

Walking Your Way to Better Health

Recorded: April 29, 2026

Transcript

[00:00 Walking for healthy aging: Introduction]

Dr. Marla Beauchamp: Thanks very much for having me, Anthony, and thanks for inviting me back this time to talk about walking. So it's a really great time of year to talk about how walking can be a really useful way for us to stay healthy and in shape and to age well. So today I'll talk about the importance of physical activity. So why does physical activity matter, and especially as we get older? We'll talk about how much you should walk, how fast you should walk, and why walking speed matters. We'll talk about how we can make walking easier or harder. We'll talk a little bit about Nordic pole walking, which is becoming more and more popular, and some of the pros and cons associated with that. Then we'll talk about seasons. Given that we live in Canada, we'll talk about walking throughout the seasons and helping using assistive devices to help us walk. And then finally, I'll end the talk with a little bit, with some caveats to think about in terms of what can walking not do, and we'll talk more about that.

[01:12 Why physical activity matters after age 65]

Dr. Marla Beauchamp: So first off, why do we care about physical activity in older people? And first of all, we're living in a really unprecedented time. Globally, people over the age of 65 now outnumber children under the age of 5. So that's a huge demographic shift. And if you look at the graph here, you can see the population aging is accelerating globally. So 10% of the world's population was over the age of 65 in 2000, and adults aged 65 and older will make up 25% of the global population in 2050. Now the issue is people are living longer than ever before, but their, their longer life is not necessarily always lived in good health.

And so how do we maintain good functional health while we age? Well, physical activity is really, really critical for that. It helps maintain function and functional ability. It reduces the risk of many different chronic diseases, as we'll see, and it lowers mortality. And now, despite knowing this, older adults are actually the least physically active age group worldwide. So it's really an important issue now that the population is aging that we pay more and more attention to physical activity.

Now, inactivity increases with age. And if you look at this graph, you can see on, on, you can see here that there's a sharp rise in physical inactivity, particularly after the age of 60. So age is here on, on the x-axis and the prevalence or the percentage of people that have insufficient physical activity is on the y-axis. So this pattern that we see is really consistent across sexes and regions, and we do see this sort of sharper rise in physical inactivity, which means people not meeting physical activity guidelines and we'll talk more about what that is, but that's people not getting

about 150 minutes of moderate to vigorous exercise each week. What we also see from this graph, so you have women in red and men in blue, is that consistently, there's about a 5% difference between men and women, with women showing consistently less active, are consistently less active than men.

So physical inactivity increases as we get older, and women are consistently less active than men. And we can talk later if there are questions about why that might be, but really important that we think about physical activity, promoting physical activity also in women.

[4:03 Best exercise guidelines for older adults]

Dr. Marla Beauchamp: So now, how much physical activity are we supposed to do? So there are the Canadian 24-hour Movement Guidelines, in recognition of how important physical activity is, put out these guidelines which are based on evidence. And essentially, for older adults, they suggest that for optimal health benefits, if you're age 65 years and older, you should be physically active each day minimize sedentary behaviour, and achieve sufficient sleep.

And what this physical activity should look like is 150 minutes of moderate to vigorous physical activity each week and several hours of light physical activity. Now, the great news is, and we'll talk about this more, is that you can use walking to help you achieve both of those. And then they also recommend muscle and bone strengthening exercises 2 times a week alongside balance exercises, for optimal health benefits.

And what are these optimal health benefits? Well, actually, if you follow the 24-hour Movement Guidelines, it actually has really powerful effects on healthy aging. So if we look on the left-hand side here, following those movement guidelines lowers the risk of mortality, lowers the risk of cardiovascular disease, hypertension, diabetes, several different types of cancers, anxiety, depression, dementia, weight gain, high cholesterol, fall, and even falls and fall-related injury, especially when we incorporate that balance component. It also can improve bone health, cognition, quality of life, and physical function. So, you know, if there was a pill that could do all these things, we'd be lining up and taking it. So definitely lots and lots of powerful effects of physical activity.

And now where does walking come in? So walking is really the most accessible form of physical activity for most, most people and most older adults as well. So there are multifaceted benefits of walking on its own for healthy aging. So just walking can decrease the risk or severity of various health outcomes like cardiovascular or, or cerebrovascular diseases, type 2 diabetes, cognitive impairment, and dementia. It improves mental well-being, sleep, and longevity. So walking on its own is quite powerful as well. So key message number 1 is that physical activity is critical for healthy aging, and walking is one of the most accessible forms of physical activity for most people.

[06:46 How many daily steps do older adults really need?]

