Inclusive physical activity and ways to reduce inequalities

A rapid review of what we’ve learned from evaluation

This report was created in four weeks as part of a rapid experimental internal challenge. In the first two weeks colleagues across Sport England shared evaluation content. In the second two weeks the Evaluation Team synthesised all content and prepared this report.

We would like to thank everyone who took the time to prepare and submit content, as well as everyone involved in the programmes, partnerships, campaigns and evaluations that we drew on.

The report was first shared on 6 August 2021. We may add to it and improve on it over time.

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1. What this report is about

Our new strategy Uniting the Movement is built on the fundamental belief that everyone should have the right to benefit from sport and physical activity. It challenges us to become a more inclusive sector and tackle the well-known and deep-rooted inequalities that have excluded too many for too long.

This report presents what we’ve learned from evaluation about ways to make physical activity more inclusive and reduce specific inequalities. It summarises content shared by a large cross-section of Sport England colleagues and teams, drawing on evaluation materials and personal experience of over 25 major investment programmes, partnerships and campaigns from recent years.

The report is part of the Data, Insight and Learning catalyst’s support for our 2022-25 strategic planning. We’ve also written it to be shared across the sector, discussed, and built on; recognising that it only scratches the surface of the available evidence.
2. How this report was created

The Sport England Evaluation Team designed a collaborative internal challenge, called the Inequalities Evaluation Challenge. The aim was to rapidly gather what we’ve learned from evaluation about inclusive physical activity and ways to reduce inequalities, to support our strategic planning. The Challenge lasted four weeks, and was split into two, two-week stages. The format was experimental, to see what we could achieve in a short space of time with a new way of working.

Before the Challenge we used internal comms channels to raise awareness, then directly approached teams and colleagues responsible for key programmes, investments and campaigns with substantial evaluation in place. In Stage 1 we invited and supported these colleagues to review and capture useful, concise content from their evaluations and submit it via two surveys on Microsoft Forms. In Stage 2 the Evaluation Team synthesised all the submitted content, then created and shared this report.

Talking point: The challenge was a pragmatic solution to reviewing a large amount of information over a short period of time. We limited the scope to internal colleagues only, and evaluation materials only, to keep it manageable. But lots of colleagues pointed to wider research, project partners and ‘untapped’ local evaluations that can provide even greater insight. We’ll keep these in mind for the future. In the meantime, if you have insight about inclusive physical activity and tackling inequalities – have you shared it with people who can use it to make a difference?

We allowed a broad interpretation of ‘evaluation materials’: reports, slide decks, workshop notes etc as well as personal reflections and experience. We asked colleagues to submit concise content based on such materials, and to approach this however they wished. Some scanned and lifted content from written outputs; others got together to talk about it, share experiences and capture their discussion.

Ultimately the report presents a pragmatic, high-level summary of one part of the available evidence. It’s a starting point rather than an exhaustive study, and we’ll use it to consider future research needs and lines of enquiry that the Data, Insight and Learning catalyst can support.

We will reflect and learn from the format of this challenge to inform the design of future challenges. If you have any feedback about the challenge format or this report, or if you’d like to find out more about the challenge, please contact tim.fitches@sportengland.org.
3. Inclusive and Inequalities

In this report we refer to:

**Inclusive**, meaning physical activity that is welcoming, accessible and open to as many people as possible.

**Inequalities**, referring to individuals and groups who have typically had unequal (less) access to sport and physical activity.

These are not perfect definitions, nor is the relationship between the two terms always clear-cut. **This report takes the view that while making sport more universally inclusive will help widen access, to eliminate inequalities altogether will require much greater effort and targeted support.**

A practical example of this might be a swimming pool which has an ‘inclusive’ timetable designed to serve the whole community, but which also provides extra measures such as a creche, gender-neutral changing rooms or ‘behind-closed-doors’ sessions that specifically help reduce inequalities for certain audiences.

The aim of this report therefore is to identify:

1) what we can do to make sport and physical activity more inclusive
2) what extra measures can reduce specific inequalities, when being inclusive just isn’t enough.

We found many broad inclusive principles as well as specific insight for certain demographic groups. **However, it’s important to remember that each of us is unique.** What is inclusive for one, may not be for another; and neither people nor inequalities can be defined solely by demographic groups.

**As per Uniting the Movement, the right thing to do is ensure we all – as individuals – have what we need to be active, regardless of who we are.** For some this needs relatively little from us, but for others it will take far more work, time, energy and investment. We hope this report helps to direct it accordingly.
4. How to make sport and physical activity more Inclusive

“As we recover together, we want to come back more inclusive and more relevant.”

“We’ll focus on working with partners to help them design and deliver enjoyable and inclusive experiences for people.”

– Uniting the Movement

The way that physical activity is provided directly affects the diversity of those who consume it. By understanding which aspects of provision support greater inclusion, we can bring the benefits of physical activity to a wider and more diverse audience.

This section shares what we’ve learned from evaluation about inclusive physical activity. It draws mainly on principles that were common across multiple audiences or programmes, along with practical examples that illustrate how they were applied.

We’ve grouped what we found into themes:

- See the world from their view
- Put the person first
- The right partnerships
- Emotional, not just practical
- Get the basics right
- The right environment, the whole experience
- Flexibility
- Reframe and reimagine
- Communication covers lots of things
- Workforce is key
- It will take time, money and effort
- Children and young people – extra insight

★ See the world from their view

Any service should begin with understanding the world from the audience’s point of view. Their lives, communities, local services, motivations, barriers, culture and more. For example, our Innovation Open Call content highlighted the need to consider cultural and religious calendars.
Effective community engagement comes before sport and physical activity, so build in time and money to do it well and focus on building trust. Involve the community throughout to co-design and co-produce sustainable services for and with them (this is more than just consultation).

Use audience insight and talk to partners who already work with them. Identify role models and peers to help you connect to the audience.

Don’t assume the ‘same’ audience in a different place will have the same worldview or face the same challenges.

