



**Active Lives Adult Survey
November 2024–25 Report**

Published April 2026

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Interpreting this report

We only highlight increases/decreases within this report where we're confident there are genuine differences. If the data is showing small differences which are within the margin of error, they're noted as 'no change'.

Key information

This report presents data from the Active Lives Adult Survey for the period mid-November 2024 to mid-November 2025. Data is presented for adults aged 16+ in England.

Release dates

This release: 23 April 2026
Next release: 22 April 2027

Find out more

For more information on the data presented in this report, please visit the [Active Lives section](#) of our website.

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Welcome



Nick Pontefract
Chief Strategy Officer

Covering the period from mid-November 2024 to mid-November 2025, this report provides an update on the sport and physical activity behaviours of adults (aged 16+) in England.

With data spanning an entire decade, this report gives an unparalleled view of the nation's sport and activity habits, how they vary by place and by demographic, the impact of inequalities and how people's choice of activity has changed.

The headline is, once again, a positive one. Overall activity levels (the number of adults doing 150 minutes or more of moderate intensity exercise – the level recommended by the Chief Medical Officers) have increased again to their highest since this survey began, showing we are genuinely building a more active nation.

There are over 850,000 more active adults this year compared to last, and when we look back over the last decade, that increase is an impressive 3.3 million. The proportion of people who are inactive (doing less than 30 minutes per week) has also decreased since we began the survey a decade ago.

All this points to a nation that is increasingly aware of the huge benefits that being active brings across physical health, mental wellbeing and both individual and social development, and that people are finding new and different ways to incorporate activity into

their daily lives, many supported by the partners Sport England works with.

Much of the increase has been driven by older adults, with people working hard to ensure they stay active, knowing the impact that activity makes to healthy life expectancy. We are also seeing changes in the type of activity people are doing, with a significant increase in gym and fitness activity.

While inequalities in activity levels remain, for example the stubborn gender gap, there are some positive signs in other areas. Those with a disability or long-term health condition continue to see activity levels increase and, over the longer term, this growth is greater than seen among those without a disability or long-term health condition.

This report provides the headlines. You can use the more [detailed data tables](#) to dig deeper into the results, or visit [Active Lives Online](#), which is updated shortly after each release, to explore trends over time, audiences not covered in this report and more specific activities.

Finally, I would also like to thank the team that works so diligently on this report every year, both at Ipsos and those within Sport England. This annual release is a hugely important contribution to our understanding of the nation's activity levels and would be impossible to do without them.

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**
(fewer than 30 minutes a week).

All measures refer to 'over the last 28 days' at point of survey completion.

The definition of 'active' is drawn from the Chief Medical Officers' recommendation that adults should do at least 150 minutes of physical activity 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 and Disparities (OHID) does include gardening in its local level physical activity data.

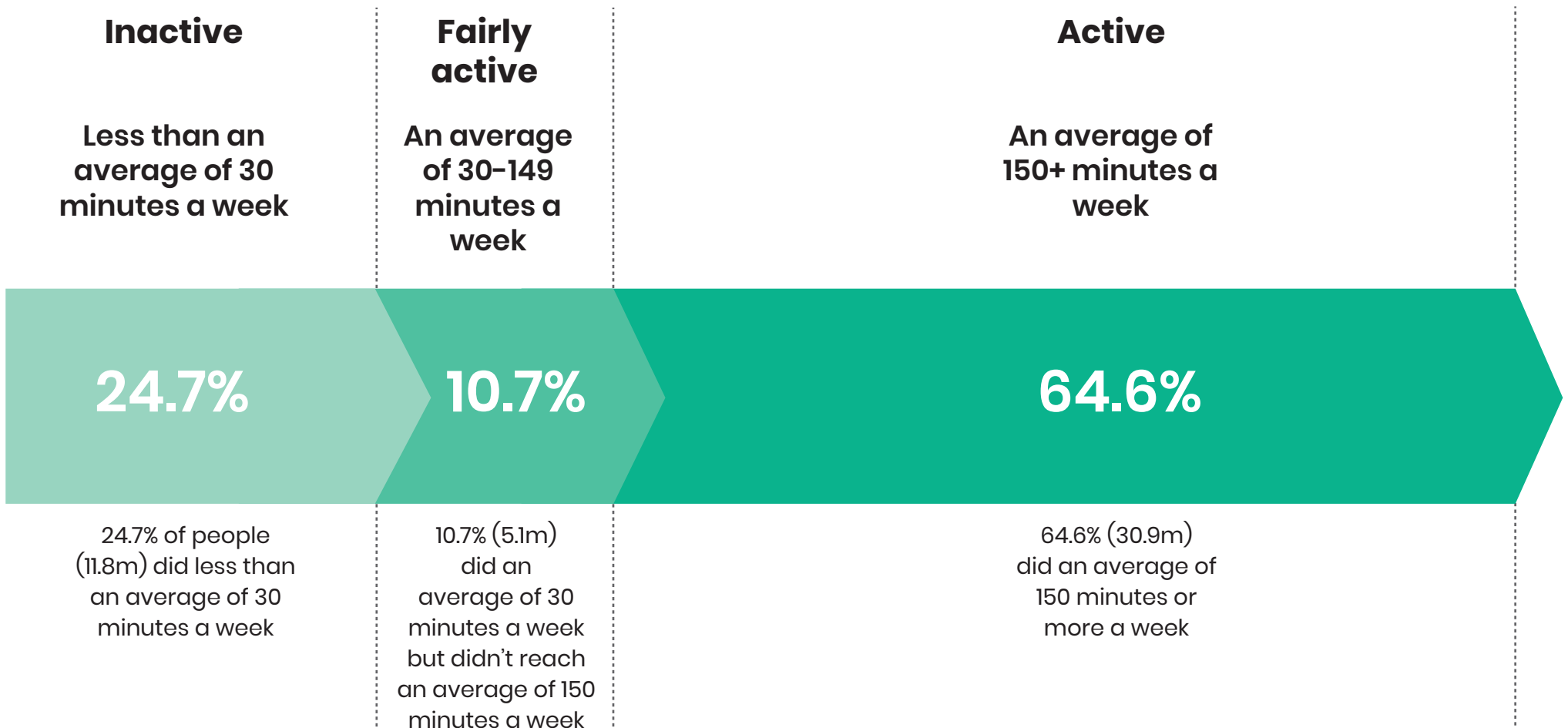
You can [view the OHID data here](#).

Levels of activity



Headlines

Our data shows that, between mid-November 2024 and mid-November 2025, just over six in 10 adults (30.9 million) achieved 150+ minutes of activity a week.



[Link to data tables](#)

Levels of activity

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

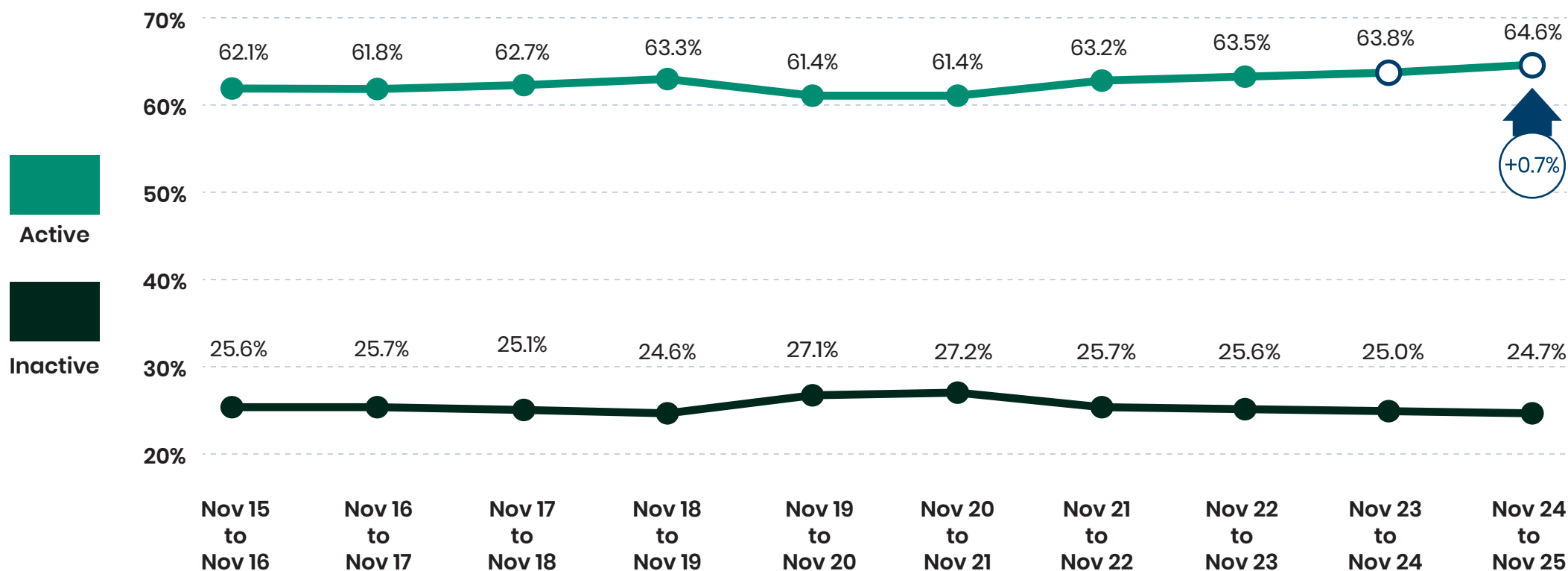


Summary of change

Activity levels continue to follow a steady upward trend since the end of the pandemic (compared to November 21-22), with an increase of 859,000 (+0.7%) active adults compared to 12 months ago. The proportion who are inactive follow a downward trend post-pandemic (compared to November 21-22).

Over the longer term, compared to November 2015-16, the number of adults who are active has increased by 3.3m (+2.5%), while the number who are inactive has decreased by 0.9%. The proportion who are fairly active has also decreased over the same period (-1.6%).

All adults (aged 16+)



[Link to data tables](#)

For details on how we measure change, see the [notes](#) pages.

Levels of activity

Active: 150+ minutes a week

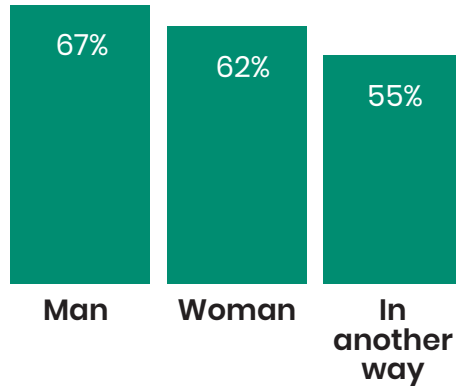


Summary of demographic differences

Our data shows there are significant inequalities:

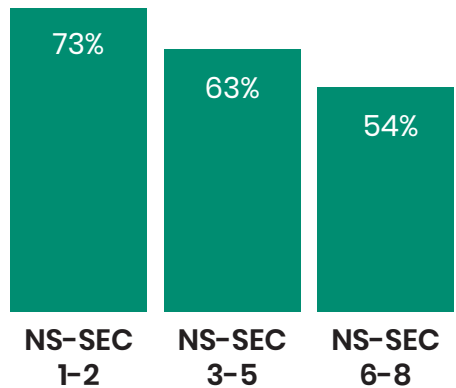
1 Gender identity

Men are more likely to be active than women and those who describe themselves in another way.



2 Socio-economic groups

Those from lower social groups (NS-SEC 6-8*) are less likely to be active.

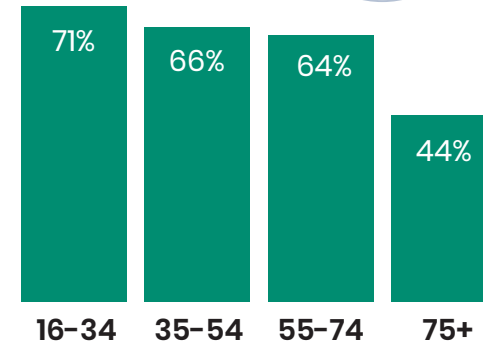


[Link to data tables](#)

*See our [definitions](#) page for the full definition of each demographic group.

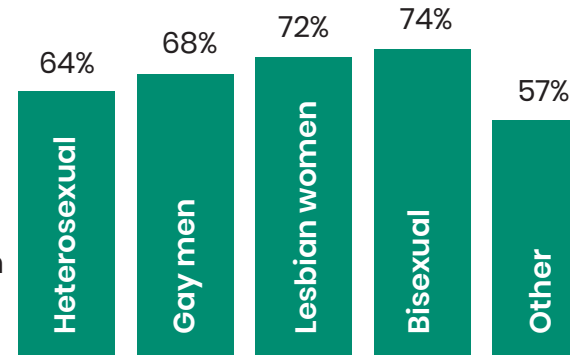
3 Age

Activity levels generally decrease with age, with the sharpest decrease coming at age 75+.



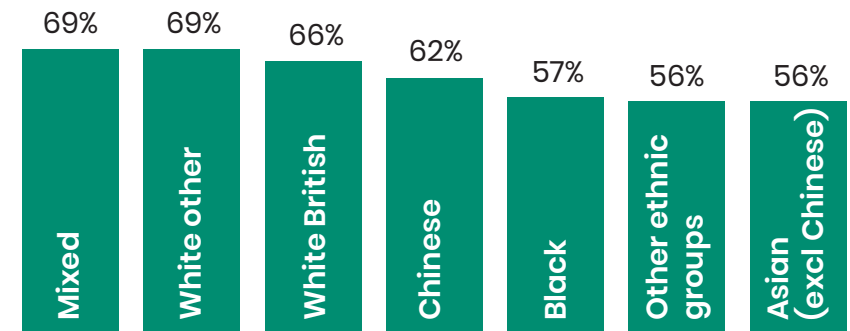
4 Sexual orientation

Gay men, lesbian women and bisexual adults are all more likely to be active than heterosexual adults.



5 Ethnicity

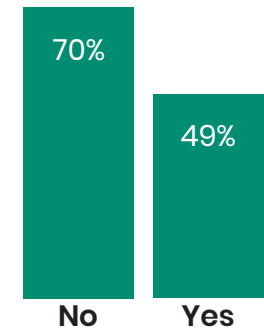
There are differences in activity levels based on ethnic background.



6 Disability and long-term health conditions

Activity is less common for adults with a disability or long-term health condition* than for those without.

Activity is less common for adults with a disability or long-term health condition* than for those without.



Additional demographic breakdowns for transgender, faith, working status and education stage can be found in the [data tables](#).



Activity levels are following similar patterns over time for both men and women

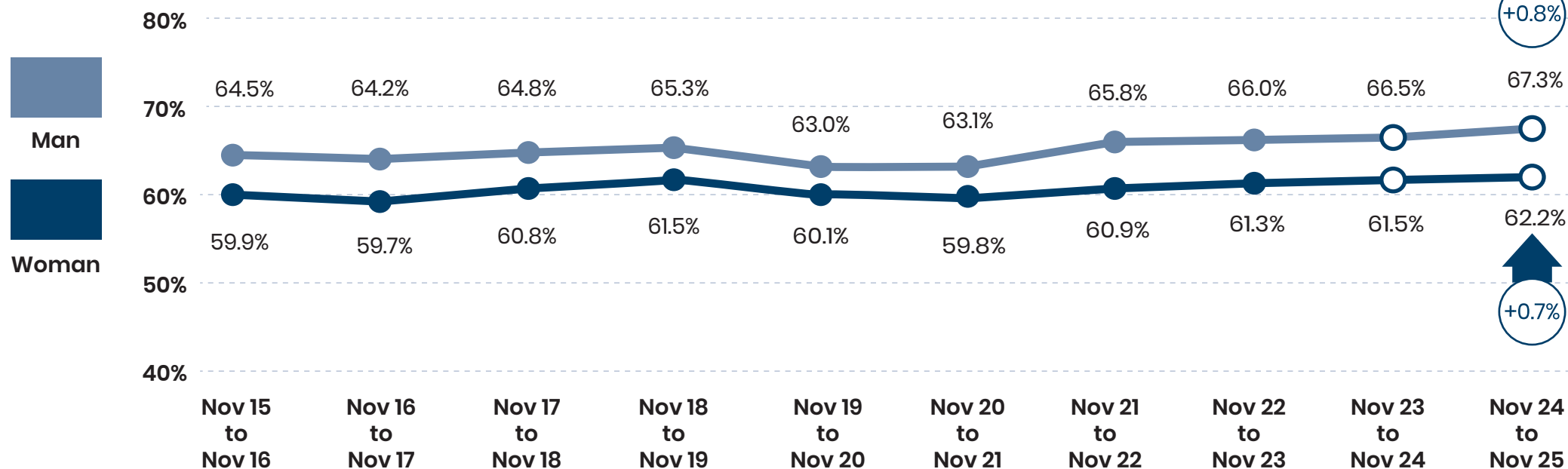
Both men and women have seen an increase in activity levels compared to 12 months ago, with levels following a steady upward trend since the end of the pandemic (compared to November 21-22) – in line with the national picture.

Over the longer term, growth has been similar for both men and women, with 1.6m (2.8%) more active men and 1.5m (2.3%) more active women compared to November 2015-16.

Note: Data on gender identification was collected on male, female, non-binary and prefer to self-describe. Results for the latter categories are combined into ‘in another way’ for reporting (due to small sample sizes) and can be found in the [data tables](#).

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

Active: 150+ minutes a week



[Link to data tables](#)



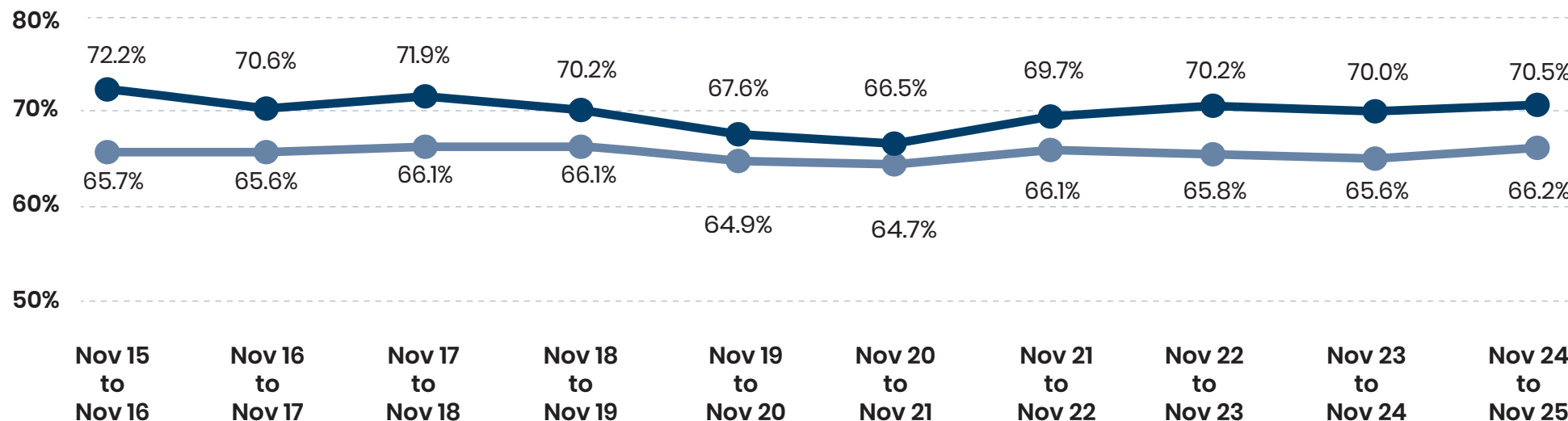
Activity levels are unchanged among younger adults

Among young people aged 16–34, activity levels have remained unchanged compared to 12 months ago, reinforcing a relatively stable position over the previous three years. The proportion who are active is down 1.7% compared to nine years ago (Nov 15–16).