Dr. Marla Beauchamp: So now, how much should you walk? So this is now, some data looking at the relationship between daily steps and mortality. So on the y-axis of this graph here, we have relative risk of death, death, where lower is better. On the x-axis, we have steps per day. So here what we can see is that when we go from very low steps, so around 2,000 to 3,000 steps a day, and we move to 6,000 to 8,000 steps a day, we have a really large drop in the risk of death. And most of the benefit is really achieved in that 6,000 to 8,000 steps per day range. So really the take-home message here is even though there's been lots and lots of sort of media campaigns and things around 10,000 steps, really most of the health benefits can be achieved in somewhere between 6,000 and 8,000 steps per day. And actually, going from the very low steps to moderate steps is actually what yields you the greatest benefit.

Now, what are the health benefits of increasing daily steps? Let's go, let's think a little bit beyond mortality. So these are results of a meta-analysis, and here they've compared people that do 2,000 steps per day to 7,000 steps per day. And what they found, and this is looking from multiple, multiple studies, is that by going from 2,000 to 7,000 steps per day, you end up with a 47% decrease in all-cause mortality, a 25% decrease in cardiovascular disease incidence, 37% decrease in death from cancer, 14% decrease in type 2 diabetes, 38% decrease in dementia, 22% decrease in depressive symptoms. So again, here, moving from very low to about 7,000 steps per day is linked to meaningful improvement in many major health outcomes.

So key message number 2, around 7,000 steps per day or 30 minutes of brisk activity per day are good targets for many older adults. But in all the data we've shown is that really every move counts. And when we go from moving very little to starting to move more, So walking a little to walking more, that's when we get the greatest health benefit.

[09:02 Walking and preventing mobility disability]

Dr. Marla Beauchamp: So now I'm gonna share with you a little bit from my own research. So this is work, one of the major research programs supported by the McMaster Institute for Research on Aging and the Labarge Centre for Mobility and Aging, as well as AGE-WELL, which is Canada's Aging and Technology Network.

So this was a cohort study, so this is a study where we're following people in their daily lives over several years, and we're doing this using wearable technology. So we have a smartwatch device that participants wear on their wrist alongside a second device on the thigh, and that allows us to capture really comprehensive information about people's mobility and how they move in their daily lives. So we can look at things like daily steps, activity levels, time spent sitting, standing, lying. We have GPS information on the watch so we can understand trip information, how far someone travels, are they going from one location to another actively or are they passive passengers in a car, for example. And then we are tracking major health outcomes like falls, disability, and hospitalization.

So our participants wear these devices for 10-day periods every 4 months, and the study is ongoing, and we're actually just finishing up our 2-year follow-up. So I'm going to share with you today a little bit of data from this study.

So first of all, who are our participants? So our participants in MacM3 have an average age of 74 years. Over 60% of them are women. The marital status is about 62% live with a partner and 75% have completed post-secondary education. 63% have 3 or more chronic conditions, which is quite common as we get older to have more common chronic conditions. 61% report excellent and very good health. 94% at baseline, so most of our sample at baseline did not use a mobility aid when they started the study. So, they weren't using like a cane or a walker. And 30, about 38% reported at least one fall in the previous year. So this just gives you a sense of the kinds of people that are part of the MacM3 study so you can get a sense of how the results may or may not relate to you.

So then if we look at our 1-year data, so this is 1 year of follow-up data in the 1,500 people that are in the study, we can see, and I'm gonna focus today because we've already talked about mortality and we've talked about chronic disease risk, but I wanna talk about something else that's really important, which is mobility disability. So this concept of either you cannot walk 400 meters or you have, you report a great deal of difficulty either walking or climbing stairs. So at the beginning of our study, no participant had, were considered to have mobility disability, but after 1 year, about 12% developed what we would call mobility disability.

So now let's look at the data that we get from the devices in the real world from following participants. And what we find is here are some of the walking-related indicators that predict that mobility disability over 1 year. So taking fewer than 6,800 steps a day meant higher risk of disability. Less than 3 minutes of continuous walking at a time increased the risk for mobility disability. Having less than 1 active trip a day increased the risk. So this is, one active trip means a time when you are going from one location to another location and you, you are traveling to that location actively, for example, walking or biking versus traveling in a car. And then moderate to vigorous activity like brisk walking, we'll talk a bit more about that after, is also a good predictor. So less than 28 minutes a day was associated with a higher risk of mobility disability. So the good news is, is that all of these data, when we look at mortality, chronic disease risk, and now looking at risk of mobility disability, they're all kind of landing around that 7,000-step threshold.

[13:44 The best way to track your steps]

Dr. Marla Beauchamp: Now you might be wondering how you can track your steps. In our study, we do it using research-grade devices that have been really customized to be able to do this really well and accurately. But at home, there's lots of things you could use. So actually, simple pedometers that you can be worn on the waist or on the thigh are generally pretty accurate for measuring step count. And they can perform well at lower gait speeds, which often happens as we get older, we walk a bit slower and we can use assistive devices like canes or walkers to help us walk that may, where other kinds of devices may not work as well. They're also low cost and

easy to use. You can grab one off of Amazon or Best Buy And, and so that's a really accessible way if you want to monitor your steps.