**Talking points:**

1. Making services more accessible for one audience usually makes them more accessible for others. This is usually a good thing, but not if it diverts services or resources away from your target audience. We had conflicting views on this – about whether to be inclusive to everyone, or just to the target audience. It’s a tricky balance and will depend on the project. But think about how to be as inclusive as possible in a way that still prioritises the needs of your target audience.

2. We mustn’t assume that an effective model of inclusion can be lifted from one place to another, or from one audience to another. Designing an inclusive approach should start anew with each different place or audience. Some of the principles here will help you do this but they won’t always work in every case. As ever, start with the audience and work from there.

**★ Put the person first**

Every group, community and audience is made up of individuals, so prioritise their needs by tailoring the service and personalising the benefits to them on an individual level.

For example, our Tackling Inactivity in Colleges content talks of selling the benefits to individuals, rather than students as a whole. Our Workforce content talks of a people-first approach to coaching – coach the person, not (just) the sport. And our Volunteering content talks of volunteer-centric opportunities.

Putting the person first is also about offering holistic and complementary services and support, such as mental health or confidence-building; and building in a
personal touch, such as sending reminders to absent participants to nudge them back.

Evaluation, too, should put the person first, as explored in our Accessible Evaluation guidance.

Talking point: 39% of adults and 55% of children – collectively over 20 million people – don’t achieve recommended levels of physical activity. If being inclusive means focusing on the individual, how can we do that in the most meaningful way across such large numbers?

★ The right partnerships

Don’t go it alone. Work with partners (broader than just sport) who are familiar to, trusted by or have existing relationships with the community or target audience. Agree a shared purpose and a shared approach to inclusion. Work within existing provision and use existing referral routes. Remove hierarchy and work as one team to tackle the same issue (that’s from our Tackling Inequalities Fund (TIF) content). Include specific time and resource to help partnerships evolve and grow. Support each other and point to each other’s activities and services while connecting the pathways for the target audience; for example our We Are Undefeatable (WAU) content talks of connecting the medical setting to the leisure setting.

Addressing inequalities across a whole system requires close work and interaction across all layers, and strong leadership at all levels. For example, our work with Local Delivery Pilots reflects that ‘positive outcomes are delivered by systems and interactions within them, not by particular interventions or organisations’.

★ Emotional, not just practical

Support people on an emotional level, not just a practical one. Be mindful of their mental wellbeing and take steps to anticipate and relieve anxieties (particularly acute during the pandemic). Consider emotional barriers, such as feelings of ‘not for me’, and use mentors, peers and role models to offer emotional support. The social aspect is an important part of this too – people want to feel they can meet and talk with people like them, which helps in making the offer feel inclusive.
Many of the other principles here touch on emotional considerations too – for example, offering holistic wellbeing support alongside physical activity, using communication (imagery and wording) that creates an emotional connection with people, a people-centric workforce, providing a supportive environment, and the importance of fun and enjoyment.

One practical step recommended by our DFE Volunteer Leaders and Coaches content is to train members of the workforce in Mental Health First Aid as well as the standard First Aid and Safeguarding.

**Talking point:** The focus on mental health and emotional support has been particularly acute during the Coronavirus pandemic, but it feels like a critical point at any time. As with other areas, it’s important that we carry forward learning from the pandemic that can help us in the future – and what could be more important than a focus on our emotional wellbeing?

★ **Get the basics right**

Think about access, safety, signage, travel and the facility itself. Our Swim Local evaluation highlights a whole range of features that can help, including pegs, storage cubbies and seating on the poolside; pool hoists and accessible steps to enter the pool with confidence and dignity; and privacy blinds and individual showers for those who are self-conscious or adhering to religious or cultural beliefs. When building new, get it right – content from one of our Football investments highlights the importance of a flat, clean, clear pitch with a versatile surface and uses. Consider what else the target audience may need – toilets, parking, benches etc, as well as clothes and equipment. Our Families Fund content mentions an ‘equipment library loan’ service. Minimise time and cost to travel by using local facilities (but be aware of any perceived community boundaries). Quick note on cost: free or cheap is good, but does not overcome all barriers.

★ **The right environment, the whole experience**

‘An environment where non-sporty people feel comfortable and welcome’ is how Our Tackling Inactivity in Colleges content puts it. Somewhere safe, supportive and non-judgemental. Go all out at the start to welcome and reassure participants. Share info, show them round the venue, introduce them to people; it all helps. Provide a sociable,
interactive environment where coaches, volunteers and participants alike can mix and get to know one another.

Our Volunteering content points out how a positive experience helps retain a more diverse range of volunteers and leads to greater outcomes, and a good experience is vital for participants too. Initially, an experience that is easy, rewarding, fun, friendly, sociable and inclusive can have broad appeal.

A high-quality experience can also maximise word of mouth, meaning wider appeal. Across everything, consider the complete user journey.

★ Flexibility

Design a core offer that can be delivered flexibly according to people’s needs. Life can be unpredictable (as can medical conditions – WAU content) so provide a flexible service that allows people to choose, drop in and out, and attend as they can based on life’s ebb and flow. Offer a range of options and be prepared to change based on fluctuating demand. Our Beat the Street content mentions how the flexible model meant people could take part locally or slightly further afield.

Many services offered more flexible approaches during Covid. Keep anything that worked well, such as blended online/offline approaches.

Don’t assume what people want (traditional prescriptive services haven’t worked with many audiences), or that people will automatically come if you provide it (needs activation).

**Talking point:** We know from behavioural science that routine and regularity can help drive new habits and behaviours. So how do we offer flexibility in a way that still helps support the creation of new habits?

★ Reframe and reimagine

Old models haven’t worked for many audiences. We must reframe, rethink and reimagine how sport can be consumed by and provided to everyone, under-represented groups most of all.
Reframing applies to participants, volunteers, coaches alike. Anyone can be active, anyone can volunteer, anyone can coach. Large and small organisations across the sector can lead by example by making inclusivity a priority.

Our Satellite Clubs content recommends that we ‘reimagine what a ‘sports club’ is or can be by thinking differently about how and where sport and physical activity can be delivered.’

So too, rethink how to contact or engage with a new audience, and reframe the message (it doesn’t always need to be about sport). Novel approaches mean you won’t always know what’s working, nor will outcomes always be those you expect. Innovate, experiment, be curious. New audience, new partners, new approach.

