This report presents data from the Active Lives Adult Survey for the period mid-May 2020 to mid-May 2021. Data is presented for adults aged 16+ in England.

This report contains a full year of coronavirus (Covid-19) restrictions, including comparisons back to the first national lockdown across mid-March to mid-May 2020.

Release dates
This release: 21 October 2021
Next release: 28 April 2022

Find out more
For more information on the data presented in this report, please visit the Active Lives section of our website.
Covering the period from mid-May 2020 to mid-May 2021, this report provides an update on the sport and physical activity behaviours of adults (aged 16+) in England. The period includes 12 months of restrictions in response to the coronavirus pandemic, including three months of full national lockdown, six months of significant restrictions and three months of easing restrictions.

Despite the huge effort from activity providers to adapt throughout the year, and continued efforts by the population to remain active, the disruption has had a significant impact upon not only our activity levels but also the number of activities we take part in and the range of settings used. In addition, there’s clear evidence of a significant impact on perceived opportunities to be active, our feelings of capability, and enjoyment levels – all key to building sustained habits, and signals recovery may take some time.

As ever, the report provides the overall picture of activity along with a 12-month picture by demographic group, broken down by each stage of the year. This reveals the groups most impacted at each stage of the year, and those who’ve found it tougher to take up opportunities as restrictions eased.

This report provides the headlines, with the opportunity to dig deeper into the results via links to the more detailed data tables. Alternatively, check out Active Lives Online, which is updated shortly after each release, where you can explore trends over time, audiences not covered in this report and more specific activities and places.

Lisa O’Keefe  Insight Director
The latest 12 months of data cover the period from mid-May 2020 to mid-May 2021. This includes three months of full national lockdowns, six months of significant restrictions and three months of easing restrictions. The final removal of restrictions in July 2021 falls outside this period. Mid-March to mid-May 2021 provides a comparison of eased restrictions with the first full national lockdown.

### Coronavirus timeline and data reference periods

**Mid-May 2020 to Mid-May 2021**

- **Notable restrictions**: Mid-May to end-July (2.5 months)
- **Easing restrictions**: August to mid-Sept. (1.5 months)
- **Notable restrictions**: Mid-Sept to end-Oct (15 months)
- **National lockdown**: November (1 month)
- **Notable restrictions**: December (1.5 months)
- **National lockdown**: January to February (2 months)
- **Notable restrictions**: March to mid-Apr (1.5 months)
- **Easing restrictions**: Mid-Apr to mid-July: (1 months)

#### Notable restrictions

- **Mid-May to end-July**:
  - June: Limited school reopening and outdoor meetings permitted.
  - Mid-May: Activity choice was extended to include outdoor activities.
  - July: Organised sport returned, followed by gyms, pools and leisure centres at the end of the month.

#### Easing restrictions

- **August to mid-Sept.**
  - Mid-September: Restrictions to indoor team sports reintroduced, along with the rule of six. Schools reopened for all pupils.

#### National lockdown

- **November**:
  - December: New tiered system of restrictions based on location.
  - National lockdown

- **January**:
  - Activity choice restricted – mainly to walking, cycling, running, local solo outdoor activity and informal activities.

- **March**:
  - Schools reopened (8th) and outdoor activity resumed with the rule of 6 in place (29th).

- **12 April**:
  - Gyms, pools, leisure centres and retail reopened.

- **17 May**:
  - Organised sport resumed and indoor gatherings reintroduced with the rule of six applied.

- **19 July**: All legal restrictions removed.
This chapter presents information on three levels of activity:

- **Active** (at least 150 minutes a week)
- **Fairly active** (an average of 30-149 minutes a week)
- **Inactive** (less than 30 minutes a week).

**What do we mean by physical activity?**

- **At least moderate intensity**
- **Bouts of 10 minutes or more that add up to one of the three levels of activity**

*Vigorous intensity counts as double*

**Note:** We count most sport and physical activity, but exclude gardening. However, the Office for Health Improvement & Disparities (OHID) does include gardening in its local level physical activity data. You can [view the OHID data here](#).
Headlines

Our data shows that between mid-May 2020 and mid-May 2021, just over six in 10 adults (27.8 million) achieved 150+ minutes of activity a week.

Levels of activity

**Inactive**
Less than an average of 30 minutes a week
27.5%

27.5% of people (12.5m) did less than an average of 30 minutes a week

**Fairly active**
An average of 30-149 minutes a week
11.6%

11.6% (5.3m) were fairly active but didn’t reach an average of 150 minutes a week

**Active**
An average of 150+ minutes a week
60.9%

60.9% (27.8m) did an average of 150 minutes or more a week

Link to data tables
Summary of change

Activity levels in England have been impacted by the range of national and tiered restrictions introduced to counter the coronavirus pandemic since mid-March 2020.

As such, the results show large changes compared to 12 months earlier:

- 0.7m (-1.9%) fewer active adults
- 1.0m (+2.0%) more inactive adults.

This reference period (mid-May 2019 to mid-May 2020) also contains disruption from the pandemic.