The smartwatches that are out there, the commercial smartwatches and wrist trackers that are available, the issue with those is that some of them, especially because they're worn on the wrist, they may misclassify arm movement as steps and they can miss steps at lower walking speeds. So when people are walking slower, they don't always capture all the steps. When they're worn on the wrist. And so they become even less accurate, for example, if you use a cane or a walker or a rollator. Where they can be really useful is if you're tracking change over time. So if you know what your baseline is with your device, let's say you have a smartwatch and you know you're always around 5,000 steps per day, then if you get up to 6,000 steps per day, you know you're actually probably changing your step count, and that is, that is good to know.

So the bottom line here is waist or thigh worn devices are generally more accurate when we're talking about step counting in older adults, and they're also simple and accessible. And it's just really important to note that accuracy varies by device placement and walking speed. So the other thing that you can easily do if you're not interested in step counting is just aiming for that 30 minutes of brisk walking every day. And we'll talk more about that in a minute.

[16:34 Why walking speed predicts healthy aging]

Dr. Marla Beauchamp: So now walking speed. Why does walking speed matter? Well, actually walking speed on its own is linked to survival. So in this graph on the, on the y-axis here, we have medium survival and here is on the x-axis is age. And we can see in the green here, the faster walkers tend to live the longest. The average walkers have about average survival and the slower walkers tend to have shorter survival. If we can walk faster today, we're positioning ourselves for better survival tomorrow. Walking speed in particular, if you've ever heard of mobility as a vital sign, well, actually some people think that gait speed or walking speed should be used as a sixth vital sign because it's such a powerful predictor.

Now that was, we talked about survival, so now let's go back to this concept again of mobility limitation and disability. And in this graph on the Y-axis, you have the percentage of people that have mobility limitation, and on the X-axis is years of follow-up. And we can see here that the slowest walkers, those in the lowest 25%, they have, they lose mobility sooner. They lose mobility sooner. They have higher percentages of mobility limitations sooner compared to faster walkers who have a much lower risk of developing mobility limitation. And the same goes for disability. So again, here, slower walking today is a higher risk of mobility limitation or disability tomorrow, in that walking speed is a really powerful indicator.

So how can we improve walking speed then? Well, the good news is, is you can improve it. Gait speed is modifiable, and there are multiple types of exercise that are effective, and the best actually results come from when you combine them. So strength training, build, you know, building muscle, especially in your legs, that improves walking speed. Balance and coordination type exercises also improve walking speed. And then when you combine strength, balance,

coordination, and walking, that's when you have the greatest improvement in walking speed. And I'll show you on the next slide some examples of, of kinds of exercises you can use. But the key thing here, and this is supported by multiple randomized controlled trials and meta-analyses, is that gait speed is modifiable, and programs that combine strength and balance can really make a meaningful difference in how fast you can walk.

[19:28 Best exercises to improve walking speed]

Dr. Marla Beauchamp: So here are some exercise ideas. These are sort of my favorites, and a lot of these also help reduce your risk of falling, which is, which is even better. So sit-to-stands. So that's just, that's really simple, crossing your arms over your chest and trying to get in and out of a chair without using the arms for support, and maybe trying to do 10 repetitions of those, and then increasing to doing that maybe 2 times 10 repetitions in a day. Then any kind of standing balance task where you're narrowing your base of support. So you're either standing first, maybe with your feet right next to one another, and then you're trying to lift one foot off, hold one foot off the ground and see how long you can hold that for. And you can incorporate these as part of your day. For example, when you're in the kitchen waiting for your toast, you can hold onto the counter for support and lift one leg up and try and balance on that leg. That's a really easy one to try and do.

Walking tasks are also really important and can challenge your balance and your coordination. So, you can try walking sideways, backwards, in a figure of 8. Just make sure you have a clear space and go at a comfortable speed, a comfortable pace. But all of these are sort of coordination walking exercises that can help improve your speed.

And then you have functional strengthening exercises. And so here we have examples of squats. And if you can't go as far down as the woman in that picture, then you can do what we call mini squats and just go halfway down. And you can do things like heel raises and toe raises. Again, to help you improve your strength. And so if you incorporate the strength training, it will help you improve your gait speed. It also then checks off the box if we think back to those movement guidelines we talked about earlier. And there's lots of different examples of programs, and one that we can share with you after is the Otago exercise program that kind of targets a lot of these things, and that can be found on YouTube and online.

So key message number 3 is how fast you walk matters. Walking speed predicts health and independence, and it can be improved with exercise.

[21:52 What counts as brisk walking?]

Dr. Marla Beauchamp: So now, how fast should you walk? So, in the guidelines for physical activity, the recommendation is for brisk walking if you want to achieve that moderate-intensity physical activity that's recommended for your health. So brisk walking is walking at a pace or intensity that achieves moderate physical activity, which typically corresponds to about 1.6 to 1.8

meters per second, or about 100 to 120 steps per minute in adults. And essentially, it's a pace where you feel you're purposefully moving, not strolling.