★ Communication covers lots of things

Tailor the language (and imagery) you use and beware of divisive ‘sporty’ terms that can alienate some. ‘Sport by another name’ as our Get Healthy Get Active content puts it.

Communication can be used to help reassure – if people are nervous or reluctant then hearing from ‘people like them’ about how good the opportunity is may encourage them to attend.

Our Innovation Open Call content highlights how ‘Listening is as important as broadcasting or communicating a message’. Listen to your audience, and invite and respond to their feedback about the service.

Use a range of communication methods appropriate to the audience. Word of mouth is gold, such as organic communication through family, friends and other influencers such as role models or carers. Social media is more targeted but can be harder to convert to participation. Some will prefer WhatsApp over email. As ever, the best channels will depend on the audience.

Evaluate, and then communicate, the benefits. You’ll have to capture them first – so use inclusive methods and talk positively about evaluation so it adds to the experience and benefits all concerned.

Consider potential issues around reaching your audience, such as how to obtain access to mailing lists (e.g. via partners) and consent to contact.
Widely showcase the service. Be persistent but not pushy, and try events and tasters to raise awareness. Show the value it has had to others, so it becomes 'the norm'.

Stay in touch. Follow-up, send reminders, support social media interaction.

**Talking point:** The way we evaluate and learn from our work directly informs our approach to being inclusive (not least of all this report). Monitor who you are and who you aren’t reaching, and the diversity of people and voices at all levels. Set learning objectives that support inclusive ambitions. Reflect and learn from your experience to adapt and improve and be more inclusive.

★ Workforce is key

The workforce, including coaches, volunteers and other frontline staff, is vital to offering inclusive physical activity opportunities. A well-trained workforce can serve as friendly, supportive empathetic and relatable role models to all participants. For example our Families Fund content recommends a workforce that can deliver to different people and a mix of age groups.

Seeing ‘people like me’ in the workforce can inspire and reassure participants; so too seeing a participant like them move into a volunteer or paid role (as our Workforce Diversity Projects content reported).

Many of the same principles apply to supporting an inclusive workforce: understanding the individual, reframing who can do it, practical and emotional support, a people-first approach, flexibility to volunteer at different times and in different ways, tailoring the benefits, etc. On this last point, Our Workforce Diversity Projects content reports that empowering a community and supporting people like them is a bigger motivation than gaining a qualification for many in the workforce.

Content from our Specialist Workforce Partnerships revealed three principles for supporting an inclusive coaching workforce:

- **Identity:** Reframe who is or can be a coach
- **Accessibility:** Coaching that is practically and emotionally accessible
- **People-first:** Prioritising the needs of the coach and the people they coach

Our Volunteer Fund evaluation provides an inclusive volunteering framework called ADAPT, replicated below:
**It will take time, effort and money**

Truly inclusive physical activity and reducing inequalities will take time, effort and money. Engaging with the audience; co-producing the service; developing relationships; building trust; changing culture, attitudes and behaviours – it all takes time.

And the more bespoke the service, the more difficult it is to deliver at scale. For example, our work to set up parkrun in deprived areas has taken much longer than the mainstream runs.

All of this tells us that we must be prepared to invest greater time and effort in the people and places who need it the most.

**Children and Young People – extra insight**

While much of the insight above applies to (and comes from) a range of audiences, there was further insight relating to inclusive physical activity for children and young people, drawn from a range of relevant programmes:
• That ‘inclusive’ and ‘competition’ don’t always mix. Some find competition to be intimidating or unattainable, while an inclusive message can feel at odds to the sense of competition. A tiered approach to competition (based on confidence and competence), or inclusive festivals or sports days work well. Some schools offer a choice between competitive sport, physical activity and health. Non-traditional sports can also be a good leveller – favoured by students who felt unable to compete at more traditional sports.
• A focus on feeling good, fun, life skills, being healthy, being with friends and destressing may be better motivators to sport than performance, ability or winning.
• Changing perceptions around what inclusive means among school staff, e.g. that it’s about everyone, not just about special educational needs and disabilities.
• There’s a large association between feeling confident and feeling included and competent (rather than competence leading to confidence) – so focus on the experience and building confidence in the individual.
• Links to the curriculum and to students’ courses help to gain support from schools and show the benefit to children.
• Student voice and involvement; speaking to those who aren’t interested as well as those who are.
• For children and young people who are less confident, having a trusted adult within sports clubs who can encourage and motivate (in whatever way works best for the young person) is important.
• For families, including a social element for the young person as well as the adults can help to boost and maintain engagement.
5. Specific inequalities / audiences:

“There are deep-rooted inequalities in sport and physical activity, which mean there are people who feel excluded from being active because the right options and opportunities aren’t there.”

“Providing opportunities to people and communities that have traditionally been left behind, and helping to remove the barriers to activity, has never been more important.”

- Uniting the Movement

Where the previous section explored common principles for broad, inclusive sport and physical activity, this section explores the more targeted, specific or additional measures and approaches that evaluation has shown can help reduce known inequalities. From the content we’ve seen, it’s clear that the greatest gains to be had in increasing physical activity are among under-represented groups, and that targeted programmes really do bring positive results.

Note on our use of demographic groups: Inequalities have traditionally been understood, funded, and evaluated using the (sometimes broad) demographic groups from which the inequalities were first identified. While we have used such demographic groups to organise this section, we emphasise once again that we are each as human beings a unique, diverse and different mix of characteristics, and cannot be defined by demographic groups alone.

Women and girls

According to Active Lives data from 2019/20, women remain less likely to be active than men. As the pandemic hit, male activity levels fell more quickly than women with a larger drop during the initial lockdown (mid-March to mid-May). However, they then recovered more quickly whereas female activity levels remained more consistently lower than 12 months earlier. This indicates that despite their activity levels initially seeming more resilient to the pandemic, those women who have seen activity levels fall may find it harder to return long term.