Combined drops since the last full pre-pandemic data point (mid-Nov 2018 to mid-Nov 2019) stand at 2.4%/0.8m fewer active and 2.9%/1.4m more inactive adults.

For details on how we measure change, see the notes pages.
Changes through the year

The drop in activity levels during the pandemic has reflected the level of restrictions in place at the time.

- Drops were smaller in magnitude over the summer of 2020, as restrictions were eased, but increased again as we entered another lockdown in January 2021.

- We’ve seen a partial recovery in activity levels across mid-March to mid-May 2021, as restrictions were eased following the early 2021 lockdown. However, this period in 2020 saw the first national lockdown and activity levels remain 4.1% (1.6m) down compared to the pre-pandemic levels of 2019.

The rest of this section explores how different demographic groups followed and deviated from this pattern, and what that means for the inequalities we observe among activity levels overall. Additional demographic breaks for sexual orientation, faith, working status and education stage can be found in the data tables.

For details on how we measure change, see the notes pages.
Levels of activity

Summary of demographic differences
Our data shows there are significant inequalities:

1. **Gender**
   - Men (62% or 13.8m) are more likely to be active than women (60% or 13.9m).

2. **Socio-economic groups**
   - Those in routine/semi-routine jobs and those who are long-term unemployed or have never worked (NS-SEC 6-8*) are the least likely to be active (52%).

3. **Age**
   - Activity levels generally decrease with age, with the sharpest decrease coming at age 75+ (to 38%).

4. **Disability and long-term health conditions**
   - Activity is less common for disabled people or those with a long-term health condition* (45%) than those without (66%).

5. **Ethnicity**
   - There are differences in activity levels based on ethnic background.

* See our definitions page for the full definition of each demographic group.
Activity levels fell for both men and women

Both men and women recorded sharp declines in activity levels as a result of the restrictions imposed.

Across mid-May 2020 to mid-May 2021:

- 62.3%/13.8m men were active. This was 2.3%/475,000 fewer compared to 12 months earlier
- 59.8%/13.9m women were active. This was 1.4%/257,000 fewer compared to 12 months earlier.

However, the nature and timing of these drops were different and this is explored on the next page.
Women saw more prolonged drops and recovery is likely to be slower

Both men and women have followed the same broad pattern across the periods impacted by the pandemic. Within this, the following nuances are observed:

• Men again saw a larger drop during the early 2021 lockdown period

• Women’s activity levels remained more consistently lower than 12 months earlier, across the period

• Men have driven the partial recovery seen during mid-March to mid-May 2021.

This indicates that, despite their activity levels seeming more resilient to the pandemic (i.e. during lockdowns), women who’ve seen activity levels fall may take longer and require more support to return.

Seasonal variation

<table>
<thead>
<tr>
<th>Gender</th>
<th>2019-20</th>
<th>2020-21</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>68.4%</td>
<td>68.8%</td>
</tr>
<tr>
<td></td>
<td>63.0%</td>
<td>65.0%</td>
</tr>
<tr>
<td></td>
<td>-5.4%</td>
<td>-3.8%</td>
</tr>
<tr>
<td>Female</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>64.7%</td>
<td>64.3%</td>
</tr>
<tr>
<td></td>
<td>61.5%</td>
<td>62.1%</td>
</tr>
<tr>
<td></td>
<td>-3.2%</td>
<td>-2.2%</td>
</tr>
</tbody>
</table>
The impact on activity levels was felt among all socio-economic groups

Having previously seen growth, activity levels among the most affluent (NS-SEC 1-2) and mid-affluent (NS-SEC 3-5) groups have fallen compared to 12 months ago.

While we can’t report a change compared to 12 months ago for the least affluent groups (routine/semi-routine jobs and those who are long-term unemployed or have never worked, NS-SEC 6-8), this is the only group to show a decrease compared to the November 2015-16 baseline (~2.7%). This reinforces the previously observed widening of existing inequalities.

Note: NS-SEC classifications refer to ages 16–74 only. Full details of what the NS-SEC categories mean can be found on the definitions page.
Seasonal variation was similar for both the most and least affluent groups

Both the most affluent (NS-SEC 1-2) and least affluent (NS-SEC 6-8) groups have a similar broad pattern to each other, and adults overall, with activity levels falling by more when greater restrictions were in place.
The downward trend in activity levels for the youngest age group has been exacerbated by the pandemic.

Activity levels have fallen for both the 16-34 and 35-54 age groups, compared to 12 months ago.

This continues the downward trend seen before the pandemic for the 16-34 age group, with the proportion who are active having fallen a further 2.8%/420,000 compared to 12 months ago. Within this, it’s the 16-24 age group particularly driving the decreases.

