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1 The impact of collective load transport on the individual walking

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6 1. Abstract

7 Collective handling is a collaborative strategy that involves two or more people in carrying 8 out load transport. Different positions can be adopted, depending on the handle locations of the 9 transported load, external constraints and the capacities of the carriers. The most adopted 10 collective transport in our daily life is stretcher type transport. However, very little research has 11 focused on the kinematic modifications caused by this type of transport. This research aims to 12 evaluate and quantify the modifications of the locomotor pattern of stretcher transport. Our 13 results highlighted a modification of walking parameters (step length, duration of the walking 14 cycle, speed of execution, etc.), an increase in energy cost but above all a modification of the 15 walking pattern with a reduction in joint range of motion. These results could be used to 16 establish new recommendations for musculoskeletal disorders.

17 2. Introduction

18 Team lifting is a collaborative strategy that involves two persons or more in the transport 19 of a load. Various configuration can be found in real life situations, with various placements of

the hand on the object, various external constraints (e.g., weight of the object, corridors), and 20 21 various capacities and preferences of the carriers (Barrett & Dennis, 2005). These parameters 22 were studied to some extent in the scientific literature, although mainly for singles carriers. For 23 example, researchers studied the optimal boxes handle positions during individual manual 24 handling that could increase user satisfaction (Jung & Jung, 2010). Load characteristics such as 25 shape and dimension were shown to play an important role in the ability to comfortably carrying 26 a weight (Garg & Saxena, 1980). In 1981, The National Institute for Occupational Safety and 27 Health (NIOSH) established an ergonomic equation evaluating weight limits for lifting tasks 28 for single individuals which take into consideration the vertical location of the load, the distance 29 the load is lifted, the frequency of lifting and, the symmetric or non-symmetric aspect of the 30 lifting. However, there is a lack of information for providing clear instructions about how to lift 31 a load in a collective configuration.

So far, mainly individual liftings have been studied (Datta & Ramanathan, 1971; Heglund et al., 1995). According to these researches, the best way to carry a load individually in terms of ergonomy is to use the double pack mode and the head mode. In contrast, carrying the load by hand was the worst method to transport a load. These data mainly suggested that the load should be as aligned as possible with the center of mass of the subjects to avoid creating a destabilizing torque. However, the ergonomic evaluations were only based on physiological parameters such as oxygen consumption and heart rate.

The collective aspect of lifting has received much less attention and is more often studied for practical/applied cases such as observed in health care facilities (Haiduven, 2003; Barrett & Dennis, 2005), construction workers (Faber et al., 2012; van der Molen et al., 2012; Anton, Mizner & Hess, 2013), rescue activities (Gamble et al., 1991) or military (Sharp et al., 1997; Knapik, Reynolds & Harman, 2004). Transporting a casualty on a stretcher is commonly studied by research in order to evaluate individual performance and hand grip strength recovery 45 (Knapik, Harper & Crowell, 1999; Leyk et al., 2006, 2007). Armstrong et al. (2020), ranked 46 paramedic lifting task using a measure of biomechanical exposure and showed that the worst 47 activity while working was lifting a scoop board from the ground to the waist. Moreover, they 48 showed that the position of the carrier, head or foot end of the equipment, didn't modify the 49 biomechanical exposure.

50 Few biomechanically based investigations of collective stretcher transport have been 51 conducted. Lanini et al. (2017) studied human walking gait kinematics adaptations during load 52 transport and considered it as a quadrupedal gait. The results showed an overall modification 53 in gait parameters such as step length, gait cycle time and, Center of Mass vertical displacement 54 associated to a walking gait synchronization of the participant. Sensory and tactile feedback in 55 human walking helps dyads to synchronize their movements during side-by-side walking 56 (Nessler & Gilliland, 2009; Zivotofsky, Gruendlinger & Hausdorff, 2012; Sylos-Labini et al., 57 2018; Felsberg & Rhea, 2021). Fumery et al. (2018), studied the walking efficiency during a 58 side-by-side collective load transport and, showed the ability of humans to collaborate 59 efficiently during load carriage. However, all of these researches focused more on the collective 60 modifications during a load transport and not on how the collective tasks impacted the 61 individual performance. This collective movement could be mainly performed in two ways: (1) 62 the team members look at each other and (2) they look at the same direction to transport a load. 63 The second technique implies a forward and a backward walking of one team member, which 64 could play a major role in the individual and collective performance of the load transport. For 65 now, most of the researches described the backward walking pattern as a simple kinematic time 66 reversal of the forward walking pattern and reported only few differences (Thorstensson, 1986; 67 Winter, Pluck & Yang, 1989; Lee et al., 2013). However, backward walking in a collective 68 transport task has not been investigated.

In this research we looked forward to explore different aspects of a collective stretcher, and mainly how does this kind of transport impact the biomechanical individual behavior. The objective of this research is to address three scientific questions: (1) What are the differences across forward and backward walking? (2) How a collective load transport impacts the biomechanics of an individual forward walking? and, (3) Does the backward walking play a major role in the biomechanical modification during collective load transport?

75 **3.** Materiels and methods

76 **1.1. Population**

Twelve women and eight men were recruited from September 01, 2019, to July 01, 2022. All participants were free of musculoskeletal or neurological disorder that might have affected the carriage. Mean (\pm s.d.) age, height and body weight were $24 \pm 2,6$ years, $1,71 \pm 0,07$ cm and $64,65 \pm 8$ kg, respectively. Each duo was matched by gender, height and weight. The project was approved by the University Review Board and all participants gave their written and, oral consent in accordance with the Helsinki convention.

83 **1.2. Experimental**

In total, 10 dyads performed four different lifting conditions. For the two first conditions, we instructed the participants to walk individually at their own pace in a Forward direction "C1" and, in a Backward direction "C2". Then two collective conditions consisted in transporting collectively a stretcher shaped load of 1.2 kg with the participant 1 at the front and the participant 2 at the back (Figure 1.c). We instructed the participants to transport the stretcher shaped load while looking at the same direction (Figure 1.a); meaning that both participants 90 were performing a forward walking "C3". And we instructed them to perform the same 91 condition while looking at each other (Figure 1.b); meaning that the participant 1 was 92 performing a backward walking and, the participant 2 was performing a forward walking "C4". 93 All conditions were randomly presented. Three trials were recorded in each condition.

94	Figure 1 : Experimental protocol with the placement of the participants for the condition 1 (a),
95	condition 2 (b), condition 3 (d) and, condition 4 (e). With (c) representing the top view of the
96	stretcher shaped load.

97

7 **1.3. Kinematic data acquisition**

98 Motion capture data were collected using 20 infrareds (11 Vero V2.2, 7 MX3 and, 2 MX 99 TS40) transmitter-receiver video cameras (Vicon, Oxford metric's, Oxford, United Kingdom) 100 sampled at 200 Hz. Forty-two retro-reflective markers were placed on bony landmarks and on 101 the navel of each participant (Wu et al., 2002, 2005), and 13 on the stretcher shaped load. One 102 gait cycle per trial and participant has been considered for the analysis. These cycles were 103 selected close to the middle of the travel path to avoid the acceleration and deceleration phases. 104 The gait cycle of walking is defined by two successive foot strikes of the same foot. Regarding 105 the collective transport C3 and C4, we investigated the Poly-Articulated Collective System 106 (PACS) gait cycle, formed by the two participants and the load they carry, and defined by the 107 first heel strike of the participant 2 (at the back) and the second foot strike of the participant 1 108 (at the front). The three-dimensional reconstruction of the markers position was performed 109 using the Vicon Nexus 2.11.0 software.

110 **1.4. Computed parameters**

111 *1.4.1. Gait parameters*

Step length was computed as the distance travelled between the foot strike of one foot and the strike of the contralateral foot.

Gait Cycle Time was computed as the time between two consecutive foot strikes of thesame foot.

116 *1.4.2. CoM trajectory*

De Leva anthropometric table (de Leva., 1996) was used to estimate the masses of each segment (m_i), the position of the center of mass of each segment *i* (CoM_i) of the participants and to determine the global position of the CoM of each carriers (i.e. CoM_{Participant1}, CoM_{Participant2}) and of the whole Poly-Articulated Collective System (PACS) which included the two subjects and the carried load (CoM_{PACS}). The participants and PACS CoM location were all computed in the global frame of reference R(0, x, y, z) as follows ($m_{Participant1/2}$, Participant 1 or 2 mass; m_{PACS} , PACS mass) :

124
$$\overrightarrow{OCoM}_{Participant1/2} = \frac{1}{m_{Participant1/2}} \sum_{i=1}^{n=16} m_i \, \overrightarrow{OCoM}_i$$

125
$$\overrightarrow{OCoM}_{PACS} = \frac{1}{m_{PACS}} \sum_{i=1}^{n=33} m_i \, \overrightarrow{OCoM}_i$$

We then assessed the vertical amplitude (A = Zmax - Zmin, with Z the CoM height), the CoM period (P, which refers to the time between two peaks of the z-position curve) and, the CoM Velocity (Winter (1995).