Now, how can we check this? We can use something called the Talk test, and that's used to identify when you're working at a moderate intensity. It's really the best way to identify whether you're in that moderate to vigorous intensity zone for those 150 minutes you want to accumulate throughout the week. So when you're— you should be able to talk, but your sentences can be shorter, should be shorter. You shouldn't be able to sing. You're slightly out of breath, but you're still comfortable. If you can sing, it's too easy, and you're probably more doing a light-intensity walk, which still has health benefits, but better to go— if you can get into that moderate-intensity zone, you'll get more benefit. If you can barely speak, then it's too intense, and that's probably vigorous intensity. So the Talk test is really— you can still talk, but your sentences are shorter, and you're not able to sing. It's essentially how you know you are doing brisk risk walking at moderate intensity.

[23:32 How to walk faster safely]

Dr. Marla Beauchamp: So, some practical tips to help you pick up your pace. So, first of all, you should warm up 2 to 3 minutes of easy walking before you start, uh, trying to go a little bit faster. We already talked about including the balance and strengthening exercises. You can also shorten your stride slightly and increase your step rate to walk a little bit faster, making sure to keep your posture tall, with relaxed shoulders and eyes forward. You can swing your arms to help you drive your pace. And again, use that Talk test to find that pace where you can talk, but you cannot sing. And we'll talk a little bit later about using a cane or walker, but the key thing here is just to make sure it's adjusted the right height and it's the right device for you so that you can use it also to progress your pace.

So key message number 4, brisk walking counts as moderate physical activity, and the talk test is a simple way to check if you're walking at the right intensity.

[24:38 How to make walking easier or more challenging]

Dr. Marla Beauchamp: So now let's talk about making walking easier or harder. So we've already talked about speed, and that's kind of a part of task load, but distance and duration is another thing. And we talked a little bit about that 30 minutes, but also going farther is a way to increase your difficulty.

There's of course mechanical demands, like if you're doing hills or stairs or you're walking on kind of uneven surfaces, if you're carrying external loads, all of those things will make walking harder. Path complexity plays into it. The simplest kind of walking is, is straight-line walking. So when you have curves, figure eights, obstacles, changes of direction, All of that adds to the complexity of walking.

It's also important to think about cognitive load. So when we're walking while talking or we're walking and we're counting, carrying objects, navigating busy environments, we refer to this as dual tasking. So you're doing a movement task while doing a secondary cognitive task at the same time, and that can increase the difficulty of walking. And maybe that's something that you want to do to make it a little bit harder for yourself, but if it is too hard, that's an easy thing to try and facilitate your environment to make it easier for you to walk. And then we'll talk about support like canes, walkers, Nordic or trekking poles, because those can be used to help kind of make the activity easier or harder. Depending.

[26:14 Nordic walking: Pros and cons for older adults]

Dr. Marla Beauchamp: So let's talk about Nordic walking. Nordic walking actually originated in Finland and has become more and more, became more and more popular throughout Europe and now is much more popular in North America. And it's essentially an enhanced walking technique that uses these sort of specially designed poles to actively engage the upper body and it's meant to sort of turn walking into a whole body exercise. And so poles are used to propel the body forward with each step. And you can look in this picture here, this is actually a picture of a group at our center at MIRA | Dixon Hall in Toronto where we introduced a Nordic pole walking program. And you can see participants here coming out. This was just after the pandemic and it went over really well. Participants really enjoyed doing the Nordic walking, and a lot of, a lot of them experienced improvements in their functional health afterwards.

So let's talk about some of the benefits of Nordic walking. So it's easily learned and it can be tailored to individual needs. The nice thing about it is it engages both upper and lower body muscles. It increases energy expenditure compared to regular walking, and often without a large increase in perceived exertion. So people are working harder, but they don't perceive that they are working harder. It can improve gait, posture, and mobility. There's some evidence, although it's a little bit mixed, that it can help kind of decrease the impact on your, on your hip and knees while walking. And it's shown benefits and health benefits in several different chronic conditions like cardiac rehab, Parkinson's disease, respiratory disease, chronic pain. Lots of different sort of systematic reviews, which are summaries of the evidence, that show that Nordic walking does have health benefits across multiple chronic conditions.

Now, some cons though with Nordic walking, or things to keep in mind, is that it does require proper technique. So it's not just walking with poles. You have to follow the correct form and, and make sure you're not causing shoulder, elbow, or wrist strain. And so beginners really do need instruction and practice. And so to, to start doing this, it would be good to join a local group, and there are groups, local groups that, that do Nordic pole walking. And so you can look up, try and look up one near you. The other obvious con is that it requires a bit of extra cost to get the poles and the proper straps, and then the gear needs to be adjusted properly. It may not be ideal everywhere, like on crowded sidewalks or tight trails like the one you're seeing in the picture here. It may not be ideal for everyone. So if you have a shoulder injury, elbow tendonitis, or wrist problems, Nordic walking might aggravate those conditions.