The fear of judgement is still prominent for women despite the success of This Girl Can (TGC). For many women, exercise is about managing fears and gathering the
confidence to get active. Women often try to mitigate their concerns by carefully managing their activities, this includes ensuring the atmosphere around the activity is friendly, considering who they participate with (e.g. a friend), and thinking about the nature of the activity (e.g. swimming makes women feel more self-conconscious than running). Safety concerns can also inhibit women from exercising, particularly in areas where there is a lack of female-only spaces to be active.

Positively, we know that developing confidence can lead to increased activity for women, but even what might seem minor changes such as changing the leader or location of a session can negatively impact confidence. It is also common for women to have breaks from activity and consequently need to build up the courage to return to exercise settings.

**The right messaging can be your hook**

TGC and specifically visible TGC branding can offer reassurance and help women feel comfortable exercising in new environments, while TGC activations have identified ways to engage and motivate women. Messaging can make a difference with projects finding that promoting activity as providing opportunities for “me time”, to make friends and socialise, and empowerment can drive participation. Emphasising that sessions are aimed at novices and including coaching can help breed confidence.

The Volunteering Fund found that the appeal of addressing a wider issue in the community or supporting their peers was a better hook to engagement for women than volunteering or participating in sport/activity. The Core Market Life Changes Fund and London Sport women’s project evaluations found that, like some other sub-groups, women often prefer language such as activity and movement to exercise and sport, and engage with messaging that speaks of the health benefits of exercise.

Appropriate marketing imagery is important to help women to feel comfortable exercising, but often it has the opposite effect. Displaying authentic photos of women performing activity, such as being red faced and sweaty, can make activity feel less intimidating, whereas including a mixture of body types and ethnicities can make it feel more inclusive.

Designing and promoting women-only sessions can also lead to engagement, particularly among older age groups.

**Drivers of activity**
Findings from the Couch to Fitness programme evaluation suggest that convenience and low cost are important drivers for inactive women with creatives that highlighted the ease of the programme and low financial investment required receiving the most engagement. The importance of convenience is potentially further supported by the finding that TGC Swim, a programme with one fixed location, reached more participants than Let’s Ride, a programme where locations were different each week.

Tailoring activities to specific sub-groups of women has also had some success with Couch to Bhangra engaging a greater proportion of women of Indian and Pakistani ethnicity. Postcode targeting via social media campaigns can initially be successful in targeting specific groups, but adverts can reach a point of saturation and require regular updating.

Perhaps most importantly programmes are only likely to be successful if they reflect and match their promotion. For example, both TGC Swim and Let’s Ride sessions were marketed at beginners so coaches regularly provided encouragement and support to participants.

**Offer a variety**

It is important to note that a one size fits all approach will not work for all women and they should at least initially be offered a mixture of activities to choose from. The East London (women) project found many participants enjoyed solo activities that they can do at their own pace, e.g. jogging or swimming, but others preferred relaxed or social group activities, such as walking groups or Zumba.

**Engaging girls and young women**

Similar to TGC, Tackling Inactivity in Colleges has tried to respond to the impact fear of judgement and negative previous exercise experiences have had on girls and young women. This has included designing activities that are different from those traditionally performed at school, organising initial female-only sessions and hosting classes in darker rooms without mirrors. We have learned through the Satellite Clubs evaluation that younger females are more likely to attend sessions in school environments than in other settings. The programme has helped younger females, particularly from LSEG communities, reconnect with dance activities they enjoyed as a child by offering encouragement, creating a judgement-free environment and removing perceived pressures such as wearing leotards or being assessed. The participants also benefitted from being able to choose the session content and music.
Encouraging new mothers to return to activity

Providers can help new mothers increase their activity levels by offering the right environment and facilities, including an on-site creche, pram access, baby changing facilities and a kitchen to warm bottles. New mothers are more likely to participate in exercise classes if they are scheduled throughout the day rather than a few fixed times. Finally, the Core Market Life Changes fund found that connecting mums together and organising challenges, e.g. first post-baby 5k, can be successful at driving engagement.

In terms of reaching this audience, using services such as parenting groups, community organisations who accommodate children, or sports clubs who offer family sessions have previously been effective.

Race and ethnicity

Family pressures, expectations, conservative views, and cultural factors can all negatively impact the ability of people, especially women, from Black, Asian, and other culturally diverse backgrounds to participate in physical activity. In addition, for the South Asian community lifestyle factors such as the need to look after multigenerational households can lead to time constraints and exercise being deprioritised. Alongside this, messaging such as that of We Are Undefeatable has less cut through with South Asian people as there can be a belief that long-term health conditions are pre-ordained and their actions and behaviour will have no impact on their situation.

Projects have identified some proven ways to successfully engage with these audiences, however, it is important to remember that a nuanced approach is required with different ethnic communities:

1. Deliver online sessions— the Satellite Clubs programme found during lockdown that online sessions enabled young women to participate in activity at convenient times and this reduced family tensions. South Asian females have cited that exercising at home makes it easier to fit in activity alongside their family responsibilities. Another advantage of online sessions for this audience is that they can mitigate against cultural pressures to not be active in public.
2. Help build friendship - connecting people can help sustain participation. Linked to the above, online activities as part of Satellite Clubs helped connect diverse communities from Milton Keynes, London, and Bradford, leading to friendships being formed. For in-person activities participants can be encouraged to invite their friends, this approach was used successfully in the Tackling Inactivity in Colleges (TIC) programme.

3. Be mindful of cultural sensitivities - this can relate to aspects such as dress code or the timing of activities. For example, if designing activities aimed at Muslims, it can be helpful to time activities around Friday prayer or have flexibility during Ramadan. TIC found that female-only sessions have also proved popular among Muslim women as they feel more confident and comfortable participating in that environment.

4. Combine activity with other opportunities - being active does not have to be the sole focus of sessions. For example, in Satellite Clubs exercise sessions with refugees incorporated English classes so that participants could benefit in multiple ways.

5. Focus on understanding the circumstances of individuals - although this can take time and patience it helps to build trust. It is important not to generalise across communities as there are always a variety of viewpoints and experiences. For example, first-generation immigrants often have different perspectives to second and third-generation immigrants, or the views of people from Pakistani and Indian backgrounds may differ significantly. Using instructors with the right skills, approach, and experience is also key.