The proportion who are active remains stable among the 35–54 age group, with little change over the short or longer term. There are, however, 1.5% or 339,000 more inactive 35–54-year-olds compared to nine years ago (Nov 15–16).

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

Active: 150+ minutes a week



[Link to data tables](#)



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

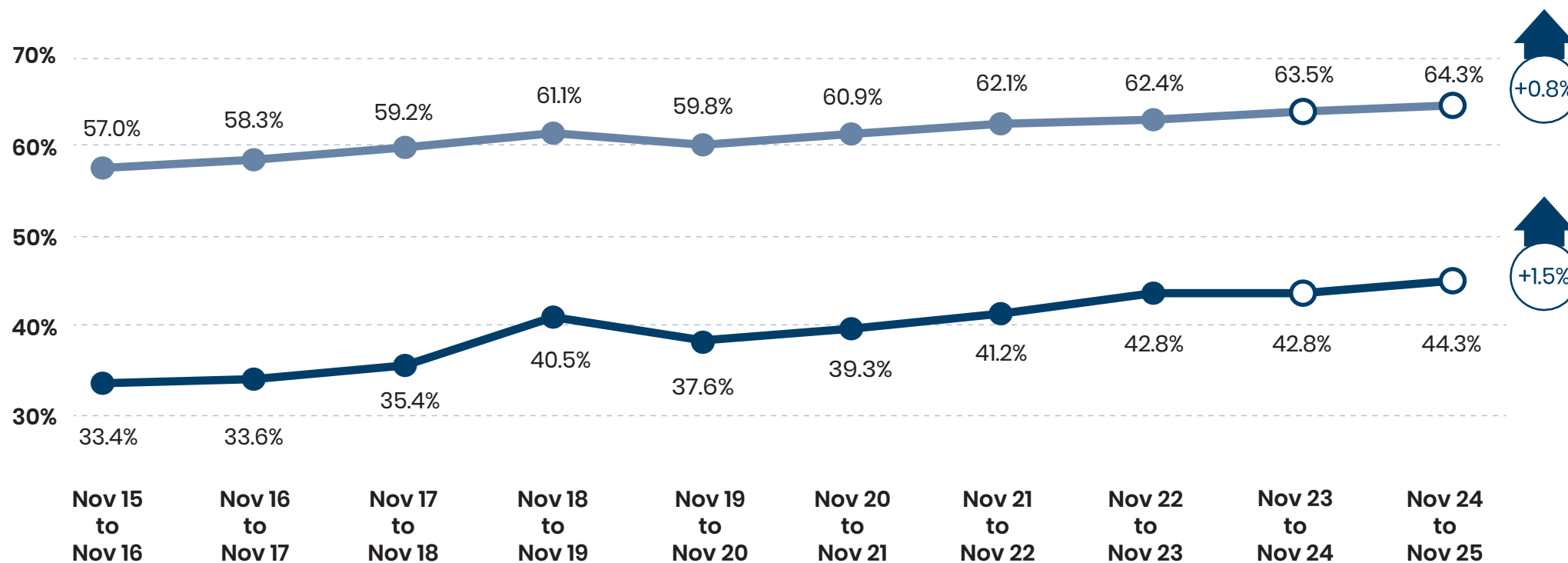


Older adults are driving increases in activity levels

Activity levels continue to follow upward trends, both across the short and longer term among adults aged 55-74 and 75+.

There are 2.1m (7.3%) more active 55-74-year-olds and 0.7m (10.9%) more active adults aged 75+ compared to nine years ago (Nov 15-16).

Active: 150+ minutes a week



[Link to data tables](#)

Levels of activity

Disability and long-term health conditions

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



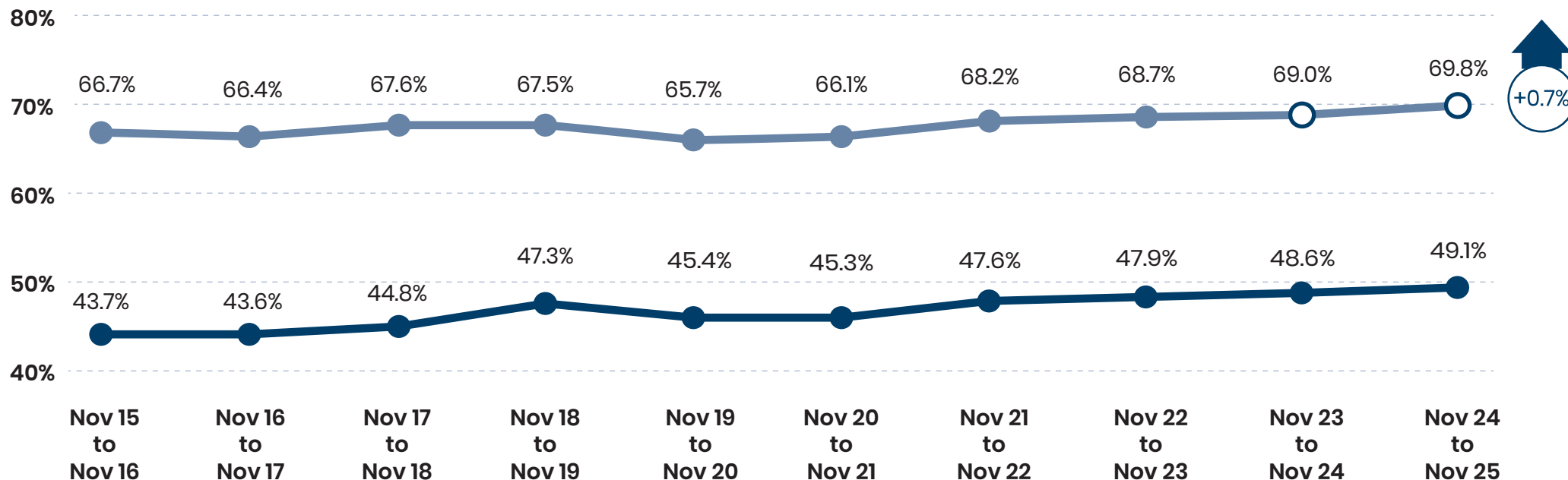
Activity levels are following similar patterns over the last three years for both those with and without a disability or long-term health condition

While the proportion who are active remains unchanged compared to 12 months ago for those with a disability or long-term health condition, there is an upward trend since the end of the pandemic (compared to November 21-22), in line with those without a disability or long-term health condition.

Over the longer term, activity levels have increased. There are now 5.4% more active adults with a disability or long-term health condition compared to nine years ago (Nov 15-16). This long-term growth is greater than for those without a disability or long-term health condition, where the proportion active is up by 3.0% over the same period.

Active: 150+ minutes a week

No disability or long-term health condition
 Disability or long-term health condition



[Link to data tables](#)

The full definition for disability and long-term health condition can be found in our [definitions](#) page.

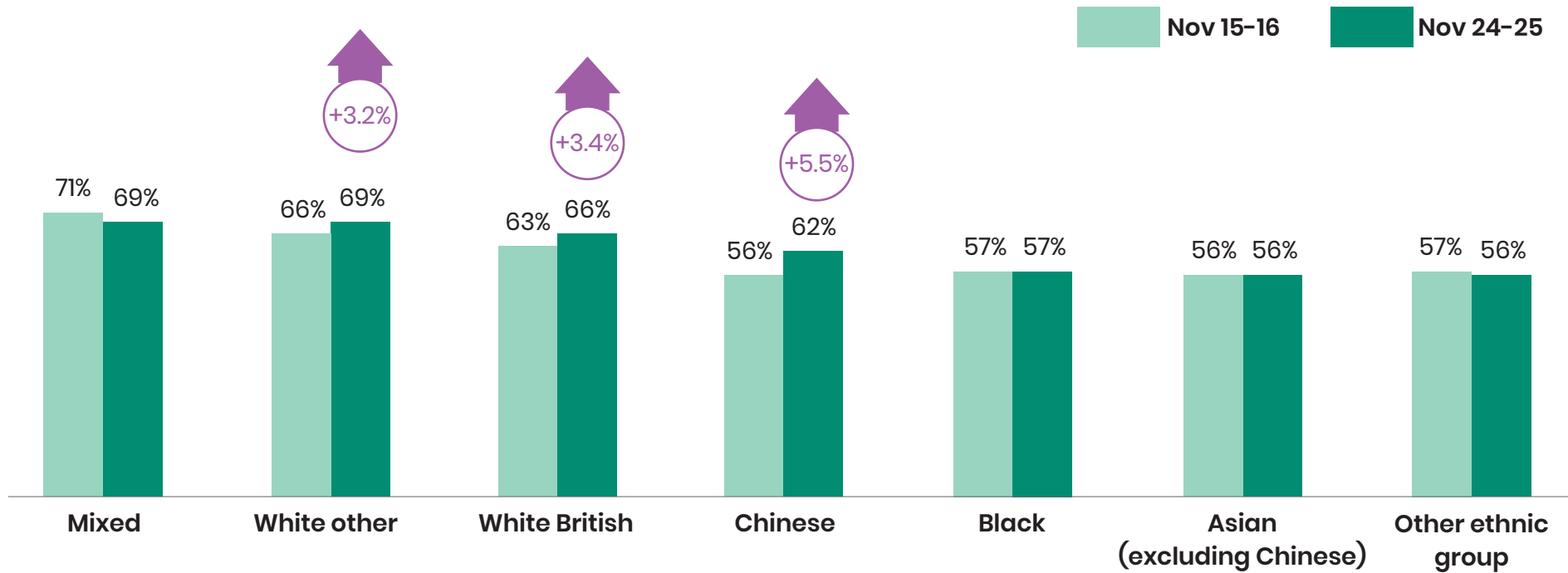


Significant inequalities continue to exist

Asian (excluding Chinese) adults, Black adults and those from other ethnic groups have not seen an increase in activity levels over the last nine years (compared to November 15-16) and, as such, the gap to White British and White other adults, where we have seen increases, has widened.

Arrows show change to November 15-16 (nine years ago). No arrows indicates no statistically reportable change

Active: 150+ minutes a week



[Link to data tables](#)





Inequalities by affluence remain wide

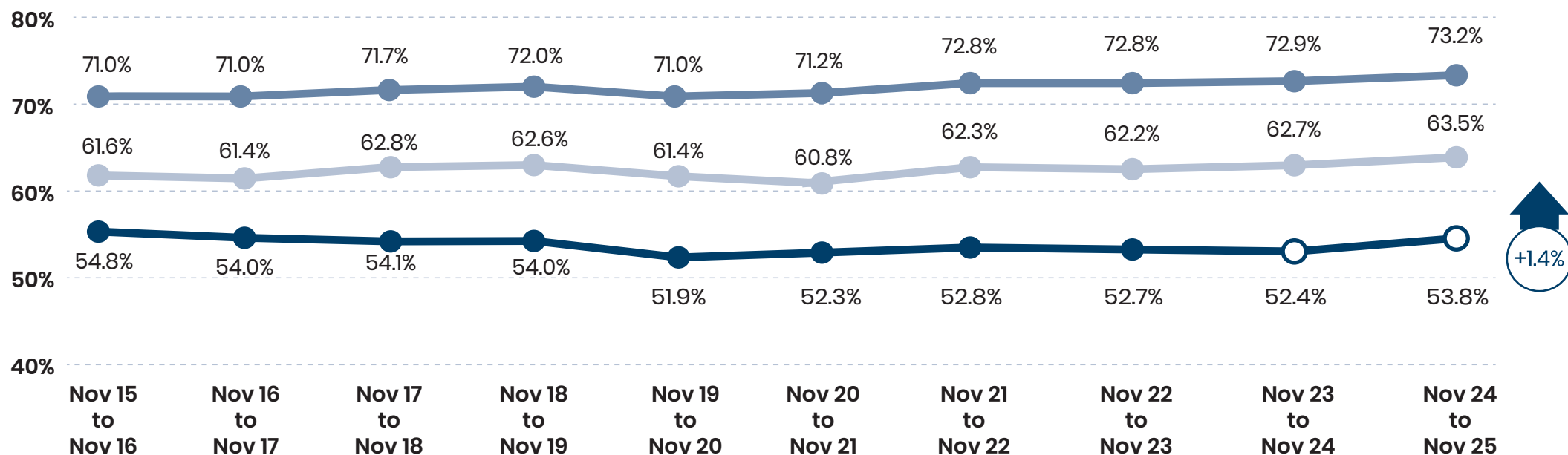
Among lower social groups (NS-SEC 6-8), we have seen a small increase in the proportion who are active (+1.4%) compared to 12 months ago, breaking a stable position seen since the end of the pandemic. There is no reportable difference in the proportion who are active now compared to nine years ago (November 15-16).

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

Activity levels are unchanged for both higher (NS-SEC 1-2) and middle (NS-SEC 3-5) social groups since the end of the pandemic (compared to November 21-22). Both groups have a long-term increase in the proportion who are active, up 2.2% among higher and 1.9% among middle social groups compared to November 15-16.

Active: 150+ minutes a week

Most affluent (NS-SEC 1-2)
 Mid-affluent (NS-SEC 3-5)
 Least affluent (NS-SEC 6-8)



[Link to data tables](#)

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.

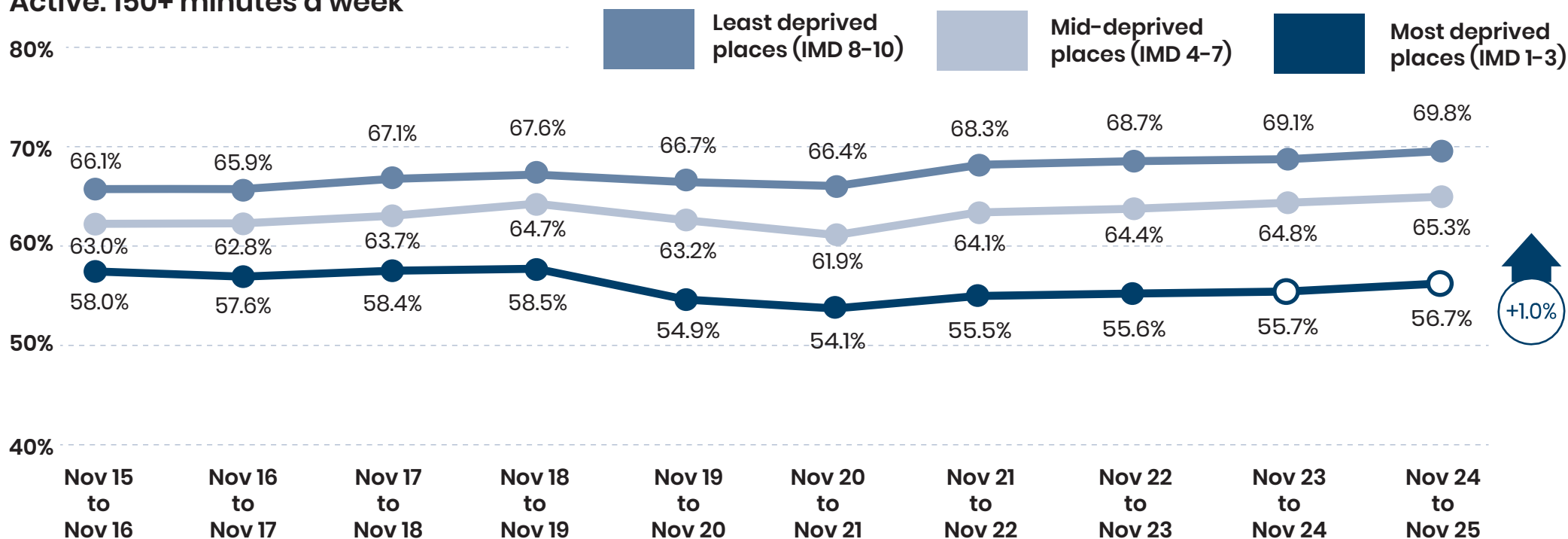


The divide in activity levels based on where someone lives has widened over the longer term

The proportion active among those living in the most deprived places in England (IMD 1-3) has increased slightly compared to 12 months ago, breaking a stable position seen over the previous three years. In contrast, both those living in mid- (IMD 3-7) and least (IMD 8-10) deprived places have followed an upward trend since the end of the pandemic (November 2021-22). Over the longer term, activity levels are up among adults living in the least (+3.7%) and mid- (+2.3%) deprived places compared to nine years ago (Nov 15-16), whereas among adults living in the most deprived places (IMD 1-3), the proportion who are active has fallen by 1.3% over the same period.

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

Active: 150+ minutes a week



[Link to data tables](#)

Note: Deprivation of place is taken from the Office for National Statistics' Indices of Multiple Deprivation (IMD). The numbers referenced refer to deciles.

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

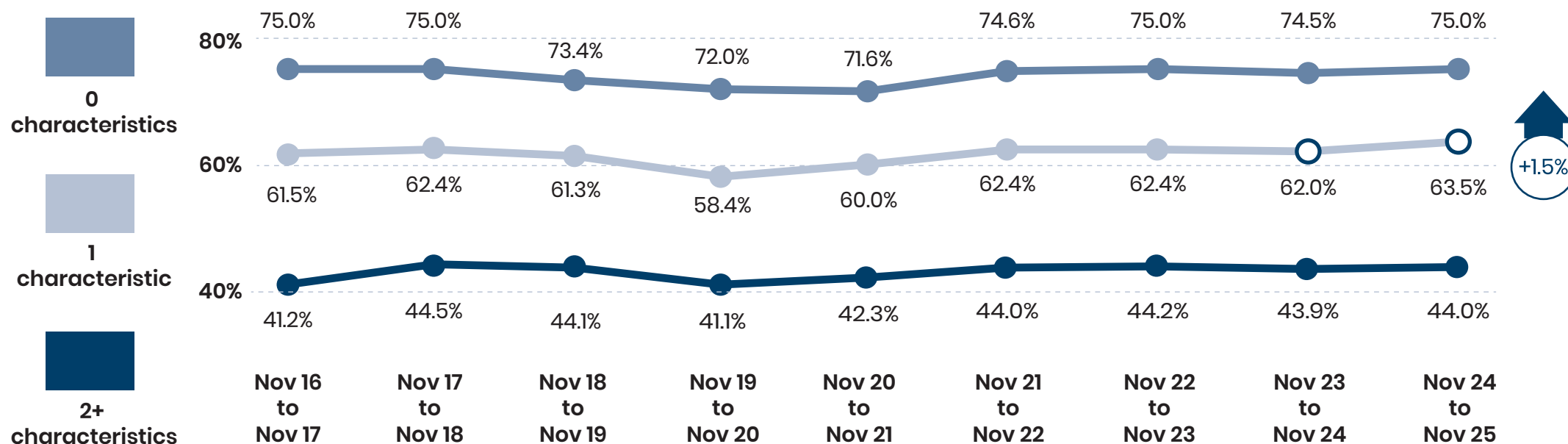


Activity levels are lowest for those with two or more characteristics of inequality

Adults with two or more characteristics of inequality are the least likely to be active, with only 44% meeting the Chief Medical Officers' guidelines – compared to 63% of those with one characteristic and 75% with no characteristics of inequality.