### Active: 150+ minutes a week

<table>
<thead>
<tr>
<th>Proportion of the population</th>
<th>16-34</th>
<th>35-54</th>
</tr>
</thead>
<tbody>
<tr>
<td>May 16 to May 17</td>
<td>71%</td>
<td>66%</td>
</tr>
<tr>
<td>May 17 to May 18</td>
<td>71%</td>
<td>66%</td>
</tr>
<tr>
<td>May 18 to May 19</td>
<td>69%</td>
<td>66%</td>
</tr>
<tr>
<td>May 19 to May 20</td>
<td>66%</td>
<td>66%</td>
</tr>
<tr>
<td>May 20 to May 21</td>
<td>64%</td>
<td>64%</td>
</tr>
</tbody>
</table>

-2.8% decrease from May 16 to May 17 for 16-34 age group
-2.2% decrease from May 16 to May 20 for 35-54 age group

Link to data tables
**Ages 16–54**

This age group has seen the greatest negative impact from the pandemic. The drops in activity levels have reflected the level of restrictions in place at the time, as per adults overall, but the scale of the drops have been greater and more sustained.

Despite some recovery as restrictions eased across mid-March to mid-May 2021, activity levels remain 6.0%/0.9m down on the same period in 2019 (pre-pandemic).

**Age 35–54**

The 35–54 age group saw a smaller but consistent drop throughout the period. They haven’t recorded any recovery across mid-March to mid-May.

**Seasonal variation**

- **16–34**
  - Mid-May to mid-July: 73.6% to 68.7%
  - Mid-July to mid-Sept: 69.8% to 69.6%
  - Mid-Sept to mid-Nov: 67.9% to 66.6%
  - Mid-Nov to mid-Jan: 63.4% to 65.0%
  - Mid-Jan to mid-March: 61.7% to 68.0%
  - Mid-March to mid-May: 63.2% to 67.1%

- **35–54**
  - Mid-May to mid-July: 70.2% to 66.2%
  - Mid-July to mid-Sept: 66.8% to 64.2%
  - Mid-Sept to mid-Nov: 64.2% to 65.4%
  - Mid-Nov to mid-Jan: 60.8% to 63.2%
  - Mid-Jan to mid-March: 63.2% to 64.5%

**Link to data tables**
Previous growth in activity levels has been halted among older adults

Activity levels had been growing strongly amongst the 55–74 and 75+ age groups prior to the coronavirus pandemic. While activity levels have broadly been maintained in the 55–74 age group, many of the gains among the 75+ age group have been lost.

The 75+ age group was particularly affected. This may be linked to the requirement for many of those aged 70+ to shield during the earlier stages of the pandemic and a continued nervousness of mingling indoors or in crowded outdoor spaces.

Active: 150+ minutes a week
Annual picture

<table>
<thead>
<tr>
<th>Period</th>
<th>55–74</th>
<th>75+</th>
</tr>
</thead>
<tbody>
<tr>
<td>May 16 to May 17</td>
<td>58%</td>
<td>34%</td>
</tr>
<tr>
<td>May 17 to May 18</td>
<td>59%</td>
<td>35%</td>
</tr>
<tr>
<td>May 18 to May 19</td>
<td>60%</td>
<td>38%</td>
</tr>
<tr>
<td>May 19 to May 20</td>
<td>60%</td>
<td>40%</td>
</tr>
<tr>
<td>May 20 to May 21</td>
<td>60%</td>
<td>38%</td>
</tr>
</tbody>
</table>
Age 55-74
The 55-74 age group has only seen a limited negative impact from the pandemic, concentrated around the first national lockdown. While more than half of the mid-March to mid-May drop has been recovered, activity levels remain 3.1% (0.1m) down on 2019 (pre-pandemic).

Age 75+
The 75+ group has seen consistently large drops throughout the period with no real sign of recovery. This indicates the older age group may need additional support to recover activity levels, or there’s a risk of the inequality widening once again.
Drops have been seen across both those with, and without a disability or long-term health condition

Disabled adults and people with a long-term health condition are less likely to be active than those without, with activity levels decreasing sharply the more impairments an individual has.

However, until the coronavirus pandemic and restrictions were introduced, there were steady increases in activity levels among all levels of impairment and, as such, a slight narrowing of the inequality.

The impact of the pandemic has been seen across all impairment groups, with an overall drop of 2.1%, compared to 12 months ago, among disabled people and those with a long-term health condition who were active.

Link to data tables
Disability and long-term health conditions

Adults with a disability or long-term health condition haven’t seen activity levels recover

Both those with and without a disability or long-term health condition have seen activity levels fall by more when greater restrictions were in place – in line with the national picture.

However, those with a disability or long-term health condition saw no recovery across mid-March to mid-May 2021, compared to the first full lockdown during the same period in 2020 – remaining 7.1% down on 2019.

This suggests a return to activity may be slower for this group and without additional support many may not return.

Seasonal variation

Disability or long-term health condition

No disability or long-term health condition

Link to data tables
The impact of the pandemic has disproportionately impacted Asian and Black adults

There’s a divide whereby Black and Asian adults, as well as those who have ‘other ethnicities’, are less likely to be active than those who are White or Mixed race.

The pandemic’s had a disproportionately negative impact on those with the lowest activity levels and as such the inequalities have widened.

Amongst those from Black and Asian (excluding Chinese) backgrounds, men have driven the drops. Despite this, women of Black and Asian (excluding Chinese) ethnicities remain the least active and have the largest gender gap to males with the same ethnicity.