6. Develop flexible volunteering opportunities - as mentioned above, women from ethnically diverse communities can often have conflicting family responsibilities, therefore allowing this cohort to volunteer at times suited to them can encourage engagement. Having a diverse workforce is important to drive engagement with different communities.

7. Market locally - research from the Tackling Inactivity Fund has found that South Asian communities are more likely to be reached through local media channels/stations rather than nationwide networks. It also found that many prefer auditory rather than written messaging. Muslim communities tend to feel comfortable in mosques so this could potentially be a good environment to recruit from.
Lower socio-economic groups

Data from multiple sources including Active Lives tells us people in lower socio-economic groups (hereafter abbreviated to LSEG) are less likely than the average to be active and these inequalities have only been exacerbated by the pandemic. Some parts of this audience can be difficult to engage as they can distrust or have difficult relationships with statutory sector agencies and can have conflicting priorities for their time.

Building trust and communication

Various projects report that building trust with LSEG people is vital to their engagement. Involving local groups and leaders can help achieve this as they may have existing positive relationships with participants, as mentioned earlier. An example of where this has been done successfully is the Families Fund where projects have partnered with local schools and community organisations. Long-term commitments also help cement trust; projects that are scheduled for several months or longer are less likely to be met with cynicism than short-term initiatives.

Several projects also highlight the importance of getting communication and messaging right when promoting programmes with best practice including:

- Using impactful, relevant, and emotional imagery
- Using local channels to spread awareness
- Providing reassurance in messaging via different channels
- Marketing sessions as something other than physical activity
- Encouraging participants to use word of mouth to spread awareness of activities
- Keep messaging easy to understand, e.g. exercise for 30 minutes a day
- Personal methods of contact with individuals including, if feasible, knocking door to door

It can also be helpful to consider any life changes when timing communication. For example, a New Tenancy Assessment (four weeks after a home move) can be a key moment for recruiting participants as individuals are likely to have had time to settle in and may be interested in making new connections.

Co-creation and thinking local
Co-creation and participant-led delivery can help attendees set expectations and take ownership of their activities. Using local facilities or asking participants to suggest venues, even if they are not sports specific, can improve accessibility.

**Importance of partners**

Effective partnerships can contribute towards successful delivery as partners can bring new skills and expertise into projects. Alternatively, they can also provide access to the target audience.

Partners must also recruit instructors with the right skillset; having strong engagement skills is usually more important than high-quality coaching skills when working with this audience.

**Think beyond physical activity**

Behaviour change is usually only possible when all influences on a person are considered, especially with an LSEG cohort, as many in this group deal with complex issues in their daily lives. This means providers should take time to understand people, their barriers, and their community, not just their activity level. It is important to note that interventions can be designed with no initial connection to physical activity and can instead be used to help participants overcome other challenges in their lives – this can then lead to the change in conditions needed for them to prioritise activity. Regardless of what the intervention is, having clarity on what the objectives are is key, e.g., to raise activity levels, create social benefits, etc.

Due to different circumstances, a one size fits all approach is unlikely to be effective. Even if a specific method of engaging an LSEG community is effective in one region, it is likely to still require tailoring in another area of the country.

**Motivating the audience**

According to the COM-B model of behaviour, motivation is one of three factors that need to be addressed for there to be behaviour change. Therefore, finding ways to motivate participants should be an important consideration for projects.

Research has found a link between increasing physical literacy and improved motivation. Therefore, educating LSEG communities about physical activity can be impactful as some in this cohort can be unaware of the reasons why exercise is relevant to them and how they can be active.
In addition, building friendships between participants can also motivate attendance, especially because people from LSEG groups on average tend to have smaller social networks. These friendships can then help people to support one another with daily challenges.

**Be flexible**

Participants usually prefer to have a recurring time slot and location where the activity takes place because it makes it easier to plan for. However, it is important to be flexible and make changes if there are mitigating circumstances, particularly because people in LSEG communities often have conflicting priorities. In addition, activities in each session do not need to be pre-planned, instead, they can be designed or adapted according to what audiences wish to do on the day.

**The role of pricing**

Organising programmes and sessions at low cost can encourage and drive participation among LSEG groups, especially families. Unfortunately, some LSEG families perceive physical activity to be an expensive lifestyle commodity, and as a sector we need to work together to make activity more affordable for this cohort. With other LSEG audiences, while low costs can help, particularly at the beginning of an intervention, it is not necessarily always about making activities cheap or free. Instead, it can be more relevant to think carefully and creatively about pricing, payment structure, and being sensitive to the lower disposable incomes available to individuals. Even if activities are made free, it does not guarantee attendance as cost is often not the main barrier that prevents people from being active, which, as discussed earlier, is why understanding individual circumstances are so critical.

**School children**

The School Games programme evaluation has found that some children from LSEG families can lack confidence, have low levels of mental wellbeing and have behavioural difficulties. Some also have limited access to outdoor space and therefore a lot don’t do much physical activity outside the school setting. In addition, some LSEG pupils are digitally excluded, so it is important to provide them with hard copy resources. Positively, school competitions provide and raise awareness of opportunities they haven’t previously had and can help students feel more confident and capable of being active. However, it is important to note that some cannot attend after-school activities due to home commitments and therefore the timing of games and competitions needs to be considered.
**Ex-offenders**

The barriers ex-offenders face in securing jobs are well-documented with around 90% of those leaving prison entering unemployment. The United Together is a pilot that aimed to support ex-offenders in probation to reach their full potential by providing a pathway of personal and professional development and reduce their risk off re-offending. Alongside mentoring and peer-to-peer support sport and physical activity was used to try to help ex-offenders build their confidence and improve their team working and communication skills. The feedback from all involved was overwhelmingly positive. The probation officers mentioned that the activities, particularly those that required collaboration, led their clients to feel part of a community. For the participants the peer support provided was the most valuable aspect of the programme, but physical activity, such as football, was also beneficial as it kept their minds occupied, built their confidence and provided opportunities to make friends.

