



SPIRIT OF 2012
INVESTING IN HAPPINESS

STEP CHANGE: WORKING TOGETHER TOWARDS AN ACTIVE SOCIETY



Acknowledgements

The report was written by Jill Rutter, Amy Finch and Gaetano Iannetta at Spirit of 2012. The authors would like to thank the grantee and partner organisations who have contributed their expertise, in particular, Activity Alliance, Robertson Trust, Sport England, sportscotland and the Scottish Government. Without their ideas, this report could not have been written.

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Spirit of 2012 was set up by the National Lottery Community Fund as the London 2012 Games legacy funder. It aims to build sustainable social legacies from the inspiration of events, investing in projects that help people become more active, creative and connected. Nearly 45,000 people have offered their time as volunteers through the projects that Spirit of 2012 has funded, and over five million people have taken part in them. Over the last eight years, Spirit of 2012 has built up a strong evidence base about the power of events to catalyse social change, drawn from its own and others' research and learning from the projects it has funded.

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FOREWORD



Since retiring from professional sport, I know the true value of continuing to swim for my own health and wellbeing. Put simply, I belong in the water where everything feels natural to me. I feel free and very much at home. Yet there are many people who do not feel as comfortable practising sport and physical activity as I do. There are people who face a range of barriers to taking part, who are put off by public health messages, or who feel that the activities on offer are not for them or completely out of their reach. The past two years have presented opportunities for change, such as highlighting the importance of being active for the benefit of our mental wellbeing, something I personally discovered during the pandemic. These years have also increasingly highlighted that there are still risks of some groups falling even further behind. We need a concerted effort to address these barriers by adopting the principles set out in this report so that everyone can discover activities which are accessible for them and suit their interests and needs.

Susannah Rodgers MBE

Paralympic Gold and Bronze medallist

Technical Adviser on Disability Inclusion and Director, Spirit of 2012.



As a former Irish League Footballer and UEFA coach, being physically active has long been an important part of my life. This report calls for more of us to play our part in addressing inactivity. In the same way that sports bodies and health providers play a vital role in promoting physical activity, similarly community organisations, faith centres, councils, as well as large and small employers are playing their part. In my role at Business in the Community Northern Ireland, I see the power that comes from organisations working together to address common goals on a daily basis. I hope the examples of partnership working contained in this report inspire you to think differently about tackling inactivity.

Kieran Harding

Managing Director, Business In The Community

Director, Spirit of 2012



I grew up in a small coastal town in the north of Scotland. As a teenager struggling with my mental health, I stopped taking part in physical activity as a participant. Around the same time, I was lucky to be introduced to a sports leadership programme through Active Schools, a scheme run by sportscotland. The opportunity gave me something positive to focus on and I loved being able to lead and assist at sessions to help more young people become physically active. Being involved in the programme was transformational for my confidence, self-esteem and most importantly my mental health and wellbeing. I haven't looked back, and now dedicate both

my career and my volunteering time to getting people active and promoting the benefits of it for their overall wellbeing. I urge both sporting and non-sporting organisations to adopt the principles in this report, and to provide your volunteers and employees with the training and support they need to put them into practice.

Kirsty Ewen

Physical Activity Partnership & Development Coordinator, Scottish Association for Mental Health (SAMH)

Regional Manager, Scottish Disability Sport and High Life Highland Director, Spirit of 2012

EXECUTIVE SUMMARY

Changes in the way we work and live mean that the UK's population is now more physically inactive than at any time in history. Today, 14.5 million UK adults are classed as physically inactive in that they undertake less than 30 minutes moderate physical activity each week. This is nearly 28% of the UK populationⁱ. Some 45% of UK adults say they struggle to keep fitⁱⁱ. Older people, disabled people, some minority ethnic groups and those from lower socio-economic grades are more likely to report being physically inactive. Some people become inactive due to changes in their lives – transition points – such as leaving school, having a child or experiencing an injury or illness. There are also seasonal and place-based variations in physical inactivity.

Physical inactivity is associated with an increased risk of depression, dementia, some cancers, cardiovascular disease and type 2 diabetes. Being overweight or obese puts people at greater risk of dying from a number of health conditions including COVID-19. The fiscal and economic costs of physical inactivity are huge and for these reasons successive governments have invested considerable amounts of money in trying to reduce physical inactivity, often with limited success. Levels of physical inactivity have barely shifted since 2012.

Yet there are successful grassroots initiatives that have a sustained impact in getting the least active people to become more active

and stay active, including projects funded by Spirit of 2012 and our partner organisations such as Sport England, sportscotland, the Scottish Government, Robertson Trust and London Marathon Charitable Trust. What characterises this successful work is a set of **eight principles** that target the least active and make it more likely that physical inactivity is reduced. This report brings together evidence from projects that Spirit of 2012 has funded and from which these principles have been derived. It also draws on focus-group evidence and a nationally-representative survey of 2,326 UK adults undertaken by ICM between 1 and 4 March 2022.

The principles we set out in this report will be familiar to organisations working in sport and physical activity, but it is important to share them with a much wider range of organisations than those directly involved in planning and delivering sports or physical activity sessions. Increasing people's physical fitness is now a priority area in many parts of government across the UK. At a local authority level, people working in education, community services, leisure, transport and planning may be involved in work to increase levels of physical activity.

This report is for a broad range of policy makers in central and local government, civil society organisations, employers and opinion formers.

EIGHT PRINCIPLES UNDERPINNING SUCCESS

1. Use a person-centred approach that is tailored to individual differences and needs.

There are many causes of physical inactivity. These include (i) individual characteristics and attitudes, such as intrinsic ability, age, confidence and motivation (ii) the family and social environment (iii) the neighbourhood environment (iv) institutional factors and (v) public policy factors, for example local and national policies that encourage or discourage physical activity. Research shows that the most important factors that impact on people's propensity to be physically active or take part in sport are free time, motivation, confidence and peer supportⁱⁱⁱ. Just 36% of those who responded to the Spirit of 2012 survey said that they *'would feel confident to turn up at a sports club or an exercise class by myself'*.

But everyone is different – some people may face few or no barriers to being active, while others may face substantial hurdles. It is essential that programmes promoting physical activity adopt a person-centred approach where individuals are placed at the centre of services. It is not a 'one size fits all' or 'if you build a leisure centre they will come' approach. Rather, staff delivering classes or sessions must understand and respond to the different factors that contribute to different people's inactivity.

2. Use sport and physical activity to achieve positive change – improving people's mental and social wellbeing alongside their levels of physical activity.

Motivation and confidence are some of the largest barriers to being active. Yet if people feel good about taking part in a sport or physical activity, or if they feel it has changed their lives, they are more likely to go on taking part. This is particularly true for those who are least active. We know from our evidence that the intentional use of sport and physical activity can achieve positive individual and community change and improve people's mental, physical and social wellbeing. It can also lead to wider social outcomes around inclusion, social connectedness and skills & learning.

36%

of people feel confident to turn up to a sports club or exercise class by themselves

3. Take people on a journey of small steps to physical fitness.

The journey to becoming active must start with activities that are appropriate to people’s initial levels of fitness. Participants in group activities and those undertaking physical activity by themselves must be supported to set realistic goals. Many people will experience setbacks in their path to becoming active and some people will need more intensive support than can offered in large classes or through individual programmes such as NHS Couch to 5K. This means that it is usually more costly per head to fund programmes for the least active than to fund work that aims to increase overall levels of participation in sport.

4. Build social elements into projects to encourage motivation.

People are more motivated to start and carry on sport and physical activity when they enjoy it, and when they receive encouragement from their peers or their family. Building social and fun elements into programmes that aim to get people more active is a key to success, for example, offering refreshments before or after a session. It is important to make sure that those who run classes or groups spend time to welcome newcomers. Enabling family and friends to be included in the activity sessions, as participants or volunteers, also builds in peer-to-peer support.

5. Embed social activity into daily routines.

An effective way to encourage greater physical activity among the least active is to embed physical activity into daily routines: at work, in education settings, in the home and by walking and cycling where possible. To achieve success, ‘active lifestyle programmes’ need to be based on the principles outlined in this report, taking people through a journey of small steps and building in social support, for example.

Gardening, housework, walking dogs and play are opportunities for moderate physical activity. Indeed, nearly two-thirds of people (63%) who live with dogs agree that they usually manage to walk or cycle more than 30 minutes every day, compared with 43% of the overall

population. During lockdown many millions of people walked or cycled more than usual. Up to 5.2 million of the least active people may have become more active as a consequence of maintaining their lockdown walking habits. It is essential to take action now – before these habits are lost – and to build on the popularity of lockdown walking, cycling and gardening.

5.2 MILLION
of the least active people may have become more active as a consequence of maintaining their lockdown walking habits.

6. Use effective communication.

Almost everyone agrees that children and adults need to move more and sit less, but the challenge is to use persuasive communications which consider the target group, how best to reach them, the content and format of messages and the best messengers.

Messages that are framed positively and highlight the social and enjoyable aspects, as well as the physical benefits of being active, are better at persuading people to get involved than threat-based language. Relatable members of the public are the most effective messengers of public health communications. People are most likely to be persuaded to change their behaviour by seeing people that look like them and reflect their local community in information materials.

Community and sporting events are opportunities to deliver public health information about keeping active.

7. Work in partnership across sports and non-sports organisations to reach the least active.

Many different organisations have a stake in work to get people active, not just those involved in sport and physical activity. At a local level these organisations include councils, GP surgeries, employers, educational institutions, faith and civil society organisations. It is often GPs, and faith and civil society organisations that have the best links with those who are the least active, as well as the greatest understanding of their reasons for inactivity. Sports and physical activity organisations should be encouraged to partner with non-sporting organisations like local health providers, faith and community organisations to reach and engage those who are least active.

8. Build a skilled and motivated staff and volunteer workforce.

In 2020 the UK sports and physical activity sectors are estimated to employ 585,000 people. It is a diverse workforce in relation to the jobs that people do, their qualifications and the terms and conditions of their employment. The sports and physical activity sectors employ high proportions of sessional coaches and freelancers. Grassroots sport and physical activity is also heavily dependent on the time of volunteers, with about 2.9 million people thought to volunteer in sport every year.

The success of programmes which aim to encourage people to become active depends on their success in upskilling their workforce and on their ability to apply the principles outlined in this report. It is essential that these principles are incorporated into induction, professional development and vocational training courses, as well as training for volunteers.

RECOMMENDATIONS

Looking ahead there are many opportunities to apply these principles in practice. Across the UK more people are being referred to activity classes through social prescribing, where health professionals refer patients for support in the community in order to improve their health and wellbeing. The Levelling Up agenda aims to reduce social disparities. In England, an imminent health disparities white paper will be an opportunity to address some of the inequalities in levels of physical activity.

Spirit of 2012's research suggests that there is also room for policy change, which if implemented would lead to significant reductions in the proportions of adults who are physically inactive.

Many more non-sporting organisations need to take responsibility for encouraging active lifestyles, including employers, schools, colleges and universities, faith and local civil society organisations.

Spirit of 2012 recommends:

1. The governments of all four nations of the UK put in place up-to-date physical activity strategies that take into account the impacts of COVID-19. These strategies should address high levels of physical inactivity among disabled people – a disparity that has widened as a consequence of COVID-19. Such strategies should set ambitious targets to increase levels of physical activity among people who are the least active, and encourage the adoption of the eight principles set out in this report.
2. Sports and public health ministers across the UK should jointly provide annual reports to their parliaments on physical activity, including data on progress in reducing inactivity in different sectors of the population.
3. Physical activity interventions should better target people at 'transition points' in their lives. These include puberty, when many teenage girls drop out of sport, young people leave school, when they face new caring obligations, late middle age and old age, or after experiencing a disabling illness or injury.
4. Many more non-sporting organisations need to take responsibility for encouraging active lifestyles, including employers, schools, colleges and universities, faith and local civil society organisations. The sports and physical activity sectors should partner with these organisations to reach and prioritise those who are less active.
5. Social prescribing link workers and sport and physical activity programmes should work in partnerships based on an understanding of effective approaches in reducing inactivity and applying the principles in this report.
6. Governments, sports councils, the public health sector, including the social prescribing movement, faith and civil society organisations should take immediate action to build on the popularity of lockdown walking, cycling and gardening, using the principles outlined in this report.
7. National public health and sports bodies should be funded to work with behavioural science and advertising expertise to create a stronger body of evidence around effective communications approaches that encourage physical activity. This must be backed up with a programme of work to disseminate this evidence to those delivering sport and physical activity programmes.
8. Community and sporting events should be better used to deliver public health messages and information about local classes and activities which start people on their journeys to becoming more active.
9. Stakeholders should be brought together to review the curriculum and progression routes of training courses that focus on wellbeing, and on sport and fitness, to make sure that staff and volunteers understand and can apply the principles set out in this report.
10. Government and philanthropic funding should be made available to address inequalities in health and wellbeing outcomes that arise from physical inactivity. Such funding streams should deliver the principles set out in this report in practice. Funders should recognise that the per head cost of increasing levels of physical activity among the least active is usually higher than among the overall population.

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PART ONE CONTEXT

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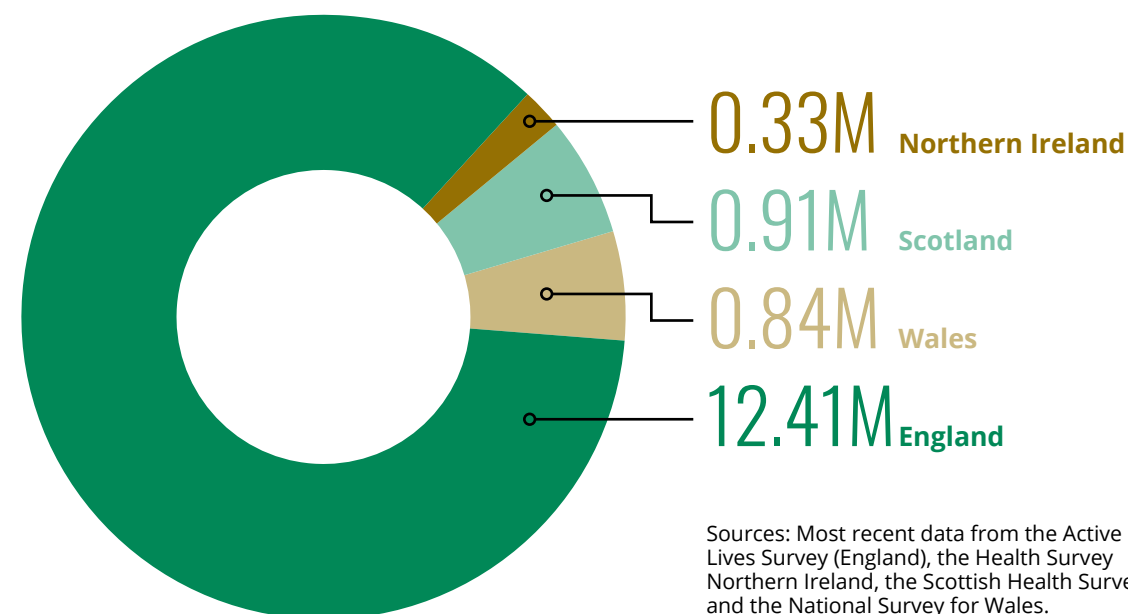


INTRODUCTION

Over the last 100 years there have been major changes in the way we work and live. The 1921 Census records the most common jobs undertaken by men as coal mining, farming and construction. While a lower proportion of women worked outside the home, household tasks demanded that they too were physically active. But in most wealthy and middle-income countries technological and social changes have meant that there has been large decline in jobs requiring moderate physical activity, as well as being active in the home. Moreover, the time we spend online has increased year-on-year, with UK adults spending an average of 3 hours and 37 minutes online and physically inactive in 2020^{iv}. Children, too, have become less physically active.