Link to data tables
Drops are large and sustained for both Asian (excluding Chinese) and Black adults

For both groups, there are indications of large drops throughout the pandemic.

While those of Asian (excluding Chinese) ethnicities have seen activity levels partially recover during mid-March to mid-May 2021, compared to full lockdown in 2020, they remain 8.2% down on 2019 – indicating a return to prior activity levels may be slow/challenging.

This indicates that not only did these groups see the largest decreases, but that easing restrictions has led to limited recovery.

Link to data tables
This chapter presents data broken down by activity group and looks at those who’ve participated at least twice in the last 28 days.

Looking at participation at least twice in the last 28 days provides:
• a useful measure of engagement in different sports and physical activities
• an understanding of the contribution of activities to achieving 150+ minutes a week.

We count sport and physical activity if it’s done...

at least twice in the last 28 days
We’ve seen unprecedented change in the activities adults have taken part in during the pandemic. The accessibility of activities has differed greatly as the various phases have evolved, however, within this some have been consistently more accessible than others.

This is reflected in the large increases seen in walking and cycling for leisure, countered by large decreases across fitness, swimming, team sport and active travel.

The following pages explore how the numbers taking part changed through the different phases of the pandemic for some of our most prominent activities and how this reflected the restrictions in place at the time.

### Taken part at least twice in the last 28 days (age 16+) for selected activity groups

<table>
<thead>
<tr>
<th>Activity Group</th>
<th>May 18–May 17</th>
<th>May 17–May 18</th>
<th>May 18–May 19</th>
<th>May 19–May 20</th>
<th>May 20–May 21</th>
</tr>
</thead>
<tbody>
<tr>
<td>Walking for leisure</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>24.0m</td>
</tr>
<tr>
<td>Walking for travel</td>
<td></td>
<td></td>
<td></td>
<td>9.4m</td>
<td>-4.5m</td>
</tr>
<tr>
<td>Fitness activities</td>
<td>11.4m</td>
<td></td>
<td></td>
<td></td>
<td>-2.5m</td>
</tr>
<tr>
<td>Running, athletics or multi-sports</td>
<td>6.9m</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cycling for leisure and sport</td>
<td>7.5m</td>
<td></td>
<td></td>
<td></td>
<td>+1.2m</td>
</tr>
<tr>
<td>Swimming</td>
<td>1.2m</td>
<td></td>
<td></td>
<td></td>
<td>-2.9m</td>
</tr>
<tr>
<td>Adventure sports</td>
<td>3.4m</td>
<td></td>
<td></td>
<td></td>
<td>+150k</td>
</tr>
<tr>
<td>Cycling for travel</td>
<td>2.5m</td>
<td></td>
<td></td>
<td></td>
<td>-34k</td>
</tr>
<tr>
<td>Team sports</td>
<td>1.5m</td>
<td></td>
<td></td>
<td></td>
<td>-1.4m</td>
</tr>
</tbody>
</table>
| Racket sports                         | 1.1m          |              |              |              | -887k
Types of activity

Walking

People turned to walking

Throughout the pandemic, walking for leisure has often been the activity people turned to and, as such, numbers taking part increased – in stark contrast to overall activity levels.

Walking for leisure has seen activity levels continue to rise throughout the pandemic. This suggests that many people have developed/are developing a new habit. The largest increase came across mid-January to mid-March 2021, during the January and February full national lockdown.

Walking for travel, however, has seen the complete opposite. With many businesses closed, this was unsurprising during the full lockdown periods. When service sectors reopened (retail, hospitality etc.) we might have expected some recovery, however, the continued drops suggest office workers have driven the decreases. It’s likely that numbers won’t fully recover as many businesses aren’t returning full time to offices.

Walking for leisure

Walking for travel

Link to data tables

Arrows show change from 12 months ago. No arrows indicates no change.

May 20/21

24
Cycling and running numbers are starting to fall back

Throughout the pandemic people have often turned to cycling and running to stay active.

**Cycling for leisure or sport** has seen increases throughout, however, these increases have been gradually getting smaller as the pandemic has progressed – most likely as people have returned to their previous activities. Notably, in mid-March to mid-May 2021, numbers dropped back compared to the first full lockdown period. They do, however, remain up on 2019 (+0.8m).

This indicates that, while momentum for cycling continues, there’s evidence that growth has slowed and rates may return to pre-pandemic levels.

**Running or jogging** saw more consistent gains across the period, however, similarly to cycling, numbers dropped back in mid-March to mid-May 2021, compared to the first full lockdown period. In this period there’s no reportable difference to 2019 (pre-pandemic).
Facility closures impact fitness activity

At home alternatives continue to reduce the impact of facility closures, however, gym and fitness numbers have been hit hard by the restrictions, and numbers haven’t yet returned to pre-pandemic levels. Gyms reopened initially in July 2020 and again in April 2021 following the most recent lockdown.

Gyms and exercise machines saw large drops in number throughout the pandemic. When gyms reopened this was with limited capacity and we haven’t yet seen numbers recover. Exercise machines follow the same patterns as gym sessions – shown in the chart opposite.