129 *1.4.3. Recovery rate*

The Recovery Rate (RR) assesses the amount of energy transferred between the potential and the kinetic energy of the center of mass (Bastien *et al.*, 2016; Fumery *et al.*, 2018a; Sghaier *et al.*, 2022). RR is related to the consistency of the locomotor pattern and is based on the analysis of an inverted pendulum system (IPS) (Cavagna, Saibene & Margaria, 1963; Willems, Cavagna & Heglund, 1995; Gomeñuka *et al.*, 2014). RRà was computed for each participant and the PACS as follow:

136
$$RR = 100 \frac{Wkf + Wv - Wext}{Wkf + Wv}$$

With Wkf the forward kinetic, Wv the vertical work and Wext the external work. These
parameters were computed according to the method of Bastien *et al.* (2016).

139 *1.4.4. Joint angles*

In order to study the kinematic modifications during a walking and a transporting task, we computed the joint angles at the hip, knee and ankle joints during a complete gait cycle. These joint kinematic were calculated according to the method proposed by the "Standardization and Terminology Committee" of the ISB, which defined a set of coordinate systems for various joints of the lower body based on the joint coordinate system and the XYZ sequence (Wu & Cavanagh, 1995; Wu *et al.*, 2002).

The flexion/extension joint angles of the hip, knee and ankle were computed for each participant and condition, in order to highlight gait modification. According to Winter *et al.*, (1989), the angles to time curve has been reversed from 100% to 0% of the gait cycle to compare backward to forward walking.

150 **1.5. Statistical Analysis**

Statistical analysis was performed with the software R v4.0.2 (http://www.r-project.org/). 151 We compared the CoM velocity, step length, GCT, RR, CoM period and CoM amplitude across 152 153 the four experimental conditions (C1, C2, C3 and, C4) using linear mixed models approach. 154 We then estimated marginal means for each condition using the package *emmeans* in R (Searle, 155 Speed & Milliken, 1980; Lenth et al., 2023; https://CRAN.R-project.org/package=emmeans). 156 In order to analyze joint angle evolution, we used the Laassel et al. (1992) method. The gait 157 cycle was divided into 25 windows, each of 4% of the gait time duration. To evaluate the effect 158 of backward walking on the individual and collective walking, we ran 6 different linear models 159 for each participant (P1 and P2) and each joints (hip, knee and ankle). Each model was built 160 using conditions, windows and their interaction as predictors and angles as response variable. 161 We then estimated the angle marginal means and their confidence interval for each condition 162 in each window using the package *emmeans* in R.

163 **4. Results**

164 **1.6. Gait parameters**

The step length of participant 1 and 2 where significantly longer for C1 compared to C2 (respectively by +20.5% and +26.1%), C3 (respectively by 7.8% and 9.1%) and C4 (respectively by 19.6% and 14.9%). These differences were of +16% between C2 and C3 (C2>C3) and +12.8% between C3 and C4 (Figure 2.a). As for the second participant, its step lengths during C2 were significantly shorter than those performed during C1 (-35.3%), C3 (-22.9%) and C4 (-15.1%).

171	Figure 2: Step length and Gait Cycle time boxplot for participant 1 respectively (a), (c) and
172	participant 2 (b) and (d) for condition 1,2, 3 and, 4. Light grey boxplots represent the forward
173	walking performance and, dark grey boxplots represent the backward walking performance(*
174	p< 0,05; ** p<0,01 and; *** p<0,001).
175	Globally for the GCT, there were no significant differences for the participant 1 between
176	the different conditions. However, Participant 2 GCT was 7% greater in the collective

177 conditions (C3, C4) than in the individual conditions (C1, C2). In addition, the GCT of C4 was

178 4.3% longer than the one of C3 (Figure 2.d).

179 **1.7. Center of Mass (CoM) excursion**

In order to compare the evolution of the CoM vertical excursion during a gait cycle (Figure 3), we computed the mean CoM amplitude and the CoM period for each trial (Figure 3). Globally, no differences were found for the individual CoM vertical excursion of P1 or P2 between the different conditions. However, the CoM amplitude was 17.2% higher during forward walking C1 than during backward walking C2. In addition, PACS's CoM excursion was also 45.2% significantly higher in C3 than in C4. Concerning the CoM period, all conditions were the same whether they were performed individually or collectively.

Figure 3 : Center of Mass mean vertical excursion (10⁻²) for participant 1 (a) and (b), participant
2 (b) and (c) and, PACS (d). Continous lines represent the individual conditions C1 and C2 and,

- 189 the dashed lines represent the collective conditions C3 and C4. The black line correpond to the
- 190 forward walking performance and, the blue ones to the backward walking performance.

191 1.8. CoM velocity

192 For P1 the velocity performed during the first condition of individual walking decreased 193 significantly for C2, C3 and, C4 (respectively by 21.6%, 10.9% and, 19.3%), which is also the 194 case for P2 (respectively by 24.6%, 11.9% and, 21%) (Figure 4.a,b). Forward walking appears 195 always faster than backward walking whether the participants are linked or not. Indeed, P1 and 196 P2 increased their walking speed by 13.6% and 16.7% from C2 to C3. This is confirmed from 197 C3 to C4 with a mean decrease of 10% for P1 and P2. Individually, backward walking induces 198 a 23% decrease of the velocity (Figure 4.c). It is confirmed when the participants carry the load. 199 The velocity of the PACS during C3 decreased by 9.9% compared to the one computed for C4 200 (Figure 4.d).

Figure 4 : Center of Mass velocity (m.s⁻¹) boxplots for participant 1 (a) and (b), participant 2 (c)
 and (b) and, PACS (d). for condition 1,2, 3 and, 4. Light grey boxplots represent the forward
 walking performance and, dark grey boxplots represent the backward walking performance(*
 p< 0,05; ** p<0,01 and; *** p<0,001).

1.9. Recovery rate

206 Concerning P1, statistical analysis showed a significant decrease of the RR by 38.8% from 207 C1 to C2 and, and then by 44.3% from C3 to C4 (Figure 5.a). P2 Recovery Rate significantly 208 decrease between C2 and C1, C3 and, C4 by 73.6%, 55.7% and, 43.9%, respectively. In 209 addition, a P2 diminution of 10.3% from C1 to C3 and, a diminution of 17.1% from C1 to C4 210 were observed(Figure 5.b). Individually, the recovery rate of forward walking "C1" decreased 211 by 40.7% compared to backward walking "C2" (Figure 5.b). In parallel, the recovery rate 212 computed for the PACS during C3 also decreased by 27.5% compared to the C4 one (Figure 213 5.c).

214	Figure 5 :Recovery Rate (%) boxplots for participant 1 (a) and (b), participant 2 (c) and (b) and,
215	PACS (d). for condition 1,2, 3 and, 4. Light grey boxplots represent the forward walking
216	performance and, dark grey boxplots represent the backward walking performance (* p< $0,05$;
217	** p<0,01 and; *** p<0,001).

218 **1.10.** Joint angles (Hip- Knee-Ankle)

219 For the participant 1, two different strategies were used depending on the walk performed 220 (forward or backward walking). A higher flexion at the initial heel strike was observed during 221 forward walking for participant 1. Differences were found between 40% and 80% of the gait cycle, with a decrease of 8° on average for the hip extension angle between C1 and C3 (forward 222 223 walking) and between C2 and C4 (backward walking). Besides, the terminal stance occurred 224 8% later in backward walking compared to forward walking. The terminal stance of C1 and C3 225 occurred around 55% of the gait cycle, while, for C2 and C4 it occurred earlier (48% of the gait 226 cycle). The same goes for the terminal swing, which was occurring in the early 80% of the gait 227 cycle in the C2 and C4, whereas, it was occurring at 90% of the gait cycle in C1 and C3.

Figure 6 : Participant 1 hip flexion/extension (°) for the condition 1, 2, 3 and, 4. The curves correspond to the 95 confidence interval of each 4% of the gait cycle. The C2 and C3 curves are reversed in time.

231 Concerning the participant 2, no difference was found across C1, C3 and C4. However, as 232 observed in the participant 1, a 23.6% decrease of the initial angle at heel strike has been 233 observed from forward to backward walking. We also found a 140.3% (9°) decrease of hip 234 extension across forward walking (C1, C3 and, C4) and backward walking (C2) at 60% of the 235 gait cycle.

236	Figure 7 : Participant 2 hip flexion/extension (°) for the condition 1, 2, 3 and, 4. The curves
237	correspond to the 95 confidence interval of each 4% of the gait cycle. The C2 curve is reversed
238	in time.
239	As for the hip, two strategies of flexion/extension occurred during the forward and
240	backward walking. C1 and C3 represent a normal forward walking, with two flexion/extension
241	peaks, one at 15% of the cycle and another one at 75% of the cycle. Conversely, the reversed
242	results of backward walking, showed an erasure of the first peak associated to a direct increase
243	of the knee flexion from 30% to 60% of the gait cycle. There was also a delay for the second
244	peak which was occurring at 65% of the cycle. Besides, a 7° decrease of the second peak
245	amplitude has been observed.
246	Figure 8 : Participant 1 knee flexion/extension (°) for the condition 1, 2, 3 and, 4. The curves
247	correspond to the 95 confidence interval of each 4% of the gait cycle. The C2 and C3 curves are
248	reversed in time.
249	Participant 2 developed the same joint kinematic strategies as demonstrated at the three
250	joints and in the three conditions (C1, C3 and, C4).
251	Figure 9 : Participant 2 knee flexion/extension (°) for the condition 1, 2, 3 and, 4. The curves
252	correspond to the 95 confidence interval of each 4% of the gait cycle. The C2 curve is reversed
253	in time.
254	The results of ankle dorsi/plantar flexion reveal an increase of the dorsiflexion during C2
255	and C4, by 27.1% and 56.5% at 36% of the cycle, respectively. At the initial swing phase, the
256	plantar flexion reached 12° in C3 and 9° in C1 at 65% of the cycle, while, the ankle joint reached
257	a plantar flexion limited to approximatively 7° at 92% of the cycle. Besides, the plantar flexion
258	was 95.3% higher in C4 collective performance than for the C2 individual performance.