And then there's just some kind of social and practical concerns. It could draw unwanted attention, especially if it's not done commonly where, where you are. It can be harder to combine with other activities, such as walking a dog, or carrying bags or using a phone. So just some things to think about, but really the best activity and the best way to walk is to find something that you enjoy doing and that you'll keep doing. So if Nordic walking sounds interesting, I highly encourage that you look into it.

[29:53 Safe walking tips for summer, winter, ice, and heat]

Dr. Marla Beauchamp: So now let's talk about walking throughout the seasons. We live in Canada, we have a lot of seasons. So the first point I wanna just make in general is if we're talking about starting up a walking routine, or change in our walking routine, especially if you have a heart, lung, metabolic, or mobility condition, it's good to either talk to your healthcare provider, and this could be, your physician, your family doctor, it could even be a physiotherapist, just before you make major changes to your routine. The second general piece of advice is to try and aim for regular walks on most days, but to adjust your distance, your pace, and your route based on the day's weather, lighting, and how you feel. And finally, always looking to choose well-maintained, well-lit routes that have benches or rest spots. And if you can walk with a partner or carry a phone or even a personal alarm, if possible, especially if you're going on trails, and you're somewhere where you may not see anyone if you needed help.

So let's first talk about footwear, traction, and visibility. So in terms of footwear, you want to wear closed-toed shoes, okay, and they should be supportive shoes that have low heels and non-slip soles, and this is year-round. So always look under your shoe at the sole and make sure it has some grip. You want to avoid loose slippers, flip-flops, or high heels. Winter or wet conditions. Using boots with a wide low heel and a deep tread is really critical, and again, turn that shoe over and check the tread on the shoe. You can consider adding ice cleats or like traction devices, especially when you have hard-packed snow and ice, and then of course remove those indoors.

If you use a cane or a walker, it's important to check the rubber tips at the bottom of the walker and the cane and check those rubber tips for wear to make sure they're not worn down and don't need to be replaced, because that could make them slippery. And in the winter, you can consider a cane that has a retractable ice grip, too; it's like a little ice pick, and it's retractable, and it can help improve traction on icy surfaces.

And then we have to think about visibility. Wear reflective vests, bands, or bright outer layers, and you can carry a flashlight or a headlamp. Headlamps just kind of strap around your head and it gives you some lighting, especially when you're walking, sorry, at dusk, at dawn, dusk, or in poor light. And this is really common when we have shorter days.

So now let's talk about summer and heat-related safety, because as we get older, we lose heat less efficiently. And so we don't often feel thirst as strongly and we may not feel heat as strongly. So we can, we're much more prone to developing heat stroke and dehydration. So it's important to think about walking in the early mornings or evening. And then on bad days too, we can always

walk indoors. So think about an air-conditioned mall or community center on the particularly hot, humid days or on days where there's warnings about air quality. Wear light-coloured, loose-fitting, breathable clothing, a wide-brimmed hat, use sunscreen and sunglasses. Fluids is really important. So again, drink fluids before, during, and after walking, and try and favor water or electrolyte drinks, and avoid alcohol and excessive caffeine, especially on hot days. And then try and, this is where you adjust your pace. If it's really hot out, slow your pace, take shaded breaks, and stop if you feel dizzy, confused, weak, or nauseated. And if those symptoms persist, it's really important to seek medical attention.

Now, walking on cold ice and snow, which hopefully we are now well into spring, but, but let's think about winter again just for a minute here. It's important to dress for the season. So 3 layers are recommended, and then plus you would like to, you should do a hat, scarf, mittens, and then consider again in the winter reflective or high visibility outerwear 'cause the days are quite short. We talked about the ice cleats and the anti-slip devices for really icy weather. If you do have to walk in an area where it's quite icy, you can use a "walk like a penguin" strategy. So you can take short shuffling steps, keeping your feet slightly turned out and your knees slightly bent, and then lean your torso forward slightly. And that can help you kind of keep, keep your balance as you're walking through that section. Choose always cleared, sanded, or salted routes and avoid carrying heavy or awkward loads that can end up affecting your balance. And then really avoid walking outside when conditions are treacherous. So it's, if it's really bad out there, really try and consider malls or community centers if you can get there safely.

[35:20 Choosing the right cane, walker, or rollator]

Dr. Marla Beauchamp: So now let's talk about using an assistive device. And here, really, I really want to stress that the right assistive device can help you walk further and more often. And so the right assistive device is really, really a helpful thing, and it's important. They're an important tool for staying active. And they are not a sign of decline. Now, it's important that you choose and fit the right device. So a lot of people purchase devices without professional help, and then what happens is you sometimes end up with a device that's maybe not the right height or not the right match to your strength, balance, and environment. And then you also want to have your fit and setup reassessed as your needs change over time. And then if you're using an assistive device, maybe because you have some balance concerns or some stability concerns, it's really important to think about other strategies that you use alongside that device. So if we're talking about reducing fall risk and balance issues, you know, good lighting and clutter reduction at home is critical, especially when we're using an assistive device around the, around the home. Again, proper footwear and thinking about seasonal safety strategies. So the key takeaway here is the right device helps you walk more, not less.