The increase in the proportion active in the last 12 months has been driven by those with a single characteristic of inequality (+1.5%). Over the longer term (compared to Nov 16-17), we have seen increases for both those with one (+2.0%) and two or more (+2.8%) characteristics of inequality but no change among those with no characteristics of inequality – inequalities have narrowed slightly.

Active: 150+ minutes a week



[Link to data tables](#)




Note: Some of the data used to compile the Inequalities Metric was not introduced into the survey until Nov 2016-17 and, as such, data for the metric cannot be reported before that date. See the [definitions](#) page for more details on the metric's composition.



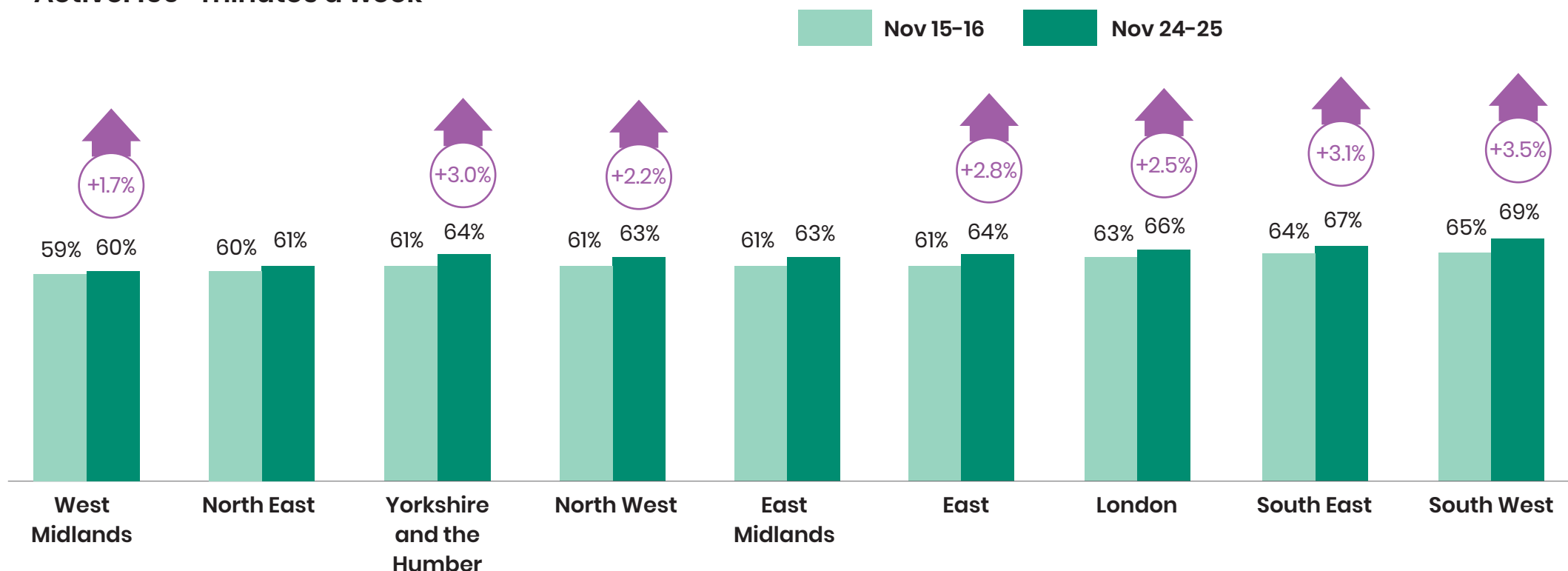
There's an increasing variation in activity levels across English regions

The regional divide in activity levels is increasing, with more long-term growth coming from areas that generally already have higher activity levels. Most regions have seen an increase in the proportion who are active.

Only the South West (down 1.7% to 21%) and the South East (down 1.7% to 22%) have seen the proportion who are inactive decrease over the last nine years (compared to November 15-16).

 Arrows show change to November 15-16 (nine years ago). No arrows indicates no statistically reportable change

Active: 150+ minutes a week



[Link to data tables](#) 

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

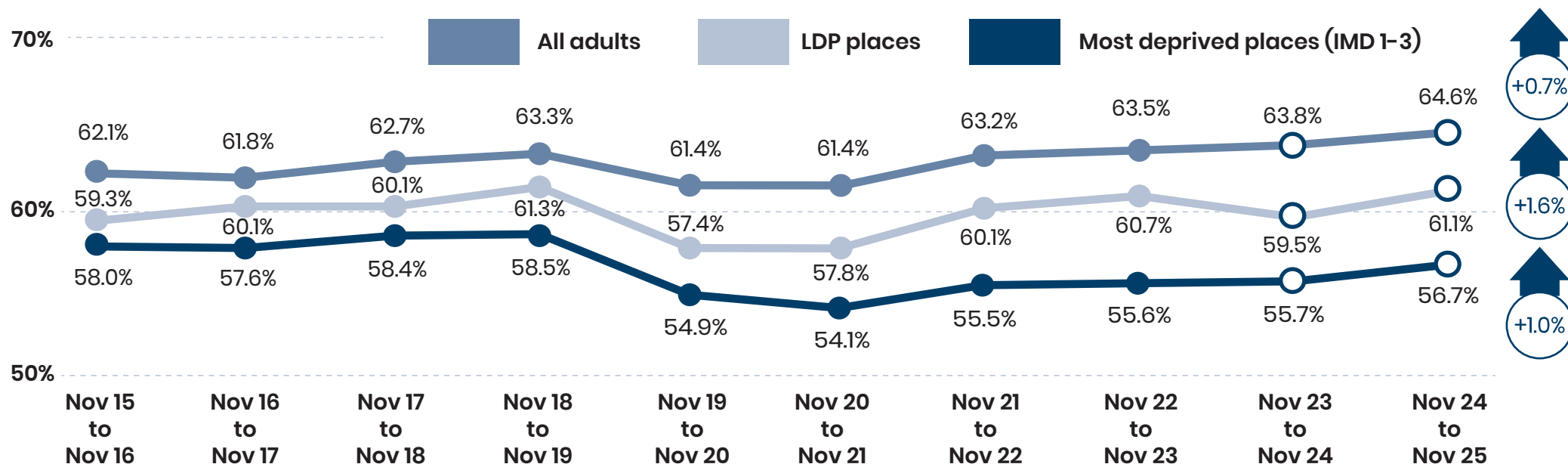


Activity levels in our priority places are lower than England as a whole but higher than the most deprived places as a collective

Just over three-fifths (61%) of adults who live in Place Partnership areas are active, compared to 65% of adults overall and 57% who live in the most deprived places in England (IMD 1-3).

Local Delivery Pilots (LDPs) were the first tranche of Place Partnerships – 61% of adults living in these places are active, the same proportion as across all Place Partnership areas. In LDPs, the proportion of adults who are active has increased by 1.8% compared to nine years ago (Nov 15-16). This increase is only slightly smaller than the increase we have seen across all adults (+2.5%) and is favourable to all IMD 1-3 places, where we have seen a decrease (-1.3%) over the same period.

Note: Place Partnership areas are typically more deprived than England as a whole, with just under half of these adults living in places classified as the most deprived in England (IMD 1-3), compared to a third of all adults. As such, we'd not expect activity levels to be as high as England overall but equally not as low as IMD 1-3. See the [notes](#) page for more details.



[Link to data tables](#)

There is notable variation in activity levels by local authority

Activity levels by local authority area vary greatly across the country, from a high of 77% active in Exeter (South West) to a low of just 48% active in Boston (East Midlands). This compares to a range of 77% to 50% in November 2015-16.

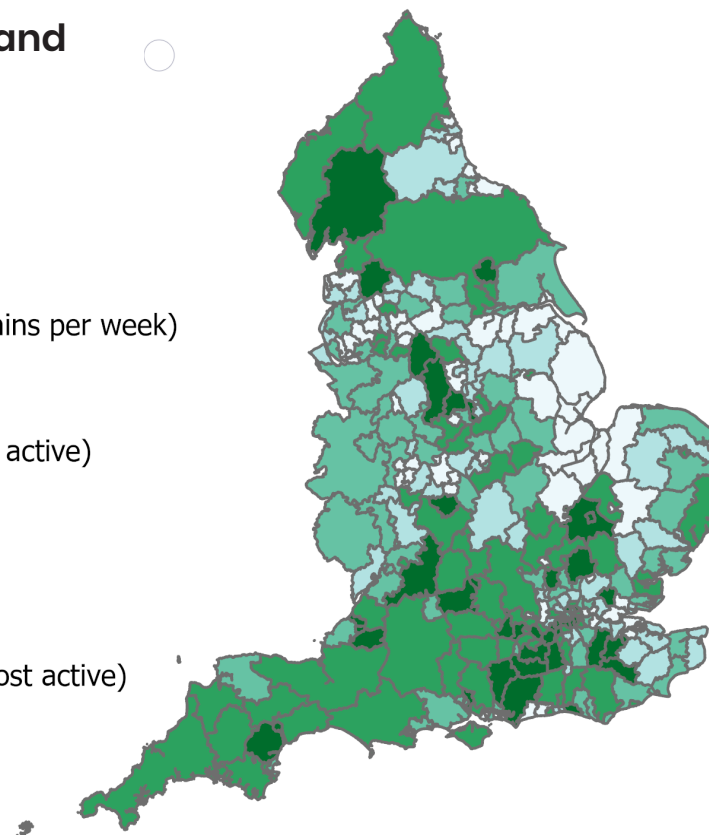
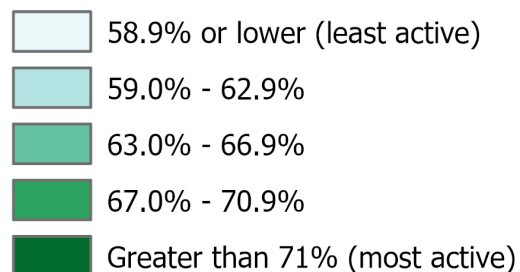
The largest increases in activity levels over the longer term (compared to Nov 15-16) have been seen in Bedford, Braintree, Breckland and East Suffolk (East region), Kingston upon Thames (London), South Tyneside (North East), Westmorland and Furness (North West), Eastleigh, Chichester, Test Valley and Runnymede (South East), and Torrington (South West).

Decreases in activity levels over the same period have been seen in Derby and East Lindsey (East Midlands), City of London (London), Middlesbrough (North East) and Gosport (South East).

Please refer to the data tables for these figures.

Activity across England

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



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Alongside doing at least 150 minutes of physical activity a week, the Chief Medical Officers also recommend adults should do muscle strengthening activities on at least two days a week.

Data has been collected to measure muscle strength since November 2019.

Data is also captured through the [Health Survey for England \(HSE\)](#). The HSE includes housework, manual gardening and DIY within its estimates but doesn't include walking.

As such, the estimates across the two surveys aren't comparable. [HSE data can be viewed here.](#)

What do we mean by muscle strengthening exercises?



Muscles feel some tension, shake or feel warm

At least two sessions a week


Muscle strengthening activity has increased

The number of adults doing two or more sessions of muscle strengthening activities a week is up slightly (+0.9%) compared to November 19-20. In total, 21.5m (45%) met the guideline across November 24-25.

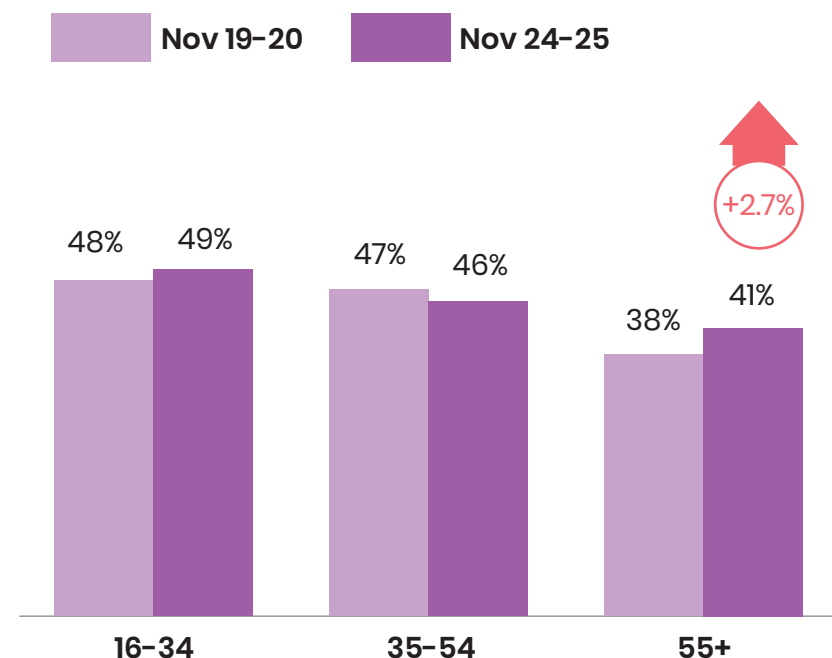
This guideline is specifically relevant to older adults and we continue to see the likelihood of meeting it reduce with age. Despite this, we have seen an increase of just under one million (+2.7%) adults aged 55+ meeting the guideline since November 2019-20.

We also note the following differences for all adults by demographic group:

- Men (49%) are more likely than women (41%) to meet the guideline and have driven the increases seen (+2.1%); women seeing no reportable change.
- There remains a large gap between those with a disability or long-term health condition and those without meeting the guideline (32% vs 49%), although both groups have seen similar increases.
- The least affluent groups (NS-SEC 6-8) remain less likely to meet the guideline than the most affluent groups (33% vs 53% among the most affluent, NS-SEC 1-2).
- Asian (excluding Chinese) adults (40%), Black adults (40%) and those from other ethnic groups (39%) continue to be less likely to meet the guideline.
- Increases have been driven by those with a single characteristic of inequality (+2.9% to 43%), with no reportable changes for those with none or two or more characteristics.

 Arrows show change from five years ago. No arrows indicates no statistically reportable change

Two or more sessions a week of muscle strengthening physical activity



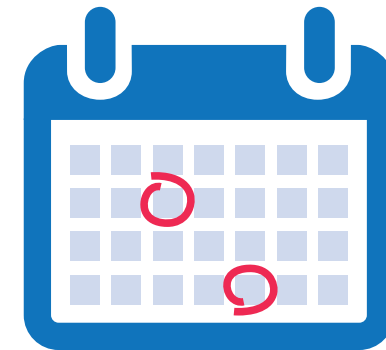
This chapter presents data broken down by different types of activity and looks at those who've participated at least twice in the last 28 days.

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**

At least moderate intensity

Types of activity

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



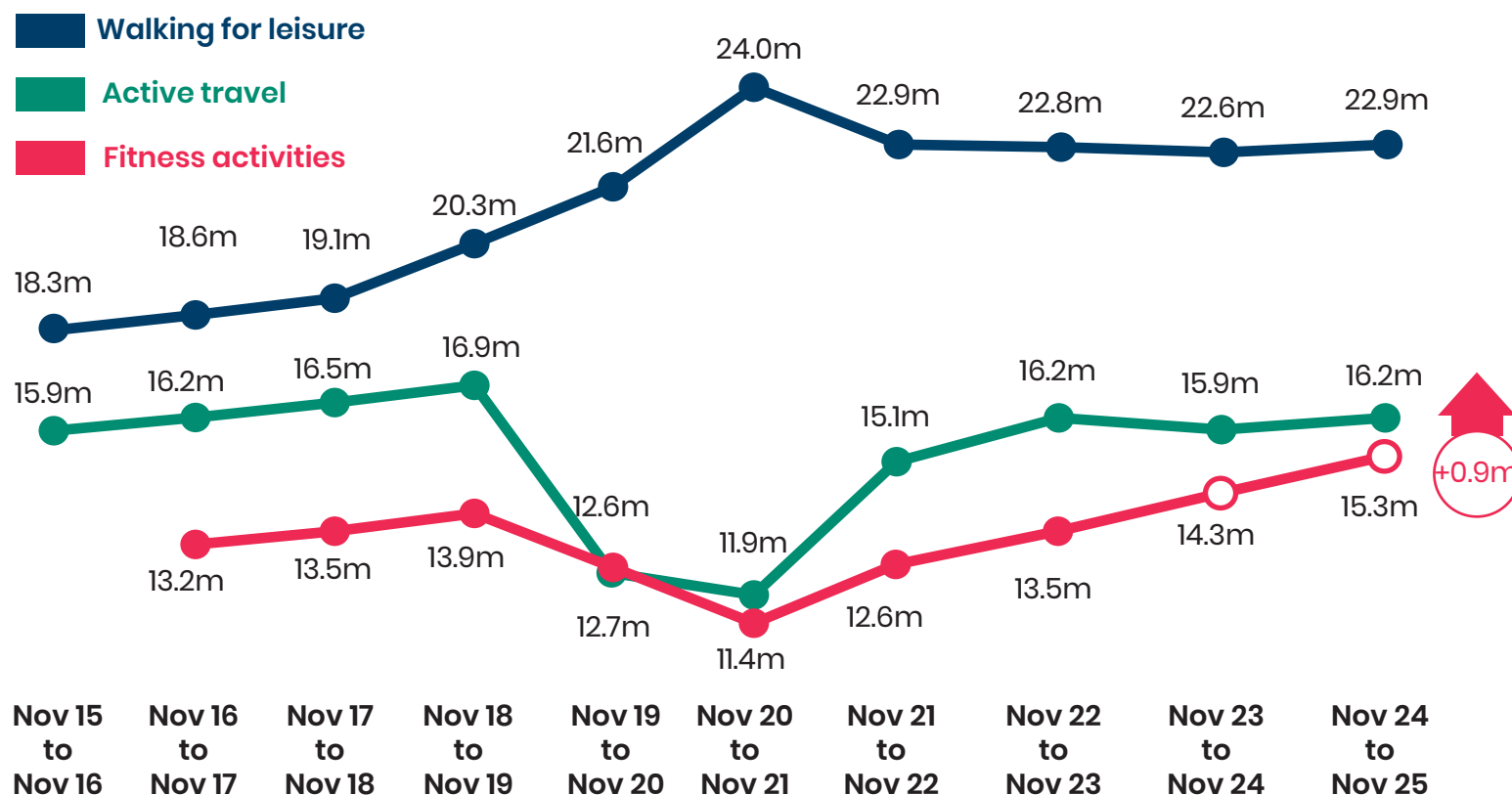
Numbers taking part in fitness activities continue to increase

The number of adults walking for leisure has stabilised around the 22.9m level. Levels remain high and up over the longer term, with 4.6m (+6.6%) more adults going for a walk compared to nine years ago (November 15-16).

Numbers walking or cycling to get to places (active travel) remain unchanged compared to 12 months ago and broadly in line with levels seen nine years ago (Nov 15-16).

Fitness numbers continue to increase, with 921,000 (+1.4%) more adults having taken part in fitness activities compared to 12 months ago, indicating a return to long-term growth. This represents just over 2m (+2.4%) more adults taking part compared to eight years ago (Nov 16-17).