Fitness classes and interval sessions (e.g. yoga, circuits, high intensity interval training etc.), saw numbers hold initially but then drop and stay low throughout the period. Women are typically more likely than men to take part in these activities.

More generic fitness training (e.g. body weight exercises, skipping etc.) saw increases in the region of half a million consistently throughout the period. The increase seen in mid-March to mid-May 2020 has been maintained in 2021. Women have been equally likely to take part as men during the pandemic.
Some activities have continued to struggle

Swimming numbers fell dramatically as a result of the pool closures during the pandemic. Although numbers began to recover as restrictions eased, the national lockdown of Jan/Feb 2021 reversed those gains.

It’s clear that as restrictions ease once more, recovery will take time and there’s a risk that some groups will find it hard to return.

Team sports numbers have been impacted significantly by the pandemic, with informal versions (individual skills or family play in the garden, for instance) often the only opportunities available.

As restrictions eased/were re-imposed we can see the scale of the drops differ according to the situation. For instance organised sport first resumed in July 2020, and we saw much smaller drops during this time.

We should note that organised activity didn’t resume for a second time until after this period (on 17 May 2021) and so it’s not unexpected that we’ve seen no recovery across mid-March to mid-May 2021 (as compared to full lockdown in 2020).
Attitudes

We ask the following attitude questions:

**Capability**
- I feel I have the ability to be physically active. *Ability includes physical ability and confidence.*

**Opportunity**
- I feel I have the opportunity to be physically active. *Opportunity includes things such as having somewhere to do it, being able to afford it, having the right kit, support from family, someone to take part with etc.*

**Motivation**
- I find sport enjoyable and satisfying. *Four questions covering motivation are included within the survey, however just enjoyment is included in this report.*

Results are presented for those saying strongly agree to each.

Definition

The attitudes of capability, opportunity and motivation combine to drive behaviour. The absence of just one of these can lead to someone becoming inactive. This awareness provides us with a key diagnosis tool in analysing and understanding changes in activity levels.
Perceived capability has fallen during the latest round of restrictions

Perceived ability to take part in sport and physical activity remained slightly higher than 12 months ago through the early stages of the pandemic, until restrictions started to be re-imposed at the end of 2020. Since the early 2021 lockdown, perceived ability to take part has been lower than 2020 levels.

Positive messaging encouraging everyone to keep moving, combined with the increased availability and promotion of digital and ‘at home’ opportunities to be active, likely contributed to this. However, it’s also likely the prolonged nature of the restrictions have had a negative impact upon perceived fitness levels, skills levels and confidence to take part in, or return to, activities.

The same broad pattern has been seen across all demographic groups.

I feel I have the ability to be physically active (proportion who strongly agree)
Perceived opportunity fell

From the start of the pandemic, the proportion strongly agreeing they feel they have the opportunity to be active has remained consistently below the levels recorded in the same periods 12 months ago. As new restrictions were imposed in November 2020, perceived opportunity dropped even more. Encouragingly, as restrictions started to ease from March 2021, the drops in perceived opportunity have reduced in magnitude.

The drops can be linked to similar ebbs and flows in activity levels – specifically, drops have been recorded in activities severely restricted during this period, so it’s unsurprising fewer people felt they had the opportunity to be active. It’s likely the second round of restrictions exacerbated the position.

The same broad pattern has been seen across all demographic groups.

**I feel I have the opportunity to be physically active (proportion who strongly agree)**

- **Mid-May to mid-July:** 34.6% (30.8% in 2019–20)
- **Mid-July to mid-Sept:** 34.9% (32.1% in 2019–20)
- **Mid-Sept to mid-Nov:** 34.1% (31.7% in 2019–20)
- **Mid-Nov to mid-Jan:** 34.8% (27.0% in 2019–20)
- **Mid-Jan to mid-March:** 34.6% (24.9% in 2019–20)
- **Mid-March to mid-May:** 32.1% (29.1% in 2019–20)

Easing restrictions compared to pre-pandemic

New restrictions compared to pre-pandemic

Full lockdown compared to pre-pandemic

Easing restrictions compared to full lockdown

Link to data tables
Enjoyment has started to fall

Having held up well during the majority of the pandemic, those strongly agreeing they enjoy taking part fell during mid-January to mid-March. This corresponded to the January/February 2021 lockdown and therefore suggests resilience has waned. While not significantly down compared to 12 months ago, mid-March to mid-May is down compared to the same period in 2019 (−1.3%), further supporting this theory.

Drops across mid-January to mid-March have been driven by men (−3.2%) and adults under the age of 55 (−3.8%).

It’ll be important to monitor enjoyment levels going forward as continued reductions are likely to impact activity levels over the longer term.

I find sport enjoyable and satisfying (proportion who strongly agree)
Mental wellbeing and individual and community development

Definition

Sport and physical activity – and volunteering to support it – has the power to improve lives. In addition to capturing the behaviour of adults when it comes to sport and physical activity, Active Lives also captures data designed to better understand impact against four of the five social outcomes identified within the government’s sport and physical activity strategy – Sporting Future.