Now, walking with assistive devices, there's 3 main kinds, and there are others, but we'll just focus on the 3 main kinds here. So cane is probably the one that has the— that provides the least support. It's for people that maybe have mild balance issues or one-sided leg pain or weakness. and it does require, you know, reasonably good balance and coordination to be able to use it. It has to be fitted and used on the correct side, okay? So that's really, really important, again, to

Speak to a physiotherapist or an occupational therapist when you're trying to, to learn how to use the cane properly.

A walker, either the standard walker, which is the one shown, or that can have two wheels, and that is for people that have more considerable sort of balance and gait problems, or they might have bilateral leg weakness. So that is going to give you sort of your most stability while walking option. And the, the drawback here is that it can be bulky. It does require a bit of arm strength to be able to navigate. And then the ones that don't have the two wheels, you have to lift them to move them. So it's really important that, you know, you have good posture and you're able to lift that safely.

And then my personal favorite is the Rollator. So this is a four-wheeled walker, and it's for kind of higher, people that have higher functional ability who need maybe just a bit of balance support, or they need something that allows them to have frequent rests, especially outdoors. So like a lot of people with chronic respiratory disease, they may not be able to walk for as long, and a rollator is a really nice way for them to help to get them out and walking and also give people a chance to take a break. So it's good for longer distances, and if you can, what is great about them is you can actually lock the brakes on the rollator and then use the seat and sit down and take a rest.

So all three of these are good options to help you walk more, not walk less, and so you can consider those if you think you might be a candidate. Please speak to a healthcare provider. So key message number 5, adapting your walk with assistive devices and seasonal planning helps you stay safe, active, and independent all year round.

[39:18 Why walking alone is not enough]

Dr. Marla Beauchamp: So before we finish, I really want to talk about some caveats. Walking alone, while wonderful, and really great for your health, it's not enough to build and maintain muscle strength. So it doesn't provide enough load to meaningfully build or preserve your muscle mass or strength. So, we know that muscle mass and strength are also key for aging well and fall prevention. So you do need to add still resistance training, and we talked about some exercises earlier that could be done to sort of help improve your muscle strength.

Now walking might help a bit in terms of balance and fall risk in terms of just staying active, but it doesn't challenge your balance systems enough. And if you attended the fall prevention webinar we did, you'll know that specific balance training, so our balance needs to be challenged in order to improve balance and reduce fall risk. So walking alone is not going to improve fall risk in a targeted way unless you add those balance-challenging exercises.

And then maintaining bone density. So while walking is weight-bearing, it's typically too low impact to prevent bone loss. Especially at the hip and spine. So higher impact in combination with resistance exercises are going to be most effective for maintaining bone density.

So those are sort of the 3 things that walking cannot do. But the bottom line is that walking is essential but not sufficient. So for healthy aging, it works best if we think about walking as part of a 24-hour movement approach that includes strength, balance, varied intensity activity, and less sitting. And so these are our Canadian 24-Hour Movement Guidelines. I put them up here again, and you can access the guidelines on the CSEP website. But really, we want to think about walking can help us get our 150 minutes a week of moderate to vigorous physical activity, our several hours of light physical activity, and then we need to add muscle and bone strengthening and balance exercises if we really want to optimize our movement for healthy aging.

[41:47 Key takeaways for healthy aging and walking]

Dr. Marla Beauchamp: So in conclusion, physical activity is critical for healthy aging, and walking is one of the most accessible forms of physical activity for most people. 7,000 steps per day or about 30 minutes of brisk activity a day are good targets for many older adults, but every move counts and is associated with health benefits. How fast you walk matters. Walking speed predicts health and independence, and you can improve it with exercise. Brisk walking counts as moderate physical activity, and the Talk test is a really simple way to check if you're walking at the right intensity. And then adapting your walk with assistive devices and seasonal planning can help you stay safe and active and independent all year round. And that's all I have for today. So thank you very much, and I'm happy to take or for you to email me with questions.

[42:49 Walking safely with arthritis and joint pain]

Dr. Anthony Levinson: So that was absolutely spectacular. I want to thank you so much, Marla. Just a tremendous mix of well-researched and practical advice. So, yeah, can't thank you enough for that. Let's jump right into some of the questions, a mix of pre-submitted and some of the ones that people have been asking. Should you walk through pain, especially with arthritis? There were a few questions around walking with knee arthritis and in that regard?