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



Note: Fitness data is not available before Nov 16-17; please see the [notes](#) page for more details.

[Link to data tables](#)

Fitness activities

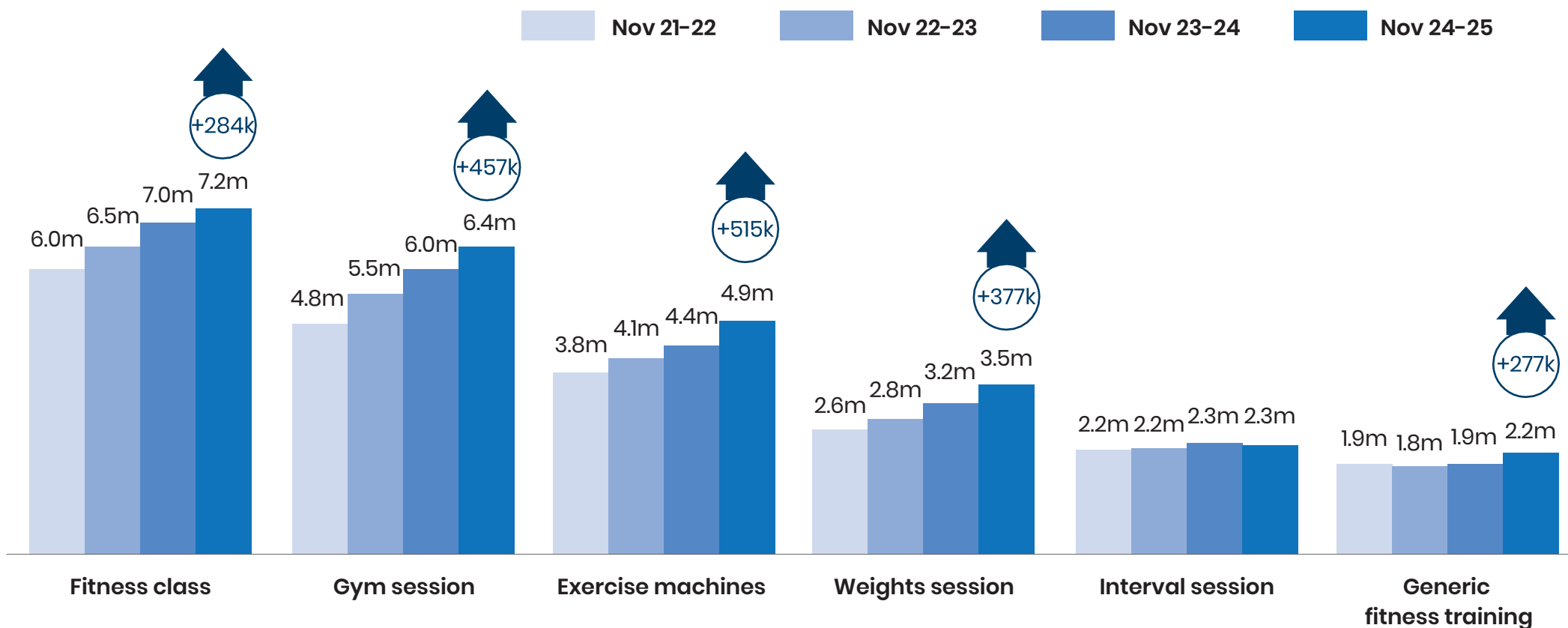
Arrows show change from 12 months ago. No arrows indicates no statistically reportable change



Post-pandemic increases in fitness numbers are seen across most fitness activity types

While growth in numbers is seen across most fitness activities compared to November 2021-22, the largest increases are among gym sessions and exercise machines. Fitness classes remain the most common form of fitness activity done. All types of fitness are up over the longer term (compared to November 2016-17).

Taken part at least twice in the last 28 days (age 16+), by fitness activity group



[Link to data tables](#)

Types of activity

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



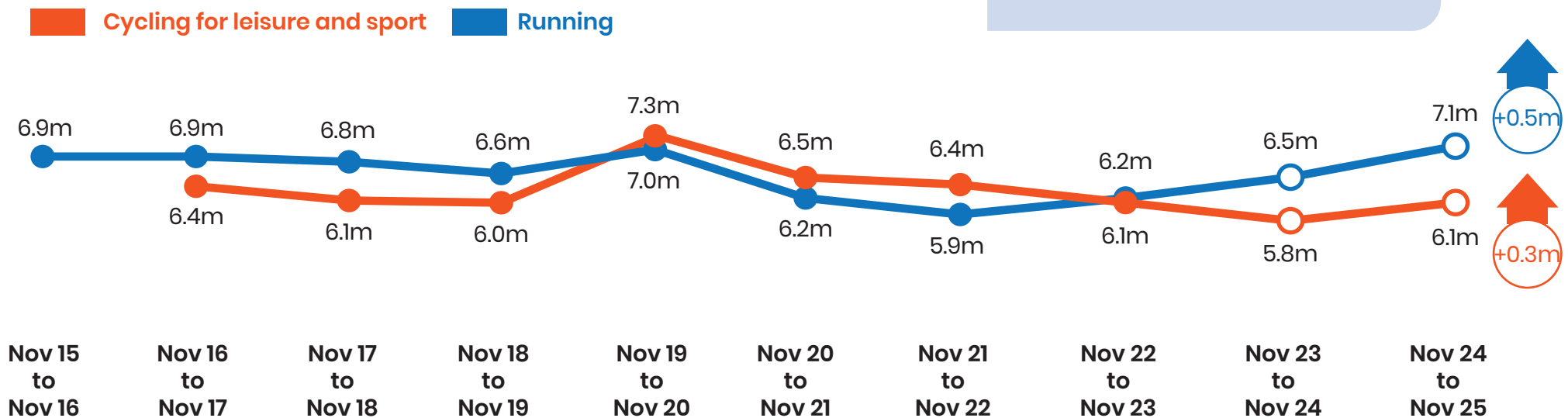
Cycling numbers may be starting to stabilise

Despite a small increase compared to 12 months ago, cycling numbers are broadly unchanged over the last couple of years, suggesting a possible stabilisation following a period of drops. There are 286,000 (-1.5%) fewer adults cycling for leisure or sport now than eight years ago (November 16-17).

Running numbers have increased compared to 12 months ago (up 514,000 or 0.8%), further suggesting an upward trend post-pandemic. Due to population growth, numbers are now above nine years ago (Nov 15-16), although the rate remains slightly down (-0.7%).

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

Note: Cycling data is not available before Nov 16-17; please see the [notes](#) page for more details.



[Link to data tables](#)

Types of activity

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

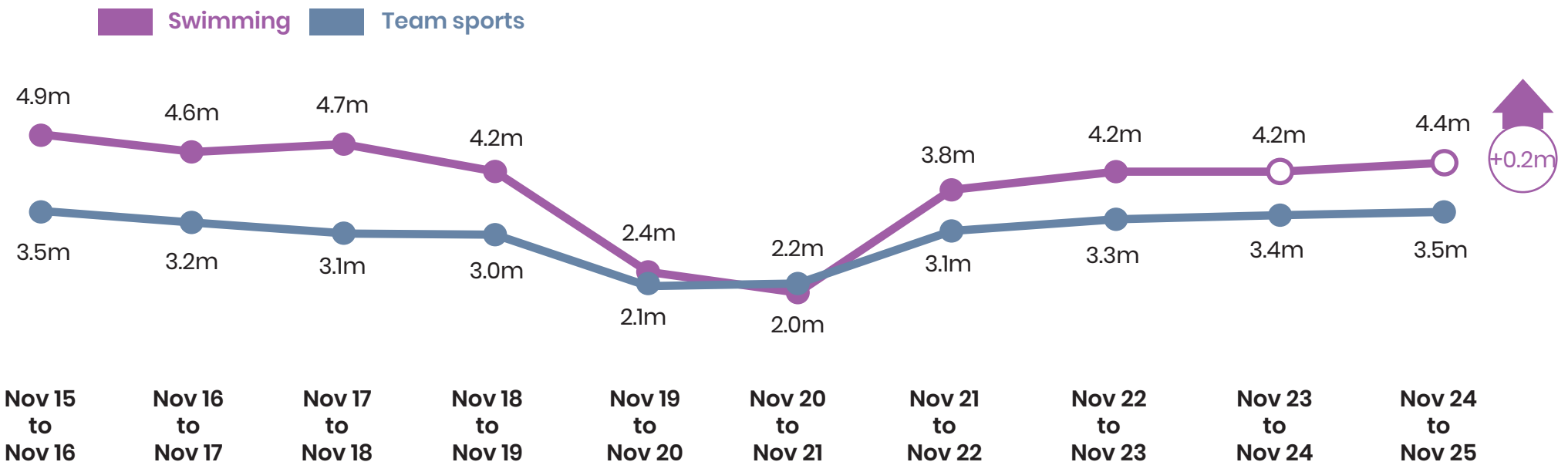


There has been little change in the number of adults either swimming or playing team sport over the last two to three years

Despite a small increase compared to 12 months ago, swimming numbers remain relatively unchanged over the last three years. Numbers are down over the longer term, following a period of drops between November 15-16 and November 18-19. There are currently 452,000 (-1.7%) fewer adults swimming compared to nine years ago (Nov 15-16).

Team sport numbers remain relatively stable across the last two years. Due to population growth, numbers are now back in line with nine years ago (Nov 15-16), although the rate remains slightly down (-0.6%).

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



[Link to data tables](#)

Team sports



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



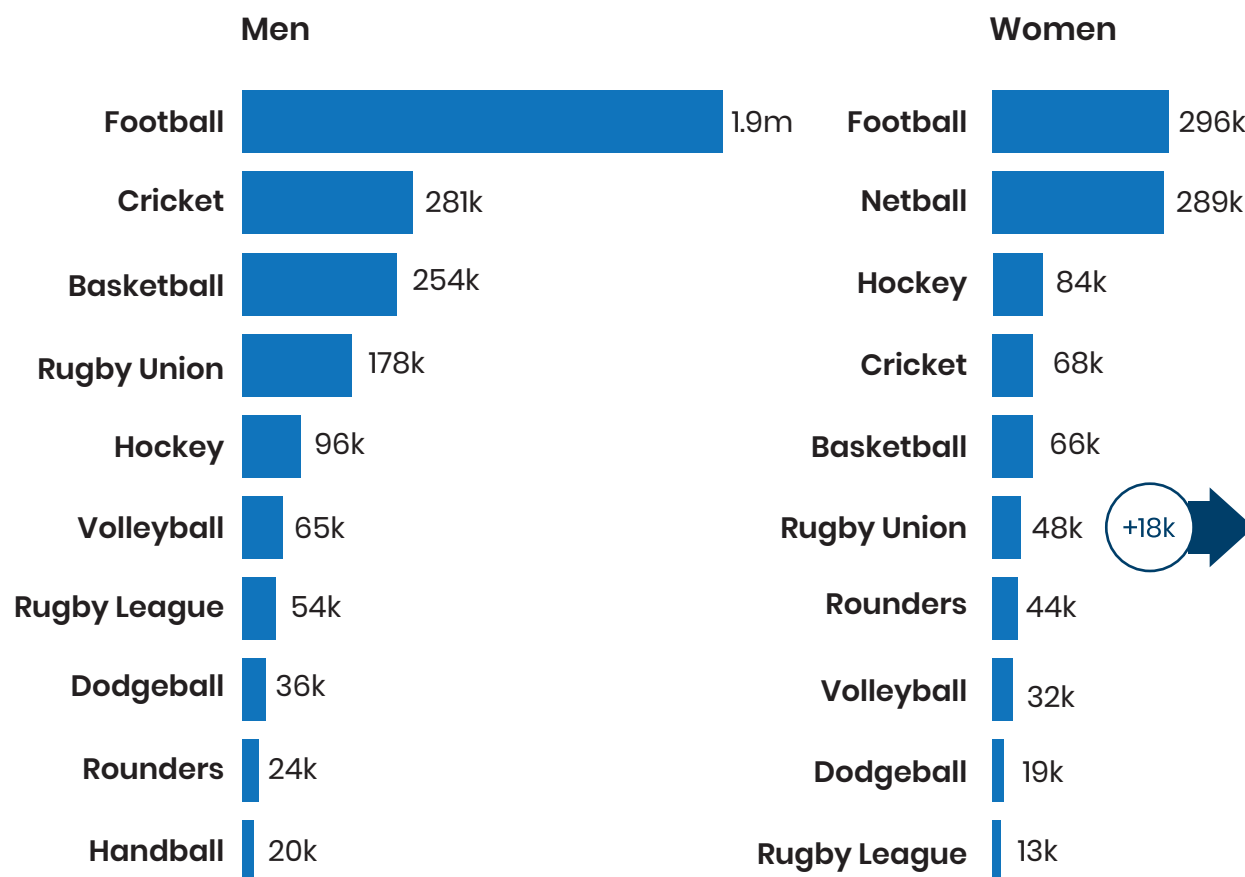
While football is the most common team sport among men, netball and football are equally common among women

A total of 1.9m men played football across November 2024-25, making it the most common team sport played among men in England. Similar numbers of women played football and netball, also similar to the number of men who played cricket and basketball.

While there are currently 153,000 (-1.5%) fewer men playing team sports compared to nine years ago (November 2015-16), there are 131,000 (+0.3%) more women doing so.

- Drops for men have been seen in football (down 163,000 or -1.3%), cricket (down 50,000 or -0.3%) and rugby union (down 58,000 or -0.3%).
- Increases for women have been seen in football (up 81,000 or +0.3%), cricket (up 35,000 or +0.1%) and rugby union (up 25,000 or +0.1%).

Taken part at least twice in the last 28 days (age 16+), top 10 team sports



[Link to data tables](#)



A volunteer makes all the difference. Volunteering benefits both the volunteer and the person receiving the support.

Whether it's serving refreshments, coaching a player or assisting disabled people to take part, the sport and activity sector needs people to give their time.



A person counts as having volunteered if:

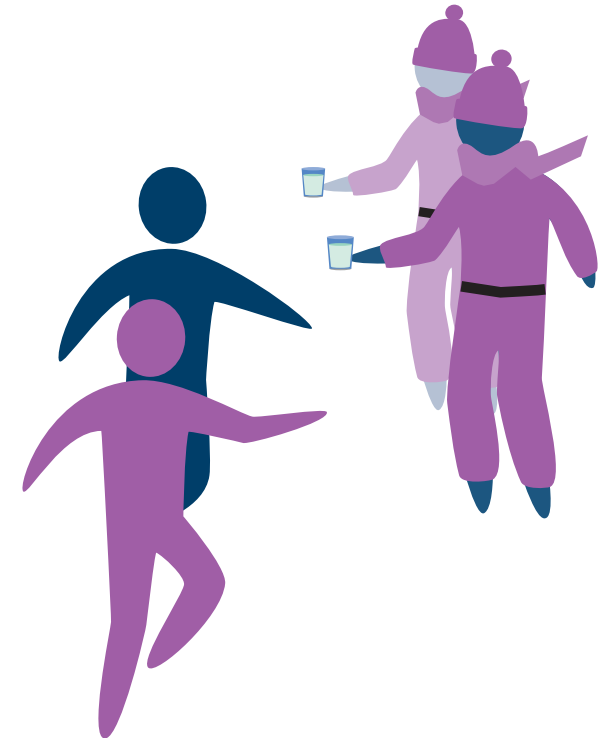
They've taken part in a volunteering role to support sport/physical activity in the past 12 months.

(A full list of roles can be found in our [definitions](#) at the end of this report.)




Volunteering is captured across four levels of frequency (in the past 12 months):

- Volunteered once/one-off in the past year
- Volunteered a few times in the past year
- Volunteered at least once a month, but not once a week, throughout the year
- Volunteered at least once a week throughout the year.



Volunteering

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

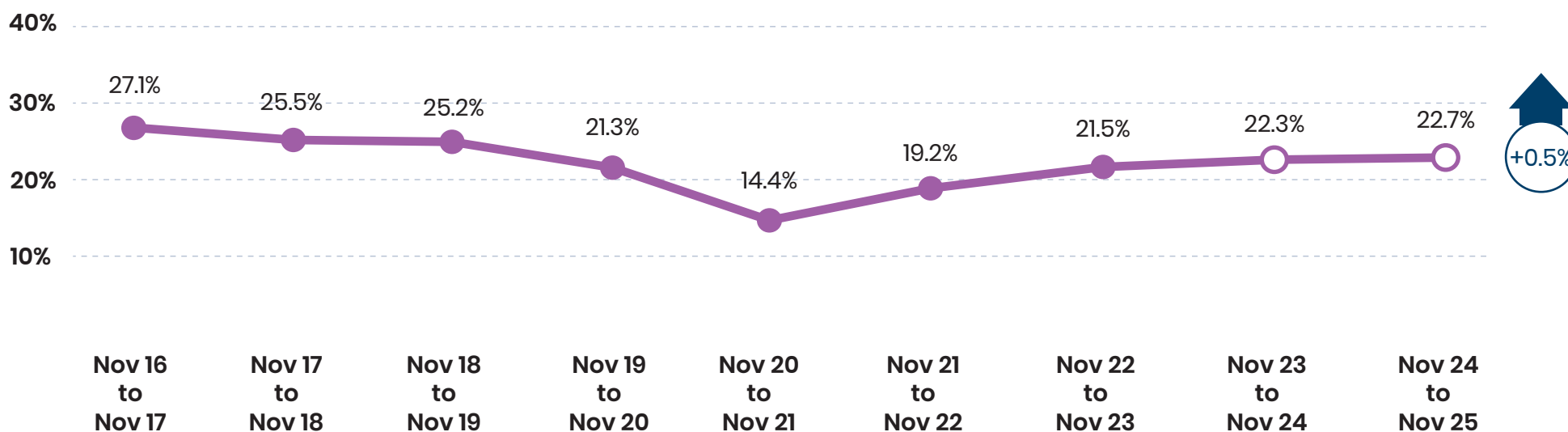


Volunteer levels continue to slowly increase but remain down over the longer term

Roughly 10.9m adults (22.7%) gave up their time, across the 12-month period from mid-November 2024 to mid-November 2025, to support sport and physical activity. This is 399,000 (0.5%) more than the previous 12 months.

However, volunteering levels were falling before the pandemic and while the recent small increases are promising, we're yet to see volunteering return to pre-pandemic (Nov 18-19) levels. There remain 1.3m (4.4%) fewer volunteers compared to eight years ago (Nov 16-17).