259	Figure 10 : Participant 1 ankle flexion/extension (°) for the condition 1, 2, 3 and, 4. The curves
260	correspond to the 95 confidence interval of each 4% of the gait cycle. The C2 and C3 curves are
261	reversed in time.
262	The same results were observed in the participant 2, when comparing the C2 angles to the
263	three other conditions (C1, C3 and, C4).

Figure 11 : Participant 2 ankle flexion/extension (°) for the condition 1, 2, 3 and, 4. The curves correspond to the 95 confidence interval of each 4% of the gait cycle. The C2 curves is reversed in time.

267 **5. Discussion**

268 The purpose of this study investigate how a collective task such as stretcher transport 269 influence the individual walking patterns. We used two load transport configurations with 270 subject looking at the same direction or in the opposite direction while transporting the load, 271 and compared the walking pattern with individual walking pattern without load. We studied the 272 differences across forward and backward walking, compared individual walking to linked 273 walking and, studied the impact of a backward walking on a linked walking. The results showed 274 that the collective task modifies the spontaneous walking pattern but only/mainly for one 275 participant.

We first compared the spatiotemporal parameters when performing a forward walking and a backward walking. Accordingly to Fritz et al., (2013) and Lee et al., (2013), a reduction of the step length and the CoM velocity during condition 2 were observed. The walking velocity is depending on the step length (JudgeRoy, Davis & Ounpuu, 1996). Unlike forward walking "C1", backward walking "C2" is occasionally used in the human range of motion despite it alters the movement efficiency. In addition, we instructed the participants to look straight ahead
during C2 meaning there was an absence of a visual feedback. Studies explained that in order
to reduce their subjective instability, participants had to reduce their step length so as their speed
(Grasso, Bianchi & Lacquaniti, 1998). Besides, the diminution of the average range of the hip
flexion/extension induced the diminution of step length parameters (Perry, K & Davids, 1992).
These results, though, did not impact the gait cycle time, which was globally around 1 second
for both conditions.

288 The recovery rate (RR) was used as an indicator of the efficiency of the walking pattern, 289 with the objective to assess the amount of energy transferred between the potential and the 290 kinetic energy due to a pendulum like behavior. Globally, RR was always significantly higher 291 when the participant performed a forward than a backward walking, whether it was an 292 individual or collective condition. The results obtained for the individual forward "C1" and 293 backward "C2" walking were close to the values found in the literature (Minetti & Ardigò, 294 2001). This same research states, that this diminution can be explained by a loss of energy, 295 which occurs when the duty factor (the proportion of ground contact reported to the stride) 296 approaches the 50% of the gait cycle, thus reducing the double-contact time. Concerning the 297 collective conditions, our results were close to those obtained by Fumery et al. (2021).

The vertical Center of Mass (CoM) excursion has been widely for normal and pathological walking. However, very few described the ones occurring during a backward walking and, even less for collective transport. Our main result showed, a diminution of CoM amplitude across individual walking, forward and backward, which can be explained by the velocity decrease and the limitation of movement. This limitation occurs mainly at the terminal stance (50% of the gait cycle). In fact, for a forward walking the hip extension reaches the 10°, whereas, for a backward walking the hip extension is not present.

305 Most of the research done on backward walking, considered it as the reverse of a normal 306 forward walking (Thorstensson, 1986; Winter et al., 1989; Lee et al., 2013). In this study, we 307 compared the forward walking results to the reverse of those of backward walking. It showed, 308 as stated by the literature, a more or less similar time-reversed pattern of flexion/extension at 309 the hip, knee and ankle. In order to compare the range of motion evolution, Lee et al. (2013) 310 compared only the maximum flexion/extension angles during selected crucial joint points: 311 loading response, stance and, swing phase. In this study, we performed a sliding window of 4% 312 to see joint angles evolution during a complete flexion/extension cycle. This statistical analysis, 313 enable us to analyze how a backward walking (C2) impacted the gait pattern. It reveals a 314 decrease of the range of motion and an early occurrence of some crucial points. The results 315 showed a clear diminution of the extension for both participants when performing backward 316 walking (C2). This result could also explain the early occurrence of the final stance, around 317 48% of the gait cycle. The knee flexion/extension, was also impacted by the backward walking 318 (C2) with a decrease of the knee flexion at 80% of the gait cycle. The results obtained for the 319 ankle correspond to those of Balasukumaran et al. (2020), who demonstrated a modification of 320 the walking pattern kinematic. Our results confirm in some ways that the backward walking 321 (C2) is a reversal kinematic of the forward walking (Winter et al., 1989). However, we found 322 major modifications in joints angles amplitudes and a delay of the occurrence of some crucial 323 time points. Those modifications can clearly explain the spatiotemporal parameters 324 modifications as the step length decrease, velocity decrease so as the decrease of the recovery 325 rate.

Concerning the collective transport, we recorded two conditions where the main difference was the position of the participant 1. In the C3 collective condition, both participants looked at the same direction. The results obtained showed that both participants reduced their speed when transporting the load. Multiple research showed that during individual walking, when the load weight tends to increase, the spontaneous velocity tends to decrease, due to the step length
reduction (James et al., 2015). These modifications allow humans to spontaneously adopt an
optimal gait and walking speed to minimize the energetic cost (Minetti & Alexander, 1997;
Bode et al., 2021). Yet, in our study, we choose a negligible weight of the transported object,
to focus on the effect of a physical link across the participants. This means that the observed
modifications were only due to their link that induced the first step of a collaborative task.

336 These diminutions are amplified during the "C4", where the participants looked at each 337 other during transporting the stretcher-like-object. Indeed, the individual performance of P1 338 showed an increase of his backward velocity during "C4" compared to "C2", when P2, on the 339 contrary, decreased his forward velocity in "C4" compared to his performance in "C1" and 340 "C3". Regarding the Gait Cycle Time "CGT", during the different conditions, P2 was the one 341 who modified his timing depending on the performed tasks. Lanini et al.(2017), explained that 342 global gait adaptations are mainly due to the fact that each subject tries to accommodate to the 343 motion of the other subject which is detected by interaction forces, visual and acoustic 344 informations. During the experiments, the participants unintentionally communicated through 345 the interaction forces, that are considered as sensory feed-back (Zivotofsky et al. 2012).

346 For P1, the collective load transport did not impact his RR performance, and no difference 347 was found across individuals and collective performance for forward and backward walking. 348 Whereas, P2 constantly modified his behavior depending on the condition. P2 RR decreased 349 when he performed "C3" and even more when he performed "C4". Fumery et al.(2018b), 350 studied paired walking of adults with intellectual disabilities and showed that when the 351 participant is paired to a healthy individual, there is an improvement of spatiotemporal of the 352 disabled participant and a decrease of the healthy participant pattern. In our study it seems that 353 P2, plays an important role in the constant kinematic readjustment given that he has more 354 environment inputs and that the backward walking disturbed P1 efficiency.

355 Concerning the kinematic modifications, the collective load transport "C3" slightly 356 impacted the kinematics of participant 1 gait pattern in hip flexion/extension at the beginning 357 and the end of the cycle. However, no other kinematic modification has been noticed for the 358 other joint as well as for the participant 2. In general, the major modifications induced by a 359 collective load transport are those found in spatiotemporal parameters.

The objective of the condition "C4" was to see if the backward walking performed by the participant 2 impacted the kinematic individual performance of the participant 1 as well as the collective performance. Kinematic results of participant 1 showed higher flexion values for each of the hip, knee and, ankle when comparing the individual backward performance "C2". On the contrary, no kinematic modifications were found for the participant 2.

365 Regarding the diad performance, we focused on the Poly-Articulated Collective System 366 (PACS) formed by the two participants and the load they transported. As done for the 367 participants, we computed the PACS velocity and Recovery Rate, with the purpose to bring out 368 how P1 placement impacted the collective performance. Both collective conditions replicate 369 two types of collective stretcher transport. Our results showed a velocity decrease of the PACS from "C3" to "C4". Which can be explained by the velocity individual decrease of each 370 371 participant. The Recovery Rate also decreased by 10% from "C3" to "C4". These two results 372 join those found by Sghaier et al. (2022), who studied a collective side-by-side load transport 373 associated to a precision constraint and, showed a decrease of the PACS velocity and Recovery 374 Rate. The amplitude of the CoM displacement also showed a decrease from "C3" to "C4". 375 These results illustrate a better collective efficiency for "C3", meaning when the two 376 participants performed both a forward walking and looked at the same direction. This also 377 means that the backward walking during the collective transport affects the efficiency of the 378 collective work.