These social changes mean that a high proportion of the UK population is now physically inactive. The Chief Medical Officers of England, Northern Ireland, Scotland and Wales define physical inactivity as undertaking less than 30 minutes of moderate physical activity each week. Today, some 14.5 million people across the UK are classed as physically inactive (Figure 1). This figure has barely shifted in recent years.

Figure 1: Physically inactive adults, estimated total UK population

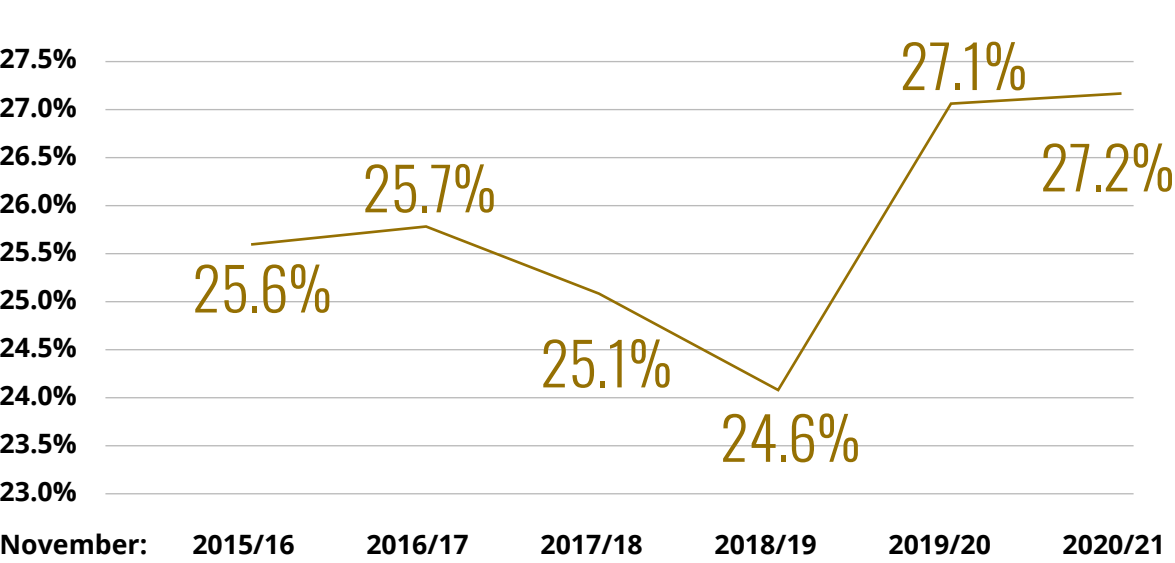


Attitudes towards physical activity develop when we are children, yet in England the Active Lives Survey suggests 32% of children and young people did less than 30 minutes a day of physical activity^v.

The costs of physical inactivity are widely recognised, with the UK Government estimating that physical inactivity is associated with 1 in 6 deaths in the UK, as well as an increased risk of depression, dementia, some cancers, cardiovascular disease and Type 2 diabetes. Physical inactivity is thought to cost the UK some £7.4 billion annually, including £0.9 billion to the NHS alone^{vi}. Physical inactivity is strongly associated with being overweight or obese, with 64.2% of adults^{vii} and 40.9% of Year 6 children^{viii} in England now falling into these categories. Being overweight or obese puts people at greater risk of dying from a number of health conditions including COVID-19.

Successive governments have invested considerable sums of money in trying to reduce physical inactivity, with little success. The legacy programme of the London 2012 Olympic and Paralympic Games was meant to *inspire a generation* with the bid promising to *‘increase school-based and grass roots participation in competitive sport – and to encourage the whole population to be more physically active.’* The evaluation of the London 2012 Games showed that 750,000 more people took part in sport after the London 2012 Games, but in the 10 years since 2012 there has been no significant reduction in the proportion of the population who are physically inactive.

Figure 2: Proportion of the over-16 population classed as physically inactive, 2015-2020



Source: Active Lives Survey.

Spirit of 2012’s response to physical inactivity in the UK

There are successful grassroots initiatives that have had a sustained impact in getting the least active people to become more active. Some of this work has been funded by Spirit of 2012, an organisation that was founded as the social legacy funder from the London 2012 Olympic and Paralympic Games.

One of our main areas of funding has been to projects that aim to get people more active. We have done this by investing in local communities across the UK through the Legacy 2014 Physical Activity Fund, Changing Lives through Sport and Physical Activity Fund (Changing Lives Fund), Sporting Equality Fund, Sport and Physical Activity Challenge Fund and Get Out Get Active (GOGA) programme.

The Changing Lives Fund is a partnership between the Scottish Government, sportscotland, the Robertson Trust and Spirit of 2012. It funded both sporting and non-sporting organisations to work in their local communities to help people become and stay active and to use sport and physical activity to intentionally bring about change for individuals and communities. GOGA is a long-term programme funded by Spirit of 2012, Sport England and the London Marathon Charitable Trust, and delivered by Activity Alliance, Scottish Disability Sport, Disability Sport Wales and Disability Sports NI. It brings disabled and non-disabled people together to take part and enjoy sport and recreational physical activity.

We have invested in a broad range of projects to get people active as we believe supporting people to take part in sport and physical activity is good for their social, physical and mental wellbeing. It can also help change perceptions of disability and

bring communities together, making them more cohesive.

This report brings together learning and evidence from Spirit of 2012’s investment in active projects to date. We have drawn on this learning to develop a set of principles which we know work and can help the least active people become more active. Increasing physical activity is now a priority area for government in all four nations of the UK. Spirit of 2012 believes that if the principles used by its most successful projects are more widely adopted, more people will become, and stay, active.

The principles we set out in this report will be familiar to many of Spirit of 2012’s partner organisations who work in sport and physical activity. But we felt it was important to share them with a much wider range of organisations than those directly involved in planning and delivering sports or physical activity sessions. Increasing people’s physical fitness is now a priority area in many parts of government across the UK. At a local authority level, people working in education, community services, leisure, transport and planning may be involved in work to increase levels of physical activity. This report is aimed at policy makers in national and local government, civil society organisations, employers and broader opinion formers as well as those who deliver sport and physical activity.

Our evidence

In writing this report, Spirit of 2012 has drawn from four sources of evidence. As already noted, we have based this report on the learning and evidence from the projects that Spirit of 2012 has funded. Spirit of 2012 has also reviewed literature relevant to this area, including quantitative data such as the Active Lives Survey and the Scottish Health Survey.

Third, we undertook three online focus group discussions with members of the public who were selected to be broadly representative of their local area in relation to gender, age and social grade, using a professional market research company. In selecting participants, we used a screening question, as we did not include people who considered themselves to be very physically active. The three groups drew people from:

Group 1 – Leicester, where half of the group were from minority ethnic communities and the remainder were white British.

Group 2 – the North East

Group 3 – Northern Ireland, where the group represented the different faith or political traditions.

Participants were asked about their levels of physical activity, including the impact of COVID-19 on their participation and on their behaviour. Participants also discussed the barriers they faced to taking part in physical activity, as well as approaches that would encourage them to be more active. This enabled us to test our eight principles with the public. The discussions also probed people's understanding of public health advice on physical activity. More information about the focus groups is included in the appendices, including the screening question and the themes explored in the discussion.

Finally, Spirit of 2012 commissioned a nationally-representative survey. This was undertaken by ICM between 1 and 4 March 2022 and sampled 2,326 UK adults, with the sample including survey boosts in Northern Ireland and Scotland. The survey covered the same themes as the focus group discussions. The findings are discussed throughout the report and given in full in the appendices.

This report

This report comprises three parts. Part One, which includes this chapter, sets the context. In the next chapter we examine the scale of physical inactivity, and the social groups which are most likely to be inactive.

Part Two of the report examines successful approaches to becoming active, setting out eight principles which underpin success.

Part Three of the report summarises and discusses the findings. It also makes ten recommendations, which if adopted, Spirit of 2012 believes would significantly increase levels of physical activity in the UK.

We have taken the decision to mostly focus this report on adults. This is because increasing levels of physical activity in children justifies a report in itself. However, we touch on schools, as habits formed in childhood influence how active we are in adult life.

The report talks about '*sport*' which we define as organised competitive games, which take place at a grassroots recreational or competitive level, or at an elite level. We have used the term '*physical activity*' to describe moderate or vigorous bodily movement that takes place outside sport. It can involve recreational pursuits such as dancing, or activities that are part of everyday life such as gardening or walking to work. In this report we refer to physically inactive people as those who do not regularly undertake the recommended amount of physical activity each week.

WHO IS PHYSICALLY INACTIVE AND WHY?

The Chief Medical Officers in England, Northern Ireland, Scotland and Wales recommend 150 minutes moderate physical activity each week or 75 minutes vigorous activity (see Figure 5 on page 43). While this benchmark can be discouraging for people trying to get fit, it provides a useful measure of the UK's health.

Based on how much activity people report that they do, the adult population can be categorised into three groups:

1. People who are physically active, because they say they undertake more than the above recommended levels of physical activity.
2. People who are fairly active, because they say they undertake between 30 and 149 minutes of moderate physical activity each week.
3. People who are inactive^{ix} because they say they undertake less than 30 minutes moderate physical activity each week.

Today, national statistics suggest that about 14.5 million UK adults are classed as physically inactive – nearly 28% of the overall UK population^x. This figure is likely to be higher, as people tend to over-estimate their levels of physical activity when asked to self-report. Indeed 45% of those who responded to the Spirit of 2012 survey agreed that they 'usually struggled to be physically active every day, or to take part in sport' and 45% of adults agreed that they struggled to keep fit^{xi}. However, people who are inactive are not a homogenous group. This is why taking a person-centred approach to supporting them to become active is more successful.

45%

of those who responded to the Spirit of 2012 survey agreed that they 'usually struggled to be physically active every day'

Variations in physical inactivity by gender, age, disability, ethnicity and place of residence.

While 28% of adults are inactive, there are considerable variations in levels of physical activity between different social groups. Survey data enables us to understand these differences, enabling those who work in sport or public health to target their work. In the UK, the largest survey about physical activity is Sport England’s Active Lives Survey^{xii} comprising over 170,000 responses each year. The size of this survey enables a detailed analysis of physical activity and participation in sport and below we present a summary of trends in England. The Health Survey Northern Ireland, the Scottish Health Survey and the National Survey for Wales ask similar questions in relation to physical activity and show similar trends, but these three surveys have a proportionally smaller sample size per head of population and ask fewer questions about participation in sport.

The Active Lives Survey shows that there are only small differences in levels of physical activity between men and women, but suggests that women are less likely to take part in competitive sport. However, there are differences in physical inactivity across social grades, with 17.8% of people in higher social groups^{xiii} categorised as physically inactive, compared to 26.5%^{xiv} of those in middle social groups and 36.2% of those in low social groups^{xv}.

28%

of adults are inactive, there are considerable variations in levels of physical activity between different social groups.

Disabled people are more likely to report being physically inactive, with 42.4% doing so in the most recent Active Lives Survey^{xvi}. This figure is supported in Spirit of 2012’s survey which suggests that 61% of disabled people said they struggled to keep fit, compared with 37% of people who said they were not disabled. Some 28% of respondents said that they had a disability or injury which made it difficult for them to exercise^{xvii}.

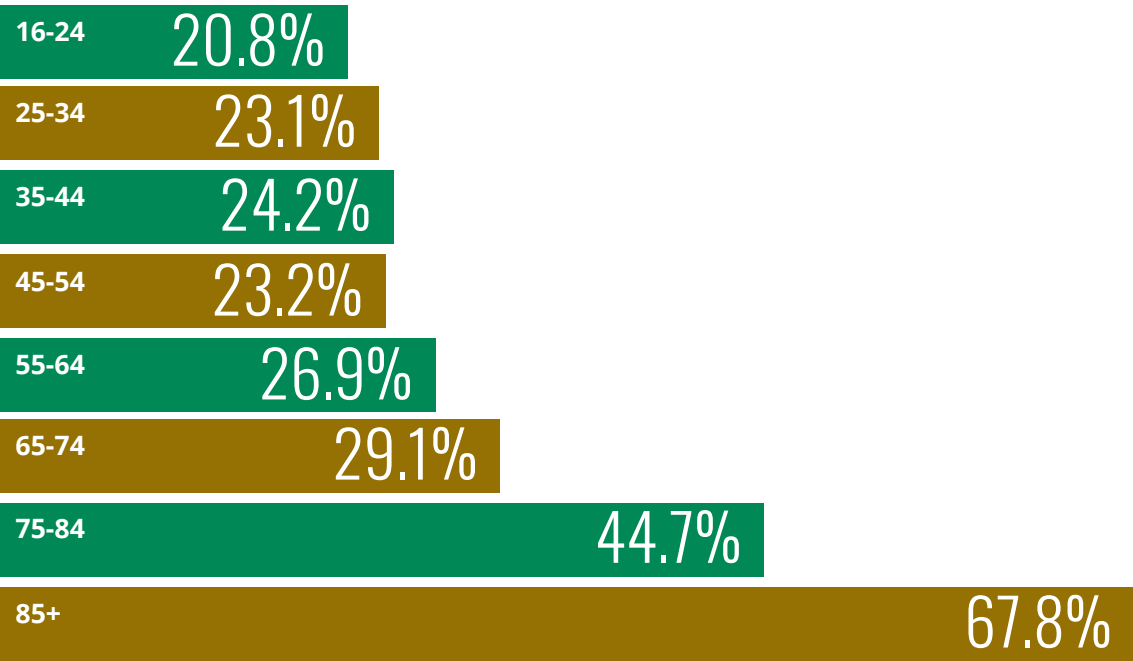
There are also differences in physical inactivity among different ethnic groups, with those of white British, white other and mixed-race ethnicities having below average rates of physical inactivity, while adults of Black, Chinese and Asian ethnicities having higher than average rates of inactivity. Levels of physical inactivity are highest among British Asians at 37.5%^{xviii}.

Impact of geography – there are place-based differences in levels of physical inactivity, which the Active Lives Survey is large enough to highlight. In England there are 29 local authority areas where more than 35% of the population reported being physically inactive in 2021 (Table 3). There are also some differences in levels of physical inactivity by characteristics of the place that people live. In the 2019, some 34% of adults in the most deprived 10% of areas of England were classified as inactive, compared with 24.7% of all adults. People who live in rural areas are more likely to report being physically inactive, although this may reflect the age composition of rural areas^{xix}.

Table 3: England local authority areas where more than 35% of the over 16 population report being physically inactive

Region	Local authority
East of England	Fenland, Great Yarmouth, Ipswich, Kings Lynn, Luton, Tendring
East Midlands	Boston, Oadby and Wigston, South Kesteven
London	Barking and Dagenham, Hillingdon
North East	Hartlepool
North West	Blackburn with Darwen, Blackpool, Knowsley, Pendle, Rochdale
South East	Slough
South West	None
West Midlands	Sandwell, Stoke-on-Trent, Walsall
Yorkshire and the Humber	Hull, North Lincolnshire

Figure 4: Levels of physical inactivity by age, England 2020-2021 (proportion of people doing less than 30 min activity per week)



Source: Active Lives Survey, May 2020-May 2020.

Impact of age – physical activity decreases with age and physical inactivity increases (Figure 4), rising from 20.8% among 16-24 year olds to 67.8% among those over 85 years old. This is not a steady rise. The focus group discussions suggested that there are transition points, when people are at greater risk of becoming inactive due to a change in their lives. Many people discussed transition points in the focus groups, suggesting that they may fall:

- At puberty soon after the transition from primary school, when girls, in particular, become more conscious of their body and disengage from sport^{xx}.
- When young people leave school and no longer have formal sports activities provided for them.
- When people face caring responsibilities on top of their working day, for example, after children are born or when family members require care.
- When people experience an injury or serious illness particularly in middle age or as an older adult.