Chapter one of this report covered the first of those outcomes – physical wellbeing. This chapter will focus on mental wellbeing, individual development and social and community development.

For further details on the outcomes, see our evidence review.
There’s a positive association between activity levels and mental wellbeing – some activity is good, more is better.

- Inactive (<30 minutes a week)
- Fairly active (30-149 minutes a week)
- Active (150+ minutes a week)

(Mean score out of 10)

<table>
<thead>
<tr>
<th>Activity Level</th>
<th>How satisfied are you with your life nowadays?</th>
<th>How happy did you feel yesterday?</th>
<th>To what extent do you feel the things you do in your life are worthwhile?</th>
<th>How anxious did you feel yesterday?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Inactive</td>
<td>6.4</td>
<td>6.7</td>
<td>7.0</td>
<td>3.7</td>
</tr>
<tr>
<td>Fairly active</td>
<td>6.6</td>
<td>6.8</td>
<td>7.1</td>
<td>3.6</td>
</tr>
<tr>
<td>Active</td>
<td>6.7</td>
<td>7.0</td>
<td>7.3</td>
<td>3.5</td>
</tr>
</tbody>
</table>

There’s a positive association between frequency of volunteering and mental wellbeing.

Regular volunteers generally have higher wellbeing scores than infrequent volunteers, who have higher scores than those who don’t volunteer.

(Mean score out of 10)

<table>
<thead>
<tr>
<th>Frequency of Volunteering</th>
<th>How satisfied are you with your life nowadays?</th>
<th>How happy did you feel yesterday?</th>
<th>To what extent do you feel the things you do in your life are worthwhile?</th>
<th>How anxious did you feel yesterday?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Not volunteered</td>
<td>6.8</td>
<td>7.0</td>
<td>7.1</td>
<td>3.7</td>
</tr>
<tr>
<td>Volunteered 1x (one-off)</td>
<td>6.9</td>
<td>7.0</td>
<td>7.1</td>
<td>3.6</td>
</tr>
<tr>
<td>Volunteered monthly</td>
<td>7.1</td>
<td>7.3</td>
<td>7.3</td>
<td>3.6</td>
</tr>
<tr>
<td>Volunteered weekly</td>
<td>7.4</td>
<td>7.4</td>
<td>7.5</td>
<td>3.3</td>
</tr>
</tbody>
</table>
Summary of change

It’s typical to see limited change in mental wellbeing scores in the short term, however, the unprecedented nature of the coronavirus pandemic means some changes have been observed.

Anxiety increased and all of happiness, life satisfaction and life worthwhileness decreased compared to 12 months ago, having been stable over the longer term, pre-pandemic.

Given the known positive associations with activity levels, it’s ever more important we help people back into sport and physical activity.

Anxiety has recovered from the high seen during the first national lockdown, now tracking consistently in the range of 0.2 points higher across the year compared to 12 months earlier.

Happiness fell more sharply across mid-November to mid-March, compared to earlier in the pandemic, as restrictions were reintroduced. Encouragingly, as restrictions started to be removed, we’ve seen a recovery – remaining below 2019 (-0.12) levels but above 2020 (+0.12) levels.

Life satisfaction and life worthwhileness both fell across mid-November through to mid-May, having seen only minor changes to that point. As more medium and long-term markers of wellbeing, this is perhaps not surprising as we’d expect levels to take longer to fall and longer to recover.

How happy did you feel yesterday?

Life satisfaction and life worthwhileness both fell across mid-November through to mid-May, having seen only minor changes to that point. As more medium and long-term markers of wellbeing, this is perhaps not surprising as we’d expect levels to take longer to fall and longer to recover.

Anxiety has recovered from the high seen during the first national lockdown, now tracking consistently in the range of 0.2 points higher across the year compared to 12 months earlier.

Happiness fell more sharply across mid-November to mid-March, compared to earlier in the pandemic, as restrictions were reintroduced. Encouragingly, as restrictions started to be removed, we’ve seen a recovery – remaining below 2019 (-0.12) levels but above 2020 (+0.12) levels.
Demographic variation

We note the following differences to the overall picture

**Age**

Anxiety levels have remained consistently higher for the 16–34 age group. Given the nature of the activities they’re more likely to participate in, this might reflect anxiety about returning to these for some or prevent others from returning.

In contrast, the 16–34 age group have also seen life worthwhileness return to its 2019 level across mid-March to mid-May.

Those aged 75+ have seen the largest drops in both happiness and life worthwhileness.

**Gender**

Women have seen a greater impact on their mental wellbeing during all stages of the pandemic, compared to men. Given consistently lower activity levels and the association between these measures, it’s likely recovery in both will take longer for women.