Volunteered to support sport and physical activity in the last 12 months



[Link to data tables](#)



Arrows show change to November 16-17 (eight years ago). No arrows indicates no statistically reportable change



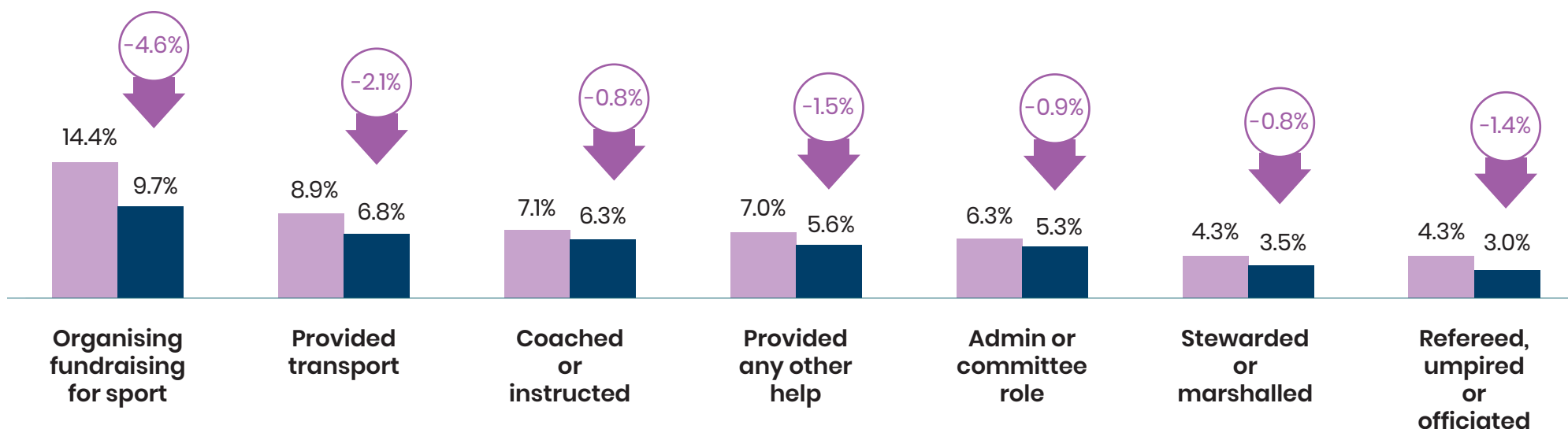
Coaching levels are recovering

Fewer adults have done each volunteering role compared to eight years ago (Nov 16-17), with drops generally around 1-2%. We have, however, seen larger drops in those organising fundraising for a sports club, organisation or event, with 4.6% (1.8m) fewer adults undertaking this role. Despite this, it remains the most common role, with 9.7% of adults (4.7m) having undertaken it in November 24-25.

The proportion who have coached or instructed remains in line with pre-pandemic (Nov 18-19), but down over the longer term (-0.8%). The proportions doing all other roles remain down both over the longer term and compared to pre-pandemic.

Roles undertaken to support sport and physical activity in the past 12 months

Nov 16-17 Nov 24-25



[Link to data tables](#)

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

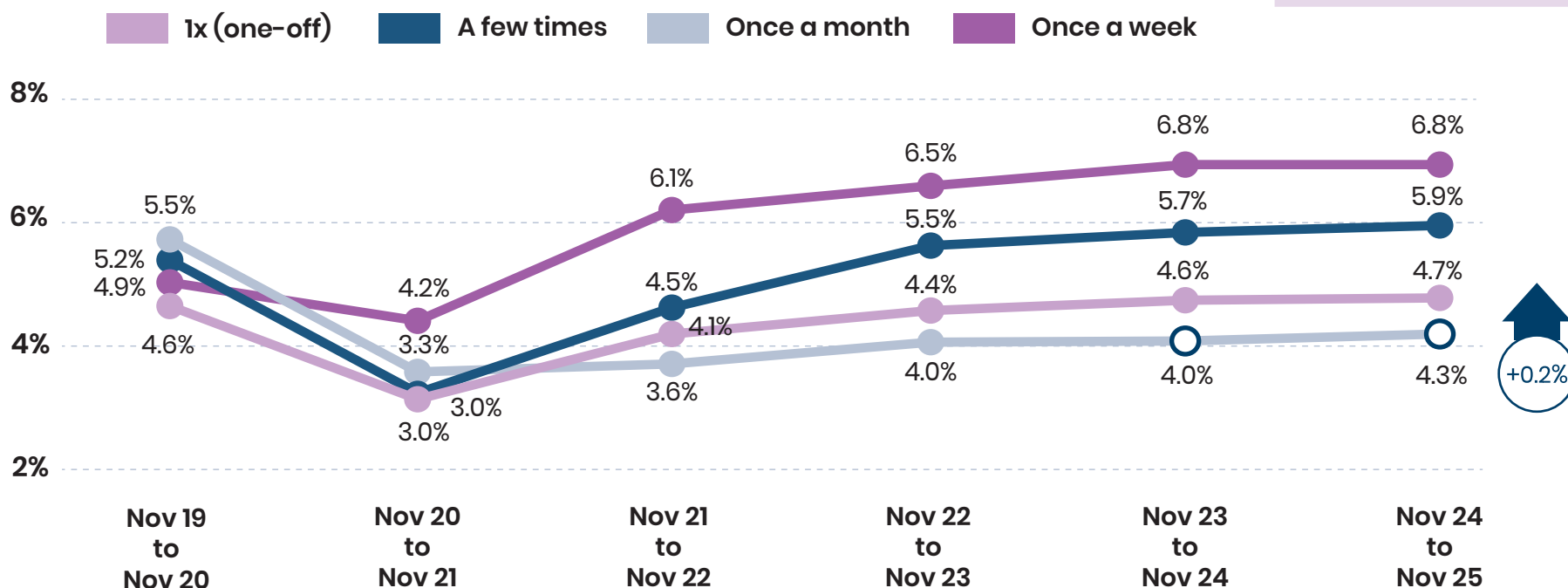


Regular volunteering remains unchanged to 12 months ago

The proportion of adults volunteering at least once a week throughout the year remains unchanged compared to 12 months ago, indicating a potential stabilisation at this level. Only volunteering once a month has seen an increase over this period but levels remain notably down over the longer term, with 449,000 (-1.2%) fewer doing so compared to November 2019-20.

Volunteered to support sport and physical activity in the last 12 months

Note:
Data is only available since Nov 2019-20 for this metric.



[Link to data tables](#)

Volunteering

Volunteered at least once a week throughout the year

Population

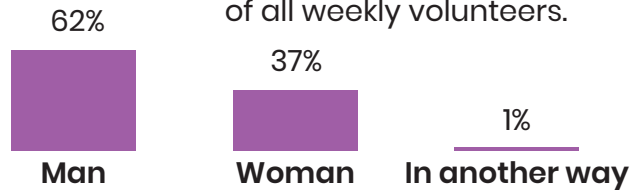


Summary of demographic profile

Our data shows there are significant inequalities:

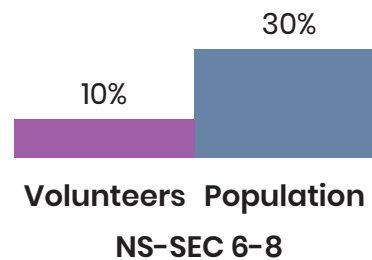
1 Gender identity

Men are more likely to regularly volunteer to support sport and physical activity than women, comprising 62% of all weekly volunteers.



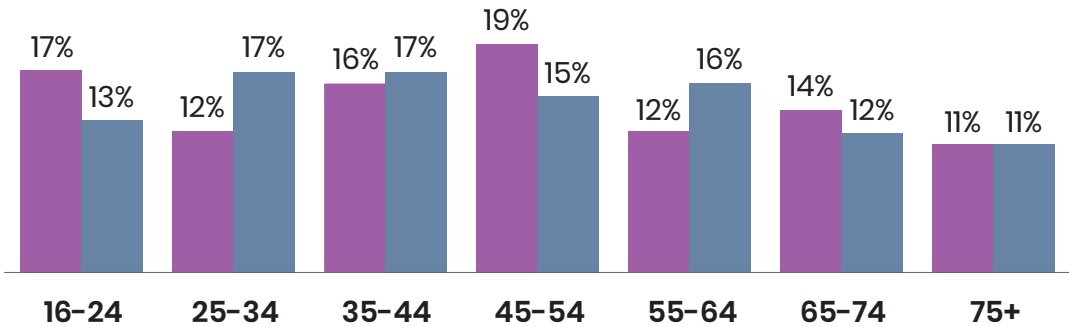
2 Socio-economic groups

Adults from lower socio-economic backgrounds (NS-SEC 6-8)* are under-represented in volunteering, comprising just 10% of all weekly volunteers but 30% of the population (aged 16-74).



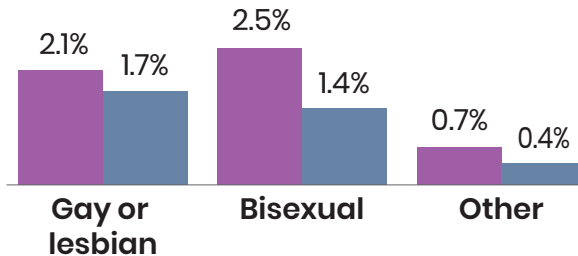
3 Age

The greatest shares of regular volunteers come from the 16-24, 35-44 and 45-54 age groups.



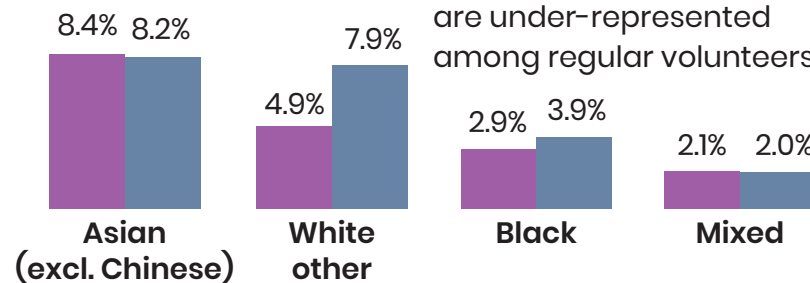
4 Sexual orientation

All three minority groups are slightly over-represented among regular volunteers.



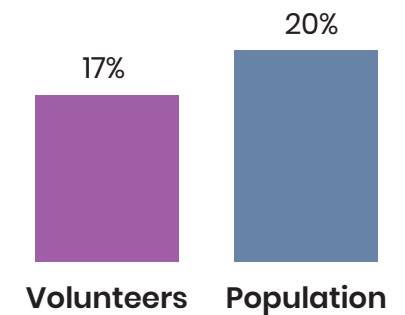
5 Ethnicity

Adults from Black and White other ethnic minority groups are under-represented among regular volunteers.



6 Disability and long-term health conditions

Adults with a disability or long-term health condition* account for 17% of regular volunteers, despite comprising 20% of the population as a whole.



[Link to data tables](#)

*See our [definitions](#) page for the full definition of each demographic group.

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

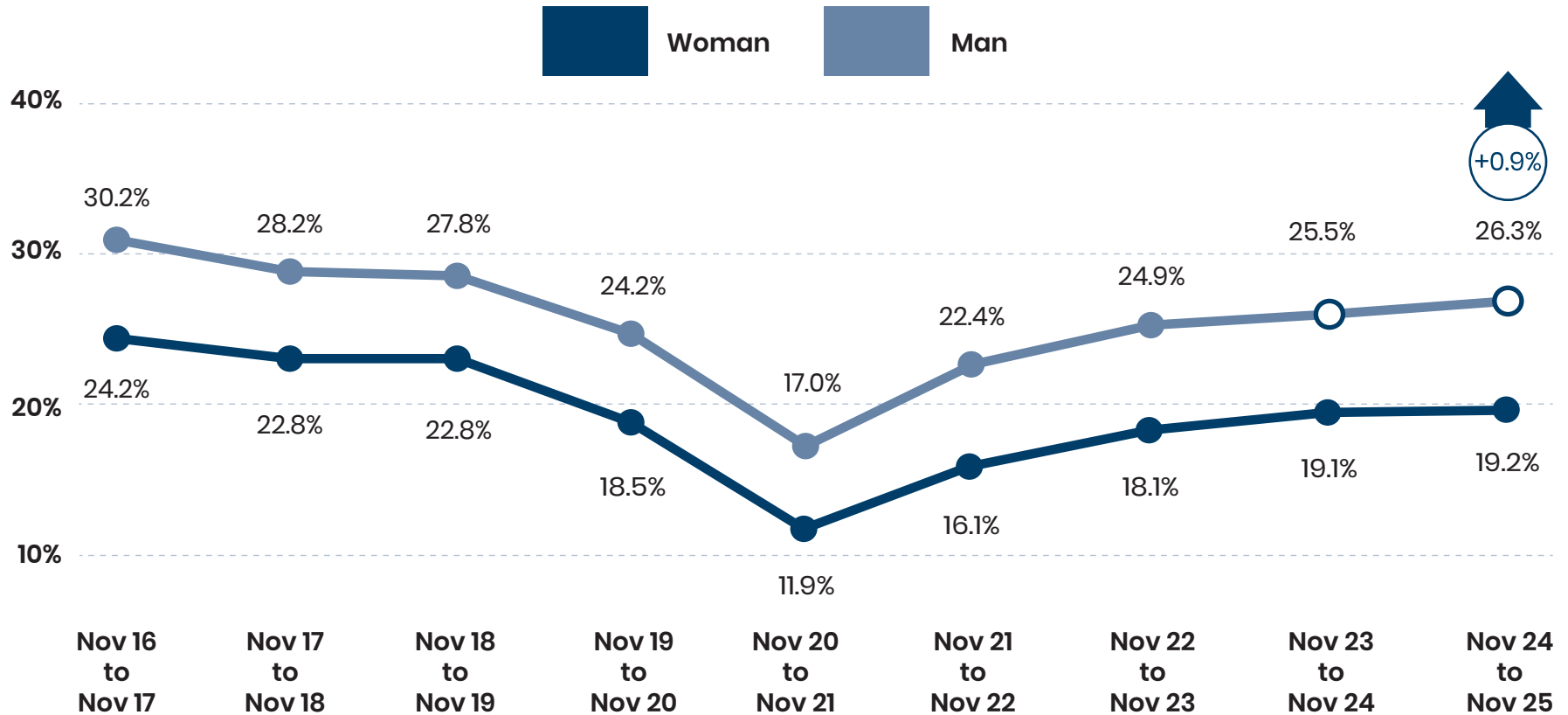


Men are driving the recent increases in volunteering

Men (26%) are more likely to volunteer than women (19%). This gap is widest for those volunteering once a week throughout the year, while men and women are equally likely to volunteer as a one-off in the last year. The recent increases in volunteering have been driven by men, with rates for women looking like they are settling around 19%.

Any volunteering in the last 12 months

Note: Data on gender identification was collected on male, female, non-binary and prefer to self-describe. Results for the latter categories are combined into 'in another way' for reporting (due to small sample sizes) and can be found in the data tables.



[Link to data tables](#)

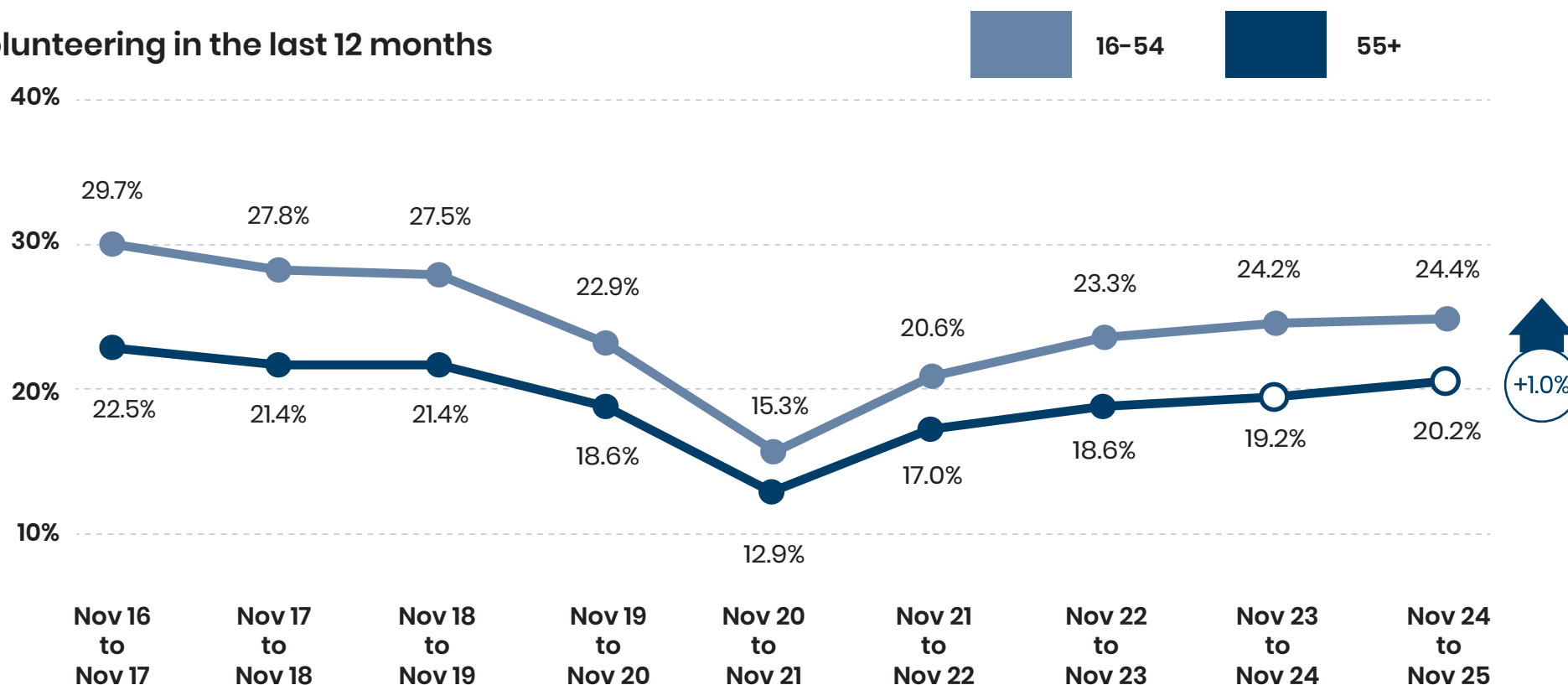
Arrows show change from 12 months ago. No arrows indicates no statistically reportable change




Older adults are driving the recent increases in volunteering

The continued increases in volunteering overall are being driven by the 55+ age group, who have seen levels increase by a further 1.0% (to 20%) compared to 12 months ago. For younger age groups, levels appear to be settling at 24%. For both groups, volunteering levels remain down compared to November 16-17.

Any volunteering in the last 12 months



[Link to data tables](#)

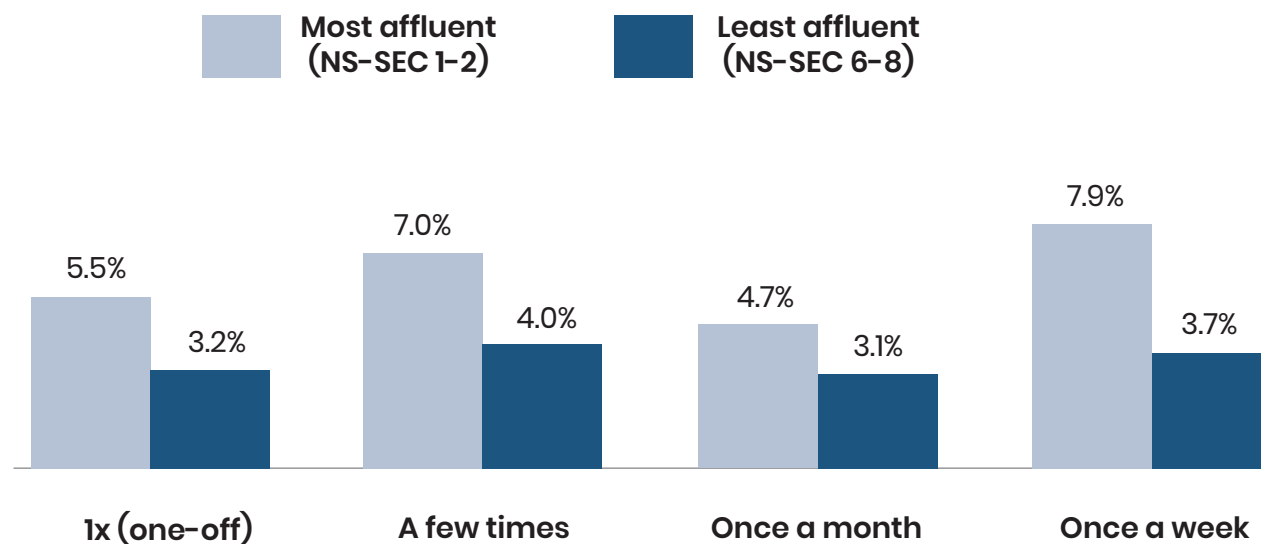
 Arrows show change from 12 months ago. No arrows indicates no statistically reportable change



There are notable differences in volunteering by social group

All social groups are following similar patterns in volunteering, both overall and by the different frequencies.