“I think youngsters are generally more active. But I think that roughly around the age of 30, there are less opportunities available. Maybe you’ve come to the end of whatever sport you play, and you ask yourself what it is the next step.”

Participant in North East Focus Group.

Programmes to reduce physical inactivity need to target people at these transition points.

The impact of COVID-19 on physical activity

“Pre-COVID I used to do modern jive dancing, although I have two left feet and I can’t dance to save my life. But I used to enjoy that because I got to meet new friends. Unfortunately, I got COVID On Christmas Day of 2020. It nearly killed me four days later. I have never had any health conditions, but it felt like a tonne of bricks. I’ve had to change my whole routine. I used to go to the gym once or twice a week before COVID. I have only just started exercising again three weeks ago. Just go for walks, not long walks half an hour tops.”

Participant in Leicester focus group.

Figure 2 shows that levels of physical inactivity increased in 2020, most likely due to the impact COVID-19. People were unable to meet up to take part in competitive sport and many recreational activities. Many disabled people and those living with health conditions were forced to self-isolate. Just over a third (34%) of respondents to Spirit of 2012’s survey reported that their overall levels of physical activity had decreased since March 2020. Londoners (43%), disabled people (44%), 18-24 year olds (45%) and 25-34 year olds (40%) were more likely to report that their overall levels of physical activity fell in March 2020.

The Active Lives Survey shows that many existing inequalities have been widened, with some groups hit much harder by the pandemic than others. This is the case for women, younger people aged 16-34,

over 75s, disabled people and people with long-term health conditions, and those from Black and Asian ethnic backgrounds. The most recent Active Lives Survey suggests a 5% increase in inactivity levels among disabled people, compared with May 2019-May 2021 data. Narrowing these inequalities in levels of physical activity must be a priority area for governments across the UK, as these inequalities lead to disparities in people’s health, wellbeing and healthy life expectancy.

The lockdowns of 2020 and 2021 also changed how people were active. Some 32% of those who took part in Spirit of 2012’s survey agreed that they ‘walked, cycled or ran more than usual during lockdown and have continued since lockdown restrictions ended. Among those who described themselves as being physically inactive, 22% of people reported that they walked, cycled or ran more in lockdown and have continued to do since then. In principle 5 (page 33) of this report, we argue that there is potential to build on the greater interest in walking and the outdoor environment since March 2020.

Understanding why people are inactive

“You know, when you come back from work, you’re really tired. And it’s really hard to kind of get motivated, you end up kind of watching TV or spending hours on your phone.”

Participant in Northern Ireland focus group.

There are differences both between different social groups in levels of physical inactivity and within social groups. It is important to address both types of disparity and the forthcoming health disparities white paper is an opportunity to do this in England. Addressing such inequalities requires an understanding of the causes of physical inactivity. Perhaps the most useful framework for understanding factors associated with physical inactivity is an ecological model which recognises the multiple levels of influence on our behaviours^{xxi}. Physical inactivity may be influenced by:

- **Individual characteristics and attitudes**, such as intrinsic ability, age, disabilities or illness, education, body image, memories, for example, of school PE, confidence and motivation. Possession of suitable clothing and footwear can also be an individual barrier to physical activity for some people.
- **The immediate family and social environment**, such as peer social norms that encourage or discourage physical activity, interactions with other people who can provide social support, or time demands due to work or caring responsibilities.
- **The neighbourhood environment**, for example, ease of access to sports facilities, safe walking and cycling routes, the presences of sports clubs or local faith and civil society organisations.
- **Institutional factors**, for example, practices in schools, workplaces and civil society organisations which constrain or promote physical activity.
- **Public policy factors**, for example local and national policies that encourage or discourage physical activity.



There are many factors that influence people's propensity to be inactive. The impact that these factors have can differ by age, social grade and ability. For example, poorer people may be less likely to live in an environment where they feel safe, and may not be able to afford gym subscriptions or specialist equipment. Parents are more likely to be time-poor, with Spirit of 2012's survey showing that 55% of those with children under 18 agree that *'it is difficult to find enough time in the day to play sport or take part in activities that would keep me fit'* compared to 39% of all adults.

There is extensive literature that examines the causes of physical inactivity. This shows that the most important factors that impact on people's propensity to be physically active or take part in sport are free time, motivation, confidence and peer support^{xxii}.

We believe that confidence is a significant barrier to physical activity, and is affected by other factors such as body image, past experiences or intrinsic ability. It is a factor highlighted in many of Spirit of 2012's project evaluations^{xxiii} as well as being mentioned in all the focus groups. There are personal aspects of confidence, for example, levels of self-esteem. There are also social aspects of confidence such as people's ability to express their needs or views in social settings. Confidence can also have a physical component, for example, confidence in using a piece of gym equipment. Personal, social and physical confidence all seem to be barriers to taking part in sport or a physical activity. Just 36% of those who responded to the Spirit of 2012 survey said that they *'would feel confident to turn up at a sports club or an exercise class by myself'*. This figure was lower among the over 55s, women (30%), those in social grades C2, D and E (28%) and people who said they were physically inactive (21%).

Of course, factors such as nearby leisure centres, or free or low-cost access to fitness equipment do have an impact on people's propensity to be physically active. While major sporting events do not automatically increase physical activity levels, they can provide a platform for investment in grassroots sport facilities that is sorely needed. Some 27% of survey participants ranked *'fitness equipment and free sports facilities in a park near my home or work'* as one of the top three practices that would encourage them to be more active^{xxiv}. But without addressing factors such as confidence, greater investment in facilities and equipment is likely to have a limited impact on encouraging the least active people to become more active.

"A big thing is confidence. The thought of going into, like, a class and not being able to perform as well as, like, your peers. That really puts me off."

Participant in Leicester focus group.

It is clear from literature – as well as learning from Spirit of 2012's funded projects – that the public fall into three groups

- (i) people facing no significant barriers to physical activity
- (ii) those for whom the most significant constraint is their availability of free time, and
- (iii) people who face multiple barriers to physical activity. This group includes many disabled and older people, as well as people experiencing poor mental health. Addressing physical inactivity in this group may require a greater funding investment than among people who are merely time poor, but there may also

be greater returns on this investment in terms of greater labour market participation and reduced demand on health services^{xxv}.

In the next section of this report, we examine how to address factors that limit people's propensity to be physically active, particularly for those who face multiple barriers to being active.

Key points

- Older people, disabled people, some minority ethnic groups and those from lower socio-economic grades are more likely to be physically inactive.
- Some people become inactive due to changes in their lives – transition points – such as leaving school, having a child or experiencing an injury or illness. Programmes to reduce physical inactivity need to target people at these transition points.
- COVID-19 has increased levels of physical inactivity in some groups more than others, including women, younger people aged 16-34, over 75s, disabled people and those from many minority ethnic backgrounds. The lockdowns of 2020 and 2021 also changed how people were active, with more people walking and cycling at this time.
- A range of individual, family and peer group, neighbourhood and institutional factors influence people's likelihood of being inactive, of which the most important are free time, motivation, confidence and peer support. Addressing physical inactivity requires using person-centred approaches that understand and respond to these factors.

PART TWO

SUCCESSFUL APPROACHES TO ENCOURAGING PHYSICAL ACTIVITY

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TAKE A PERSON CENTRED APPROACH

"You need to be confident if you are joining an exercise class, that is, if you are going by yourself. Most people would like to join with a friend. Money is an issue as well, because if you want to do it twice a week, and you've got to pay each time."

Participant in North East focus group.

A range of individual, family, neighbourhood, institutional and public policy factors impact on people's likelihood of being physically active. Yet the extent to which these factors affect people differs considerably from person to person. As previously noted, some people may face few or no barriers to being active, while others may face substantial hurdles.

It is essential that programmes promoting physical activity take into account individual differences. **Our first principle that underpins success in getting the least active people active is a person-centred approach that is responsive to individual differences.** This means that individuals are placed at the centre of services. It is not a 'one size fits all' approach. Rather, staff delivering classes or sessions must understand and respond to the different factors that contribute to different people's inactivity.

Motivation and confidence emerge as some of the largest barriers to being active. Yet if people feel good about taking part in a sport or physical activity, or if they feel it has changed their lives, they are more likely to go on taking part. This is particularly true for those who face multiple barriers to physical activity, or for people who did not enjoy sport at school.

We draw from two projects funded by Spirit of 2012 to demonstrate how these principles have been put into practice.

A PERSON CENTRED APPROACH – COMMUNITY STRIDES

Community Strides was a project delivered by the Scottish Association for Mental Health in partnership with Jog Scotland. The project was funded by Spirit of 2012 through the Changing Lives Through Sport and Physical Activity Fund. This was a partnership between the Scottish Government, sportscotland, the Robertson Trust and Spirit of 2012.

The project team set up jogging groups in four cities across Scotland, working closely with community-based organisations with specific expertise in working with women from minority ethnic communities. These women experienced a number of barriers that prevented them from taking part in physical activity, which included caring responsibilities, social confidence fear of being seen outdoors and by men, and access to suitable footwear and clothing. Many of the women also remembered negative experiences of sport at school or had negative views about sport in Scotland^{xxvi}.

The project was based on an understanding of the specific barriers which participants faced. From the start, staff spent time listening and trying to

understand participants' backgrounds and experiences. In doing this, trust was built and participants felt more comfortable taking part in physical activity. Some 88 women took part in Community Strides and all of them reported they felt healthier and were more physically active at the project's end.

Participants were also encouraged to volunteer as 'community champions', acting as role models for other women in their communities and encouraging them to jog or take part in other physical activities. The project team found that based on the presence of strong role models, other women felt more confident joining their local jogging group. All of the women said that they enjoyed going to the sessions because the group was friendly, inclusive and welcoming.

One community champion, after joining her local jogging group, encouraged ten other women to join. She took part in a discussion panel as part of Women in Sport week, and was subsequently shortlisted for an award at the Scottish Women in Sport awards.

Key points

- The most successful projects in increasing levels of physical activity are those that adopt a person-centred approach that is responsive to individual differences, and those that explicitly plan to improve people's wellbeing alongside their levels of physical activity.

PLAN FOR WELLBEING - THE STEP FORWARD PROJECT

STEP FORWARD

Our second principle that underpins success in getting the least active people active is to use sport and physical activity to achieve positive change and improve people's mental and social wellbeing alongside their levels of physical activity. This, too, requires planning.

"I felt low, I lacked motivation to do things and didn't think physical activity could help. I knew I wanted to get active but it seemed so hard to take the first step, at times it felt hopeless. Joining GOGA and working with Morris has actually changed my life. He was there alongside me when I took my first step into yoga and slowly he helped me to set small goals, motivating me at each step. I now go to classes six times a week."
Stephen, a participant in a GOGA project in London.

"It gives me a reason to go out. It's good socially and is helping me feel better and stronger. The social aspect is good for my mental health. I'm used to being busy and I needed this to give me something to do."

Participant, Step Forward.

Step Forward was a project that used physical activity to achieve positive change and improve people's mental and social wellbeing, and through this approach maintained their motivation and engagement. The project was run by Springboard, and the Old Library Trust and worked with adults with long term health conditions in Creggan, Northern Ireland. The project was funded by Spirit of 2012 as part of a legacy programme from the Glasgow 2014 Commonwealth Games. It targeted men, women, parents of young children, older people and disabled people who were the least physically active and experienced the lowest levels of wellbeing.

Creggan is a large social housing estate on the outskirts of Derry. Its population is overwhelmingly from the nationalist community in a city that is rigidly segregated by tradition. Unemployment is significantly higher than the UK average

and Creggan is among the most deprived areas in Northern Ireland. A significant number of residents also report poor physical and mental health and experience loneliness and isolation.

The Step Forward project organised activities such as walking and exercise classes for those living with chronic conditions, and a Gaelic football session for girls. The project explicitly aimed to increase participants' social connectedness and wellbeing as well as their physical activity. Adults could sign up to the project themselves, or were referred to the project by GPs. As well as classes and walks, the project lead thought about how to reconnect people to the community through activities such as community litter-picking and gardening in the park.

Over 300 people took part in the project, with a notable increase in life satisfaction and reduction in loneliness and anxiety, as well as increased levels of physical activity. The project also increased people's confidence in their ability to take part in sport or physical activity, with 84% of participants saying they felt empowered to do so at the end of the Step Forward Project. There was a high retention rate, with few people dropping out of sessions, a factor attributed to the emphasis on improving participants' wellbeing. The project provided one-to-one support for those who needed it.

During the lockdowns of 2020 and 2021 there was an increase in demand for the Old Library Trust's services, and the project became oversubscribed as people struggled with financial pressures, the loss of loved one and their mental health. While many other local activities closed down, staff and volunteers at the Old Library Trust worked to see how they could continue to support participants while remaining compliant with COVID-19

restrictions. Exercise classes were organised online and the Old Library Trust also created its own YouTube Channel. The Old Library Trust also organised 'Exercise on the Streets' initiative – all done within social distancing guidelines. Here project staff and volunteers went to individual streets and encouraged over 1,400 people to exercise in their front gardens or on their doorsteps.

"All of the programs that we've been doing have a massive emphasis on socialising to help improve mental health. We have the opportunity to work with counsellors in here. So anybody that's coming on to the programme, if they really identifying as somebody who struggled mentally, we were able to refer them on to that. And also going forward we're going to have counselling budgets set aside for that, because for 90% of the people it's not just physical it's mental."

Project Lead, Step Forward.

Key points

- Programmes to reduce physical inactivity look different from those that aim to increase overall participation in sport, with the former putting much more emphasis on person-centred approaches and on boosting wellbeing.

2

A JOURNEY OF SMALL STEPS

Many people start the new year by making resolutions. Polling undertaken by YouGov in December 2020 showed that 'doing more exercise or improving my fitness' was the most popular new year resolution for 2021, with 53% of people who made resolutions putting it on their list, followed by 46% of people who wanted to lose weight^{xxvii}. Yet getting fit is the resolution that is most often broken, usually within a few weeks. Often, this is because people do not set themselves realistic goals, and become discouraged when they are unable to undertake activities, or because taking part leads to injury. The third principle that underpins success in getting the least people active is to take people on a journey of small steps to physical fitness.

3

"It all depends on motivation and setting realistic goals. So for me to lose weight so I can receive IVF, I've got an aim. So I've recently bought an exercise bike at home. So I'm going to start by using that in the evenings and returning to go more walks rather than choosing the car for ease. That will be a start, then I will go back to swimming."

Participant in Leicester focus group.

This journey to fitness must start with activities that are appropriate to people's initial levels of fitness. Participants in group activities and those undertaking exercise by themselves must be supported to set realistic goals.

The principle of a journey of small steps is recognised in the design of some fitness apps and in a number of existing fitness programmes. The NHS Couch to 5K programme, which includes an app, takes participants through a journey from to running five kilometres over a nine-week period.

Some people will need more encouragement than can be provided through the goal setting of individual programmes such as Couch to 5K. Many people also face setbacks in their path to greater physical activity. The activities in classes and groups must be flexible enough to accommodate people who have experienced setbacks. Those who

run activity sessions must also be skilled in giving encouragement, which can involve more intensive one-to-one or small group support. Government and philanthropic funding must reflect that this means that it is usually more costly to increase levels of physical activity among the least active than to increase overall levels of participation in sport.

Spirit of 2012 has encouraged many of the projects it has funded to incorporate the 'journey of small steps' into their work. In 2014, the Scottish Government worked with Spirit of 2012 to design a legacy programme for the Glasgow Commonwealth Games. This programme funded a number of Scottish organisations to focus their work on increasing physical activity among the least active. There was a recognition that for many people, the gulf between the Chief Medical Officers' 150 minutes of moderate activity every week and what they were doing was just too high. Separating people out into 'active' and 'inactive' categories also made it difficult to people to celebrate the progress they were making to become more active.