Positively, data collected from a random sample of participants showed that the re-offending rate amongst those engaged with the United Project (26%) was almost half compared to those who were referred to the project but did not engage (56%). In addition, participation in the project significantly increased participants’ self-reported mental wellbeing.

These findings suggest that interventions that combine physical activity with other types of support can help creative positive outcomes for ex-offenders and can be used to help this audience re-integrate into society.

**Volunteering**

Volunteering opportunities can reduce isolation and potential boredom for low-income families, especially over school holiday periods. Families can be enticed by creating roles for both adults and children and by offering childcare facilities. In addition, providing perks such as a free lunch can also incentivise involvement because it helps reduce cost as a barrier to volunteering.

**LGBTQ+**

Compared to other groups, data on the physical activity levels of the lesbian, gay, bisexual, trans and queer/questioning (LGBTQ+) community – and the sport they play – is less well established.
However, the sport and physical activity sector is working with community groups to better understand what works for them and some Sport England projects have been able to capture insights on this audience. We understand from Satellite Clubs that prejudices and fear of judgement have been detrimental to the confidence of some LGBTQ young people therefore they may need reassurance that the environment will be inclusive before they engage in activity. Communicating with this audience privately has also previously helped with programme recruitment. Similarly, findings from EDI commissioned work with Pride Sport found that building trust is key to engaging LGBTQ people, and this can be achieved by providing dedicated sessions for them and ensuring staff understand the societal challenges and barriers this audience encounters.

**Older adults**

Older adults are disproportionately more likely to be inactive than younger audiences. Even those with a resilient habit are dropping out of activity or reducing activity levels as they get older. Our Active Ageing projects addressed these barriers and provided support to maintain an active life through:

1. Putting older people and inclusivity at the heart of the design and co-designing the opportunities with their participants, considering the whole journey: marketing, registration, transport, signage, facilities and the welcome – to make people feel comfortable and included. For example, Love to Move has co-designed the music and language locally with its participants so that each class reflects and represents the musical tastes and cultural diversity of the local community. This tailored approach saw some classes using music from the participants’ teenage years which they associated with energy and enjoyment and this led to a significant increase in engagement, mobility and fun during the activities.

2. Developing pathways to support individuals into other offers as they get fitter, increase their skills or tire of an activity and want to try another.

3. Adapting the activity to participants’ needs and confidence levels and helping them experience activities they enjoyed in the past, e.g. non-competitive walking football rather than matches

4. Recruiting groups rather than individuals to help with motivation as there will be a ready-made peer group

5. Adopting a flexible approach as there is no ‘typical’ participant as everyone has different needs and motivations. Staff need to be skilled in adapting to meet individuals’ needs.
6. Training staff and volunteers to enable participation from older adults, for example, training volunteers to operate electric rickshaw tricycles enabling less physically able older people to go on bike rides.

**Older adults in care**

One area of focus for the Calderdale Local Delivery Pilot has been around increasing physical activity for people, generally older adults, who are in care settings. Their system approach has highlighted a variety of barriers and where improvements could be made.

<table>
<thead>
<tr>
<th>Challenge faced</th>
<th>What we did</th>
</tr>
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<tbody>
<tr>
<td><strong>Policy</strong></td>
<td></td>
</tr>
<tr>
<td>• Those in care not asked about physical activity when assessed</td>
<td>• Questions on physical activity embedded in all assessment forms</td>
</tr>
<tr>
<td>• Physical activity not integrated into Adult Social Care’s commissioning arrangements</td>
<td>• Building physical activity into clients’ lives is now embedded in all service specifications</td>
</tr>
<tr>
<td><strong>Physical environment</strong></td>
<td></td>
</tr>
<tr>
<td>• Those in care not being encouraged to move during home care visits</td>
<td>• People receiving care are now encouraged to get up and open the front door to let the carer into their home – if they’re able to</td>
</tr>
<tr>
<td><strong>Organisations and institutions</strong></td>
<td></td>
</tr>
<tr>
<td>• Care providers not encouraging clients to be active</td>
<td>• Better Living Team supports activity delivery in settings</td>
</tr>
<tr>
<td>• Training provided to staff to enable activity delivery</td>
<td></td>
</tr>
<tr>
<td><strong>Social environment</strong></td>
<td></td>
</tr>
<tr>
<td>• Carers don’t feel confident talking about or enabling physical activity</td>
<td>• Training provided to carers to have good conversations about physical activity and support clients to move more</td>
</tr>
<tr>
<td><strong>Individual</strong></td>
<td></td>
</tr>
<tr>
<td>• Those in care not asked about activities they might be interested in, and clients not prompted to think about the value of being active</td>
<td>• Active at Home booklet issued and activities developed/delivered to match interests</td>
</tr>
</tbody>
</table>

**Digitally excluded**

Generally older adults are more likely to be digitally excluded, those who are digitally excluded are also over-represented among people with health conditions, representing about 1 in 5. The digitally excluded also have smaller circles of
influencers so it is critical to engage the right partners, for example adult social care and healthcare professionals in the promotion of physical activity, along with friends and family and mainstream TV and tabloid media. Hard copy information may be preferred for this group.

**Disabled people and people with long term health conditions**

This is a highly diverse audience both in terms of the nature and impact of disability or long term health condition and also in terms of mindset, experiences of physical activity, demographics and lifestyle. Much of our evaluation data from our campaign We Are Undefeatable and research such as #Easier to be Active are focused on long term health conditions. An estimated 43% of the population are living with at least one health condition (according to 2018 NHS data) and multiple conditions are becoming the new norm (according to Health Foundation research in 2018).

People with health conditions would like to see more understanding from the public about their condition and how it affects them. Similarly, there needs to be better representation of people with health conditions in the media. This lack of awareness and representation leads to specific barriers for this audience, impacting on mental wellbeing and motivation to be active.

Our evaluations have highlighted a variety of themes when supporting disabled people and people with long term health conditions to be active.