The most affluent (NS-SEC 1-2) remain more likely to volunteer across all frequencies, when compared to the least affluent (NS-SEC 6-8), with the gap the widest for those volunteering once a week throughout the year.



[Link to data tables](#)



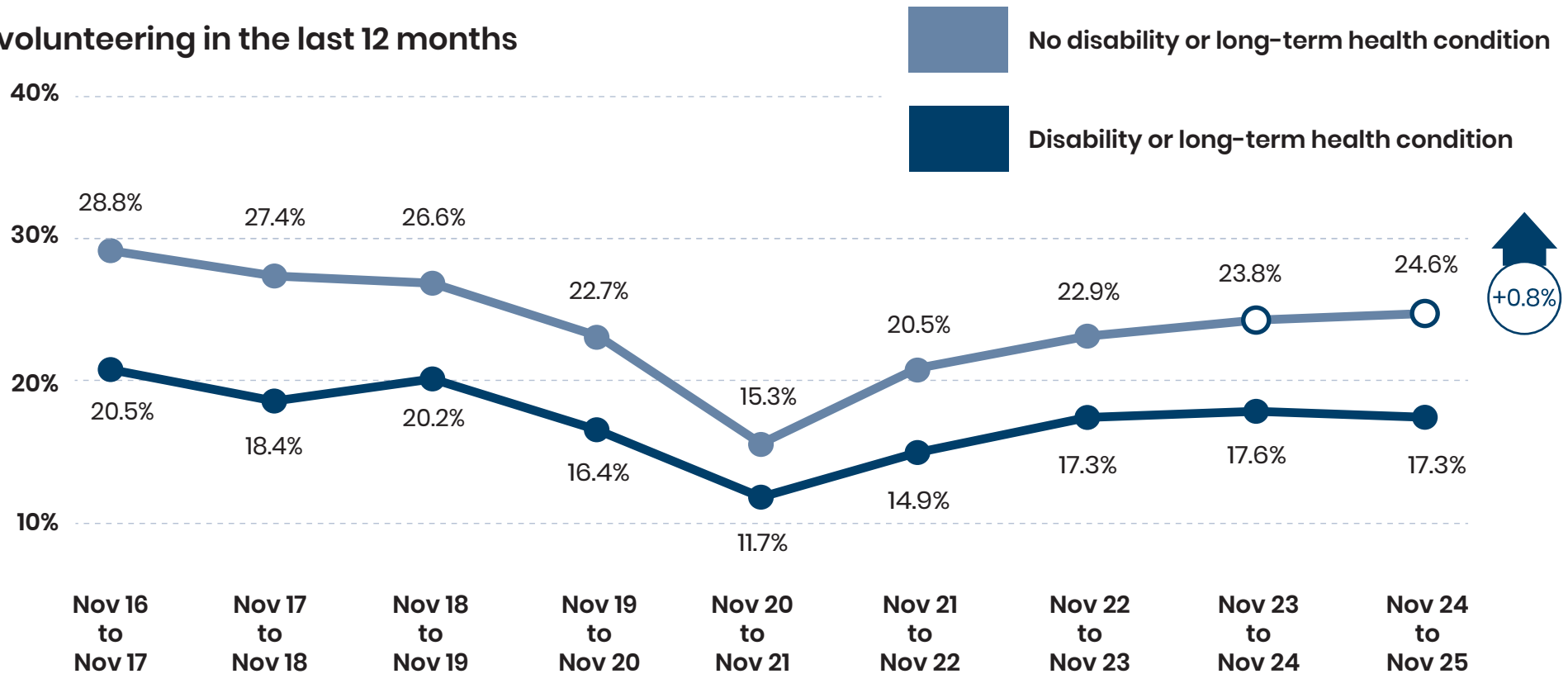
Arrows show change from 12 months ago. No arrows indicates no statistically reportable change



Recent increases in volunteering have not been seen among those with a disability or long-term health condition

Adults with a disability or long-term health condition are less likely to volunteer across all frequencies, compared to those without. The recent increases in volunteering have been driven by those without a disability or long-term health condition. Those with a disability or long-term health condition are seeing volunteer levels settle at 17-18%, down 3.2% compared to November 16-17.

Any volunteering in the last 12 months



[Link to data tables](#)

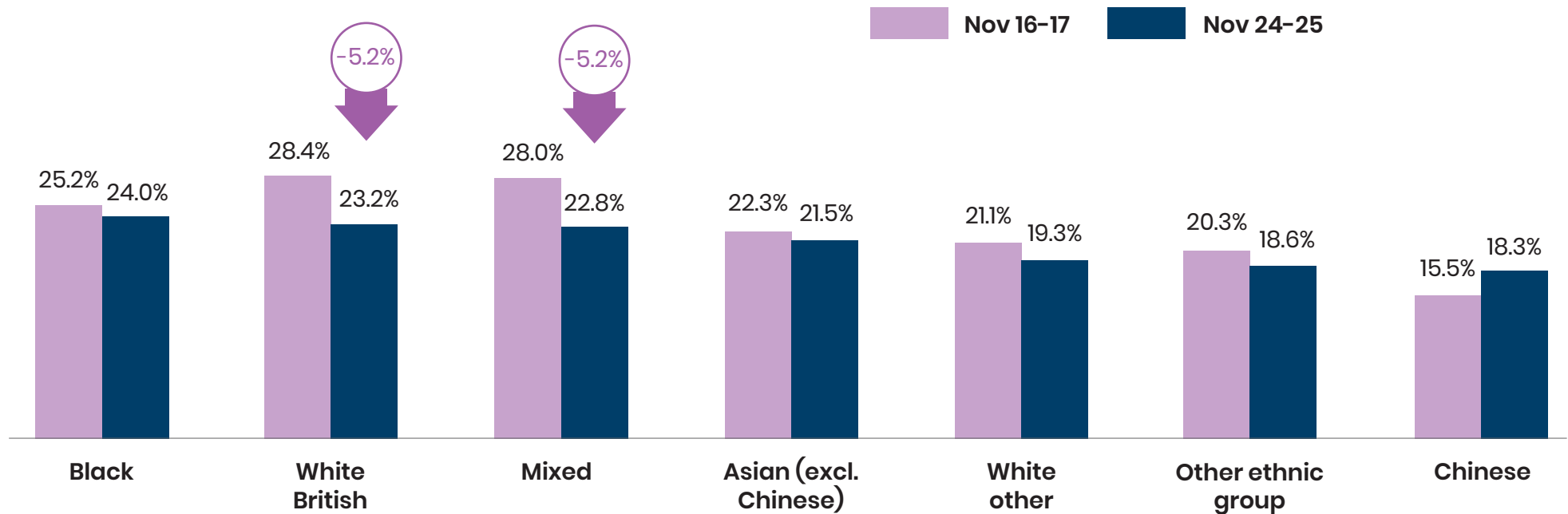
Arrows show change to November 16-17 (eight years ago). No arrows indicates no statistically reportable change



Long-term drops in volunteer levels are seen among White British and adults of mixed ethnicity

Adults from White other, Chinese and other ethnic groups are the least likely to volunteer to support sport and physical activity. It is, however, White British adults and those with mixed ethnicity who are driving the long-term decreases, both down 5.2% compared to November 16-17.

Any volunteering in the last 12 months



[Link to data tables](#)



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

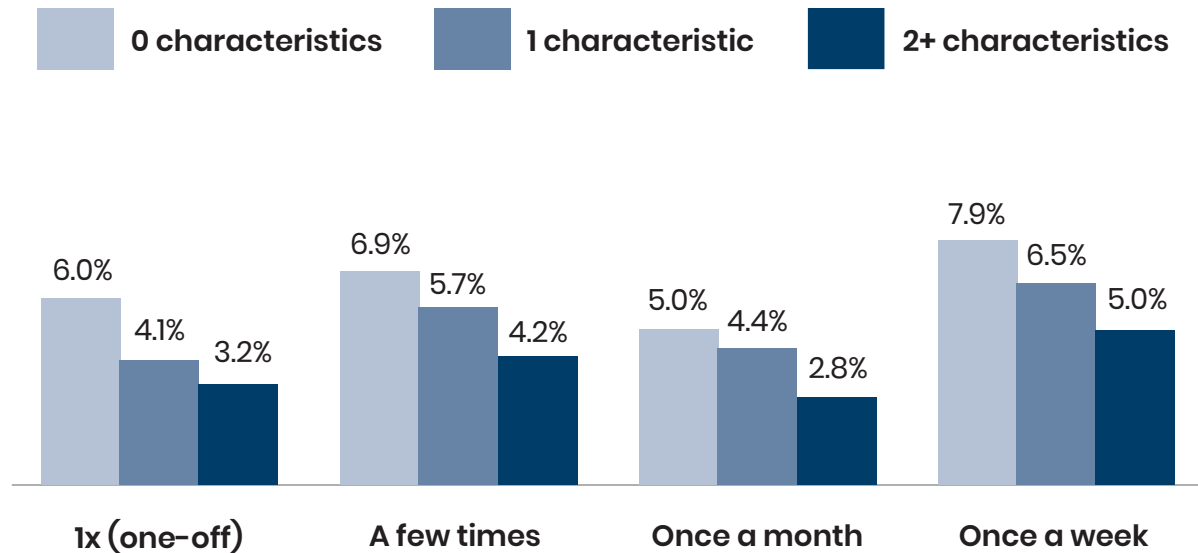


Volunteer levels are lowest for those with two or more characteristics of inequality

Adults with two or more characteristics of inequality are less likely to volunteer (16%) than those with one characteristic (22%), who in turn are less likely to volunteer than those with no characteristics of inequality (27%). The same is true for all frequencies of volunteering.

Similar patterns are seen across time for all three groups.

Frequency of volunteering





Physical wellbeing



Mental wellbeing



Individual development



Social & community development



Economic development

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 to which sport and physical activity contributes.

Chapters one and two 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](#).

Sport and physical activity can...

- Help improve and maintain fitness, strength and balance.
- Help prevent and manage medical conditions.

- Contribute to happiness and improved self-esteem.
- Reduce stress, anxiety and depression.

- Help develop soft/social skills and increase persistence and perseverance.
- Impact positively on employment opportunities.

- Bring people together.
- Build trust and reduce isolation.

- Promote economic growth.
- Create jobs.

Measured by...

Proportion of adults who:

- Undertake an average of **150+ minutes** a day of sport and physical activity.
- Undertake two or more sessions of **muscle strengthening** activity a week.

Agreement with:

- How **happy** did you feel yesterday?
- How **satisfied** are you with your life nowadays?
- To what extent do you feel that the things you do in your life are **worthwhile**?
- How **anxious** did you feel yesterday?

Agreement with:

- I can **achieve** most of the goals I set myself.
- If I find something difficult, I **keep trying** until I can do it.

Agreement with:

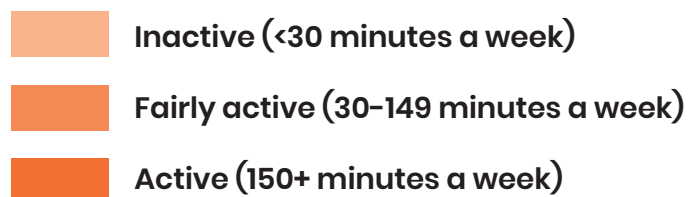
- Most people in our local area can be **trusted**.
- My local area is a place where people from **different backgrounds** get on well together.

The economic value of sport, as reported in:

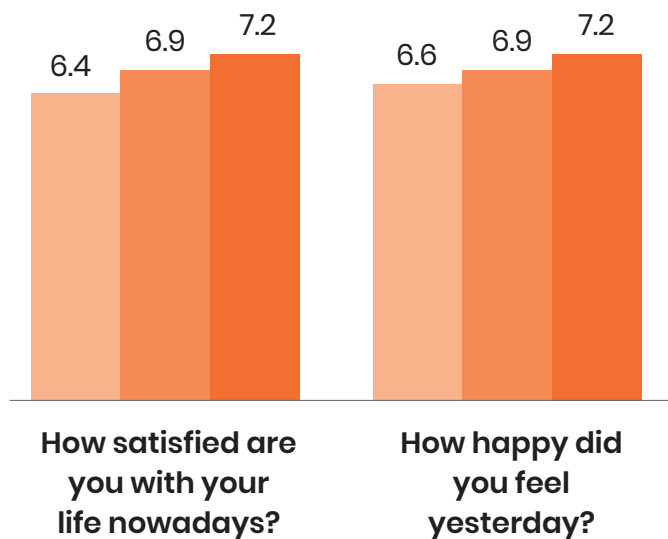
- DCMS's [Sports Satellite Accounts](#)
- Our [report on the social and economic value of community sport and physical activity in England](#).

There's a positive association between activity levels and mental wellbeing – some activity is good, more is better

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

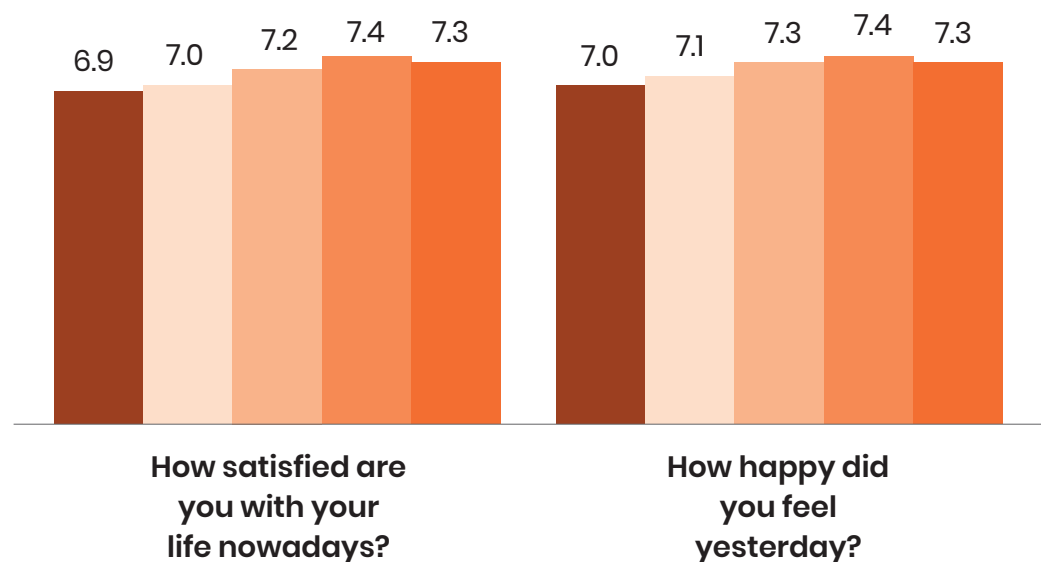


(mean score out of 10)



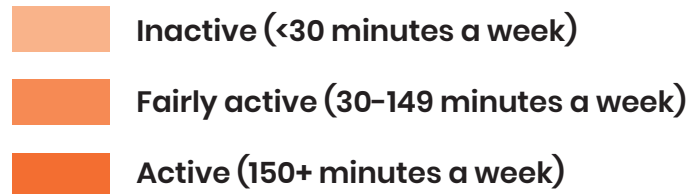
There's a positive association between frequency of volunteering and mental wellbeing

Regular volunteers generally have higher wellbeing scores than those who volunteer as a one-off or not at all.

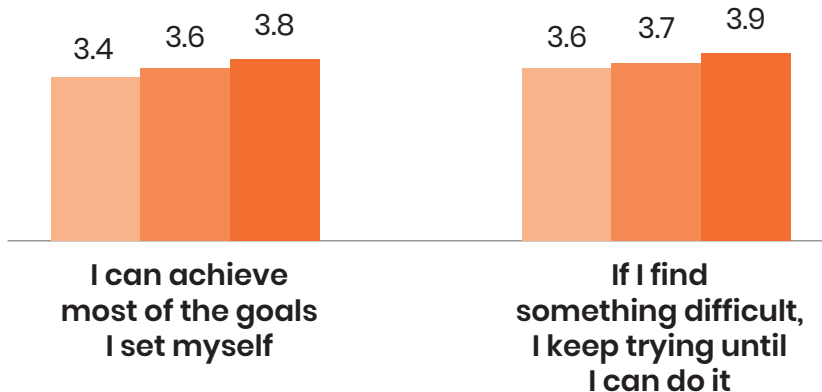


There's a positive association between activity levels and individual development

Those who are active have higher scores than those who are fairly active. In turn, those who are fairly active have higher scores than those who are inactive.



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

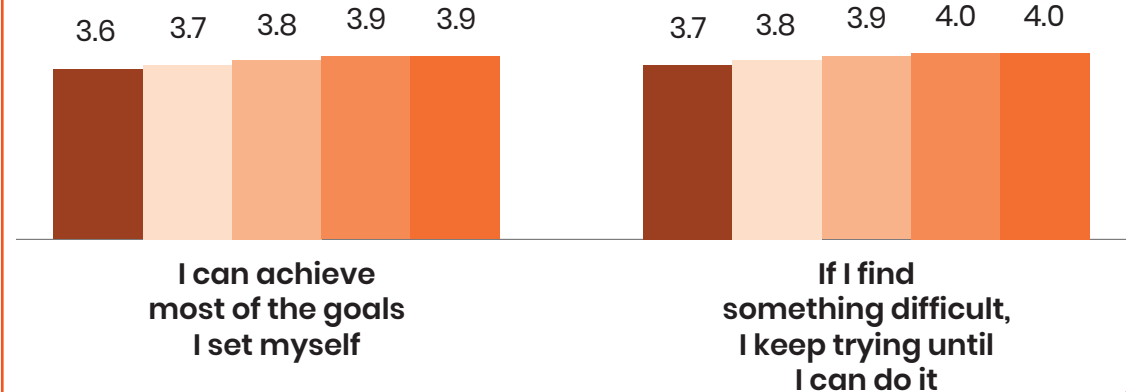


There's a positive association between frequency of volunteering and individual development

Those who volunteer regularly generally have higher scores than those who don't volunteer.