Shifting away from intimidating targets, and just focusing on getting moving, really worked for KA Leisure, who ran a walking programme in North Ayrshire as part of Legacy 2014. One participant, Debbie, had experienced poor mental health since childhood and has spent time in and out of hospital. Although she enjoyed walking, she didn't have the confidence or motivation to join a class or group and be active on a regular basis.

Debbie joined a fitness class and started slowly, bringing along a friend for support, and had one-to-one sessions with staff. Over the course of several months, she progressed from joining in activities to leading activities as a volunteer – both Gentle Movement classes and walking groups. Debbie said *"my confidence and self-esteem have improved and I feel able to go out more, meet up with friends and do more in everyday life. I felt very isolated before I joined the project. My closest friend has seen me at my lowest point and is amazed and extremely proud of the progress I have made."*

Key points

- This journey to fitness must start with activities that are appropriate to people's initial levels of fitness. Participants in group activities and those undertaking exercise by themselves must be supported to set realistic goals.
- Many people will experience setbacks in their path to physical fitness and some people will need more intensive support than can be offered in large classes or through individual programmes such as NHS Couch to 5K. This can involve more intensive one-to-one or small group support. This means that it is usually more costly per participant to fund programmes for the least active than to fund work that aims to increase overall levels of participation in sport.

"If you've got a good circle of friends they might encourage you and get you into a routine."

Participant in Leicester focus group.

MAKE IT FUN AND MAKE IT SOCIAL

Motivation is a major determinant of whether a person will begin and maintain their participation in a sport, or carry on undertaking physical activities such as daily walks. People will be more motivated to do this where activities are fun and they receive encouragement from their peers or their family. Evaluations of projects that have been funded by Spirit of 2012 show that they have been much more successful in maintaining the involvement of participants where they said they enjoyed the activities, made friends and felt that they were encouraged by their peers. This observation is backed up by an extensive body of research. The fourth principle that underpins success in getting the least people active is to build social elements into projects to encourage motivation.

4

Building in social elements to sports and physical activity programmes can be achieved in a number of ways:

1. Enjoyable taster sessions that spark people's interest. This is particularly important for people who do not enjoy sport. The 2020 Active Lives Survey suggests that just 31.8% of adults and 25.5% of women reported that they found sport enjoyable and satisfying. Adults' attitudes to sport are often based on their experiences of sport at school. Some 47% of respondents to the Spirit of 2012 survey stated that they did not enjoy sport at school^{xxviii}. This figure rose to 59% among women and 53% who stated that they were physically inactive. Taster activities need to overcome negative memories of sport at school.
2. Making sure that those who run classes or groups spend time to welcome newcomers and have the skills to make everyone feel included. Some 25% of survey participants ranked *'knowing that staff running activities were friendly and welcoming'* as one of the top three practices that would encourage them to be more active. This was particularly important for disabled people, with 30% of them prioritising this, compared with 23% of those who did not have a disability. Women are also more likely than men to prioritise this factor (28% of women versus 23% of men)^{xxix}.

3. Scheduling in social time before an activity starts or after it has ended, for example, by enjoying refreshments together, celebrating birthdays or organising Christmas parties. Parkruns, which take place in over 750 UK locations, involve informal or organised socialising time after these Saturday events. Social time helps to build friendships within a group which in turn increases enjoyment and builds in peer-to-peer encouragement. Some 22% of survey participants ranked *'opportunities to socialise and have fun with my group after my sport or activity session has ended'* as one of the top three practices that would encourage them to be more active^{xxx}. For those planning projects targeted at the least active, it is essential to include budget for the social side of projects, covering for room hire and refreshments, for example.
4. It is important to talk to participants about how they feel: if they have enjoyed taking part, if the activities make people feel happier or less anxious. Such informal social conversations provide useful feedback for organisers. It also encourages participants to reflect on changes to their mood, and link this back to their participation.
5. Enabling family and friends to be included in the activity sessions as participants, volunteers or spectators. Participants might be encouraged to bring a friend to a group or class, for example. Activities can be organised so that a whole family can take part in them together. Some 27% of survey participants ranked *'sport/exercise groups/classes I could do with a friend, colleague or someone else I knew'* as one of the top three practices that would encourage them to be more active. Similarly, 19% of survey participants

ranked *'sport/exercise groups/classes I could do with my family'* as one the top three practices that would encourage them to be more active^{xxxi}.

6. Using people's pre-existing interests to inspire and encourage people to take part in activities. For example, football clubs have strong community connections and a loyal fan base. All league and many larger non-league football clubs run community activities, including walking football and fitness classes targeted at those who are less physically active. Participants are encouraged to take part through their interest in football and may be incentivised to carry on through free tickets.

Key points

- People are more motivated to start and carry on sport and physical activity when they enjoy it, and when they can receive encouragement from their peers or their family. Building social elements into programmes that aim to get people more active is a key to success.
- Fun taster sessions can spark people's interest. People's pre-existing interests can also be used to inspire and encourage people to take part in activities.
- It is important to make sure that those who run classes or groups spend time to welcome newcomers. Scheduling in social time after an activity session has ended can also increase participants' enjoyment of activities and builds in peer-to-peer encouragement. Enabling family and friends to be included in the activity sessions, as participants or volunteers, also builds in peer-to-peer support.



GET OUT GET ACTIVE

As already noted, Get Out, Get Active (GOGA) is a programme of work funded by Spirit of 2012 with Sport England and the London Marathon Charitable Trust, and delivered by Activity Alliance. It brings disabled and non-disabled people together to take part and enjoy sport and physical activities. Starting in 2016, GOGA has worked with partner organisations in 44 different local authority areas across the UK and involved over 1,500 volunteers.

GOGA's central tenant is 'be active together' highlighting the social aspects of the projects. The programme enables disabled people to be 'active together' with their friends and families, something that few disabled people have the opportunity to do. Designing activities that people can do together increases levels of peer encouragement and boosts motivation. Enjoyment is integral to the GOGA projects and another secret of their success. Social time is built into the sessions, alongside support to helping people find and stick to activities that work for them. As Adrian, a GOGA participant in Lincolnshire explained: 'I always been quite an active person. In my younger years, I was an avid footballer and enjoyed hiking. Unfortunately, all that changed when I broke my leg playing football. After numerous medical interventions and operations, I had my leg amputated below the knee.'

It was a tough time. I stopped doing any sort of physical activity, became unfit and struggled with asthma (which had not bothered me since childhood). It took a while to get to grips with wheelchair basketball. Once I got the hang of it, I started to feel both healthier and happier. After seeing me in action, my eight-year-old son wanted to have a go. He absolutely loves it; and would give up all his other activities in a heartbeat just to play wheelchair basketball with me. That is the beauty of the GOGA programme; it encourages families to be active together. It has really helped to change my son's perceptions of disabled people too'.

GOGA is on target to involve 40,000 people by 2023. Seven out of ten people who have already joined the project have previously been inactive. Retention data shows two out of three of regular attendees are sustaining their increased physical activity levels during and after the programme. Participants also reported improvements in their wellbeing, including their levels of anxiety. The experience of feeling happier after taking part in sessions also incentivised people to carry on. Furthermore, it is a genuinely inclusive programme with 32% of GOGA participants self-identifying as disabled. A social return on investment analysis showed that the GOGA programme generated £8.83 in wellbeing benefits for every pound spent. This was achieved by reducing demands on the NHS, increasing their wellbeing, volunteering and employability^{xxxii}.

BUILDING PHYSICAL ACTIVITY INTO DAILY ROUTINES

Over the last 100 years there has been large decline in the numbers of people whose employment requires physical activity. New patterns of leisure, greater car ownership and the invention of labour-saving devices have also meant that most people are less active in the home. Yet there is much potential to build physical activity into our daily routines: at work, in the home, in educational settings and while travelling.

The fifth principle that underpins success in getting the least people active is to embed physical activity into daily routines. This requires action from employers, in education settings, faith and civil society organisations to promote physical activity. It requires more opportunities for children and parents to be active together. It is also essential that central and local government deliver on their active travel commitments.

"It would be nice if some companies took on board the importance of a healthy body as well as a healthy mind. They're going to reap the benefits eventually, if they allow for fitness hours or whatever it may be. Bigger companies could do that, they can incorporate something a couple of times a week."

Participant in Leicester focus group.

5

Physical activity in the workplace

Spirit of 2012’s survey suggested that 29% of people agreed that they were physically active because of the job they did. Men and young people are more likely to be active in the workplace. Yet most people’s working lives are sedentary experiences, although there are many opportunities for employers to encourage greater physical activity. Some 24% of survey participants ranked ‘opportunities to exercise before or during my working day’ as one of the top three practices that would encourage them to be more active.

There are a number of ways that physical activity can be encouraged in workplaces. Employers can offer:

- Flexible working hours – such as the option of longer lunch breaks allowing time for a walk or run.
- Corporate gym or local leisure centre memberships – linking up with local leisure centres to offer discounts for employees. Some large employers have on-site gym facilities.
- Active travel to work which we discuss below.
- Lunchtime walk or jog clubs – giving employees the chance to get together and go on a planned route.
- Taking stairs instead of lifts.
- Walking and standing meetings.

There is a strong business case for embedding physical activity in the workplace, through decreased absenteeism, increased staff morale and greater productivity. One study suggested that if all employees met the Chief Medical Officers’ recommendations on physical activity, this could deliver up to £6.6 billion in direct productivity gains to businesses each year^{xxxiii}.

Some employers already recognise the benefits which promoting physical activity brings, and are supporting work to change their employees behaviour. In one focus group we were told about the sports facilities that the car manufacturer Nissan offered its Sunderland staff, which included a gym, sports hall and floodlit football pitches, as well as encouraging exercise breaks for office-based staff. The NHS has produced guidelines that aim to increase levels of physical activity among its staff^{xxxiv}.

We need more employers to encourage physical activity. However, the benefits of increased physical activity will not be realised, unless the least active staff are encouraged to be more active. Providing subsidised gym membership may not be an effective way of reaching this group. Rather, employers need to target this group intentionally, using the principles outlined in this report. Employers should consider how to incorporate physical activity into the working day and to promote active travel. There is also scope to partner with sports and civil society organisations to organise

In one focus group we were told about the sports facilities that the car manufacturer Nissan offered its Sunderland staff, which included a gym, sports hall and floodlit football pitches, as well as encouraging exercise breaks for office-based staff.

group-based activities or classes that take people through the journey of small steps to becoming more active. Such a programme of work requires leadership, through the involvement of government, organisations representing employers and through business voices to make the case for greater physical activity.

Educational settings

Although school support is not the primary focus of this report, there are opportunities to embed physical activity in the school day, outside of formal PE lessons. Similarly, colleges and universities can adopt measures to encourage greater physical activity.

Many schools already encourage active travel (see below). There are strong arguments for all schools to support active transport. Programmes that target children also have an opportunity to reach their parents, thus shifting the attitudes towards active travel among the adult population. There is also scope for the further and higher education sectors to become more actively involved in the active transport movement.

A significant number of school children do not enjoy competitive sport, particularly teenage girls, with recent research suggesting just 37% of girls aged 11-16 enjoyed sport^{xxxv}. Many schools offer dance or recreational physical activities for older pupils instead of competitive sport.

Schools need to adopt a ‘whole day’ approach to fitness, encouraging physical activity through PE, but also by incorporating physical activity into extra-curricular activities and school routines^{xxxvi}. Some schools run gardening or walking groups as extra-curricular activities. A few UK primary schools have adopted tracksuits as school

uniform, a practice that is still rare in the UK, although commonplace in China. In schools with a tracksuit uniform, teachers argue that the practice encourages physical activity throughout the day, and without the need to change for games and PE lessons.

Over 7,300 UK schools are now taking part in the Daily Mile where children run or jog at their own pace each day for 15 minutes. Evaluations of this initiative showed that it increased children’s strength and fitness, as well as improving their wellbeing and concentration^{xxxvii}. These are strong arguments for the Daily Mile to become the norm in all schools.

Physical activity in the home

Gardening, housework, walking or stretching during TV commercial breaks, dog walking and playing with children are opportunities for moderate physical activity in the home environment. Indeed, nearly two-thirds of people (63%) who live with dogs agree that they usually manage to walk or cycle more than 30 minutes every day, compared with 43% of the overall population. But changes to leisure practices and the use of domestic labour-saving devices have meant that children and adults are less physically active in the home environment than at any time in history. We believe there are now opportunities to reverse this trend by building on an greater appreciation of walking caused by COVID-19.

During the pandemic lockdowns, home-based fitness routines saw a growth in their popularity. The coach Joe Wicks used YouTube to livestream his *PE with Joe* sessions, with his channel being watched by over one million people. Many people who were forced to work from home also turned to walking, cycling or running to keep fit or to boost their wellbeing.

"I find working from home has allowed me to be as active as I want to be to be honest. I get up first thing in the morning and take a big walk with the dog because I don't have the commute to the city centre for work."

Participants in Northern Ireland focus group.

We have previously discussed how some of the projects that Spirit of 2012 funds encouraged physical activity in home environments during lockdown. In Northern Ireland, for example, the Old Library Trust organised online exercise classes and created its own YouTube Channel. The organisation also delivered the 'Exercise on the Streets' initiative, where project staff and volunteers went to individual streets and encouraged over 1,400 people to exercise in their front gardens or on their doorsteps. Staff and volunteers in a number of projects also gave their time to foodbanks and put information about physical activity in food boxes.

Some 32% of those who took part in Spirit of 2012's survey agreed that they 'walked, cycled or ran more than usual during lockdown and have continued since lockdown restrictions ended. Among those who were least physically active, however, just 22% of adults had continued to walk or cycle more since lockdown restrictions ceased. Nevertheless, this figure needs to be seen in context^{xxxviii}.

32%

of people agreed that they 'walked, cycled or ran more than usual during lockdown'.

22%

of adults had continued to walk or cycle more since lockdown restrictions ceased.

More than one in five (22%) of people who said they struggled to keep fit in the Spirit of 2012 survey have continued to be more active by maintaining their lockdown walking habits. People tend to over-report their levels of physical activity, but scaled up, the survey results show that up to 5.2 million of the least active people may have become more active as a consequence of maintaining their lockdown walking habits.

There are opportunities for local faith and civil society organisations as well as those involved in social prescribing to build on the popularity of walking and appreciation of green space, for example, by setting up walking groups and gardening groups. However, action needs to be taken now before people lose their lockdown habits.

There has been a recent growth in social prescribing in the UK, a practice where health professionals refer patients for support in the community in order to improve their health and wellbeing. Although social prescribing is a comparatively new practice in the UK, increasing numbers of people are being referred to walking and gardening groups, exercise classes and other fitness sessions^{xxxix}. To be successful, such initiatives need to be based on the principles outlined in this report. They need to take a person-centred approach and use physical activity to boost wellbeing. Successful projects take people through a journey of small steps to physical activity and build in social time and peer support, as described in the Care About Walking case study below.

CARE ABOUT WALKING

Care About Walking was a project delivered by Paths for All and funded through Changing Lives Through Sport and Physical Activity fund. The project worked with five care homes in Perth and Kinross in Scotland, aiming to improve older adults' physical health by encouraging them to walk more in and around their care homes.

Over lockdown, residents were no longer able to walk outside of their care homes, and so looked to use communal and social spaces within the homes. Residents were supported to set up gardening exercise and walking groups with help from Paths for All.

One care home worker said "I have three residents who do the exercises together nearly every day. They all have dementia and don't always get around all of the exercises. They all really enjoy it and encourage each other to keep going with the exercises. There is a gardening group who have really taken ownership of the outdoor space and they are deciding where the outdoor plants go. It will really help to get more of our residents enjoying the space, even those that are not gardeners. I hope that the families will also enjoy it next year, when we hope to welcome them."