Dr. Marla Beauchamp: Yeah, so that's a common question. And I think the answer there is it depends. So there is some pain, you know, when you start walking and you have arthritis, you can feel a little bit stiff and a little bit painful at the beginning and it can kind of ease into it and get a little bit better as you go. You know, I think most clinicians would say, you know, if you're about a 3 out of 10 on the pain scale, pain scale, you're doing okay and you can continue because movement is actually really important for arthritis. And so it sort of becomes a vicious cycle.

So you do have to move a little bit through pain in order to stay active and to keep your joints lubricated and all those good things. But you also have to listen to your body. So if your pain is really worsening and intensifying, that's a sign you're, you're, you're probably doing too And a good rule of thumb is if your symptoms are worse the next day, that means you probably did too much.

So a really good way of handling pain with osteoarthritis and other kinds of conditions would be to break your walks up into short, you know, instead of going out and doing 30 minutes all at once, try for, aim for, you know, 10 minutes 3 times a day, or maybe start with just 10 minutes twice a day and you work your way up to doing 10 minutes 3 times a day. And so breaking those up into shorter pieces and then really listening to your body. If you're really aggravated, if you're swollen afterwards, then you're pushing too hard and you'll wanna ease off. And then, you know, always good for arthritis is to think about, you know, there's also water-based exercises which are really, really good. So there's other kinds of things you can do to sort of decrease the impact, but walking is still really important. So if you can keep your pain levels, you know, in that kind of 3 out of 10 range and make sure they're not getting worse the next day and then just do those short bouts, you'll be in a good position.

Dr. Anthony Levinson: That's great. And kind of dovetails nicely with one of the other questions was, is it better to do one long walk or multiple shorter walks?

Dr. Marla Beauchamp: Well, this is kind of a really active area of research. And generally what they found is that it's how much you accumulate that matters the most. So you really, if you can get to that 150 minutes, it doesn't actually matter how you get there. There's just a few little things to think about. So if you are doing shorter walks throughout the day instead of one longer walk, the only thing to think about is you may not achieve the benefits that you would want sort of in cardiovascular health and endurance if you don't do enough of a sustained walk. But research really honestly has shown that, you know, even multiple bouts, shorter bouts of walking can make a difference as long as you're trying to get up to that 150 minutes of moderate to vigorous activity every week, then you're doing well and you can split that up however makes sense and works for you.

[46:48 What is a safe heart rate when walking?]

Dr. Anthony Levinson: We've got a couple of questions related to speed, pace. Is there any data on what a safe heart rate for walking in older adults might be?

Dr. Marla Beauchamp: Yeah, so that's always a little tricky because the thing is, is that you, when you could often, some older adults and some of us are on medication that could impact your heart rate. So, you know, if you're not on any of those medications that affect your heart rate, you can use your, your max heart rate would be 220 minus your age, and then you can take a percentage of that. to determine what, what your heart rate should be. So, so let's say you are, 70 years old, right? So you'd go 220 minus 70, and, that would be your max heart rate. And then you would take 70% of that. And I think that gets you around, what is it? Around 105, beats per minute would be sort of that moderate intensity. Heart rate that you would go to. So if you aim for 70% of your maximum, which is 220 minus your age, that should kind of give you a reasonable kind of moderate intensity zone for your heart rate.

But I really, really do highly suggest just using the Talk test, because the Talk test is just much simpler, and then you don't have to worry if you're taking medications that may blunt you don't

have to match your heart rate, which makes it a lot, lot harder to track. It's just a really easy way. You know, you're able to, the Talk test is just, I can talk, I have to use short sentences, I'm a little out of breath, but I'm still able to speak.

[48:40 How fast should older adults walk?]

Dr. Anthony Levinson: That's great. And actually ties in a little bit with one of the other like clarifications. So one of the people asked, "I'm 86, I walk on the treadmill at 2.5 miles per hour. Is that brisk or slow?" And so I thought one of the other questions was really just to redefine the brisk walking again might be helpful.

Dr. Marla Beauchamp: Yeah. So I think I put in the slide and I don't know my miles per hour, so I can't remember what exactly was the. I think it was 2.5 to 4 was the definition range of brisk walking. Good for you. Okay, good memory. So 2.5 to 4, and this gentleman was saying he did 2? Ah, 2.5. So you're at the low end of the brisk walking. Yeah, absolutely. But I would still say here, even at that speed, because some of that is going to depend on how tall you are, how wide your stride is. So really here, I would again use that Talk test. If you're able to talk in short sentences, but you cannot sing, that is moderate intensity. And I would not worry too much about trying to measure your heart rate. And also just remembering too that a lot of those machines, like the ones at the gym and things like that, they're not always that accurate in giving you a great heart rate estimate anyways. So you're much better to go off your symptoms.