379 **6.** Conclusion

380 The present study give insight on how a collective load transport modify the individual 381 walking performance. We first compared individual forward and backward walking. As stated 382 by the literature we observed a kinematic time reversal of the flexion/extension angles. 383 However, we observed major modifications in the flexion/extension amplitude and a delay of 384 the occurrence of some crucial time points inducing a modification of some spatiotemporal 385 parameters. Then we studied the impact of a collective load transport on the individual walking 386 performance. When the participant looked at the same direction, we observed a slight kinematic 387 modification of the participants. Yet, the linked task induced a decrease of spatiotemporal 388 parameters. However, when the participants looked at each other during the carriage, we 389 observed higher flexion values for participant 1, added to the decrease of spatiotemporal 390 parameters. The efficiency of the collaborative task decreased when the participant looked at 391 each other as shown the decrease of the recovery rate. This result indicates that the major 392 component impacting the efficiency of a collective load transport was the performance of a 393 backward walking by the participant 1. Moreover, the efficiency of the collaborative task was 394 mainly controlled by the participant 2 with more environment information. He adjusted 395 systematically his behavior (spatiotemporal parameter) in order to adapt to the other participant 396 who was performing a backward walking. Future research should study the forces interaction 397 across participants in order to understand the involvement of each participant.

398

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References 8. 401

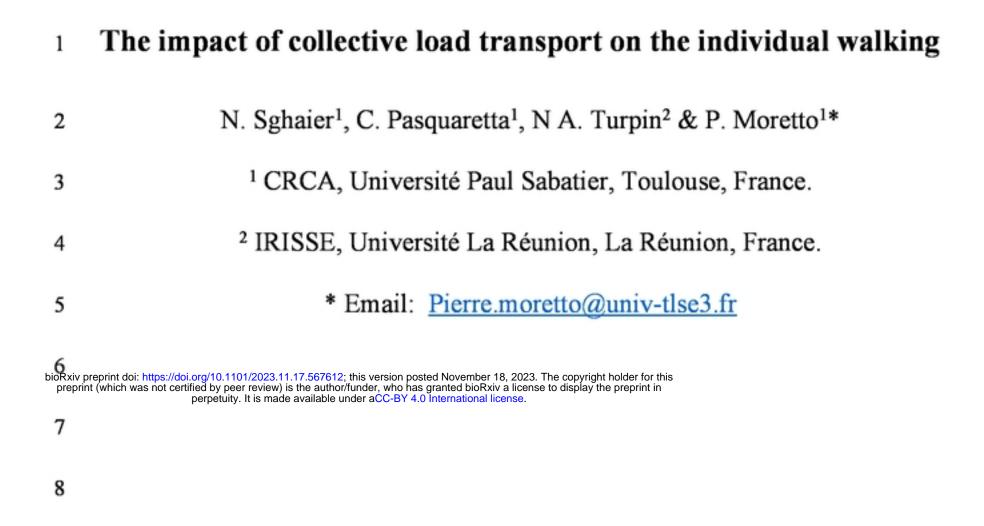
402	1.	Barrett R s., Dennis G j. Ergonomic issues in team lifting. Human Factors and Ergonomics in
403		Manufacturing & Service Industries. 2005;15(3):293–307.
404	2.	Jung HS, Jung HS. A survey of the optimal handle position for boxes with different sizes and
405		manual handling positions. Applied Ergonomics. 2010 Jan 1;41(1):115-22.
406	3.	Garg A, Saxena U. Container Characteristics and Maximum Acceptable Weight of Lift1. Hum
407		Factors. 1980 Aug 1;22(4):487–95.
408	4.	Datta SR, Ramanathan NL. Ergonomic Comparison of Seven Modes of Carrying Loads on
409		the Horizontal Plane. Ergonomics. 1971 Mar;14(2):269-78.
410	5.	Heglund NC, Willems PA, Penta M, Cavagna GA. Energy-saving gait mechanics with head-
411		supported loads. Nature. 1995 May 4;375(6526):52-4.
412	6.	Haiduven D. Lifting Teams in Health Care Facilities: A Literature Review. AAOHN Journal.
413		2003 May;51(5):210-8.
414	7.	Faber G, Visser S, Van der Molen HF, Kuijer PPFM, Hoozemans MJM, Van Dieën JH, et al.
415		Does team lifting increase the variability in peak lumbar compression in ironworkers? Work.
416		2012;41:4171–3.
417	8.	van der Molen HF, Visser S, Kuijer PPFM, Faber G, Hoozemans MJM, van Dieën JH, et al.
418		The evaluation of team lifting on physical work demands and workload in ironworkers. Work.
419		2012 Jan 1;41(Supplement 1):3771–3.
420	9.	Anton D, Mizner RL, Hess JA. The Effect of Lift Teams on Kinematics and Muscle Activity
421		of the Upper Extremity and Trunk in Bricklayers. Journal of Orthopaedic & Sports Physical
422		Therapy. 2013 Apr;43(4):232–41.
423	10.	Gamble RP, Stevens AB, McBrien H, Black A, Cran GW, Boreham CA. Physical fitness and
424		occupational demands of the Belfast ambulance service. Occupational and Environmental
425		Medicine. 1991 Sep 1;48(9):592–6.

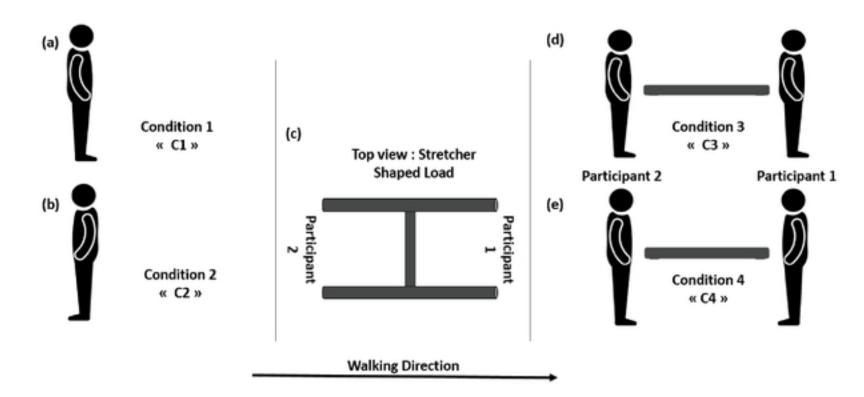
426 11. Knapik JJ, Harper W, Crowell HP. Physiological factors in stretcher carriage performance. 427 Eur J Appl Physiol. 1999 Mar 1;79(5):409-13. 428 12. Levk D, Rohde U, Erley O, Gorges W, Wunderlich M, Rüther T, et al. Recovery of hand grip 429 strength and hand steadiness after exhausting manual stretcher carriage. Eur J Appl Physiol. 430 2006 Mar 1;96(5):593-9. 431 13. Levk D, Rohde U, Erley O, Gorges W, Essfeld D, Erren TC, et al. Maximal manual stretcher 432 carriage: performance and recovery of male and female ambulance workers. Ergonomics. 433 2007 May;50(5):752-62. 434 Armstrong DP, Makhoul PJ, Sinden KE, Fischer SL. Ranking Stretcher and Backboard 14. 435 Related Paramedic Lifting Tasks Based on Their Biomechanical Demand on the Low Back. 436 IISE Transactions on Occupational Ergonomics and Human Factors. 2020 Jan 2;8(1):9-19. 437 15. Lanini J, Duburcq A, Razavi H, Goff CGL, Ijspeert AJ. Interactive locomotion: Investigation 438 and modeling of physically-paired humans while walking. PLOS ONE. 2017 Sep 439 6;12(9):e0179989. 440 16. Nessler JA, Gilliland SJ. Interpersonal synchronization during side by side treadmill walking 441 is influenced by leg length differential and altered sensory feedback. Human Movement 442 Science. 2009 Dec 1;28(6):772-85. 443 17. Zivotofsky AZ, Gruendlinger L, Hausdorff JM. Modality-specific communication enabling 444 gait synchronization during over-ground side-by-side walking. Human Movement Science. 445 2012 Oct 1;31(5):1268-85. 446 Sylos-Labini F, d'Avella A, Lacquaniti F, Ivanenko Y, Human-Human Interaction Forces and 18. 447 Interlimb Coordination During Side-by-Side Walking With Hand Contact. Front Physiol. 448 2018 Mar 7;9:179. 449 19. Felsberg DT, Rhea CK. Spontaneous Interpersonal Synchronization of Gait: A Systematic 450 Review. Archives of Rehabilitation Research and Clinical Translation. 2021 Mar 451 1;3(1):100097.

- 452 20. Fumery G, Claverie L, Fourcassié V, Moretto P. Walking pattern efficiency during collective
 453 load transport. Gait & Posture. 2018 Jul 1;64:244–7.
- 454 21. Thorstensson A. How is the normal locomotor program modified to produce backward
 455 walking? Exp Brain Res. 1986 Feb 1;61(3):664–8.
- 456 22. Winter DA, Pluck N, Yang JF. Backward Walking: A Simple Reversal of Forward Walking?
 457 Journal of Motor Behavior. 1989 Sep;21(3):291–305.
- 458 23. Lee M, Kim J, Son J, Kim Y. Kinematic and kinetic analysis during forward and backward
 459 walking. Gait & Posture. 2013 Sep;38(4):674–8.
- 460 24. Wu G, Siegler S, Allard P, Kirtley C, Leardini A, Rosenbaum D, et al. ISB recommendation
 461 on definitions of joint coordinate system of various joints for the reporting of human joint
 462 motion—part I: ankle, hip, and spine. Journal of Biomechanics. 2002 Apr 1;35(4):543–8.
- Wu G, van der Helm FCT, (DirkJan) Veeger HEJ, Makhsous M, Van Roy P, Anglin C, et al.
 ISB recommendation on definitions of joint coordinate systems of various joints for the
 reporting of human joint motion—Part II: shoulder, elbow, wrist and hand. Journal of
 Biomechanics. 2005 May 1;38(5):981–92.
- 467 26. Winter D. Human balance and posture control during standing and walking. Gait & Posture.
 468 1995 Dec;3(4):193–214.
- 469 27. Bastien GJ, Willems PA, Schepens B, Heglund NC. The mechanics of head-supported load
 470 carriage by Nepalese porters [Internet]. 2016 [cited 2020 Nov 20]. Available from:
 471 https://jeb.biologists.org/content/219/22/3626
- 472 28. Sghaier N, Fumery G, Fourcassié V, Turpin NA, Moretto P. Biomechanical effects of the
 473 addition of a precision constraint on a collective load carriage task. R Soc open sci. 2022
 474 Aug;9(8):220636.
- 475 29. Cavagna GA, Saibene FP, Margaria R. External work in walking. Journal of Applied
 476 Physiology. 1963 Jan 1;18(1):1–9.
- Willems PA, Cavagna GA, Heglund NC. External, internal and total work in human
 locomotion. Journal of Experimental Biology. 1995 Feb 1;198(2):379–93.