A gardening group member said "I am really proud of our garden. I like to be outside, take a walk and sit to listen to the birds. I can't remember what was there before, but this is lovely."

Public health guidance recommends that children are physically active at home as well as at school. England's School Sport and Activity Action Plan recommends children undertake 60 minutes of physical activity every day, of which 30 minutes should take place at school and 30 minutes outside a school setting. There are similar recommendations in Northern Ireland, Scotland and Wales. Yet there are large disparities in the scale and nature of home-based physical activity among children. Girls, older children and children in low income families are much less likely to take part in active play in or near the home^{xl}. As previously discussed, programmes to increase levels of physical activity need to provide opportunities for children and parents to be active together.

Active travel

Some 49% of adults in Spirit of 2012's survey agreed that they 'usually managed to walk or cycle more than 30 minutes every day'^{xli}. Walking, running and cycling enable us to be more active. Switching from our car to physically active forms of transport is good for our health and wellbeing, as well as the environment.

"I would like to be more physically active but I have children and I work, so it is hard to find the time. I know that I always use the car for ease, even for small journeys. If I stopped doing this, it would be good for me and the environment."

Participant in North East focus group.

In 2021, 32% of all journeys were made on foot and 3% were made by bicycle^{xlii}. The UK Government wants to make walking or cycling the first choice for as many journeys as possible, with a target of half of all journeys in urban areas to be made on foot or bicycle by 2020. To take forward these plans the UK Government published Gear Change, a walking and cycling strategy in 2020^{xliii} and has made £2 billion funding available to implement the policy. Active Travel England, a new government organisation, will start work in 2022, led by the cyclist Chris Boardman who has been appointed as the organisation’s first commissioner. Transport Scotland leads policy on active travel in Scotland, where Lee Craigie has been appointed as an Active Nation Commissioner. The Active Travel (Wales) Act 2013 provides the legal basis for funding to promote active travel in Wales, while in Northern Ireland this policy area is overseen by the Department for Infrastructure. As well as combined and local authorities there are also a number of civil society organisations which advocate for active transport, for example, Sustrans and Create Streets. Making sure that features of the built environment support physical activity is also priority area for a number of sports organisations^{xliv}.

Some employers, schools and civil society organisations have also promoted active transport^{xlv}. Changing Lives Through Sport

and Physical Activity programme has funded a project that encouraged active travel. Care2B Active is a project that worked with young people who have experienced the care system. With funding from Care2B Active helped young people gain skills in living independently by building up their confidence to navigate public transport. Young people received monthly bus tickets uploaded on to a smartcard. At the same time project staff encouraged the young people to use public transport independently and confidently, and young people also encouraged each other. This enabled a group of vulnerable young people to travel to see friends or family, attend college and to take part in sport and physical activity. The project also increased the time that they spent walking, boosting their levels of moderate physical activity.

An environment that supports active travel

Many people who took part in the focus groups believed that people are more likely to walk or to cycle in attractive environments where they felt safe. It was also something that the focus group participants thought would boost physical activity. Some 37% of survey participants ranked ‘safe and attractive walking and cycling routes in my neighbourhood and/or near my work’ as one of the top three practices that would encourage them to be more active^{xlvi}.

27%

of survey participants ranked ‘safe and attractive walking and cycling routes in my neighbourhood and/or near my work’ as one of the top three practices that would encourage them to be more active.

FEATURES THAT PROMOTE ACTIVE TRAVEL INCLUDE:

- Safe cycling and walking routes, including safer road crossings.
- Mixed-use high streets and town centres that are attractive and characterful, providing a sense of pride and belonging.
- 20mph and low emission zones.
- 15-minute neighbourhoods where services and retail outlets lie within a 15-minute walk to reduce dependency on cars^{xlvii}.
- Nearby green space for walking. Across the UK some 28% of people live more than a 15 minute walk from a public park or public green space^{xlviii}.
- Practices to encourage active travel to work, including promotion by employers, local active travel ambassadors, bicycle loan schemes, racks and showers in the workplace.
- Walking bus routes for school children, and incentives to walk to school.
- Making sure that the needs of older people and disabled people^{xlix} are reflected in urban design, for example, public seating along popular walking routes, accessible toilets and parking, and consideration about the positioning of street furniture.
- Integrated transport systems where popular walking routes are close to public transport.

“With employers, they could incentivise their employees to walk to work instead of driving to work. Maybe that will encourage them to exercise. You could have some sort of a scheme in place where if you walk to work, you can get an extra break or something.”

Participant in North East focus group.

28%

of people live more than a 15 minute walk from a public park or public green space.



This was the most popular option for increasing physical activity in the survey, with 17% of people choosing it as their first option. However, those who lived in the least deprived quintile^{xlviii} of the UK were more likely than those who lived in the most deprived to rank safe and attractive cycling and walking routes in their neighbourhood and/or near their work as a top 3 motivator to take part in more exercise (42% versus 32% of people who lived in the most deprived quintile). This suggests that walking and cycling may be more popular in more prosperous areas.

Much progress has been made to encourage active travel, partly because this policy is being driven by the need to reduce carbon emissions to reach the 2050 Net Zero Target. The Levelling Upⁱ agenda will also drive forward active travel, through investment in the public transport infrastructure and in town centre regeneration. While there has been some modest success in getting more people walking and cycling, there are some challenges in meeting the ambitious active travel targets:

- The public already knows and broadly supports the principle of active travel, but this does not always translate into changes in people's behaviourⁱⁱ. Programmes to encourage active travel need to be based on the principles outlined in this report. People who are inactive need to be taken on a journey of small steps to physical activity, for example, building walking to work over a period of time. Peer support for active travel also makes it more likely they will be successful.
- The adoption of active travel plans has been patchy across the UK, with the scale of local authority ambition somewhat variable. More schools and employers should be promoting active travel.
- Changes to the layout of the built environment and investment in public transport require costly capital investment. With no new spending through Levelling Up, there are limits to the changes that can be made to the transport system or the layout of the built environment in the current fiscal climate.

- Active travel policies have mostly been rolled out in urban areas that are characterised by better public transport. However, 14% of the UK population live in rural areas, and 19% of people live in small towns of 2,000-15,000 people. The Active Lives Survey as well as Spirit of 2012's survey both suggest that people who live in small towns and rural areas are less likely to be physically active through walking and cycling; 43% of those who lived in small towns and 47% of those who lived in rural areas agreeing that they usually managed to walk or cycle for more than 30 minutes each day, compared with 52% of people who live in big cities. Active travel policy needs to be adapted for those who live in small towns and rural areas.

- Gardening, housework, walking dogs and play are opportunities for moderate physical activity. Indeed, nearly two-thirds of people (63%) who live with dogs agree that they usually manage to walk or cycle more than 30 minutes every day, compared with 43% of the overall population.

- During lockdown many millions of people walked or cycled more than usual. Up to 5.2 million of the least active people may have become more active as a consequence of maintaining their lockdown walking habits. It is essential to build on the popularity of lockdown walking, cycling and gardening.

- Programmes to encourage active travel need to be based on the principles outlined in this report. People who are inactive need to be taken on a journey of small steps to active journeys, for example, building in walking to work over a period of time. Peer support for active travel also makes it more likely they will be successful.

Key points

- An effective way to encourage greater physical activity among the least active is to embed physical activity into daily routines: at work, in education settings, in the home and by walking and cycling where possible. To achieve success, 'active lifestyle programmes' need to be based on the principles outlined in this report, taking people through a journey of small steps and building in social support, for example.
- Many more organisations need to become involved in promoting active lifestyles. In particular, there is a strong business case for employers taking steps to encourage people to become more active, including the least active people. Schools also have a major role in promoting active lifestyles through active travel policies and initiatives such as the Daily Mile.

"I've seen a poster from Leicester City Football Club, and they arranged a programme to support adults that were over the age of 30 and had issues with being overweight. And it was like a Sunday football thing where you know, guys had the opportunity to get together and play a bit of football in the evenings. And I think that was organised and funded by Leicester City Football Club. I really did consider going."

Participant in Leicester focus group

EFFECTIVE COMMUNICATION

Almost everyone agrees that children and adults need to move more and sit less, but how can we persuade them to do this? The sixth principle that underpins success in getting people active is effective communication.

Communication on physical activity includes posters and leaflets, text messages, phone calls or in-person communication, online information, social media content and activity tracking apps. Usually the aims of such content are to:

- convey information about keeping healthy, for example, public health guidance on levels of physical activity. Figure 5 is an example of public health guidance from the Chief Medical Officers of England, Northern Ireland, Scotland and Wales on levels of physical activity.
- publicise local activities, for example, information about when sports clubs or fitness classes meet.

Successful communication about physical activity requires that information reaches its intended target. It also requires that the information conveyed is understood and resonates with its target audience to encourage people to change their behaviour. Unfortunately, there is a great deal of evidence that shows that much information about physical activity does not achieve these aims^{lii}. Public health guidance may not reach the right people, it may not be understood or it may not lead to behavioural change.

In both the focus groups and survey we asked if people had received publicity about local activities such as sport or fitness clubs or walking groups. Some people had, but others had no recollection of receiving such information, even when prompted with local examples. Just 40% of survey respondents knew about sports clubs and classes that are running in their area that were appropriate for to their level of fitness. Age was strongly associated with this factor, with 62% of 18-24 year olds knowing about local sports clubs appropriate to their level of fitness, compared with 34% of over 45s and 22% of those over 75 years old.

We also asked people if they knew the Chief Medical Officers' recommended levels of physical activity. Many people who have taken part in projects funded by Spirit of 2012 had previously been unaware of public health guidance on physical activity; taking part in projects such as GOGA led to an increased awareness of these recommendations^{liii}.

Figure 5: Infographic showing the Chief Medical Officers' guidance on physical activity.

HOW MUCH PHYSICAL ACTIVITY SHOULD YOU DO?

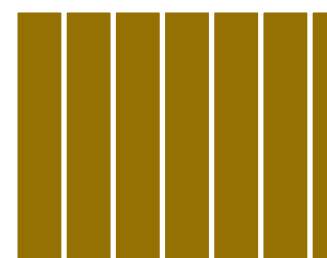
150 MINUTES 

Of moderate intensity activity should be aimed for each week (Adults 19 to 64)

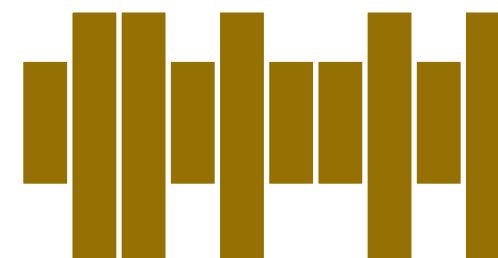
In bouts of 10 minutes or more (England, Northern Ireland and Wales guidance)



This can also be achieved by 75 minutes of vigorous activity across the week



Or a mixture of moderate and vigorous activity



2+ DAYS A WEEK

All adults should undertake muscle strengthening activity, such as:



Exercising with weights



Yoga



Carrying heavy shopping

Minimise the amount of time spent sedentary (sitting) for extended periods



Most people in the discussions underestimated the amount of physical activity they needed to undertake each week, and few knew the recommendations about sedentary behaviour and muscle strengthening. Table 6 draws from Spirit of 2012’s survey and shows that just 21% of adults knew of the recommended level of moderate physical activity that they need to undertake to stay healthy. Awareness of this public health guidance is low among almost all social groups, but is lowest among disabled people (16% of this group knew the Chief Medical Officers guidance), the over 75s (16%) and people in social grades D and E (16%). Some 18% of men could correctly recollect the Chief Medical Officers’ guidance, compared with 24% of women. Significantly, people who were already physically active were more likely to know the recommended levels of physical activity, with 31% of them able to recollect the Chief Medical Officers’ recommendations, compared with 16% of those who were deemed inactive. These figures suggest cognitive bias in people’s understanding and processing of public health information^{iv}. Cognitive bias is a phenomenon where people only remember information – including numerical information – which concurs with their world view and values. If a person’s behaviour is not oriented towards physical fitness they will be less likely to remember public health information about physical activity.

Although the Chief Medical Officers’ recommendations are a useful benchmark for some people, this guidance may not always be effective way of changing the behaviour of the least active people. As previously discussed, the recommendation may discourage those who are the least active.

Characteristics of effective communications

While there are shortcomings in much communication about physical activity, there are also many examples of good practice. Spirit of 2012 has looked at how some of its funded projects are planning and delivering information about physical activity. We have learned that projects need to consider:

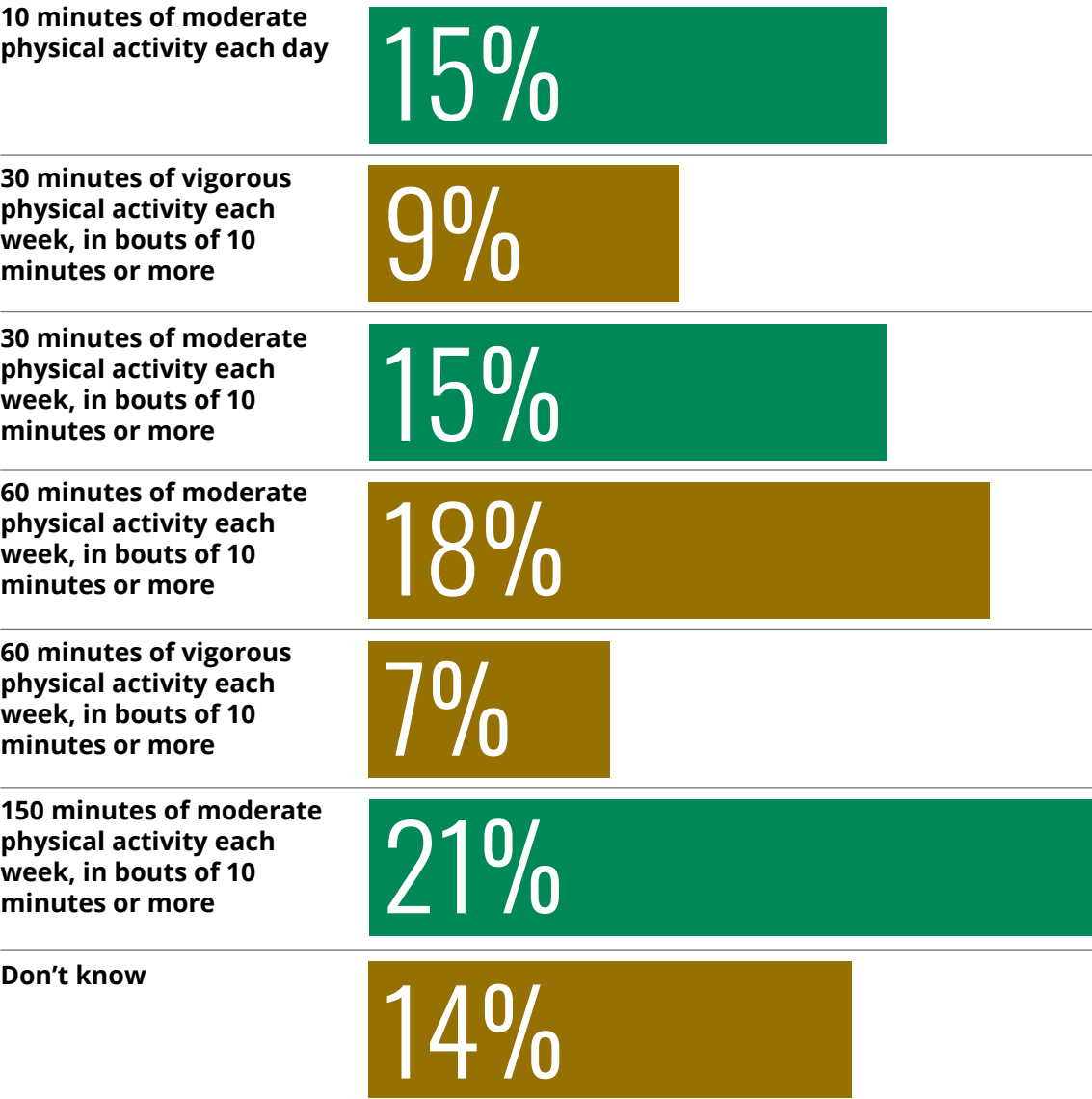
- The social group to be targeted, as this will impact on the content of information and the delivery of messages. Content and delivery may need to be adapted for specific groups such as young people, older people, disabled people, pregnant women, specific minority ethnic groups and so on.
- The content of messages, making sure that it appropriate for the target audience
- The format and delivery of messages, as well as the best messenger for the target group.