**How anxious did you feel yesterday? Age 16–34**

<table>
<thead>
<tr>
<th>Period</th>
<th>Mean Score (out of 10)</th>
<th>Change from Previous Period</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mid-May to mid-July</td>
<td>4.1</td>
<td></td>
</tr>
<tr>
<td>Mid-July to mid-Sept</td>
<td>4.0</td>
<td>+0.29</td>
</tr>
<tr>
<td>Mid-Sept to mid-Nov</td>
<td>4.3</td>
<td>+0.30</td>
</tr>
<tr>
<td>Mid-Nov to mid-Jan</td>
<td>4.3</td>
<td>+0.27</td>
</tr>
<tr>
<td>Mid-Jan to mid-March</td>
<td>4.2</td>
<td></td>
</tr>
<tr>
<td>Mid-March to mid-May</td>
<td>4.2</td>
<td></td>
</tr>
</tbody>
</table>

(mean score out of 10, where 10 is very anxious and 0 is not anxious at all)

**Link to data tables**
Demographic variation

The following differences to the overall picture have been observed:

**Ethnicity**

Comparing the latest period, May 20/21, with 12 months ago:

- Adults from Black ethnicities haven’t reported any changes in their mental wellbeing across any of the measures.
- Decreases in mental wellbeing are generally largest among those of mixed ethnicities.

**Socio-economic groups**

Adults from most affluent groups (NS-SEC 1-2) have driven the drops across all measures of mental wellbeing.

With the exception of life satisfaction, the least affluent groups (NS-SEC 6-8) haven’t recorded a reportable change in their mental wellbeing across the year as a whole, compared to 12 months ago.
Individual development

There's a positive association between activity levels and individual development

Those who are active have higher scores than those who are fairly active or inactive.

- Inactive (<30 minutes a week)
- Fairly active (30-149 minutes a week)
- Active (150+ minutes a week)

(mean score out of 5, where 5 is strongly agree and 1 is strongly disagree)

There's a positive association between frequency of volunteering and individual development

Those who volunteer regularly generally have higher scores than those who volunteer as a one-off or not at all.

- Not volunteered
- Volunteered 1x (one-off)
- Volunteered a few times
- Volunteered monthly

(mean score out of 5, where 5 is strongly agree and 1 is strongly disagree)

Link to data tables
There's a positive association between activity levels and social and community development

Those who are active have higher social trust scores than those who are inactive.

There's a small positive association between volunteering and social and community development overall, but not between the different frequencies of volunteering.

Link to data tables
Tackling loneliness is a key government objective.

In October 2018, the Department for Digital, Culture, Media and Sport published ‘A Connected Society’, its first strategy for tackling loneliness in England.

This chapter sets out the role sport and physical activity – and volunteering to support it – has in this.

Supporting people to have meaningful social relationships isn’t just crucial to people’s physical and mental health. It also affects their engagement in the workplace and wider community cohesion.

We’ve focused on those who are often/always lonely, as policy is centred around this group.

How often do you feel lonely?

- 6% Often/always
- 18% Some of the time
- 22% Occasionally
- 28% Hardly ever
- 26% Never
Loneliness

People who engage in sport and physical activity are less likely to feel lonely

Those who are active are less likely to feel lonely than those who are fairly active, who in turn are less likely to feel lonely than those who are inactive. Many forms of sport and physical activity include a social element, so this is perhaps not surprising.

Often/always feel lonely

<table>
<thead>
<tr>
<th>Activity Level</th>
<th>2019-20</th>
<th>2020-21</th>
</tr>
</thead>
<tbody>
<tr>
<td>Active</td>
<td>5.1%</td>
<td>6.2%</td>
</tr>
<tr>
<td>Fairly active</td>
<td>6.2%</td>
<td>8.5%</td>
</tr>
<tr>
<td>Inactive</td>
<td>8.5%</td>
<td>8.5%</td>
</tr>
</tbody>
</table>

This association holds across demographic groups, with one exception:

- Disabled adults or those with a long-term health condition are equally likely to be lonely, whether they’re active or not.

Seasonal variation

Loneliness levels have increased across mid-November to mid-May compared to the same periods 12 months earlier. This isn’t surprising considering the January/February 2021 lockdown will inevitably have had the greatest negative impact on the most vulnerable.

Often/always feel lonely (all activity levels)

Link to data tables
Loneliness

Demographic variation

Gender
Women (7.2%) are more likely to report feeling lonely often or always, compared to men (4.9%).

Age
Feeling lonely often or always is most common among the oldest and youngest age group. Until ages 75+, it decreases with age. Across mid-November to mid-May, increases in loneliness have been most prominent in the 16-24 age group.

Link to data tables

Socio-economic groups
Loneliness is higher amongst those from the least affluent groups (NS-SEC 6-8, 10.3%), compared to those from the most affluent groups (NS-SEC 1-2, 4.2%).

Ethnicity
Adults from Black (8.0%) and Mixed (9.8%) ethnicities report higher levels of loneliness than all adults.

Disability and long-term health conditions
Loneliness is higher among disabled people or those with a long-term health condition compared to those without, and increases further for those with three or more impairments. Across mid-November to mid-May, increases in loneliness have been greater among those with a disability or long-term health condition, widening the gap.
Further breakdowns

Local level data
Data for local areas (regions, Active Partnerships, local authorities) are available for the following measures:

- Levels of activity
- Loneliness (regions and Active Partnerships only).