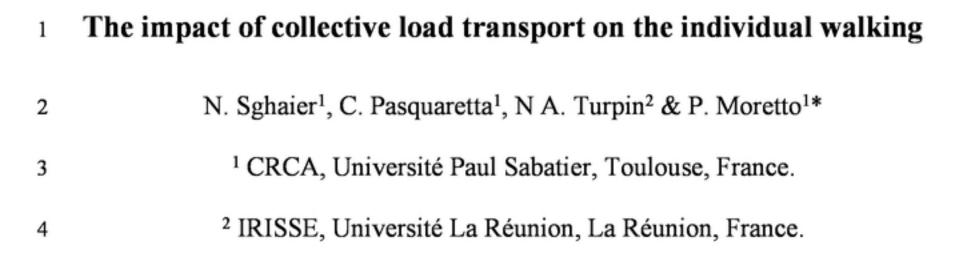
- 479 31. Gomeñuka NA, Bona RL, Rosa RG da, Peyré-Tartaruga LA. Adaptations to changing speed,
- 480 load, and gradient in human walking: Cost of transport, optimal speed, and pendulum.
 481 Scandinavian Journal of Medicine & Science in Sports. 2014;24(3):e165–73.
- 482 32. Wu G. Cavanagh PR. ISB recommendations for standardization in the reporting of kin
- 482 32. Wu G, Cavanagh PR. ISB recommendations for standardization in the reporting of kinematic
 483 data. J Biomech. 1995 Oct;28(10):1257–61.
- 484 33. Searle SR, Speed FM, Milliken GA. Population Marginal Means in the Linear Model: An
 485 Alternative to Least Squares Means. The American Statistician. 1980 Nov;34(4):216–21.
- 486 34. Lenth RV, Bolker B, Buerkner P, Giné-Vázquez I, Herve M, Jung M, et al. emmeans:
 487 Estimated Marginal Means, aka Least-Squares Means [Internet]. 2023 [cited 2023 Apr 19].
 488 Available from: https://CRAN.R-project.org/package=emmeans
- 489 35. Laassel EM, Loslever P, Voisin PH, Herlant M. Analyse multidimensionnelle des forces de
 490 réaction du pied au cours de la marche normale. Acta Orthop Belg. 1992;58(3):272–279.
- 491 36. Fritz NE, Worstell AM, Kloos AD, Siles AB, White SE, Kegelmeyer DA. Backward walking
 492 measures are sensitive to age-related changes in mobility and balance. Gait & Posture. 2013
 493 Apr;37(4):593–7.
- JudgeRoy JO, Davis B, Ounpuu S. Step Length Reductions in Advanced Age: The Role of
 Ankle and Hip Kinetics. The Journals of Gerontology Series A: Biological Sciences and
 Medical Sciences. 1996 Nov 1;51A(6):M303–12.
- 497 38. Grasso R, Bianchi L, Lacquaniti F. Motor Patterns for Human Gait: Backward Versus Forward
 498 Locomotion. Journal of Neurophysiology. 1998 Oct 1;80(4):1868–85.
- 499 39. Perry J, K ST, Davids JR. Gait Analysis: Normal and Pathological Function. Journal of
 500 Pediatric Orthopaedics. 1992 Dec;12(6):815.
- 501 40. Fumery G, Turpin NA, Claverie L, Fourcassié V, Moretto P. A biomechanical study of load
 502 carriage by two paired subjects in response to increased load mass. Scientific Reports. 2021
 503 Feb 23;11(1):4346.

504	41.	Balasukumaran T, Gottlieb U, Springer S. Spatiotemporal gait characteristics and ankle
505		kinematics of backward walking in people with chronic ankle instability. Sci Rep. 2020 Jul
506		13;10(1):11515.
507	42.	James CR, Atkins LT, Yang HS, Dufek JS, Bates BT. Kinematic and ground reaction force
508		accommodation during weighted walking. Human Movement Science. 2015 Dec 1;44:327-
509		37.
510	43.	Minetti AE, Alexander RMcN. A Theory of Metabolic Costs for Bipedal Gaits. Journal of
511		Theoretical Biology. 1997 Jun 21;186(4):467–76.
512	44.	Bode VG, Frykman PN, Smith NI, Fellin RE, Seay JF. Spatiotemporal and Kinematic
513		Comparisons Between Anthropometrically Paired Male and Female Soldiers While Walking
514		With Heavy Loads. Military Medicine. 2021 Feb 26;186(3-4):387-92.
515	45.	Fumery G, Fourcassié V, Moretto P, Bourg V. Analysis of gait during independent and paired
516		walking in adults with an intellectual disability: A case report. J Rehabil Med-CC.
517		2018;1(1):1000009.
518		

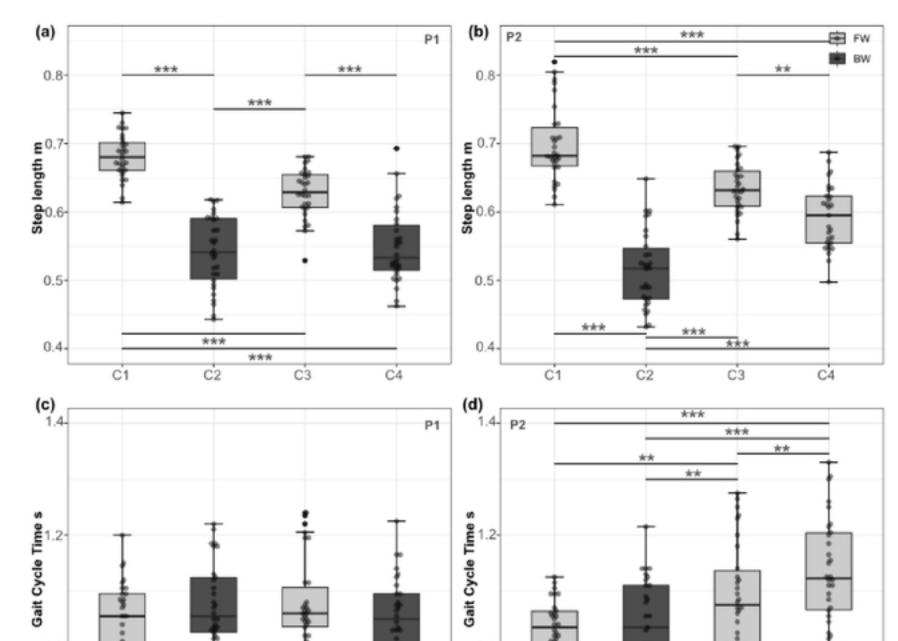




- 10 Figure 1 : Experimental protocol with the placement of the participants for the condition 1 (a),
- 11 condition 2 (b), condition 3 (d) and, condition 4 (e). With (c) representing the top view of the
- 12 stretcher shaped load.









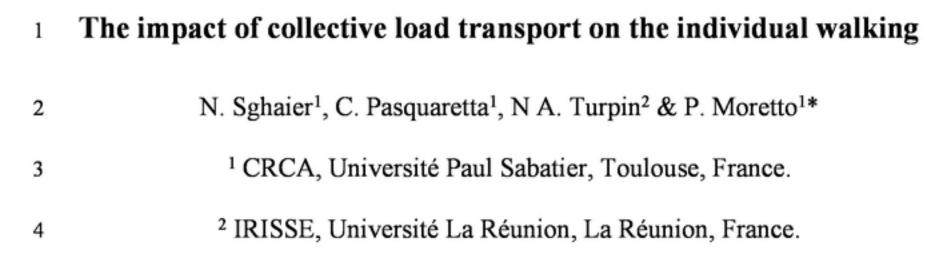
8 Figure 1: Step length and Gait Cycle time boxplot for participant 1 respectively (a), (c) and

9 participant 2 (b) and (d) for condition 1,2, 3 and, 4. Light grey boxplots represent the forward

10 walking performance and, dark grey boxplots represent the backward walking performance(*

11 p< 0,05; ** p<0,01 and; *** p<0,001).