Appropriate content

Learning from Spirit of 2012’s funded projects suggests messages that are framed positively and highlight the benefits of physical activity or taking part in sport are better at persuading people to get involved, than threat-based language that highlights the consequences of physical inactivity. Effective messages use simple language to stress the benefits of physical activity on wellbeing.

“I don’t think that they explained the benefits of being more active enough, you know the physical benefits, mental health benefits and things like that.”
Participant in Northern Ireland focus group.

Table 6. The Chief Medical Officers of England, Scotland, Wales and Northern Ireland recommend that people undertake a certain amount of physical activity each week in order to stay fit. From the list below please choose the option that you believe is closest to their recommendation.



Source: ICM survey of 2,326 UK adults undertaken 1-4 March 2022.

As already noted, people are much more likely to join a group or class if they think it will be enjoyable, and that is appropriate for their level of fitness. Some 38% of survey participants ranked *'knowing that people taking part in a sport/class or group were the same level of fitness as me'* as one of the top three practices that would encourage them to be more active. Among older people, disabled people and those who did not take part in physical activity regularly, knowing that fellow participants were at a similar level of physical fitness was particularly important, with 47% of 55-64 year olds and 53% of 65-74 year olds prioritising this as

something that would encourage them to become more active.

The visual content of communication material also influences how effective it is in engaging people and changing their behaviour. Evaluations of Spirit of 2012 funded projects showed that both children and adults want to see people that look broadly like them in advertisements for classes or groups. In 2018 the Scottish Government awarded fourteen grants across Scotland through the Sporting Equality Fund, in order to increase the number of women and girls participating

in sport and physical activity. One partner, KA Leisure was originally advertising its classes with stock images of girls exercising. Recruitment was low. Through consultation, the organisation discovered that potential participants were put off by the images in the flyers – they did not identify with the girls in the pictures, and had sub-consciously assumed the class was not for people like them^{iv}. The project found that switching to photographs that showed local girls taking part in the actual classes was much more effective. Indeed, images of slim and fit people can be off-putting for those whose body image is different. Activities that target disabled people need to use relatable images of disabled people, for example.

Methods of delivery

When planning communications about physical activity, organisations also need to consider how the content will be delivered. Leaflets and posters can be used to publicise local groups and classes. Participants can also be asked to publicise activities among their peers. However, evaluations show that it is more effective to use both offline and online publicity together. Activities can be publicised through text messages, using local online noticeboards and Facebook groups. Targeted Facebook advertising is inexpensive and can also be used to publicise activities, but requires organisers be skilled in this method of advertisement. Some larger sports organisations are highly skilled in their communications, including in the evaluation of approaches that work. Activity Alliance, for example, has drawn

from its evaluations to develop Talk to Me a set of communication guidelines initially designed for engaging disabled people, and further developed for other groups with high levels of inactivity through GOGA^{viii}. But there is a need to increase the communication skills of smaller grassroots organisations if these organisations are to become better at reaching and engaging people.

It is important to remember that about one in eight people (13%) are internet non-users, because they do not have access to the required equipment or connectivity (primary digital exclusion), or because they lack the skills to navigate the online world (secondary digital exclusion)^{lix}. A further 10% of the UK are limited users, facing barriers which restrict their engagement with online life on a day-to-day basis, for example, they share a laptop with others or have limited skills^{lx}. Older people are most likely to experience digital exclusion, but people with low incomes may be limited internet users because they share equipment or have limited access to data. If these two groups are targets for publicity and public health advice, Spirit of 2012's evidence suggests both online and offline methods will need to be used. As previously discussed, the Old Library Trust, based in Creggan in Northern Ireland, encouraged people to take part in online exercise sessions during lockdown, but also included printed information about keeping fit in food parcels.

Activity tracking technology – This is another method of communicating public health information, for example, mobile apps or wearable devices. It is likely that this technology will continue to develop; already the IT industry is working with public health organisations to combine activity tracking component of apps with information about local activities.

WE ARE UNDEFEATABLE

We Are Undefeatable^{lvi} is a campaign that has brought together organisations representing people who live with long-term health conditions and disabilities. Partners include the Alzheimer's Society, Versus Arthritis, the British Red Cross and Parkinson's UK. The campaign aims to encourage people living with such conditions to become more active and has been backed with funding from the National Lottery Community Fund and Sport England. Campaign activities have included the production of social media content, much of which tells the stories of people's journeys to greater physical activity. *We Are Undefeatable* has also used personal stories to give advice about becoming active.

John's story is an example of a video produced by the campaign^{lvii}. Recently diagnosed with Parkinson's, there are many things about his condition that John finds frustrating. As a younger man,

John enjoyed football. He has now set up a weekly game of football that brings together people with Parkinson's, as well as those recovering from strokes. Alongside helping participants to keep active, the game links up people living with long-term conditions, combating isolation and building mutual support.

The video is narrated by John. Through personal testimony it provides encouragement to people living with long-term health conditions. This and other testimonies have been widely shared on social media and provide a strong example of peer-to-peer communication. *We Are Undefeatable* has also increased communications expertise amongst the participating organisations. However, there is still the need for a stronger evidence base on the best communications approaches to encourage greater physical activity among the least active people.

Some larger sports organisations are highly skilled in their communications, including in the evaluation of approaches that work.

There were some people who used activity tracking technology in the focus groups, most of whom spoke highly of their effectiveness in encouraging physical activity. The groups included one person who had taken part in a trial that provided rewards in the form of shopping vouchers to people who increased and maintained their levels of physical activity. Some 23% of survey participants ranked ‘a device such as a Fitbit or an app on my phone’ as one of the top three practices that would encourage them to be more active. The survey showed that activity tracking technology was felt to be fairly equally popular among most social groups, apart from the over 75s.

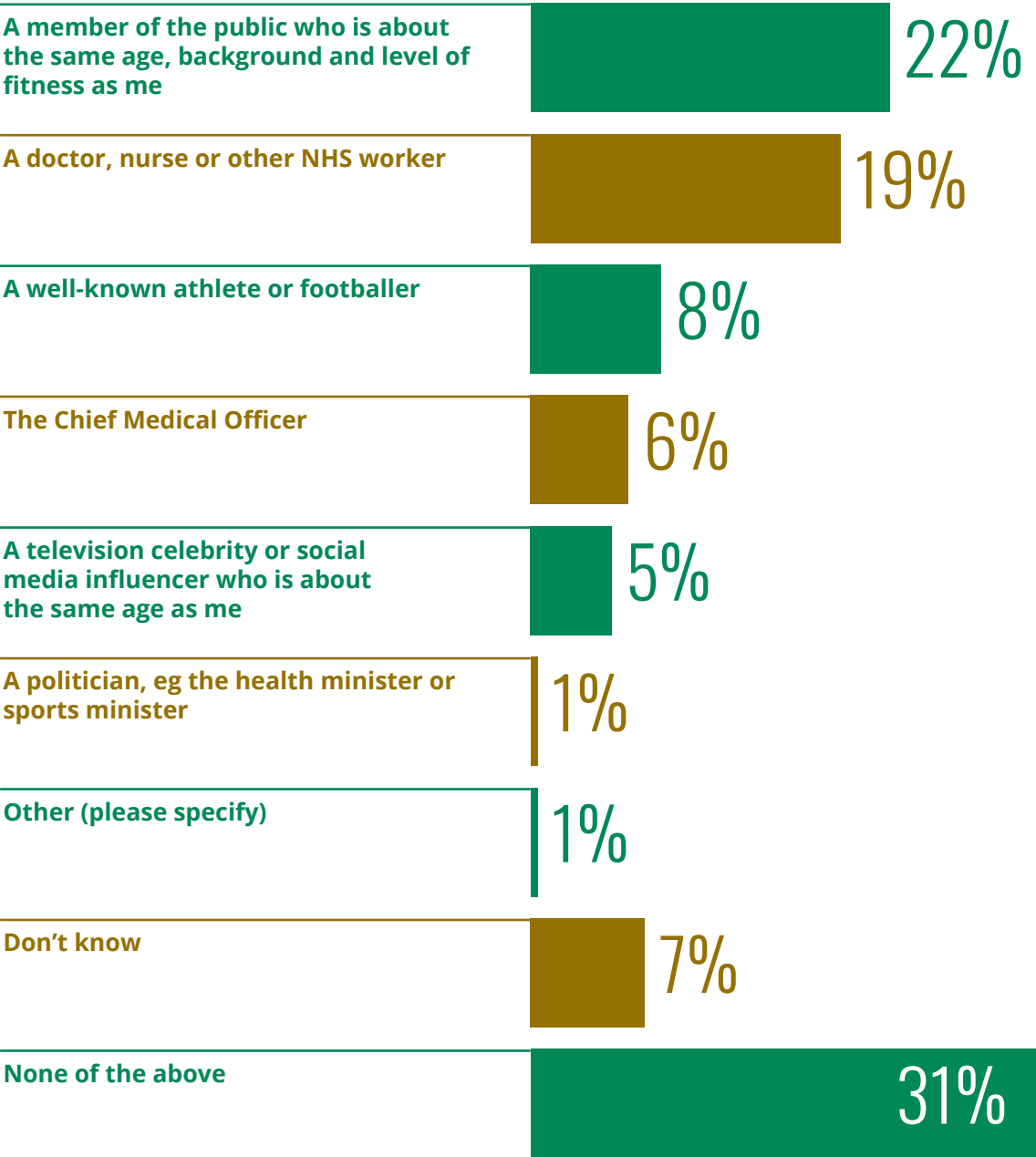
Events as opportunities for public health messaging – Events are also an opportunity to deliver public health messages and information about local activities. Increasing people’s participation in grassroots sport was an explicit aim of the London 2012 Olympic and Paralympic Games. Although the numbers of adults taking part in sport did increase in 2011 and 2012, this was not sustained^{lx}. Nor was there a significant impact on the activity levels of the least active people. Evidence shows, however, that major sporting events are more effective in changing the behaviour of young people, with the London 2012 Games increasing the levels of participation in sport among 11-15 year olds^{lxii}. Watching the event can increase children and adults’ interest in taking part in particular sports, but this interest is unlikely to last without support.

We asked focus group participants if watching sporting events had ever encouraged anyone to try out the sport. A few people gave examples, for example, taking up boxing, although these new

interests had not been sustained. Survey results showed that 21% of adults had been inspired to take part in a sport they had watched live or on television. Younger people and men were much more likely to try out a sport after seeing it played, with 44% of 18-24 year olds reporting this impact, and 27% of men. Watching a sport live or on television has a much greater impact on people who already describe themselves as physically active, with 41% of adults who described themselves as physically active trying out a sport after watching it, compared with 9% of people who said they were inactive.

Public health information can be given out at regular sporting events – many football clubs publicise their community fitness programmes on match days. Pre-event and post-event community programmes associated with major sporting events can also be used to disseminate this information^{lxiii}. As the London 2012 Games legacy funder, Spirit of 2012 has funded a number of successful programmes that have used the inspiration of events to increase levels physical activity and participation in sport. Get Set is the official youth engagement programme of the British Olympic Association and the British Paralympic Association. Since its inception in 2012, it has used the Olympic and Paralympic Games to inspire young people to get active. Get Set capitalises on the excitement of the event by recruiting athlete ambassadors who visit schools and encourage young people to take part in sports. The programme also provides ‘challenges’ set at different levels, for example running a specified distance or encouraging young people to try new sports.

Figure 7: In an advertising campaign who would be most likely to persuade you to take up a sport or become more active? Please select one.



Source: ICM survey of 2,326 UK adults undertaken between 1 and 4 March 2022.

Messengers

Those chosen to deliver public health information can impact on the success of campaigns. In both the focus groups and survey we asked who would be most persuasive messenger in encouraging people to increase their levels of physical activity (Figure 7). Overall, relatable members of the public are considered to be the most persuasive messengers. Many larger organisations are already using them as the voice of public health information, as illustrated by John in the *We are Undefeatable* case study and *This Girl Can*, a campaign run by Sport England that aimed to encourage more women and girls to be active. This Girl Can's website provides information about getting active through nearly 100 crowd-sourced stories of girls and women who have overcome barriers to take part in grassroots sport^{lxiv}.

Women are more likely than men to be persuaded to take up a sport or become more active by a relatable member of the public (25% against 18% of men), but men are more likely to be persuaded by a well-known athlete or footballer (12% of men against 4% of women). Younger adults are more likely than their older peers to be persuaded to take up a sport or become more active by a television celebrity or social media influencer who is about the same age as them. Disabled people are more likely to be persuaded by a doctor, nurse or NHS worker (23% of disabled people, compared with 19% of all adults).

Key points

- Projects need to plan communications about physical activity. They need to consider the target group, how best to reach them, the content and format of messages and the best messengers.
- Messages that are framed positively and highlight the benefits of physical activity or taking part in sport are better at persuading people to get involved, than threat-based language. Effective messages use simple language to stress the benefits of physical activity on wellbeing.
- There is a need for more evidence about the best communication approaches to encourage active lifestyles, and a greater dissemination of expertise to those involved in grassroots sport and delivering physical activity programmes.
- The visual content of communications also influences how effective they are in engaging people and changing their behaviour.
- Community and sporting events are opportunities to deliver public health information about keeping active.
- Relatable members of the public are the most effective messengers of public health communications. People are most likely to be persuaded to change their behaviour by seeing people that look like them in information materials.
- Offline and online methods can be used to deliver public health information or to publicise local groups and fitness classes. But it is important to remember that older people and people with low incomes are more likely to be internet non-users or limited users.
- There is a need to increase the communication skills of grassroots organisations involved in sport or promoting physical activity.

PARTNERSHIPS TO REACH AND ENGAGE PEOPLE

Many of the least active people have had little previous contact with sport organisations. They may never have visited a leisure centre. An effective way to reach this group is for the sport and physical activity sectors to partner with those who already have networks and contact with local communities. The seventh principle that underpins success in getting people active is to set up partnerships to reach and engage people. This will require sport and physical activity organisations partnering with faith and civil society organisations, with health and social care, or with schools or employers.

The Get Out Get Active (GOGA) project worked with mosques in Bradford to identify and reach Muslim families who had disabled members. Replay Sporting Memories, described below, is another example of a partnership between a sport organisation and the social care sector. The growing popularity of social prescribing is an opportunity for the sport and physical activity sectors to reach out and partner with GP's surgeries where social prescribing link workers are usually located. It is these link workers who refer patients for support in the community in order to improve their health and wellbeing. There is scope for more partnerships between link workers and sport and physical activity programmes. These partnerships should be based on an understanding of effective approaches in reducing inactivity and should apply the principles in this report.

When planning work to increase levels of physical activity, sport and physical activity organisations need to know which sectors of the population are inactive. Public health officials will usually have this demographic data. After choosing target groups, those planning sport or physical activities will need to consider how best to reach them. Faith and civil society organisations, employers, as well as health and social care providers may have the networks to reach people.