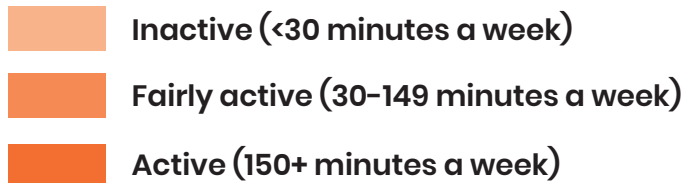


(mean score out of 5, where 5 is strongly agree and 1 is strongly disagree)

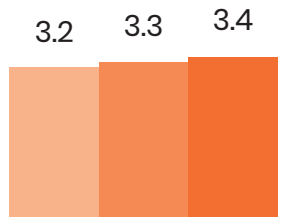


There's a small positive association between activity levels and social and community development

Those who are active have slightly higher social trust and community integration scores than those who are inactive.

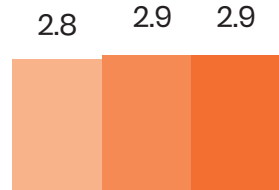


(mean score out of 5, where 5 is strongly agree and 1 is strongly disagree)



Most people in our area can be trusted

(mean score out of 4, where 4 is strongly agree and 1 is strongly disagree)



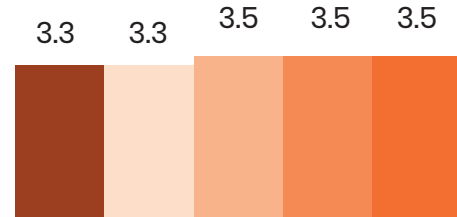
My local area is a place where people from different backgrounds get on well together

There's a small positive association between volunteering and social and community development

Social trust and community integration scores vary very little by volunteering.

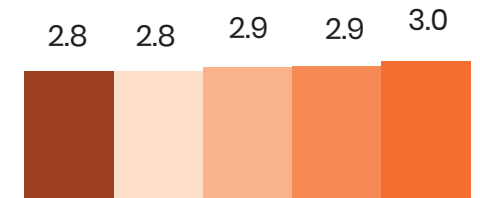


(mean score out of 5, where 5 is strongly agree and 1 is strongly disagree)



Most people in our area can be trusted

(mean score out of 4, where 4 is strongly agree and 1 is strongly disagree)



My local area is a place where people from different backgrounds get on well together



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

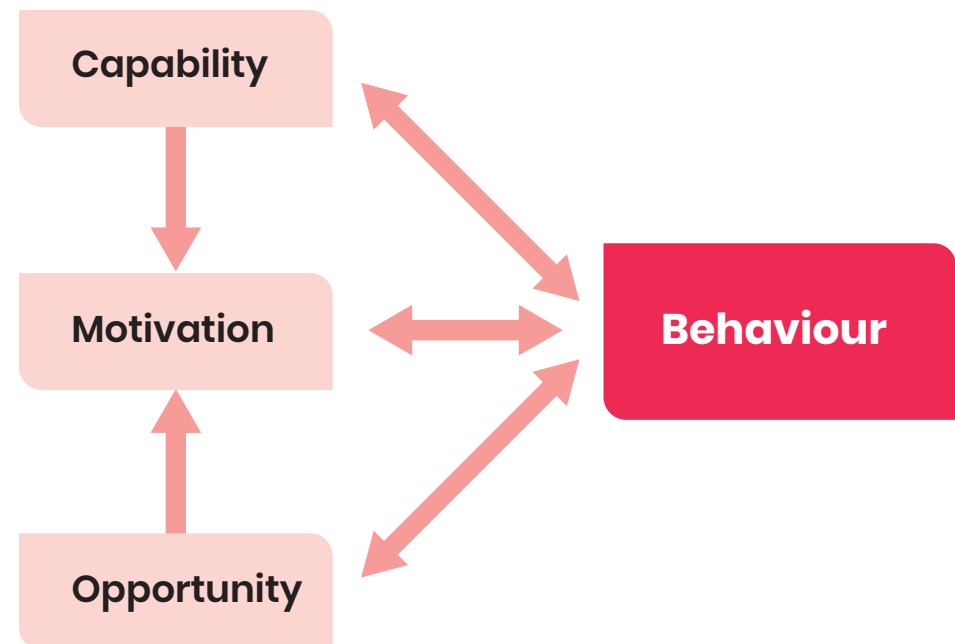
- I find sport/exercise enjoyable and satisfying. Four questions covering motivation are included within the survey; however, just enjoyment is included in this report.

This chapter also presents data on attitudes towards how **inclusive** sport and physical activity is:

- I find the places and environments where I exercise inclusive and welcoming.
- I see people who are similar to me at the places and environments where I exercise.
- The public places and settings where I'd like to exercise feel safe at the times I'd prefer to use them.

Results are presented for those saying they 'strongly agree' with each statement.

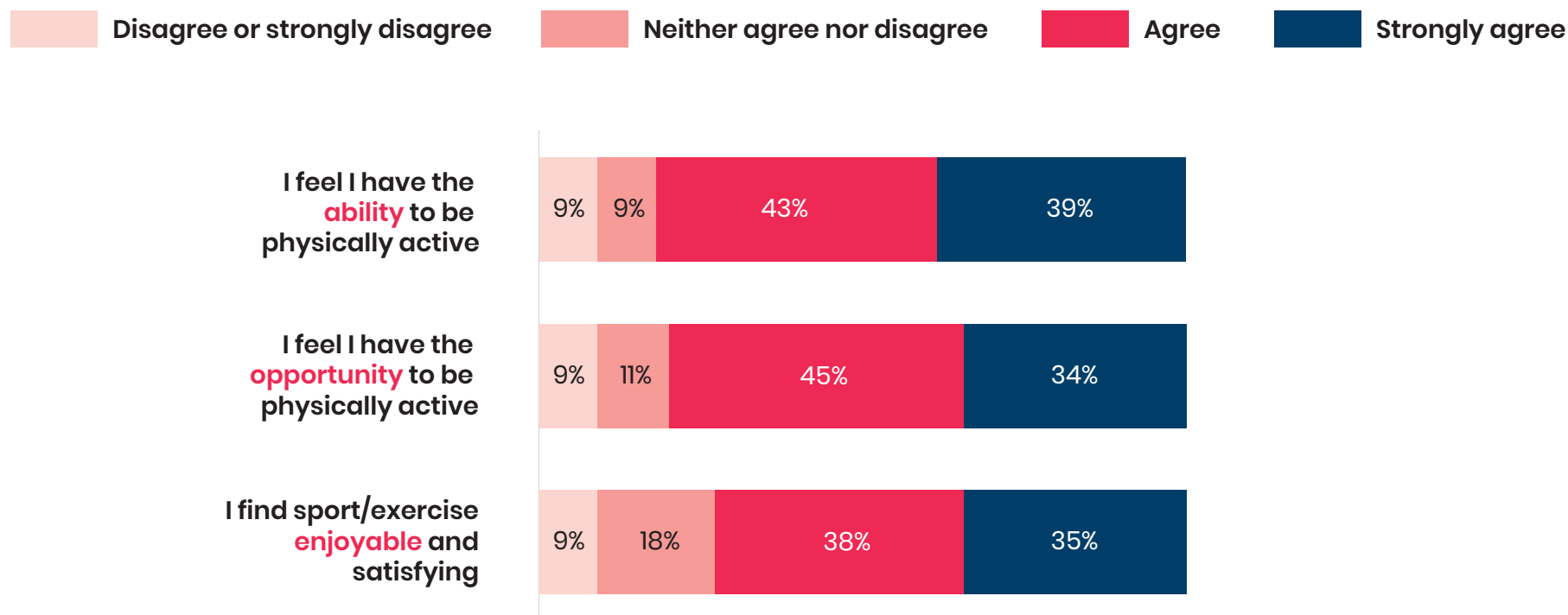
Someone's **C**apability, **O**ppportunity and **M**otivation to be active combine to drive their **B**ehaviour (the COM-B model*). The absence of just one of these can lead to someone becoming inactive. Data on these attitudes helps us to better understand people's activity levels.



*Susan Michie, Maartje van Straken, Robert West (2011)

Slightly more adults say they have the ability to be active compared to the opportunity or enjoyment of being active

The proportion strongly agreeing they have the ability to be active is just under two-fifths, while just over a third feel they have the opportunity to be active and find it enjoyable and satisfying.



[Link to data tables](#)

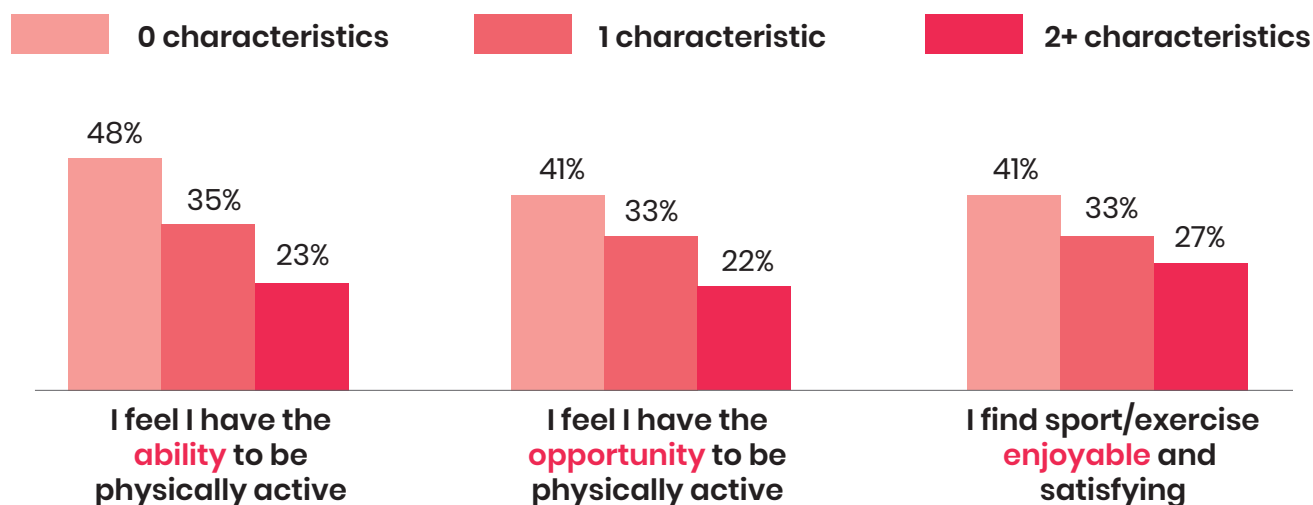


Capability, opportunity and enjoyment levels decrease as inequalities increase

The likelihood of strongly agreeing with all three statements decreases as inequalities increase. We note the following differences by key demographic group:

- While the likelihood of strongly agreeing with all three statements decreases with age, the gradient is steeper for perceived ability to be active. There is little difference in perceived opportunity to be active between ages 35-54 and 55-74.
- Men are more likely to strongly agree with all three measures than women.
- Adults with a disability or long-term health condition are noticeably less likely to strongly agree with any statement than those without.
- Black and Mixed adults are the most likely to strongly agree with both the capability and opportunity statements. Black adults are also most likely to strongly agree with the enjoyment statement.
- The likelihood of strongly agreeing with each of the three statements increases with affluence.

Proportion who strongly agree



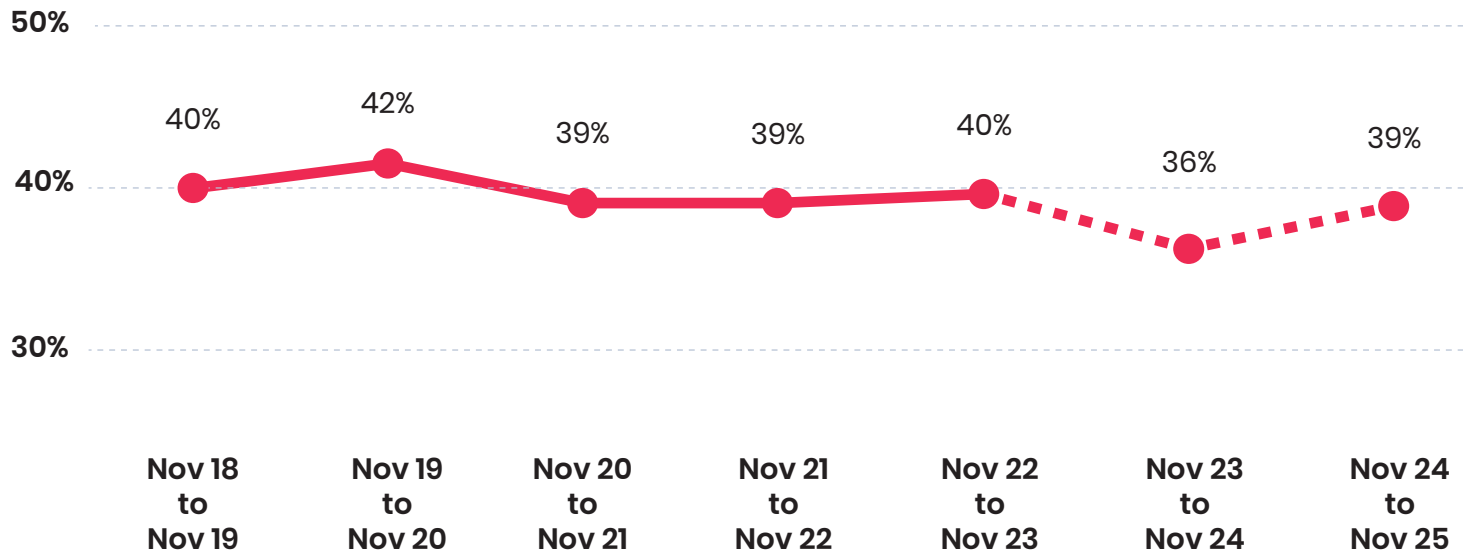
[Link to data tables](#)



Capability remains unchanged over time

Until November 2023-24, we have seen very little change in the proportion strongly agreeing they have the ability to be active. Changes are likely to be methodological; please see notes.

I feel I have the ability to be active (proportion who strongly agree)



Notes:

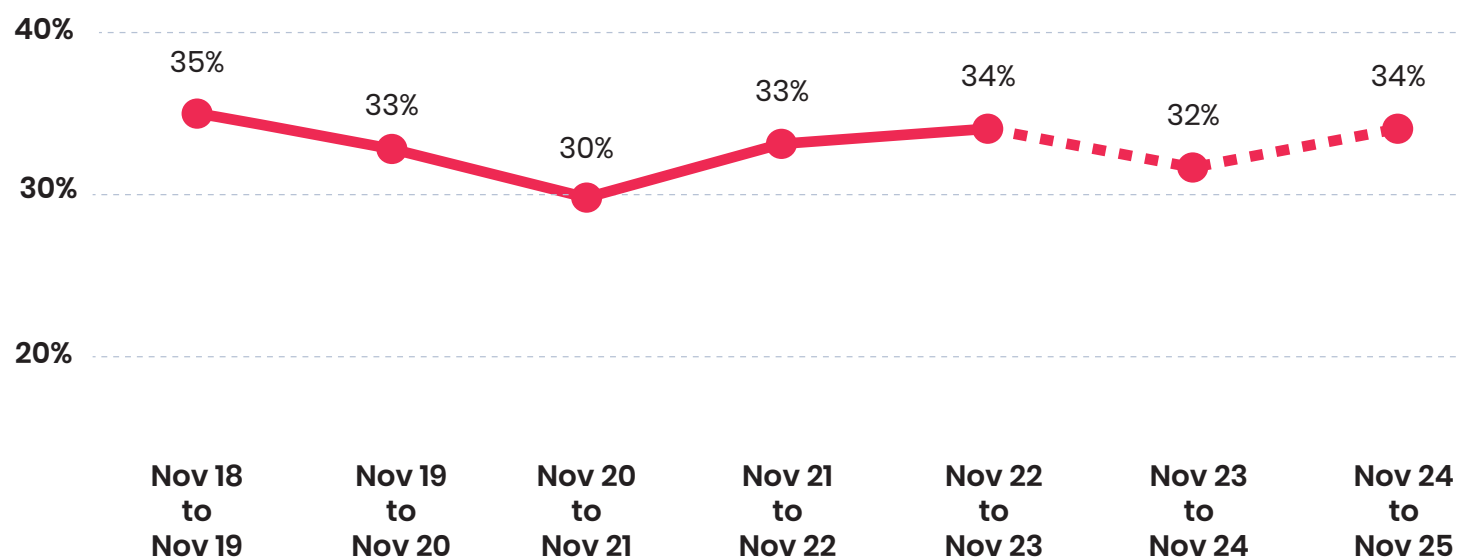
- Changes to the questionnaire – impacting both the ordering of the capability, motivation and enjoyment questions, and how questions on habit were asked – have had an impact on the data reported here.
- As such, we expect to see another change next year, with a new time series continuing at November 2023-24 levels.
- We recommend that policy decisions are not based on the latest results.
- Please see the [notes](#) page for more details.

[Link to data tables](#) 

Outside of the pandemic, opportunity remains unchanged over time

Until November 23–24, the only changes in the proportion strongly agreeing they have the opportunity to be active were aligned to the pandemic, when opportunities were officially limited. Changes are likely to be methodological; please see notes.

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



Notes:

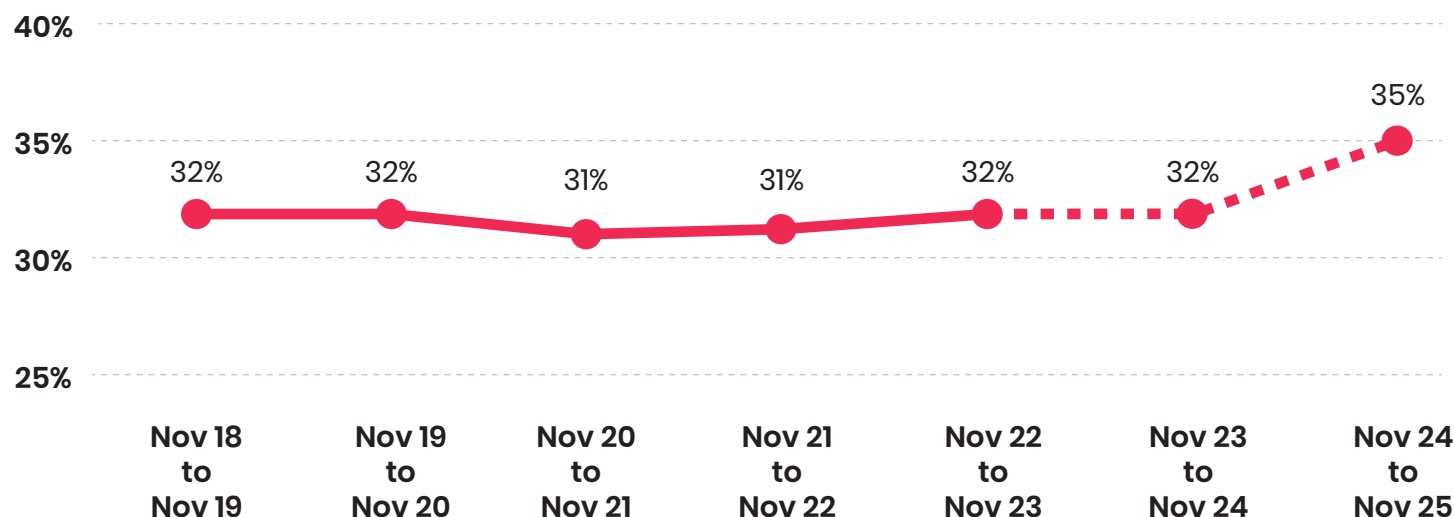
- Changes to the questionnaire – impacting both the ordering of the capability, motivation and enjoyment questions, and how questions on habit were asked – have had an impact on the data reported here.
- As such, we expect to see another change next year, with a new time series continuing at November 2023–24 levels.
- We recommend that policy decisions are not based on the latest results.
- Please see the [notes](#) page for more details.