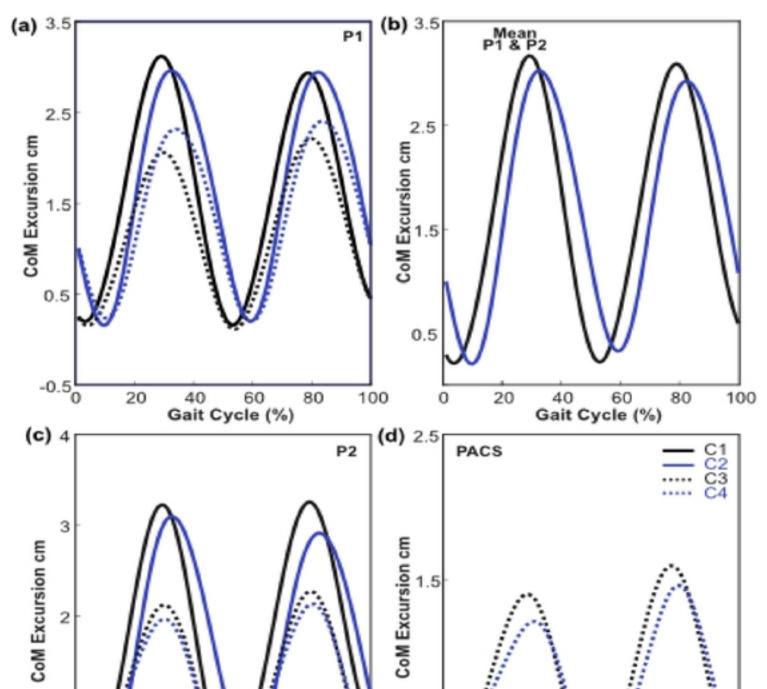
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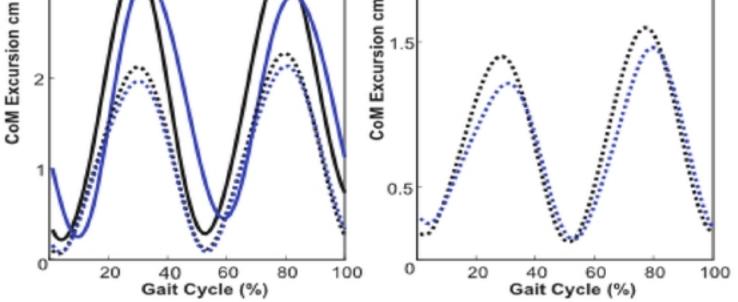


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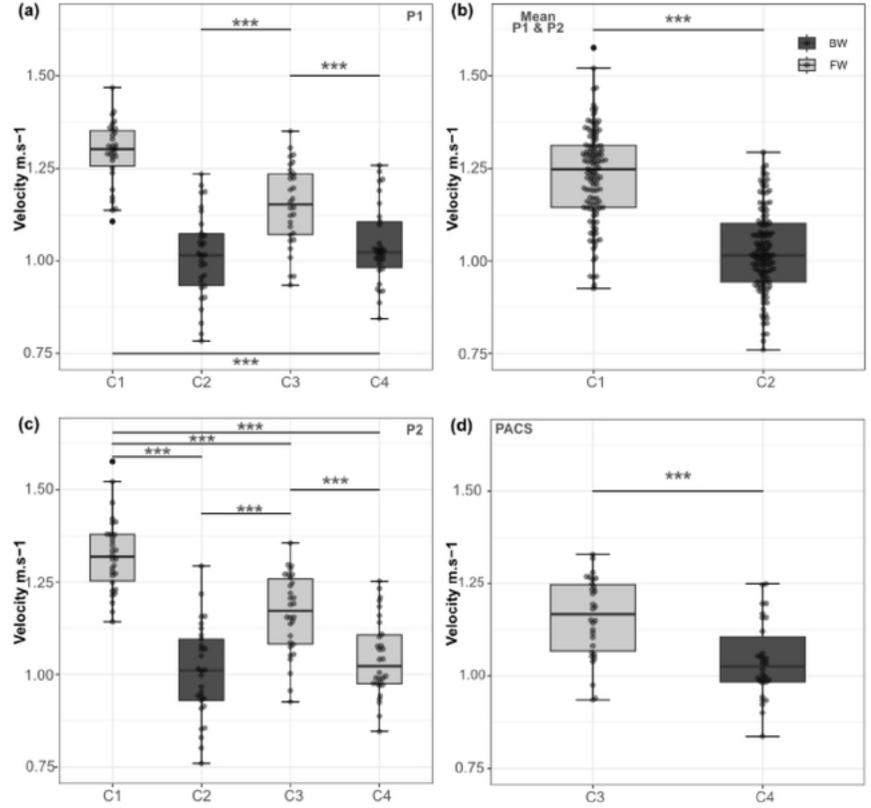
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- 8 Figure 1 : Center of Mass mean vertical excursion (10⁻²) for participant 1 (a) and (b), participant
- 9 2 (b) and (c) and, PACS (d). Continous lines represent the individual conditions C1 and C2 and,
- 10 the dashed lines represent the collective conditions C3 and C4. The black line correpond to the
- 11 forward walking performance and, the blue ones to the backward walking performance.

The impact of collective load transport on the individual walking N. Sghaier¹, C. Pasquaretta¹, N A. Turpin² & P. Moretto^{1*} ¹ CRCA, Université Paul Sabatier, Toulouse, France. ² IRISSE, Université La Réunion, La Réunion, France.



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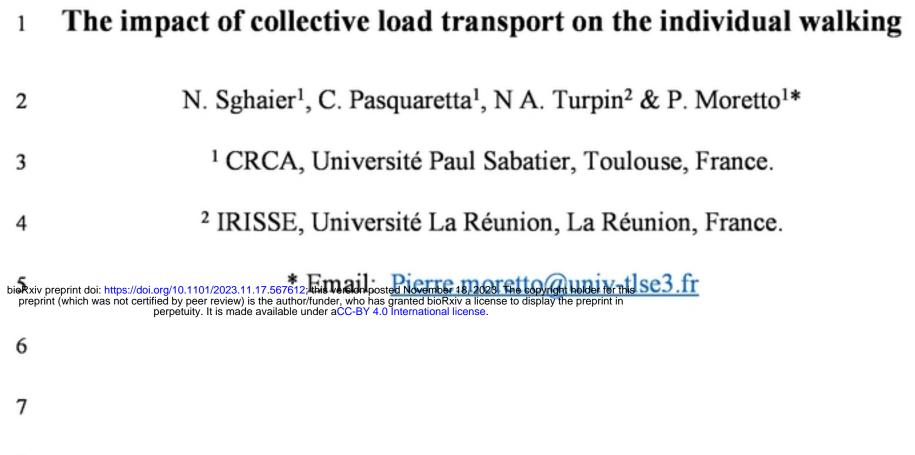
9 Figure 1 : Center of Mass velocity (m.s⁻¹) boxplots for participant 1 (a) and (b), participant 2 (c)

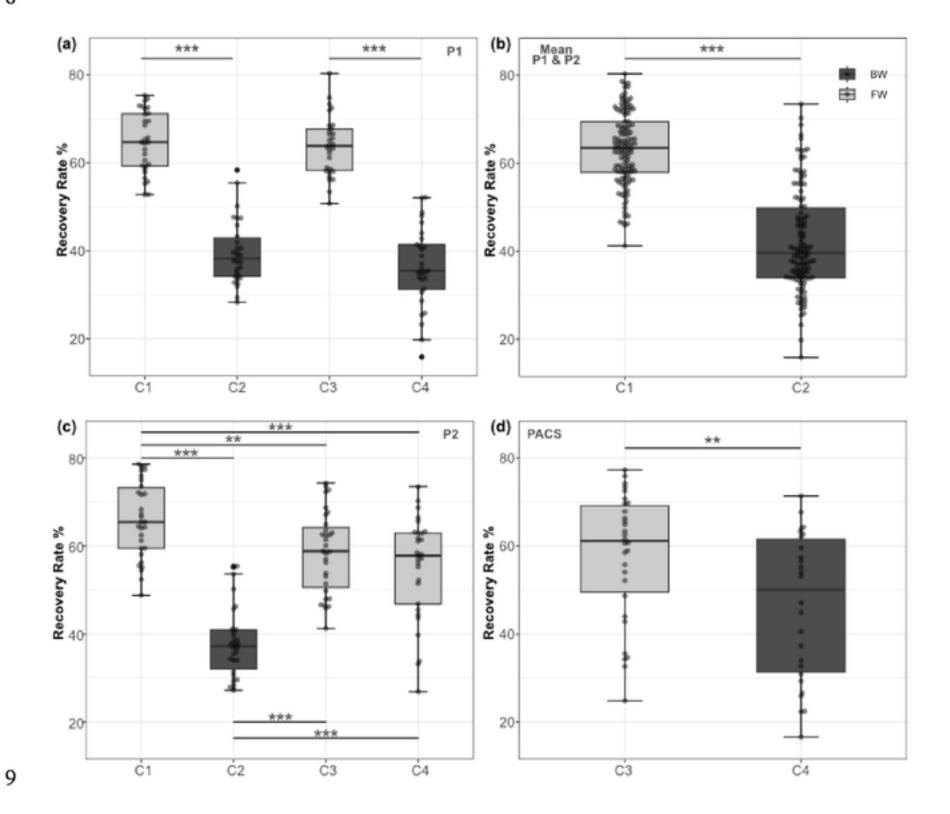
10 and (b) and, PACS (d). for condition 1,2, 3 and, 4. Light grey boxplots represent the forward

11 walking performance and, dark grey boxplots represent the backward walking performance(*

12 p< 0,05; ** p<0,01 and; *** p<0,001).