**Inclusive messaging and opportunities**

We need to ensure that messaging and opportunities to be active are inclusive. Language, tone of voice and images (particularly with a strong emotional pull) must be inclusive for people with disabilities and health conditions. Some people who would be considered disabled under the equalities act do not self-identify as being disabled so any messaging targeted at this group needs to be mindful of representing them, without necessarily referring to them as being disabled. Classic exercise vocabulary can alienate disabled people and people with health conditions. Having messaging that is relatable, as in someone like me, is important. While also acknowledging the unpredictability of health conditions which can impact motivation and capability.

Beat the Streets: Intelligent Health engaged with the Activity Alliance to consider a range of ways to make the programme more inclusive, one outcome being that the headline banner ‘walk, jog, cycle’ was tweaked to become ‘walk, jog, roll’ to reflect the broader ways to move around a place.
Reassurance and support from influencers
People with disabilities or long-term health conditions can be reluctant to get involved in physical activity as they are fearful that physical activity may make their condition worse, or that their condition means they won’t be good enough to take part. This audience needs reassurance that physical activity is safe and possible from influencers / trusted voices.

There are a range of people who influence this audience’s ability and desire to be active – from healthcare professionals, fitness professionals, health and social care charities and social and support networks such as family, friends and carers. These influencers can be more important for disabled people and people with health conditions than for the non-disabled population. However, these influencers can also discourage physical activity, due to their own feelings towards physical activity, confidence as well as expectations about the person they support.

An integrated system that works to promote physical activity for this audience
The system should ensure the network around the disabled person or person with a long term health condition is informed about how to support them to be more active. We need to ensure this audience is connected with the right support and information. This involves the broad array of influencers (healthcare professionals, fitness professionals, health and social care charities and family, friends and carers).

Physical activity goals should be realistic and personalised
Put the individual at the heart of everything we do and talk to the person not to their impairment. Goal setting and progression towards goals can be extremely motivating but needs to be realistic and account for the wide variety of starting points. For example, for some people daily housework or a short walk might be important accomplishments.

Sport and leisure opportunities could be made more inviting
There are a variety of options that can be considered to make the environment more inclusive:
1. Relevant offers being made available – this could be specific sessions for this audience e.g. quieter sessions with a calmer ambience for those that require this, or could be ensuring that they are supported to take part with non-disabled peers
2. Range of options for participation e.g. 1:1s, online options, group sessions to help meet the needs of a range of people
3. Integrate a social aspect into the offer – physical activity that is ‘social’ broadens participation, helps to overcome condition-related barriers, benefits both physical
and mental wellbeing, fuels the motivation flywheel and can also increase frequency of activity

4. Reduce cost or no cost for accompanying carers

5. Physical positioning of equipment – for example, need to make sure that wheelchair users can safely access the equipment and facilities

6. Currently, this audience may need extra reassurance in relation to COVID secure measures that are in place in these facilities

The sport and physical activity workforce needs to be confident in supporting disabled people and people with health conditions

They need to:

1. Be knowledgeable about health conditions and potential limitations, and adapt activities accordingly, offer tailored support, and provide alternatives when necessary

2. Know how to deal with medical events that may happen as a result of a health condition, in addition to injuries. For example, hypos among diabetics

3. Be supportive/empowering of people trying something new so they do not feel judged

4. Provide one-to-one interaction where possible, to facilitate good understanding of participants and to tailor sessions appropriately

5. Encourage and enable people with health conditions to participate at their own pace

6. Be knowledgeable about how to communicate with and aware of specific needs for people who are hearing impaired.

Improve information about the options to be active

It is important that disabled people and people with health conditions can easily find available opportunities and identify which activities are suitable and safe for their condition. Sources of information on physical activity can be overwhelming. We should make sure information on suitable organised activities is consistent, comprehensive, up-to-date and publicised including via key channels such as health professionals, charities and activity providers. We should use consistent terminology to describe levels and types of physical activity so that this audience understands its appropriateness for them. This terminology should account for intensity, progression, and any available adaptations. For those with special education needs develop ‘easy read’ materials (and the same for adapting evaluation tools e.g. easy-read surveys).

At home activity

Inspiration and guidance for in-home activity / self-directed activity is particularly relevant due to Covid, but also broadly relevant for people with health conditions
who may feel anxious about doing physical activity in public places, or be more affected by the weather and the unpredictability of their condition. Some people value practical, curated sources of accessible activity.

**Dementia specific learning**
Isolation can be common for people with dementia and their carers so it is essential to build positive, trusting relationships. For people with dementia, cognitive processing difficulties, or more severe physical restrictions, carers often provide the necessary practical and psychological support to ensure physical activity happens at all. The carers themselves may therefore benefit from emotional and practical or financial support to continue to facilitate this. There is a need to have dementia-friendly facilities with appropriately trained staff.

The dementia guide developed by Alzheimer’s Society gives clear practical advice for things that sport and physical activity sector can do to make facilities more accessible (e.g. layout, use of different colours).

**Supporting people with poor mental health**
Physical activity can provide an enjoyable experience for people with poor mental health, as it gives them an opportunity to focus on something positive and fun, while giving them a sense of achievement.

1. Peer support and the personal experiences of people with poor mental health should be a central element of the programme design and delivery. Support should include information on wellbeing (physical and mental), advice on overcoming barriers, providing positive reinforcement and setting realistic goals.
2. Family and friends should be included in the programme through ‘bring a friend’ and/or information sessions.
3. Regular timetabled sessions should be scheduled, changes should be minimised where possible.
4. A relaxed environment which focuses on fun and enjoyment rather than on participants’ mental health problems.
5. Demonstrate trust and understanding by accepting participants’ behaviours and beliefs, while establishing boundaries.
6. Motivation can be low for this audience, due to a low sense of self-worth and confidence. Rewards and incentives can help boost motivation but these need to be tailored to what work wells for that age group.
7. Sport and physical activity providers should deliver group sessions, which are fun and promote connection with others, creating an empathetic and welcoming environment. Where possible, sessions should be peer-led.
8. Staff from mainstream facilities should attend the Mental Health Awareness for Sport and Physical Activity (MHASPA) training to reduce stigma within mainstream facilities, and to support them to positively interact with people with mental health problems.