However, It is important not to make assumptions about a target group – not all Muslims may attend a particular mosque, for example. Ideally, those planning sport should have multiple routes to reach people.

Key points

Many of the least active people have had little previous contact with sport organisations. An effective way to reach this group is for the sport and physical activity sectors to partner with those who already have networks and contact with local communities.

Link workers and sport and physical activity programmes should work in partnerships based on an understanding of effective approaches in reducing inactivity and applying the principles in this report.

REPLAY SPORTING MEMORIES

The project was developed by Sporting Memories Foundation and funded by Spirit of 2012, in partnership with sportscotland, Robertson Trust, and Scottish Government, through the Changing Lives Fund. Sporting Memories Foundation linked up with local care homes to support older people living with long term conditions such as dementia and Parkinson's Disease, as well as those experiencing loneliness and social isolation.

Staff from Sporting Memories Foundation worked with care home staff to develop a programme of basic strength and balance exercises. This routine was combined with reminiscence activities as part of care home residents' daily activities. 'Keep in Touch' bags were distributed to people isolated in their homes and care home residents, which contained exercise equipment, an instructional DVD and a logbook, so that they could keep track of their daily progress between weekly

online group sessions. Sporting Memories also included guides for care home staff and family members, so that they could support participants, or join in the sessions themselves.

One care home resident said "With my health conditions, it's vital for me to keep my body moving and the KIT Bag has allowed me to do this in a challenging but fun way. I enjoy exercising with the group and it gives me the confidence to go off on my own to continue with the exercise programme from the booklet. It's been a great idea and I've benefited a lot."

Most (81%) of older people participating in the Replay Sporting Memories project felt encouraged to exercise more; half (51%) felt more confident about moving more and being active. On average, participants increased the time that they were physically active each day by 44% or 12 minutes.

STAFF AND VOLUNTEERS

In 2020 the UK sports and physical activity sectors had an estimated workforce of 585,000 people, and accounted for about 1.7% of all jobs in that year^{lxv}. Grassroots sport is also heavily dependent on the time of volunteers, with an estimated 2.9 million people offering their time as volunteers each year^{lxvi}. The success of programmes to encourage people to become more active depends on the skill of its workforce and their ability to apply the principles outlined in this report. The eighth principle that underpins success in getting people active is building a skilled and motivated staff and volunteer workforce.

8

Understanding the workforce

The sport and physical activity paid workforce is diverse in terms of the organisations that employ them, the jobs that they do and the terms and conditions of their employment. Those in paid employment who work in this sector may be employed in:

- education, for example, in schools or in education programmes.
- private, public and third sector leisure facilities, for example, in gyms, leisure centres or swimming pools.
- sports clubs, which may be professional, semi-professional or amateur. It has been estimated that there are 150,000 sports clubs in the UK.
- sports' governing bodies and infrastructure organisations, for example Access Sport and England Hockey, described in the case study above.
- civil society organisations that use sport or physical activity in their work with clients, often alongside other types of intervention, for example, the Old Library Trust, an organisation based in Derry-Londonderry which we have previously discussed in this report.

Paid staff undertake diverse roles, but many people in the sports and physical activity sector work as 'coaches' (in both in paid roles and as volunteers). Many of those who work in paid roles are freelancers or are employed as sessional staff.

FLYERZ

The Flyerz programme involves an approach to disability inclusive hockey which allows children and young people of all skills and abilities to play hockey together. It emphasises having fun, making friends and being active, and no prior experience or equipment is needed. Some of those who take part in Flyerz have learning difficulties. Flyerz has grown from its small beginnings – now 50 hockey clubs in England, Scotland and Wales have Flyerz sections.

Funding from Spirit of 2012 enabled Access Sport and England Hockey to work with clubs to develop the Flyerz programme and then to train paid staff and volunteers in this approach. Access Sport provided training and resources for club managers, staff and volunteers, and developed a network for Flyerz clubs to share best practice with one other. The support offered included advice on adapting equipment, preparing and promoting sessions, as well as training in disability inclusion. Flyerz has also developed a marketing portal to enable clubs to personalise material. Access Sport and England Hockey also offer one-to-one advice to clubs.



One Club manager explained how the programme had helped increase the confidence of volunteers to support disabled and non-disabled players to take part.

"I think that right at the beginning a lot of volunteers are worried. They are worried that they are not going to be able to communicate, are not going to be able to do a good job because they just didn't know how to help or teach kids or adults with learning difficulties and it's so lovely after the first session when all the volunteers say 'that was incredible'. Because it's just a normal session, slightly tweaked and it's nothing to worry about it's actually the most rewarding thing you can do."

The sector is also characterised by a large numbers of volunteers, with grassroots sports clubs and civil society organisations particularly dependent on their time. The GOGA project, funded by Spirit of 2012, Sport England and the London Marathon Charitable Trust was delivered by nearly 1,000 paid staff, but also worked with 1,500 volunteers. Survey analysis suggest there may be 2.9 million volunteers in the sports and physical activity sector, with many of them being regular volunteers in that they

offer their time every week. Volunteers in the sport and physical activity sector tend to have a younger age profile than those who volunteer in other sectors, for example, in foodbanks or in health settings. Volunteers in sports organisations are more likely to be male; Sport England suggests that 64% of volunteers in sport are male, compared with 36% who are female^{lxvii}. This reliance on volunteers in grassroots sport often means that volunteers manage other volunteers.

Volunteering in sport and physical activity usually requires people committing their time on a regular basis, for example, to coach weekly football session or run a weekly walking group. This time commitment sometimes deters potential volunteers from coming forward^{lxviii}. A significant minority of volunteers in sport also report negative experiences, with some ceasing to offer their time because of this^{lxix}.

Supporting staff and volunteers

The composition of the sport and physical activity workforce raises a number of issues that relate to workforce skills and motivation. First, the sport and physical activity workforce comprises people with a wide range of qualifications, from people with higher degrees in sports science to people with an interest in sport but no formal qualifications in this area. There are many vocational courses for coaches, for example, Level 2 courses in group exercise, or Level 2 courses in fitness instruction. Organisations also offer an array of different training programmes for volunteers, including those such as GOGA. GOGA provides a comprehensive training programme for staff and volunteers, including on disability inclusion.

Spirit of 2012 supports the conclusions of a recent House of Lords report that recommended a review of sport and physical activity qualifications^{lxx}. This review must look at how courses cover the principles outlined in this report, enabling those who enrol for these courses to build their skills in working with the least active. Training providers should also offer accredited training courses that are at an appropriate level and time commitment for volunteers. One of the Scottish Government's long-term legacy programmes from the Glasgow 2014 Commonwealth Games is the Thrive learning programme,

which combines both online and in-person training to support practitioners to take a person-centre approach to designing physical activity programmes.

Many sport and civil society organisations also struggle to recruit volunteers, limiting growth in this area. Addressing this challenge will require better publicity about volunteering opportunities, but also better volunteer management. If people's experience of volunteering is positive and they feel valued and supported, they are more likely to continue to give their time^{lxxi}. Organisations across the sport and physical activity sector need to consider how they make sure that volunteering is a positive experience. The Flyerz case study is an example of a programme of work to support volunteers.

Key points

- The sport and physical activity workforce is made up of an estimated 585,000 paid staff and 2.9 million volunteers, working in a range of settings which include schools, leisure facilities, sports clubs, governing bodies and infrastructure bodies and civil society organisations.
- The sport and physical activity workforce comprises people with a wide range of qualifications, from people with higher degrees in sports science to people with an interest in sport but no formal qualifications in this area. Not all vocational course in sport cover disability inclusion or ways to work with the least physically active.
- Many sport and civil society organisations also struggle to recruit volunteers, limiting growth in this area. Addressing this challenge will require better publicity about volunteering opportunities, but also better volunteer management.

PART THREE LOOKING AHEAD



CONCLUSIONS AND RECOMMENDATIONS

Physical inactivity is one of the largest public health challenges facing the UK. Despite considerable investment in sports facilities and programmes in recent years, overall levels of physical inactivity have not fallen. Over a quarter of the population is classed as physically inactive. But a number of projects funded by Spirit of 2012 and others have been successful in boosting physical activity among the least active. Evaluations from these projects suggest that this success has been achieved by the approaches taken by the projects – which we have summarised as a set of eight principles.

Projects need to apply a person-centred approach that is responsive to individual differences.

Sport and physical activity should focus on boosting people's mental and social wellbeing alongside their levels of physical activity. If people feel good about taking part in a sport or physical activity, or if they feel it

has changed their lives, they are more likely to continue taking exercise.

People need to be taken on a journey of small steps to physical fitness. People need to set realistic goals and the journey must start with activities that are appropriate to people's initial levels of fitness. Many people will experience setbacks in their path to physical fitness and may need extra encouragement.

Programmes need to build in social elements to encourage motivation, for example, offering refreshments and a time to talk after a session. People are more motivated to start and carry on sport and physical activity when they enjoy it, and when they can receive encouragement from their peers or their family.

Physical activity should be embedded into daily routines where possible: at work, in education settings, in the home and by walking and cycling to destinations.

People need to be taken on a journey of small steps to physical fitness. People need to set realistic goals and the journey must start with activities that are appropriate to people's initial levels of fitness.

Programmes and wider public health messaging need to think carefully about effective communication techniques that reach and motivate their intended audience.

Sports organisations should be encouraged to partner with local health providers, faith and community organisations to reach and engage those who are least active.

Applying these principles and encouraging the least active people to become active requires a skilled and motivated staff and volunteer workforce.

As well as paid staff, grassroots sport is heavily dependent on the time of an estimated 2.9 million volunteers. It is essential that these principles are incorporated into vocational training courses, as well as training for volunteers.

Looking ahead there are many opportunities to apply these principles in practice. We believe it is important to build on the popularity of lockdown walking and the greater appreciation of nature. Our report argues that up to 5.2 million of the least active people may have become more active as a consequence of maintaining their lockdown walking habits in 2021 and 2022. Sports, faith, civil society and health providers could build on this, but to be successful such initiatives need to be based on the principles outlined in this report. Programmes would need to take a person-centred approach and use physical activity to boost wellbeing. Successful projects take people through a journey of small steps to physical activity and build in social time and peer support, as described in the Care About Walking case study included in the report.

More people are now being referred to activity classes through social prescribing, where health professionals refer patients for support in the community in order to improve their health and wellbeing. This too is an opportunity to focus on the least active. The Levelling Up agenda aims to reduce social disparities. In England, an imminent health disparities white paper is an opportunity to address some of the inequalities in levels of physical inactivity.

These are all opportunities to focus interventions on the least physically active in society. Spirit of 2012's research suggests that there is also room for policy change, which if implemented would lead to significant reductions in the proportions of adults who are physically inactive. Spirit of 2012 recommends:

1. The governments of all four nations of the UK should put in place up-to-date physical activity strategies that take into account the impacts of COVID-19. These strategies should address high levels of physical inactivity among disabled people – a disparity that has widened as a consequence of COVID-19. Such strategies should set ambitious targets to increase physical activity levels among people who are the least active, and encourage the adoption of the eight principles set out in this report.
2. Sports and public health ministers across the UK should jointly provide annual reports to their parliaments on physical activity, including data on progress in reducing inactivity in different sectors of the population.

3. Physical activity interventions should better target people at 'transition points' in their lives. These include puberty, when many teenage girls drop out of sport, when young people leave school, when people face new caring obligations, late middle age and old age, or after experiencing a disabling illness or injury.
4. Many more non-sporting organisations need to take responsibility for encouraging active lifestyles, including employers, schools, colleges and universities, faith and local civil society organisations. The sports and physical activity sectors should partner with these organisations to reach and prioritise those who are less active.
5. Social prescribing link workers and sport and physical activity programmes should work in partnerships based on an understanding of effective approaches in reducing inactivity and applying the principles in this report.
6. Governments, local councils, sports bodies, the public health sector, including the social prescribing movement, faith and civil society organisations should take immediate action to build on the popularity of lockdown walking, cycling and gardening, using the principles outlined in this report.
7. National public health and sports bodies to be funded to work with behavioural science and advertising expertise to create a stronger body of evidence about effective communications approaches that encourage physical activity. This must be backed up with a programme of work to disseminate this evidence to those delivering sport and physical activity programmes.
8. Community and sporting events should be better used to deliver public health messages and information about local classes and activities and start people on their journeys to becoming more active.
9. Stakeholders should be brought together to review the curriculum and progression routes of training courses that focus on wellbeing and on sport and fitness, to make sure that staff and volunteers understand and can apply the principles set out in this report in practice.
10. Government and philanthropic funding should be made available to address inequalities in health and wellbeing outcomes that arise from physical inactivity. Such funding streams should deliver the principles set out in this report in practice. Funders should recognise that the per head cost of increasing levels of physical activity among the least active is usually higher than among the overall population.

The principles we set out in this report will be familiar to organisations working in sport. It is important to share them with a much wider range of organisations than those directly involved in planning and delivering sports or physical activity sessions. In becoming a more active society, everyone needs to play their part: government and councils, institutions such as employers and schools, local community and faith organisations and ourselves as individuals. We hope that the ideas set out in this report will help those from outside the sport and physical activity sector understand successful approaches to reducing inactivity, and encourage them to play a greater role in this task.

APPENDICES

Results of the nationally-representative survey

Spirit of 2012 commissioned a nationally-representative survey of UK adults carried out by ICM between 1 and 4 March 2022 sampling 2,326 UK adults. In addition to the core sample, the survey included booster samples of an additional 60 respondents from Northern Ireland and 400 respondents from Scotland.

The survey findings were analysed by gender, age band, social grade, economic activity, level of education, household

income, ethnic group (white/BAME), importance of faith/religion to respondents, disability, household composition, housing tenure, region/nation of residence in UK, settlement type (large city, small city/large town, medium town, small town, rural), Index of Multiple Deprivation quintiles, 2019 General Election voting, dog ownership, and existing patterns of physical activity.

The survey findings are given below and detailed breakdowns of the results are available on request from Spirit of 2012. The figures presented have been rounded to whole numbers.

Q1. The Chief Medical Officers of England, Scotland, Wales and Northern Ireland recommend that people undertake a certain amount of physical activity each week in order to stay fit. From the list below please choose the option that you believe is closest to their recommendation.

10 minutes of moderate physical activity each day	15%
30 minutes of vigorous physical activity each week, in bouts of 10 minutes or more	9%
30 minutes of moderate physical activity each week, in bouts of 10 minutes or more	15%
60 minutes of moderate physical activity each week, in bouts of 10 minutes or more	18%
60 minutes of vigorous physical activity each week, in bouts of 10 minutes or more	7%
150 minutes of moderate physical activity each week, in bouts of 10 minutes or more	21%
Don't know	14%

Q2. To what extent do you agree or disagree with each of the following statements?

	NET: Agree	NET: Disagree	Strongly agree	Tend to agree	Neither agree nor disagree	Tend to disagree	Strongly disagree	Don't know
I would like to get fitter this year	73%	7%	33%	41%	19%	4%	3%	1%
I usually manage to walk or cycle more than 30 minutes every day	49%	36%	23%	26%	14%	17%	20%	0%
I usually struggle to be physically active every day or take part in sport	45%	34%	17%	28%	20%	19%	15%	1%
I struggle to keep fit	45%	33%	15%	30%	21%	21%	12%	1%
Generally I don't find sport enjoyable or satisfying	44%	35%	21%	23%	20%	18%	17%	0%
I play sport or go to the gym or an exercise class on a regular basis	29%	59%	13%	16%	11%	18%	41%	1%
I am physically active because of the job that I do	29%	53%	11%	18%	17%	19%	34%	1%

Q3. To what extent do you agree or disagree with each of the following statements?