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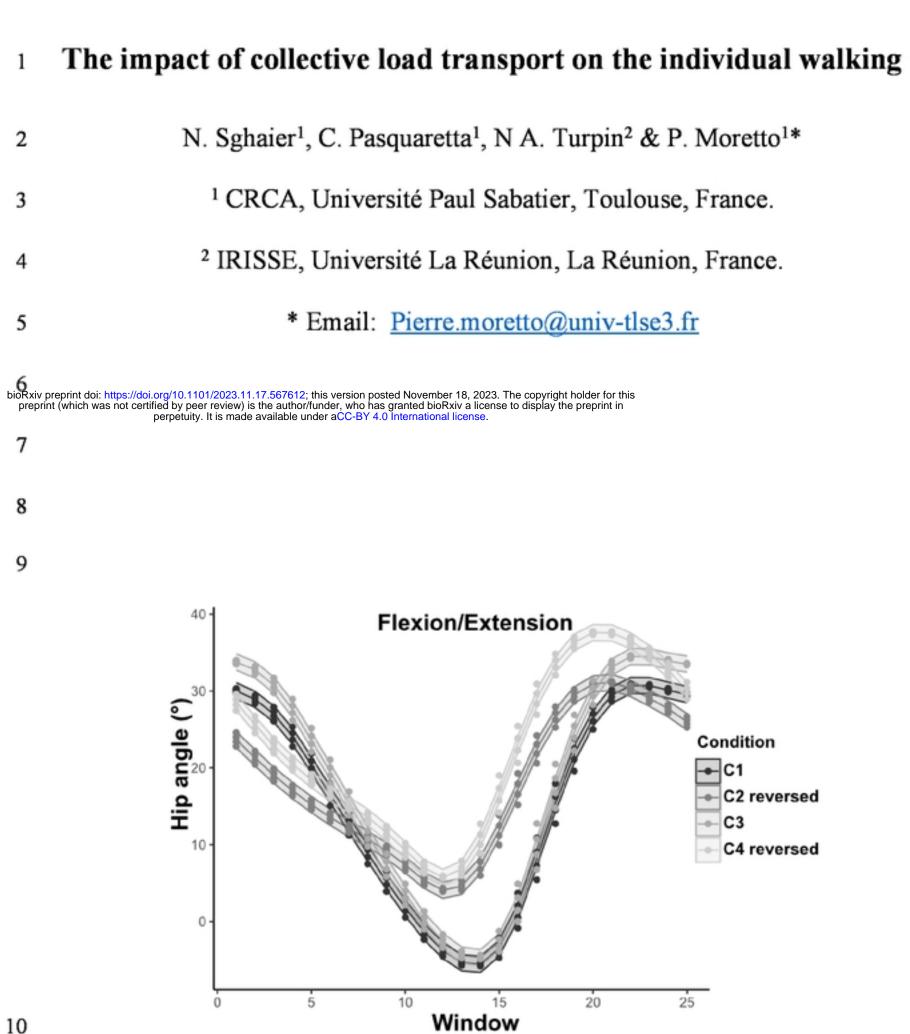
10 Figure 1 :Recovery Rate (%) boxplots for participant 1 (a) and (b), participant 2 (c) and (b) and,

11 PACS (d). for condition 1,2, 3 and, 4. Light grey boxplots represent the forward walking

12 performance and, dark grey boxplots represent the backward walking performance (* p< 0,05;</p>

13 ** p<0,01 and; *** p<0,001).

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- 11 Figure 1 : Participant 1 hip flexion/extension (°) for the condition 1, 2, 3 and, 4. The curves
- 12 correspond to the 95 confidence interval of each 4% of the gait cycle. The C2 and C3 curves are
- 13 reversed in time.

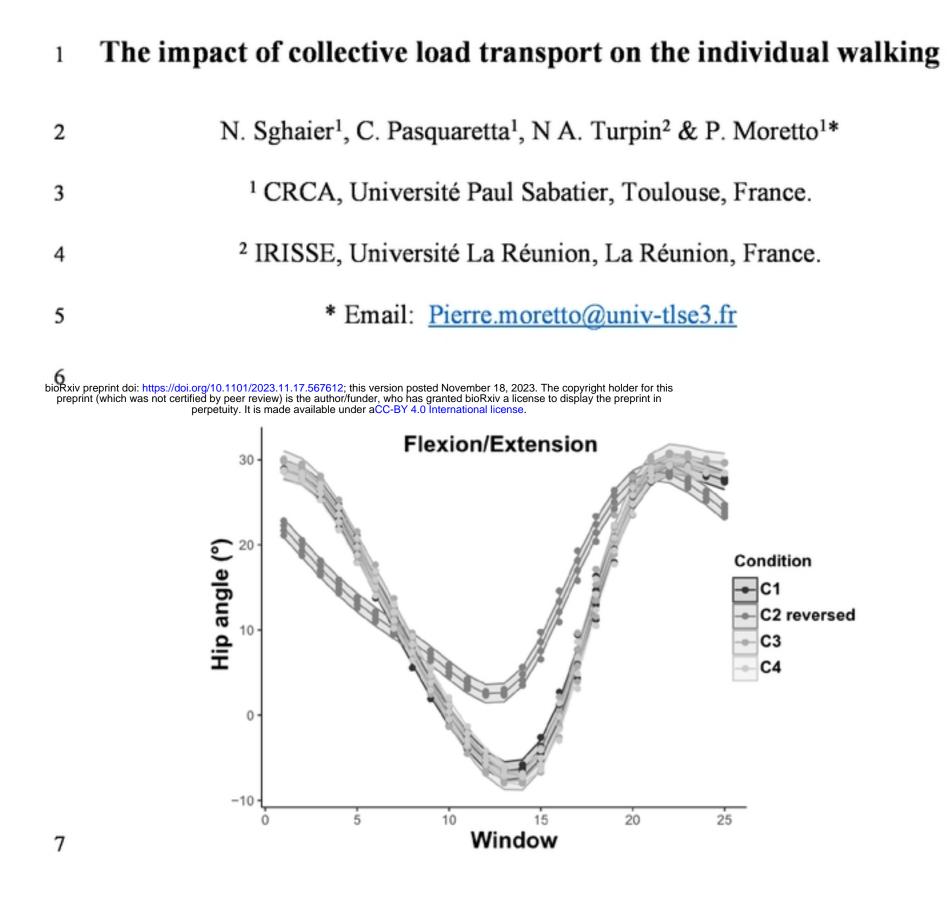
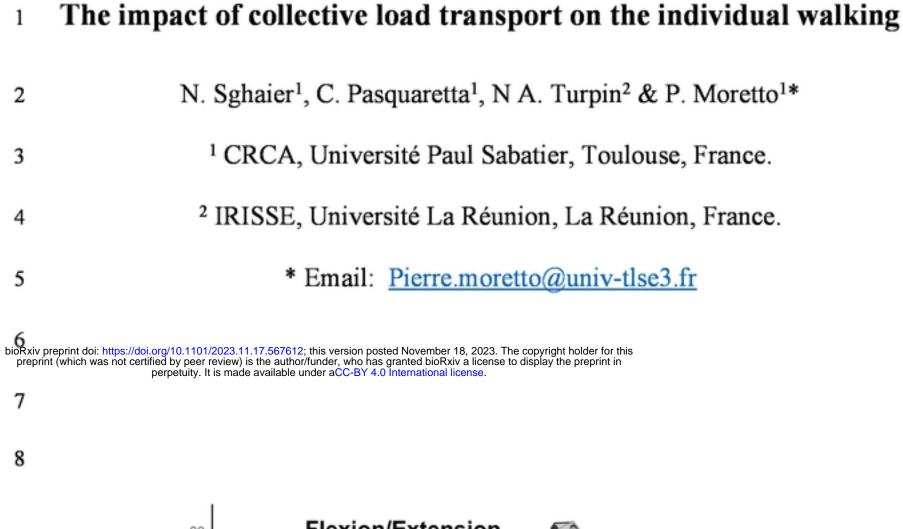
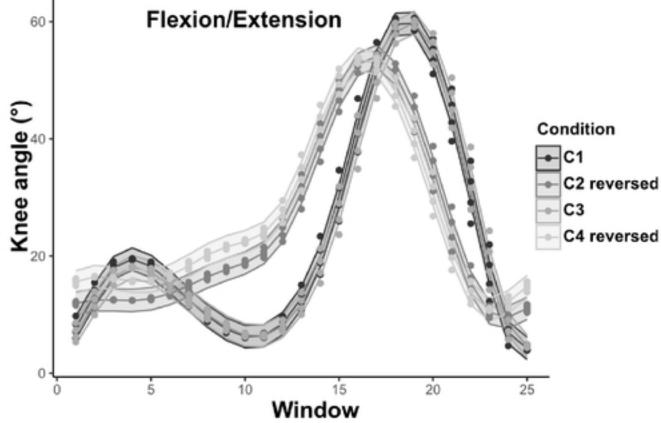


Figure 1 : Participant 2 hip flexion/extension (°) for the condition 1, 2, 3 and, 4. The curves
 correspond to the 95 confidence interval of each 4% of the gait cycle. The C2 curve is reversed

10

in time.





- 10 Figure 1 : Participant 1 knee flexion/extension (°) for the condition 1, 2, 3 and, 4. The curves
- 11 correspond to the 95 confidence interval of each 4% of the gait cycle. The C2 and C3 curves are
- 12 reversed in time.

