research should directly address the gaps  
17 we have identified.

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