[Link to data tables](#)

Enjoyment remains unchanged over time

Until the latest year, we had seen no reportable change in the proportion strongly agreeing they find sport/exercise enjoyable and satisfying. Changes are likely to be methodological; please see notes.

I find sport/exercise enjoyable and satisfying (proportion who strongly agree)



Notes:

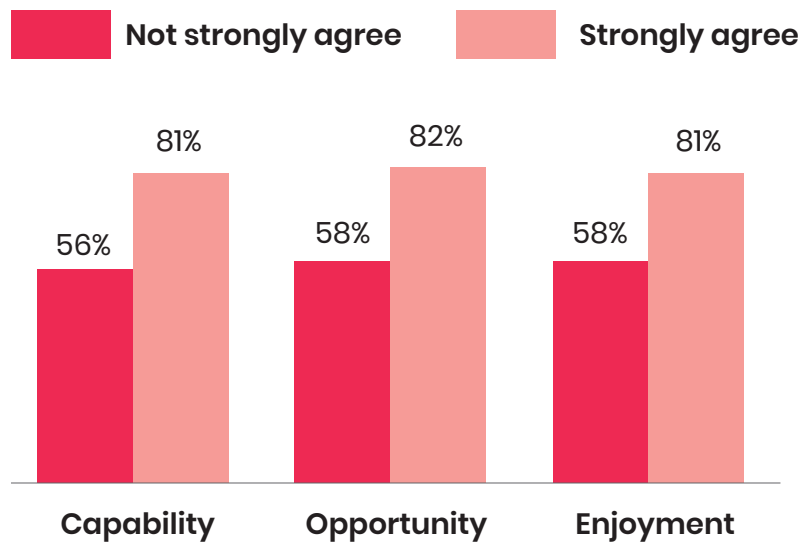
- Changes to the questionnaire – impacting both the ordering of the capability, motivation and enjoyment questions, and how questions on habit were asked – have had an impact on the data reported here.
- As such, the latest data point is likely to be an outlier and we expect to return to trend levels in November 2025-26.
- We recommend that policy decisions are not based on the latest results.
- Please see the [notes](#) page for more details.

There's a positive association between positive attitudes and activity levels

Those who strongly agree with each of the attitude statements are more likely to be active than those who don't strongly agree with these statements.

This reinforces the importance of the COM-B model in understanding factors influencing activity levels.

Active: 150+ minutes a week

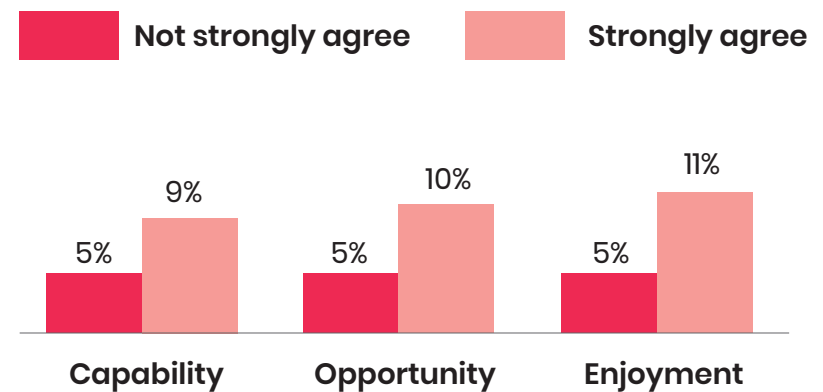


There's a positive association between positive attitudes and volunteering

Those who strongly agree with each of the attitude statements are more likely to regularly volunteer to support sport and physical activity than those who don't strongly agree with these statements.

This illustrates that not only is the COM-B model relevant to activity levels but it also applies to volunteering behaviours.

Volunteered at least once a week throughout the year

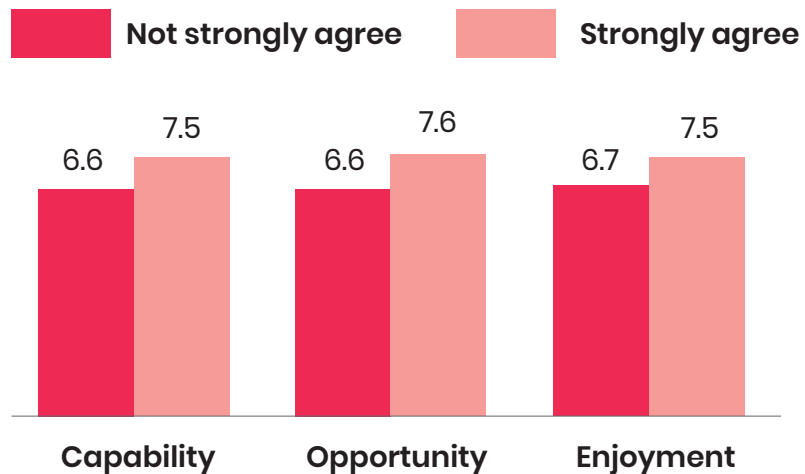


There's a positive association between positive attitudes and wellbeing

Those who strongly agree with each of the attitude statements are more likely to have higher mental wellbeing scores than those who don't strongly agree with these statements.

Positive attitudes have benefits for wider wellbeing.

How satisfied are you with your life nowadays? (mean score out of 10)

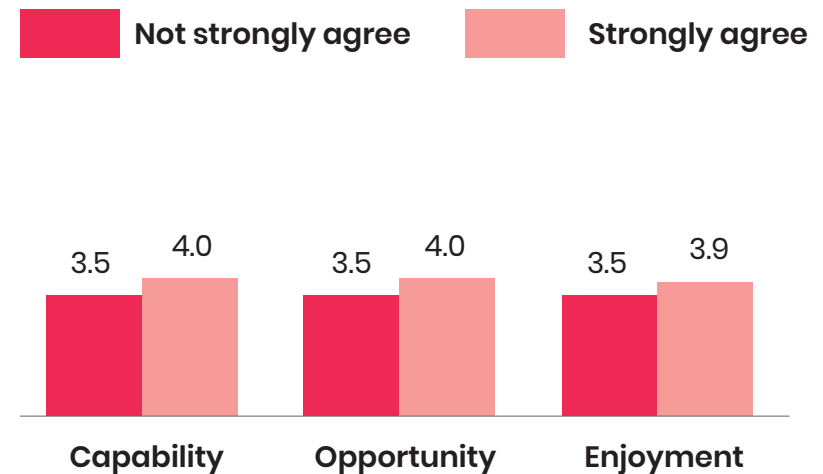


There's a positive association between positive attitudes and individual and community development

Those who strongly agree with each of the attitude statements are more likely to have higher individual development and community development scores than those who don't strongly agree with these statements.

Positive attitudes have benefits for wider outcomes.

I can achieve most of the goals I set myself (mean score out of 5)

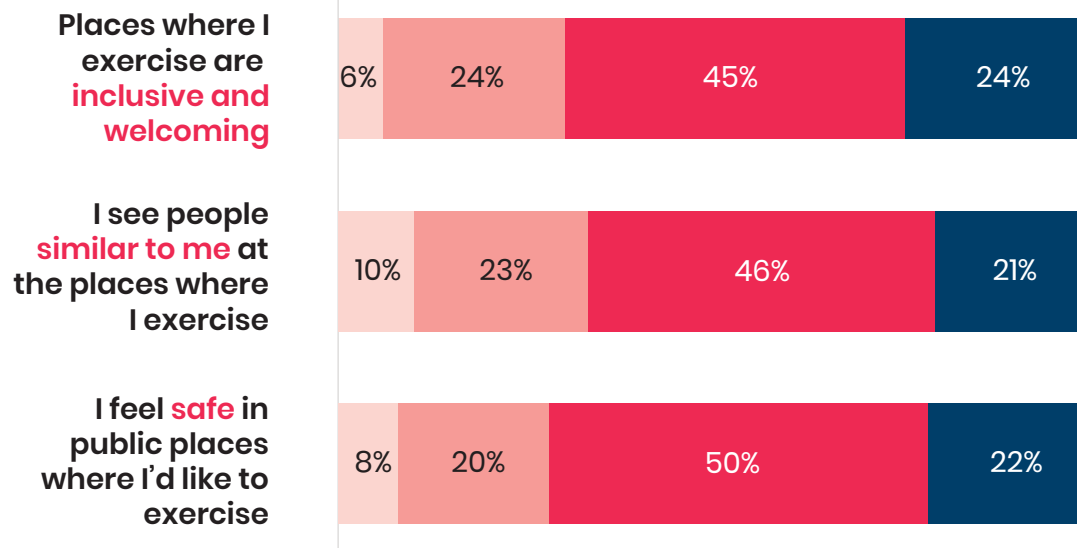
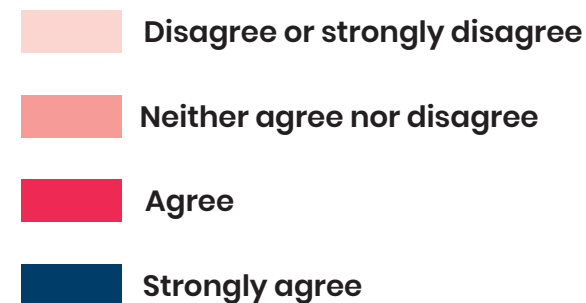


On average, around seven in 10 adults either agree or strongly agree that taking part in sport and physical activity is inclusive

Just under a quarter (24%) of adults strongly agree that places where they exercise are inclusive and welcoming, with a further 45% agreeing.

Similarly, 21% of adults strongly agree that they see people similar to them at the places where they exercise, with a further 46% agreeing.

And 22% of adults strongly agree that they feel safe in the public places where they'd like to exercise, with a further 50% agreeing.



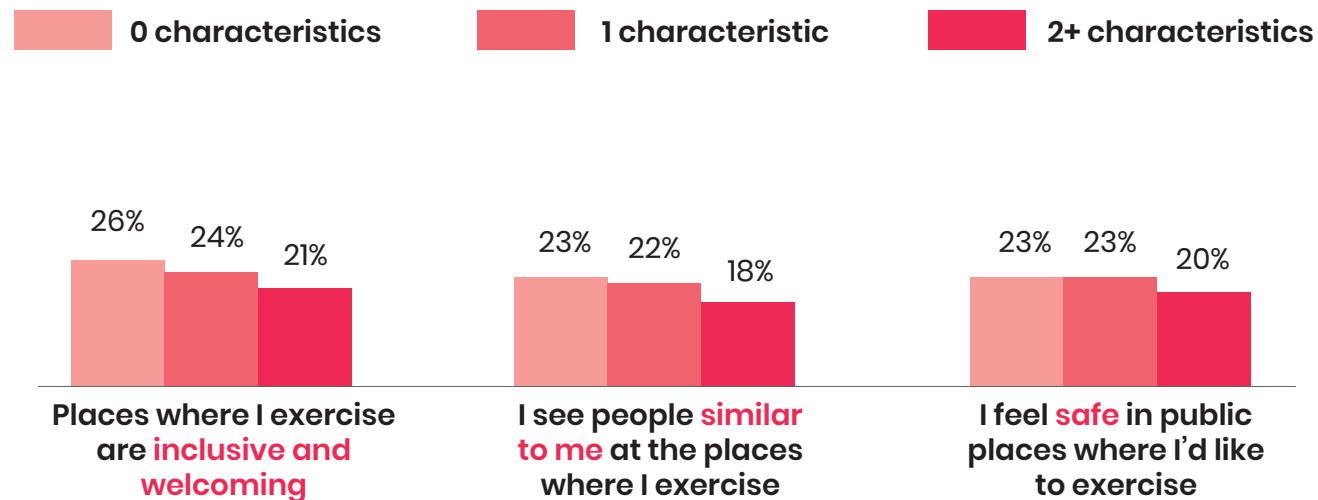
[Link to data tables](#)

Feelings of inclusivity decrease as inequalities increase

The likelihood of strongly agreeing with all three statements is lower for those with two or more characteristics of inequality, compared to those with none or one. We note the following differences by key demographic group:

- There is little difference in strong agreement by age – 16-34-year-olds are most likely to feel places are inclusive and welcoming (26%), while 35-54-year-olds are least likely to see people similar to them (20%) and to feel safe in public places where they'd like to exercise (21%).
- Men are more likely to strongly agree with all three measures than women.
- Adults with a disability or long-term health condition are noticeably less likely to strongly agree with any statement than those without.
- The likelihood of strongly agreeing with all three statements increases with affluence.

Proportion who strongly agree



[Link to data tables](#)

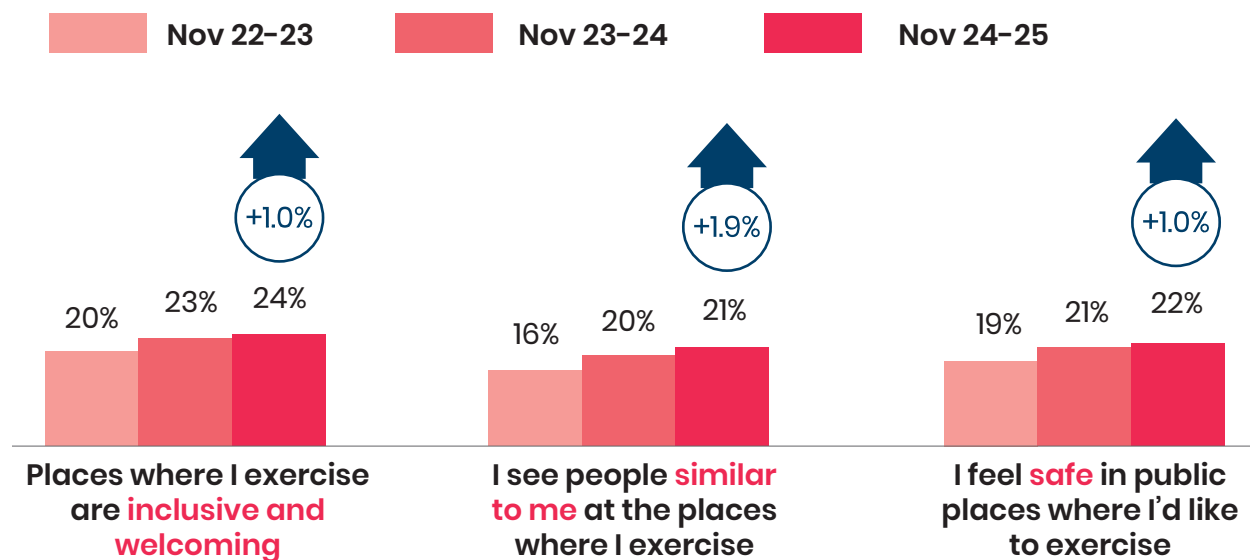
Feelings of inclusivity in sport and physical activity are increasing

All three measures are up compared to both 12 months ago and two years ago (November 22-23).

Increases have been seen consistently across key demographic groups.

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

Proportion who strongly agree



[Link to data tables](#)

Exploring the data

Please use the [Active Lives Online](#) tool to run your own analysis of the data – this will be updated with the latest data shortly after its publication.

Local level data

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

- Levels of activity
- Volunteering.

Additional demographic groups

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

- transgender
- faith
- working status
- stage of education
- pregnant or with a child under the age of one.

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).

Muscle tension is where the effort of the activity was usually enough to make your muscles feel some tension, shake or feel warm.

More information on measures and demographics



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. postman, shop assistant, bus driver).
- Students and other (NS-SEC 9).

Limiting disability and long-term health condition 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 question used in the Active Lives Survey relates to **gender** identification. Adults are given the options of male, female, non-binary and prefer to self-describe. Results for the latter categories are combined into 'in another way' for reporting (due to small sample sizes) and can be found in the [data tables](#).

Inequalities. In 2024 we launched the [Inequalities Metric](#), which recognises the intersectionality of individuals' characteristics and aims to create a comprehensive measure of inequalities.

Volunteering roles are all in relation to supporting sport or physical activity and/or a sports organisation or event. They're defined as:

- Organising fundraising for a sports club, organisation or event (doesn't include general fundraising through taking part in a sports event or activity).
- Provided transport to help people other than family members take part.



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

Carried out by Ipsos, 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.

Find [more information on the survey](#).

[More information on measures and demographics](#) 

- Coached or instructed an individual or team(s) other than solely for family members.
- Refereed, umpired or officiated at a match, competition or event.
- Administrative or committee role e.g. chairman, treasurer, social secretary, first aider, welfare officer.
- Stewarded or marshalled.
- Provided any other help e.g. helping with refreshments, sports kit or equipment.

Place Partnership areas refer to the places where Sport England is partnering with local organisations to create lasting change within the communities that need it – [see here for more details](#).

Sample and weighting

The achieved sample was 176,326 (16+).

Data has 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 the differences seen in our sampled respondents are reflective of the population.

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

[More information on measures and demographics](#)

[Link to data tables](#)

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-year estimates from 2015–2024. Confidence intervals also apply to these.

More details can be found in the [technical note](#).

Data considerations

How we measure change

Active Lives figures are based on the response of 176,326 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'.

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 and sport.

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.

Restatement of data

Data relating to activity levels, types of activity and associations with activity levels across November 2021–22 through to November 2023–24 have been restated as part of this publication. This is due to a small error being noted in the derivation of these metrics in relation to two indoor cycling codes. The changes are minor and all data in this publication (including the associated data tables) is consistent.

Data considerations

Capability, opportunity and enjoyment

Three questionnaire changes were made in November 2023-24 that we believe have impacted this data:

1) The questions relating to perceived capability and opportunity were moved below the motivation questions to accommodate the addition of a question on confidence. This was done to ensure answers on 'confidence' did not influence answers to the motivation questions. An unexpected result has been observed, whereby reported enjoyment levels are higher and perceived capability and opportunity lower as a result of this change.

2) The habits questions (not included in this report) were changed in November 2023-24 to specifically ask about the respondent's main activity (rather than a randomly selected activity). These questions come before all of the capability, opportunity and motivation questions and an unexpected result has been observed, with reported perceived capability, opportunity and enjoyment all being lower as a result of this change.

3) The habits questions have historically only been asked to half the online sample. In November 2023-24 they were asked to the full online sample, while in November 2024-25 they reverted back to half the online sample. In November 2025-26 they will once again cover the whole online sample. Reported perceived capability, opportunity and motivation levels are lower among those asked the habits questions than those not asked them.

We believe that the impacts of these changes cancelled each other out in November 2023-24 for enjoyment and, as such, expect levels to revert back next year i.e. this year's figure is an outlier.

All effects work in the same direction for perceived capability and opportunity, so we believe future rates will sit closer to November 2023-24 levels as all conditions next year replicate those.

As such, users are advised to exercise caution when using November 2024-25 data for these metrics and we would not recommend making policy decisions based on the changes observed, as they are methodologically driven.

[More information on measures and demographics](#) 

[Link to data tables](#) 