9. For those with anxiety, peer supporters (volunteers with lived experience) can research venues and sessions to relay what they are like to participants to relieve anxiety or catastrophic thinking. Watching and observing can also help people with anxiety build confidence for taking part, so let people take it slow.

10. Look behind the mental health issue to the reason or life change that caused it.

**Volunteering opportunities**

The volunteering evaluation also found specific barriers for people with poor mental health to volunteer in sport and physical activity. These were overcome through:

1. Partnering with local authorities and organisations such as Mind and Crisis to gain referrals to their volunteer activities. Having already been diagnosed or having explained their background to the trusted referral organisation, this meant that the volunteer did not need to explain this again to the project, which could have been a barrier.

2. Providing a buddy system for volunteers to provide them with on-going support throughout the opportunity.

3. Working with local businesses to secure volunteering opportunities and address the stigma around mental health in the community.

The volunteering fund projects also removed barriers to participation for people who have a visual impairment, by:

1. Offering team building activities and development opportunities (including sport coaching qualifications) for visually impaired volunteers to develop their confidence, provide them with skills and improve their employment prospects.

2. Volunteers running a sports day, which was advertised for visually impaired people of all ages to try visually impaired tailored sports.

3. Linking with visually impaired groups, including National Governing Bodies for visually impaired sports, visually impaired schools and specialist colleges to promote the project and gain referrals.

4. Training sport venues on how to support those with a visual impairment to participate in sport and volunteering.

**Carers**

It is thought that 1 in ten people in the UK are carers (Carers UK). As a group they face specific barriers to participation in physical activity:
1. Lack of time and the unpredictable nature of caring is a major barrier for carers to commit to formal sport and physical activity or building it into their routine.
2. High quality replacement care can be difficult to find which limits the opportunities for the carer to leave the person/s they care for.
3. These challenges are exacerbated for those living on low incomes, as they cannot ‘risk’ losing pre-paid session fees.

However, our evaluation with Carers UK and through our campaign We Are Undefeatable has shown there are solutions to reduce the impact of these barriers and to engage this group in physical activity:
1. The sport and physical activity sector needs to become more ‘Carer aware’ and to ensure that opportunities are inclusive and accessible i.e. flexible booking options
2. Providing opportunities that enable the carer to do physical activity with the person they care for helps to remove barriers to participation
3. Offering ‘carer’ sessions can also encourage a social element where participants can talk to other carers. Pairing or grouping up carers with similar needs/barriers can help them to support each other to stay active
4. Offer complementary wellness therapies alongside physical activity offer
5. Offer a variety of times so carers can fit physical activity around caring responsibilities
6. Providing online and digital options – the Satellite Clubs project found that by providing online opportunities to take part meant that young carers were able to fit this in around their caring responsibilities.
7. Wider system change also required to address some of these barriers i.e. greater access to carers breaks, increase in carers allowance (currently the lowest benefit of its kind) and for physical activity to be discussed as part of carer assessments

**Less active children and young people**

(See also specific children and young people insight within the Inclusive section)

Data from Active Lives shows that similar inequalities exist for children and young people as for adults: girls, those from low affluence families and those from ethnically diverse backgrounds are more likely to be less active. Children and young people access physical activity in a variety of settings (i.e. formal leisure settings, school and informal settings such as parks and playgrounds) which can be different from adults. In this section we focus specifically on age related or children and young people
specific setting related inequalities that are not covered by the other demographics. Much of our learning for this comes from the Families Fund projects, Satellite Clubs and Secondary Teacher Training.

**The importance of family as an influencer**
To address inequalities families play a key role. Educating parents as to the benefits of and knowledge of where and how to be physical active helps to encourage continued physical activity away from more structured opportunities to engage. Supporting families to take ownership and a positive experience of ‘I can/we can’ will lead to increased motivation. Parents are motivated by seeing their children having fun and understanding why being physically active is good for their children. Parents, children and young people often take it in turns to motivate each other so it is important to develop motivation across everyone in the family.

**The role of educational settings**
The key learning has been the importance of inclusive environments, allowing each student to genuinely access opportunities that reflect their needs and wants. Tackling inequalities and addressing inactivity requires a shift in thinking, culture and approach. We need to support all stakeholders to take ownership for ensuring positive attitudes and engaging all students in a more active lifestyle e.g. students themselves, governors, non-PE staff, senior leadership teams, parents and carers.

By improving the universal offer and by listening to what students want, schools have managed to improve participation from groups of students who were disengaged and less active. Student voice is a critical driver – and it’s vital that this voice represents all students, especially those that are disengaged and might not know they have a voice in relation to PE, school sport and physical activity. Respond to the differences and consistencies in students’ perceptions, motivations and barriers. We have a tendency to focus on the differences but addressing both will have a greater impact for all. Sometimes the smallest changes will have the biggest impact.

**Young people**
As children and young people get older, we know that activity declines and these inequalities become more embedded. We also know that this is a time of physical and social change, all of which can impact on physical activity behaviour. For example, leaving school or university can easily disrupt routines. Providing options that help to minimise these impacts and provide stability is important when looking to engage this audience.
6. Final thoughts

This rapid, experimental challenge has given us lots of insight on how to make physical activity more inclusive and reduce specific inequalities. It’s imperfect and incomplete, but we hope it’s a useful starting point to build on. We plan to share and discuss these findings in more creative and interactive ways in the future. And we’ll reflect and collect feedback on this report and the format of the challenge, to inform future challenges.

The report itself is the result of a much greater volume of content shared by teams across Sport England. Most said they found it relatively easy to submit content for their areas of work, suggesting our evaluation methodologies and outputs are supporting rather than hindering our ability to draw out useful insight on this topic – and this is something we should continue to be mindful of when designing new evaluation.

The wider evidence base (including local evaluation reports) isn’t covered in this report but has a lot to offer, and we’ll look for ways to understand and use this in the best way. We encourage anyone reading this to consider what insight you hold, and how you can share it and get it to people who can use it to make a difference.

**Tackling inequalities isn’t easy but the benefits will far outweigh the effort.** We all have it in us to make a difference and we hope this report has inspired you to help us Unite the Movement and bring the benefits of sport and physical activity to everyone.