Additional demographic groups
Data for additional demographic groups are available in the accompanying data tables, covering:

- Sexual orientation
- Faith
- Working status
- Stage of education.

Exploring the data
Please use the Active Lives Online Tool to run your own analysis of the data: Active Lives Online Tool – the tool will be updated with the latest data shortly after its publication.

Link to data tables

Activity across England

Active
(an average of at least 150 minutes per week)

- 54.9% or lower (least active)
- 55.0-59.9%
- 60.0-64.9%
- 65.0-69.9%
- 70.0% or greater (most active)
Definitions

**Moderate activity** is defined as activity where you raise your heart rate.

**Vigorous activity** is where you’re out of breath or are sweating (you may not be able to say more than a few words without pausing for breath).

**NS-SEC groups** are defined as:
- **Most affluent** (NS-SEC 1-2): Managerial, administrative and professional occupations (e.g. chief executive, doctor, actor, journalist).
- **Mid-affluent** (NS-SEC 3-5): Intermediate, lower supervisory and technical occupations; self employed and small employers (e.g. auxiliary nurse, secretary, plumber, gardener, train driver).
- **Least affluent** (NS-SEC 6-8): Semi-routine and routine occupations; long-term unemployed or never worked (e.g. post man, shop assistant, bus driver).
- **Students and other** (NS-SEC 9).

Limiting disability and long-term health conditions is defined as an individual reporting they have a physical or mental health condition or illness that’s lasted, or is expected to last, 12 months or more, and that this has a substantial effect on their ability to do normal daily activities.

Impairment types cover matters that limit day-to-day life, including chronic health conditions (e.g. diabetes and cancer), physical disability (e.g. mobility and dexterity), mental health (e.g. depression and anxiety) and sensory impairments (e.g. hearing and vision).

The White British group within **ethnicity** includes those who say they are White-Irish.

The data tables also include breakdowns for additional key demographic groups such as **sexual orientation**, **religion**, **working status** and **current education stage**.

Link to more information on measures and demographics

Link to data tables
The Active Lives Adult Survey is a push-to-web survey.

Carried out by Ipsos MORI, it involves postal mailouts inviting participants to complete the survey online.

The survey can be completed on mobile or desktop devices. A paper questionnaire is also sent out to maximise response rates. More information on the survey can be found here.

**Sample and weighting**

The achieved sample was 172,970 (16+).

Data have been weighted to Office for National Statistics (ONS) population measures for geography and key demographics.

Confidence intervals can be found in the linked tables. These indicate that if repeated samples were taken and confidence intervals computed for each sample, 95% of the intervals would contain the true value. Only significant differences are reported within the commentary. Where results are reported as being the same for two groups, any differences fall within the margin of error.

Significance tests can be found in the linked tables. The tests indicate that if repeated samples were taken, 95% of the time we’d get similar findings, i.e. we can be confident that the differences seen in our sampled respondents are reflective of the population. When sample sizes are smaller, confidence intervals are larger, meaning differences between estimates need to be greater to be considered statistically significant.

Population totals are estimated values and have been calculated using ONS mid-2015, mid-2016, mid-2017, mid-2018, mid-2019 and mid-2020 estimates. Confidence intervals also apply to these. More detail can be found here.
During the first six months of surveying, a number of respondents were double counting a gym session and the individual activities they did within the gym. We resolved this problem by rewording the question from May 2016. Due to exercise bike being counted within cycling for leisure and sport, this means we can’t report November 15/16 data for either fitness activities or cycling for leisure.

Associations

Where associations between wellbeing, individual and community development and engagement in sport and physical activity are referenced, this doesn’t tell us about causality. We don’t know the direction of the association or whether we’re seeing a direct or indirect link.

Volunteering

Please refer to the November 19-20 report for volunteering data – as this data was new, there will not be a 12 month update period available until the November 20-21 report.

Loneliness

Data collection was extended to the full sample for year five, however this uncovered an ordering effect with the questions following the outcomes data. This has been rectified for year six. Only data not impacted is presented.

Muscle strength

As per volunteering, please refer to the November 19-20 report.

Data considerations

How we measure change

Active Lives figures are based on the response of 172,970 adults, which we then scale up to provide an England-wide picture. That means there’ll naturally be small fluctuations when we compare the figures we have now, with 12 months ago.

In accordance with Government Statistical Service good practice guidance, we highlight changes within the report where we’re confident there are genuine differences. If the data is showing only small differences which are within the margin of error, they’re noted as “no change”.

Where we comment on change this refers to a percentage point (absolute) change.

Link to more information on measures and demographics

Link to data tables

Suppressed data

During the first six months of surveying, a number of respondents were double counting a gym session and the individual activities they did within the gym. We resolved this problem by rewording the question from May 2016. Due to exercise bike being counted within cycling for leisure and sport, this means we can’t report November 15/16 data for either fitness activities or cycling for leisure.

Associations

Where associations between wellbeing, individual and community development and engagement in sport and physical activity are referenced, this doesn’t tell us about causality. We don’t know the direction of the association or whether we’re seeing a direct or indirect link.