[50:09 How to start walking after being sedentary]

Dr. Anthony Levinson: So I'm going to amalgamate a couple of questions, a new one that came in from a walk hater. So this person said, "To be honest, I hate walking. I work out twice a week. Do yoga once or twice. I do try to walk in my apartment for 10 minutes after every meal. Is there any way to motivate me?" And I'm going to tie that in with other question that we got, was "How should somebody restart walking after being sedentary?" Or to go back to your presentation, if you're doing a very low number of speeds, steps, and you want to try to get to roughly 7,000, what might be some of the ways to motivate people?

Dr. Marla Beauchamp: Okay, so first, the person who's very active and yoga and the gym, and I mean, that's wonderful. If you can add a little bit a little bit of walking, even better. A lot of people find walking after meals really helpful, so that could be a strategy because it also helps sort of with glucose control. So you could try just going for, you know, just to, you know, 10 minutes after, after your meals. And if you can do that 2 or 3 times a day, then you're at 30 minutes and you're done. And it sounds like you're doing a lot of other, that person is doing a lot of other really great things. So they should be in good shape.

Also thinking about the other way to kind of incorporate it into your life is this idea of active transportation. So if there's a way that you can, instead of taking the car, if you, if let's say you're going to pick something up from the grocery store and it's not too heavy and the grocery store is

not too far, you know, that's a great way to give yourself a destination. I know a lot of people don't like aimless walking. Or what they perceive as aimless walking. So sometimes if you kind of, if you attach it to an errand, it's a little bit easier. Or, you know, you go to the mall and, you know, you're gonna, you'll do a lot of window shopping.

Dr. Anthony Levinson And I think sometimes people will maybe as a deliberate strategy park a little farther away if let's say they do need to drive to their destination. Park a little farther away to get some more steps.

Dr. Marla Beauchamp: Definitely. And that's a great way to start to accumulate steps. All those little things add up throughout the day. Now, for the person who has not, who has been quite sedentary or might be coming, you know, had a, maybe had a medical condition or something like that, it's important to start slowly. It's not your, it will be very difficult to go from, you know, 1,000 steps a day to 7,000 steps a day overnight. You can get there, but you don't need to go that fast. And you're going to get the most benefit from doing nothing, from going from doing nothing to doing something. All the data has shown that.

So if, if you're getting back into walking and it's been a while, I would say start with, you know, 3 to 4 minute bouts, 3 to 4 minute bouts of walking, and do that 2 or 3 times a day. And that could be, you could do that in your home. It could be actually just, I used to tell this sometimes to my patients who, after a lung infection, sometimes become very deconditioned. So just walk out to your, you know, maybe walk out to your mailbox or just to the end of your driveway and back, even if you're really, really sedentary and really deconditioned and start to do that a few times a day and then make a goal to go a little bit further, and a little bit further to, you know, trying to get up to like 10-minute bouts a couple of times a day. And then you just keep working your way up that way, week after week, make changes week after week and progress. And you can get to 7,000 steps. It will take a little bit of time, but the most important thing is going from, you know, maybe 500 or 1,000 steps to trying to get to 2,000 2,500 steps, that's goal number one.

[54:36 Treadmill vs. outdoor walking: Which is better]

Dr. Anthony Levinson: I'm just conscious of the time, so I'm gonna do one more question and apologies for those whose questions we didn't have time to get to. "Is it better to, is treadmill walking as effective as outdoor walking? And what about an elliptical?"

Dr. Marla Beauchamp: Okay, well, okay, so treadmill walking, so generally treadmill walking compared to outdoor walking, the data pretty consistently shows that outdoor walking is better. And there may be lots of different kind of reasons for that. When we're outside, we also, you know, you're also outside, which is good for you. And there's more resistance because you're on the treadmill, you have really kind of minimal resistance. So I think you get, you end up getting maybe more health benefits from walking outside than walking inside on a treadmill. That being said, it depends completely on pace, and if being inside on the treadmill allows you to focus and walk faster and walk longer, then by all means, that's the way you should do it. But there's, you don't need a treadmill to achieve the benefits. You can achieve lots of benefits just being outside.

The other thing to remember with treadmills, for a lot of people, especially as we get older, balance can be off. And so getting on the treadmill, some people feel quite uncomfortable or unsteady, and so they feel that they can't really walk as fast as they would like on the treadmill because of the balance issues. So something to think about.

The elliptical is a great one is a great tool for, you know, getting that moderate to vigorous exercise. I wouldn't call it walking. I'd call it somewhere between a walk and a jog. So it's a great way to get exercise for sure. But I would still try increased walking as part of your daily life on top of it.

Dr. Anthony Levinson: And I will say one thing about the treadmill. I've heard people say that if you want to replicate some of that resistance from walking outdoors, you should set the incline up to at least a 1.0 or 1.5 to give a little more resistance.

So just, I want to thank you so much. I'm going to just briefly present a little bit about the portal before we go, but that was just an absolutely fantastic talk, Marla. I really appreciate it.

Dr. Marla Beauchamp: Great. Thank you for having me.

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