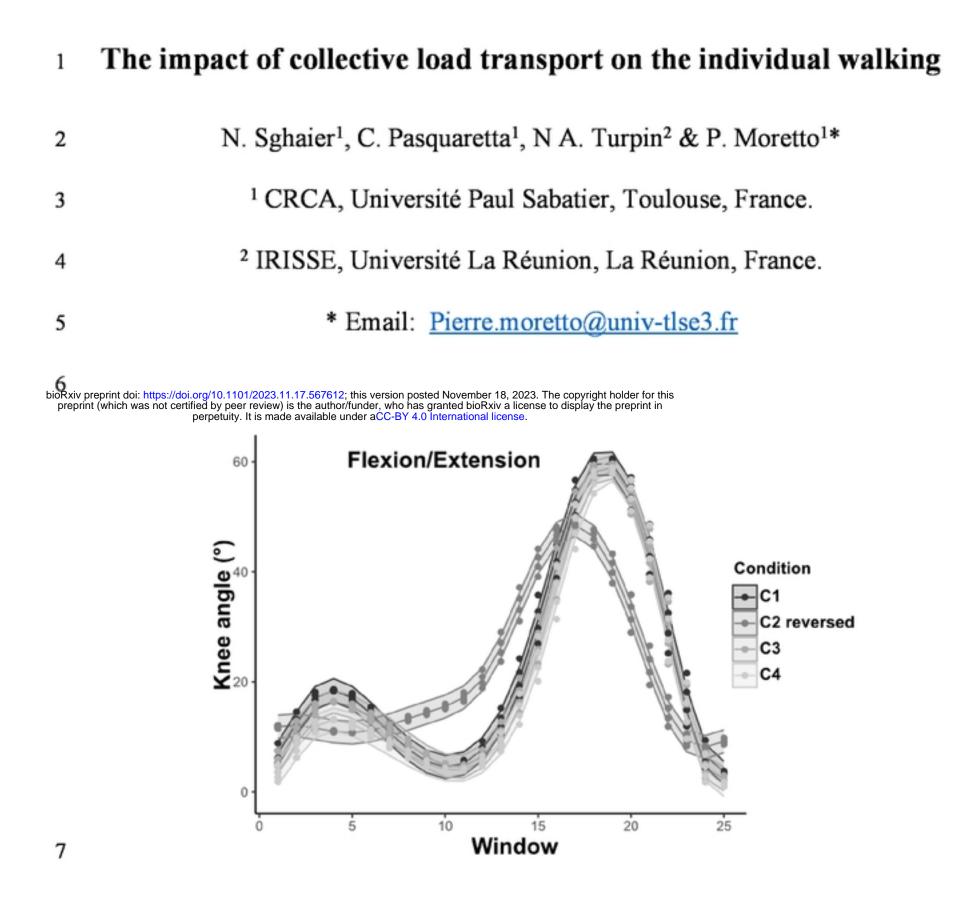
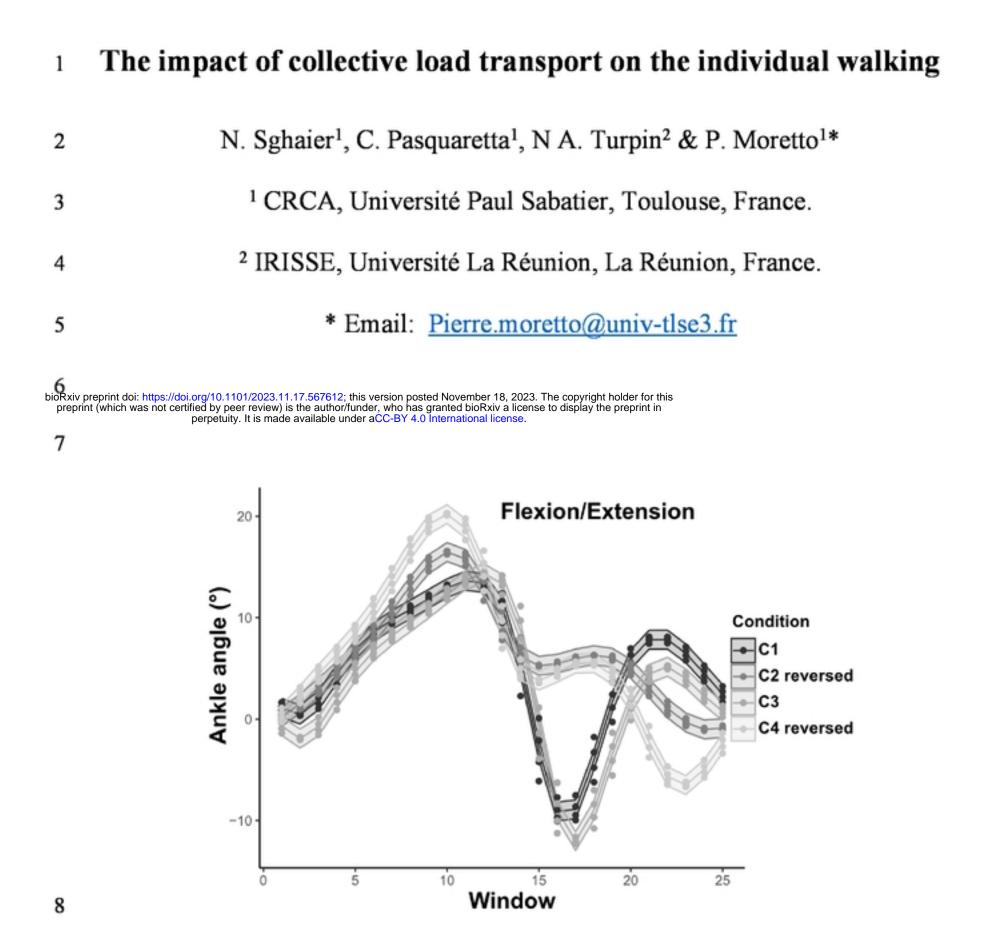


Figure 1 : Participant 2 knee flexion/extension (°) for the condition 1, 2, 3 and, 4. The curves
 correspond to the 95 confidence interval of each 4% of the gait cycle. The C2 curve is reversed

10

in time.



9 Figure 1 : Participant 1 ankle flexion/extension (°) for the condition 1, 2, 3 and, 4. The curves

correspond to the 95 confidence interval of each 4% of the gait cycle. The C2 and C3 curves are
 reversed in time.

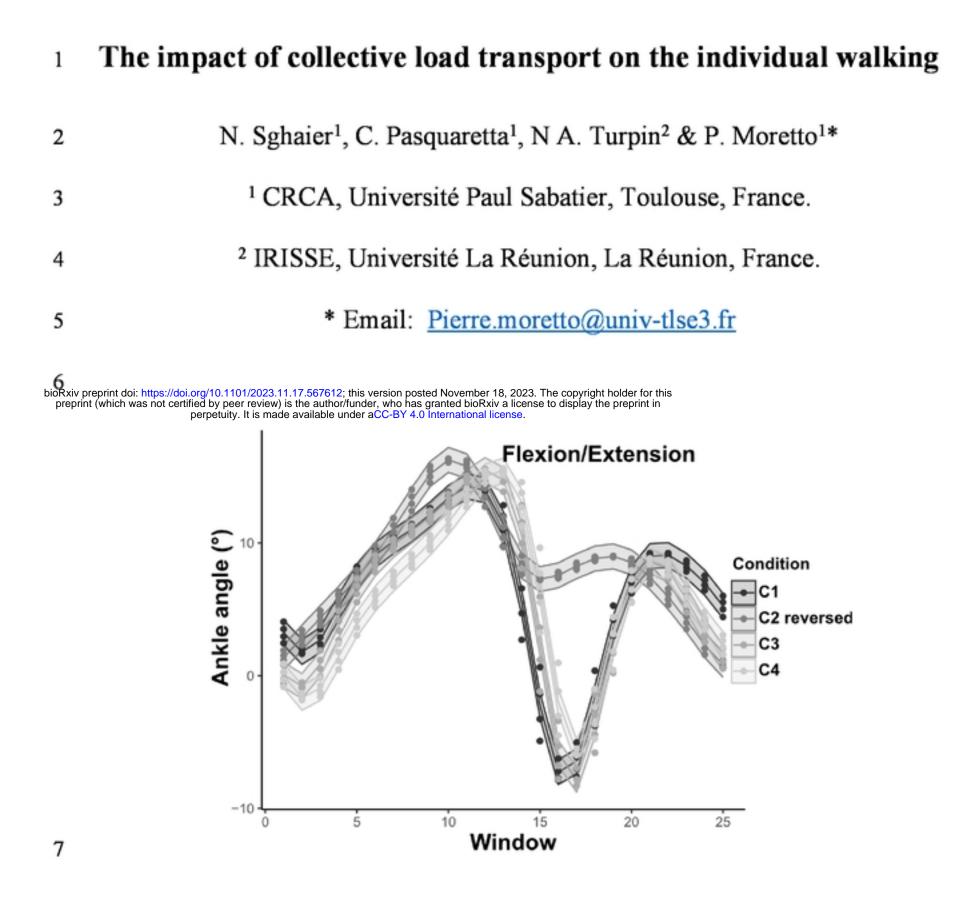


Figure 1 : Participant 2 ankle flexion/extension (°) for the condition 1, 2, 3 and, 4. The curves
 correspond to the 95 confidence interval of each 4% of the gait cycle. The C2 curves is reversed

10

in time.