	NET: Agree	NET: Disagree	Strongly agree	Tend to agree	Neither agree nor disagree	Tend to disagree	Strongly disagree	Don't know
I did not enjoy sport at school	47%	38%	27%	20%	14%	16%	22%	1%
I know there are sports clubs and classes that are running in my area that are appropriate to my level of fitness	40%	25%	14%	27%	23%	14%	11%	12%
It's difficult to find enough time in the day to play a sport or take part in activities that keep me fit	39%	36%	12%	27%	23%	21%	15%	1%
I would feel confident to turn up at a sports club or an exercise class by myself	36%	45%	13%	23%	17%	18%	27%	2%

I have a disability or injury that makes it difficult for me to exercise	28%	59%	11%	17%	12%	16%	43%	1%
I have been inspired to take part in a sport I watched live or on television	21%	61%	6%	14%	18%	24%	36%	1%

Q4. This question is to understand whether your patterns of physical activity have changed since the beginning of the lockdown in March 2020. To what extent do you agree or disagree with each of the following statements?

	NET: Agree	NET: Disagree	Strongly agree	Tend to agree	Neither agree nor disagree	Tend to disagree	Strongly disagree	Don't know
My overall levels of physical activity have not changed since March 2020	41%	35%	14%	27%	22%	23%	12%	2%
My overall levels of physical activity have decreased since March 2020	34%	41%	13%	21%	23%	25%	16%	2%
I walked cycled or ran more than usual during lockdown and have continued to do so since lockdown restrictions ended	32%	47%	10%	22%	20%	24%	23%	1%
My overall levels of physical activity have increased since March 2020	30%	42%	10%	20%	27%	24%	18%	1%
I walked cycled or ran more than usual during first lockdown but stopped doing this after lockdown restrictions ended	26%	51%	8%	18%	22%	26%	25%	1%
COVID-19 has continued to disrupt my exercise routine after lockdown restrictions ended	25%	49%	8%	17%	24%	26%	23%	2%

Q5. Below is a list of things which can help people to take part in more exercise. Looking at this list, which THREE (in rank order) would be most likely to encourage YOU to take part in more exercise?

	Ranked Top 1	Ranked Top 3
Safe and attractive cycling and walking routes in my neighbourhood and/or near my work	17%	37%
Knowing that the people taking part in a sport/class or group were the same level of fitness as me	14%	38%
A device such as a Fitbit or app on my phone	9%	23%
Opportunities to exercise before or during my working day	9%	24%
Sport/exercises groups/classes groups I could do with a friend/colleague/or someone else I know	8%	27%
Fitness equipment and free sports facilities in a park near my home or work	7%	27%
Opportunities to socialise and have fun with my group after my sport or activity session had ended	7%	22%
Free sport or exercises session run by a football club or community organisation near where I live or work	6%	23%
Knowing that staff and coaches that run activities were friendly and welcoming	6%	25%
Sport/exercises groups/classes groups I could do with my family	6%	19%
Other	2%	3%

Q6. In an advertising campaign who would be most likely to persuade you to take up a sport or become more active? Please select one of the below options.

A member of the public who is about the same age, background and level of fitness as me	22%
A doctor, nurse or other NHS worker	19%
A well-known athlete or footballer	8%
The Chief Medical Officer, e.g. Chris Whitty (England), Gregor Smith (Scotland), Frank Atherton (Wales), Michael McBride (Northern Ireland)	6%
A television celebrity or social media influencer who is about the same age as me	5%
A politician, e.g. the health minister or sports minister	1%
Other (please specify)	1%

Don't know	7%
None of the above	31%

Q7. How important is religion or faith in your life?

Very important	15%
Somewhat important	16%
Not too important	20%
Not at all important	48%

Q8. Do you consider yourself to have a disability or long-term health condition?

Yes	31%
No	67%
Don't know	2%

Q9. Do you own or live in the same household as a dog?

Yes	30%
No	69%
Don't know	0%

Focus groups

The report has been informed by the findings from three online focus group discussions with members of the public who were selected to be broadly representative of their local area in relation to gender, age and social grade, using a professional market research company. In selecting participants, we used a screening question, as we did not include people who considered themselves to be very physically active or inactive. The screening question used for the selection was:

Which phrase best describes you?

- I consider myself to be physically fit and can generally manage more than 30 minutes sport or physical activity every day – screen out.
- I sometimes struggle to be physically active or take part in sport, but I would like to get fitter – screen in.
- I am not physically active and not really interested getting fitter – screen out.

The three focus groups drew people from:

Group 1 – Leicester, where half of the group were from minority ethnic communities and the remainder were white British.

Group 2 – North East

Group 3 – Northern Ireland, where the group represented the different faith or political traditions.

Basing the discussion on a guide, participants were asked about their levels of physical activity, including the impact of COVID-19 on their participation. The following questions were asked in each discussion:

Memorable events

- In an average year, most people will attend a number of different events. These can be local events such as a street party, festivals or shows, regular events such as football matches, or big national events such as the Euros or Olympics. I'm going to put a slide up that shows all the different types of events our project is looking at...

- I wanted to ask you what was the most memorable event you have been involved in and why. This could be as a spectator, including on TV, or as a volunteer. I'm going to ask all of you. What made it memorable?
- Some of you have talked about events that have taken place in the [named location] I want to focus the discussion on this. What are the best events that take place here in the [location]? What makes them really good events?
- What about sporting events? How many of you are sports fans?
- Are there any smaller events – local events, community events – that you think are really good?
- Do you think that events have an impact on life here in the [location]? Do these events have an impact after the event itself is over?

Physical activity

- I want to ask all of you what you do to keep active. It can be things such as taking part in a sport. Or it can be things such as walking, cycling or gardening. Why do you enjoy [named sport or physical activity]. What makes it fun?
- Are you as physically active as you would like to be? Or do you want to be more active?
- Has COVID impacted on the amount or type of physical activity you do?
- What things stop people being physically active or taking part in sport?
- The Chief Medical Officers in England, Scotland Wales and Northern Ireland recommended that everyone should aim for a certain number of minutes of physical activity each week. Do you know what the official recommendation is?

- The Chief Medical Officers have made a few other recommendations on physical activity. Does anyone know what they are?
- Show slide of Chief Medical Officers' recommendations. Who didn't know about this recommendation? Was anyone surprised by them?

Getting more active

- Four out of 10 people in the UK aren't as active as they should be, and that figure is higher among older people or disabled people. What type of things might encourage people to get more active, including taking part in sport?
- You can get things like FitBits or Apps on your phone that show how active you are. Has anyone used them? Did anyone find them helpful?
- What about employers? Do they have a role to play in getting people more active?
- Has anyone taken part in a class, or taken part in a sport because it was recommended by the NHS? Could you tell us about your experience? What was good about the class and what wasn't so good. Did you enjoy it? Did you continue with your exercises after the classes ended?
- Has anyone ever seen a sport on TV and decided to give it a try? How did it go?
- Is there anything else you want to add to the things that you think would encourage people to become more active?

Sporting events and physical activity

- One of the aims of the 2012 Olympics and Paralympics was to get people more involved in sport. Do you think that it achieved this aim?
- Do you think football clubs have a role to play in getting people to play sport or be physically active?

- Based on your own experience, has anyone ever been motivated to get involved in a sport or physical activity as a result of being a fan or attending a sporting event as a spectator? Can you tell us more about this? Did you become fitter?
- Local football clubs round here run keep-fit activities for the community. Have you heard about them, or any of your friends and family been involved in these activities? What did you think about them? Did they get people more active?
- Finally, we wanted to ask you how you think sporting events – both regular events and one-off events – might encourage people to get more active.

Endnotes

- i Sources are the Active Lives Survey (England), the Health Survey Northern Ireland, the Scottish Health Survey and the National Survey for Wales
- ii ICM survey of 2,326 UK adults undertaken for Spirit of 2012 between 1 and 4 March 2022.
- iii See National Institute for Health and Social Care Research Moving Matters review available at [https://evidence.nihr.ac.uk/themedreview/moving-matters-interventions-to-increase-physical-activity/Sport England](https://evidence.nihr.ac.uk/themedreview/moving-matters-interventions-to-increase-physical-activity/Sport%20England) has also commissioned literature reviews in this area, including Sport England (2004) *Driving Up Participation: the Challenge for Sport* (Academic Review), London: Sport England.
- iv Ofcom (2021) *Online Nation*, London: Ofcom.
- vi NHS estimates, March 2022.

- vii Obesity is usually defined as having a body mass index (BMI) of 30 or above. A BMI between 25 and 30 is classified as 'overweight'. The 2019 Health Survey for England suggests that 28.0% of adults in England are obese and a further 36.2% are overweight but not obese.
- viii National Child Measurement Programme data 2020-2021.
- ix Very low activity category in the Scottish Health Survey.
- x Sources are the Active Lives Survey (England), the Health Survey Northern Ireland, the Scottish Health Survey and the National Survey for Wales
- xi ICM survey of 2,326 UK adults undertaken for Spirit of 2012 between 1 and 4 March 2022.
- xii While covering the same themes, the Active Life survey comprises a survey of children between 5 and 16 years, and a survey of young people over 16 and adults.
- xiii Ibid.
- xiv Ibid.
- xv Ibid.
- xvi Ibid.
- xvii Ibid.
- xviii Ibid.
- xix Ibid.
- xx Women in Sport (2022) *Reframing sport for teenage girls: Tackling teenage disengagement*, London: Sport England.
- xxi Yousifan, A., Ziller, E., Swartz, J. and Hartley, D. (2009) 'Active living for rural youth: addressing physical inactivity in rural communities' in *Journal of Public Health Management Practice* Vol 15 (3).

- xxii See National Institute for Health and Social Care Research Moving Matters review available at [https://evidence.nihr.ac.uk/themedreview/moving-matters-interventions-to-increase-physical-activity/Sport England](https://evidence.nihr.ac.uk/themedreview/moving-matters-interventions-to-increase-physical-activity/Sport%20England) has also commissioned literature reviews in this area, including Sport England (2004) *Driving Up Participation: the Challenge for Sport* (Academic Review), London: Sport England.
- xxiii See, for example, the 2022 evaluation of the Changing Lives Through Sport and Physical Activity Fund.
- xxiv ICM survey of 2,326 UK adults undertaken for Spirit of 2012 between 1 and 4 March 2022.
- xxv Wavehill Social and Economic Research (2021) *Get Out Get Active Cost Saving Modelling*, London: Wavehill.
- xxvi Ibid.
- xxvii YouGov poll of 1,656 GB adults undertaken between 17 and 18 December 2020.
- xxviii ICM survey of 2,326 UK adults undertaken for Spirit of 2012 between 1 and 4 March 2022.
- xxix Ibid.
- xxx Ibid.
- xxxi Ibid.
- xxxii Wavehill Social and Economic Research (2021) *Get Out Get Active Cost Saving Modelling*, London: Wavehill.
- xxxiii PJM Economics (2019) *The economics of exercise: Measuring the business benefit of being physically fit*, London: PJM Economics.
- xxxiv National Institute for Health and Care Excellence (NICE) (2015) *Physical Activity for NHS Staff, patients and carers*, London: NICE.

- xxxv Women in Sport (2022) *Reframing sport for teenage girls: Tackling teenage disengagement*, London: Sport England.
- xxxvi UK Active (2017) *Generation Inactive: An analysis of the UK's childhood inactivity epidemic and tangible solutions to get children moving*, London: UK Active.
- xxxvii For a list of evaluation studies see <https://thedailymile.co.uk/research/>
- xxxviii ICM survey of 2,326 UK adults undertaken for Spirit of 2012 between 1 and 4 March 2022.
- xxxix The National Academy for Social Prescribing acts as the secretariat for an All Party parliamentary Group on Health and the Natural Environment.
- xl See Active Lives Survey 5-16 dataset
- xli ICM survey of 2,326 UK adults undertaken for Spirit of 2012 between 1 and 4 March 2022.
- xlvi Transport Statistics Great Britain, 2021
- xlvi Department for Transport (2020) *Gear Change: A bold vision for cycling and walking*, London: Department for Transport.
- xlvi Sport England (2019) *Planning for Sport Guidance*, London: Sport England.
- xlvi House of Lords National Plan for Sport and Recreation Committee (2021) *A national plan for sport, health and wellbeing*, London: UK Parliament.
- xlvi ICM survey of 2,326 UK adults undertaken for Spirit of 2012 between 1 and 4 March 2022.
- xlvi Using Index of Multiple Deprivation measures.
- xlvi Ordnance Survey data cited by the Office for National Statistics, 2020.

- ^{xlix} House of Commons Women and Equalities Committee (2017) *Building for Equality: Disability and the Built Environment*, London: UK Parliament.
- ⁱ HM Government (2022) *Levelling Up the United Kingdom*, London: HM Government.
- ⁱⁱ See statement from the Active Transport for Healthy Living Coalition and Public Health England (2016) Working Together to Promote Active Travel A briefing for local authorities, London: Public Health England.
- ⁱⁱⁱ Williamson, C., Baker, G., Mutrie, N., Niven, A. and Kelly, P (2020) ‘Get the message? A scoping review of physical activity messaging’ in *International Journal of Behavioral Nutrition and Physical Activity*, Vol 17(51).
- ^{liii} Wavehill Social and Economic Research (2020) *GOGA Evaluation Final Summative Report*, London: Wavehill.
- ^{liv} Duffy, B. (2019) *Why We’re Wrong About Nearly Everything: A Theory of Human Misunderstanding*, London Basic Books.
- ^{lv} Finch, A., Chau, P. and Johnston A. (2019) *Sporting Equality Fund Evaluation Report*, London: Spirit of 2012.
- ^{lvi} <https://weareundefeatable.co.uk/>
- ^{lvii} <https://www.youtube.com/watch?v=kA2Px-f7S3o&t=2s>
- ^{lviii} Activity Alliance (2014) *Talk to Me Principles in Action*, Loughborough: Activity Alliance.
- ^{lix} Ofcom (2020) *Adults’ media use and attitudes report 2020*, London: Ofcom.
- ^{lx} Data from the Good Things Foundation.
- ^{lxi} HM Government and Mayor of London (2012) *Inspired by 2012: the legacy from the London 2012 Olympics and Paralympics*, London: Cabinet Office.
- ^{lxii} Grant Thornton (2013) *Meta-Evaluation of the Impacts and Legacy of the London 2012 Olympic Games and Paralympic Games: Sport Evidence Base*, London: Grant Thornton.
- ^{lxiii} As above for summaries of the community programmes associated with the London 2012 Games.
- ^{lxiv} thisgirlcan.co.uk
- ^{lxv} The Chartered Institute for the Management of Sport and Physical Activity (CIMSPA) (2021) *CIMSPA 2020 workforce insight report: Understanding the size and impact of the UK Sport and Physical Activity Workforce*, London: CIMSPA.
- ^{lxvi} Calculated through analysis of Spirit of 2012 survey of 2,073 UK adults undertaken by ICM, 24-27 September 2021 and Sport England estimates.
- ^{lxvii} Sport England (2021) *Igniting the Movement: Developing a Vision for Volunteering in the Sport and Physical Activity Sector*, London: Sport England.
- ^{lxviii} Williams, G. and Jacques, K. (2018) *Hidden Diamonds: uncovering the true value of sports volunteering*, London: Join In.
- ^{lxix} Sport England (2021) *Igniting the Movement: Developing a Vision for Volunteering in the Sport and Physical Activity Sector*, London: Sport England.
- ^{lxx} House of Lords National Plan for Sport and Recreation Committee (2021) *A national plan for sport, health and wellbeing*, London: UK Parliament.
- ^{lxxi} Spirit of 2012 (2021) *How events can boost volunteering*, London: Spirit of 2012.