Designing Safe Physical Activity for Transgender Communities: Implications for Primary Care

Executive Summary

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Foreword

Physical activity matters. For many people, it is a source of joy, connection, and wellbeing. Yet for trans people in Aotearoa New Zealand, access to that joy has too often been blocked — not by a lack of desire, but by environments that were not designed with us in mind.
I have had the privilege of leading the *Counting Ourselves* survey — the largest study of trans and non-binary health and wellbeing in Aotearoa New Zealand. The data from that work tells a striking story about physical activity and sport. While similar proportions of our trans participants reported exercising or training on their own as in the general population, stark disparities emerged the moment sport became organised or social. Only 13% of our participants had taken part in competitions, events, or other organised activities, compared with 24% of the general population. The gap is not about motivation or capacity. It is about safety and belonging.

When we asked participants whether being trans or non-binary had affected their ability to exercise or participate in recreational sport, the responses were clear and consistent. Fifty-one percent said they would be more likely to participate if gender was not an issue. Forty-five percent had avoided gender-segregated exercise or recreational sport because they didn't know whether trans and non-binary people were welcome, and 43% had stayed away due to concerns about accessing a bathroom or changing room. Thirty-nine percent chose not to disclose being trans or non-binary, or deliberately selected solo activities, simply to avoid having to navigate others' attitudes. Only 23% of our participants felt able to be themselves around others when engaging in sport or active recreation.

These findings remind us that participation is not only about motivation, fitness, or opportunity. It is about safety. It is about belonging. It is about whether people can enter a space and know they will be respected, affirmed, and able to participate without fear. The numbers reflect a community that has learned, through hard experience, that participation comes at a cost that is not asked of others.

What makes this report particularly important is that it moves beyond identifying problems and instead asks communities what safe participation actually looks like. Through collaboration with transgender community members, Health Improvement Practitioners, Health Coaches, and local partners in Whanganui, this project centres lived experience and places trans people's voices at the heart of designing solutions.

The findings reinforce what many trans people have long known: safety is multi-dimensional. It includes physical environments, social relationships, identity affirmation, practical access, and trust. Physical activity is not simply exercise; it can also be a pathway to connection, confidence, healing, joy, and community.

This report offers an important contribution by shifting the focus from asking trans people to adapt to existing systems, toward designing environments that support participation from the outset. It provides practical guidance for creating safer and more inclusive opportunities not only in Whanganui, but across Aotearoa New Zealand.

I commend the research team, the Transgender Working Group members, and everyone who contributed their time, trust, and expertise to this kaupapa. I hope this work contributes to a future where trans people can engage in movement, sport, and recreation not despite us being trans, but as valued members of our communities.

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We would like to acknowledge the Health Improvement Practitioners and Health Coaches from two Whanganui primary care services, whose time, insights, and openness to sharing their experiences of working alongside transgender patients have contributed meaningfully to this work. Their reflections provided important context for understanding how safe physical activity can be supported within primary care.

We extend our sincere thanks to Pride Whanganui and its subsidiary, Gender Care Whanganui, for their support in connecting with and recruiting members of the transgender Working Group. Their ongoing commitment to the wellbeing of the local transgender community has been central to enabling this project.

We also acknowledge Sport Whanganui for their early engagement and contribution to the development of this work. Their input regarding local physical activity options, the potential role of Green Prescriptions, and opportunities for service-level support helped to shape the practical considerations explored within the project.

Most importantly, we acknowledge the members of the transgender Working Group. This work would not exist without their time, honesty, openness, and commitment. Participants shared personal experiences, insights, and reflections with generosity and courage, often going beyond what could reasonably be expected in a research setting. The findings and outcomes presented in this report are a direct result of their lived experience, collective knowledge, and commitment to supporting their community. We recognise and deeply value the trust placed in this process, and the contribution made to advancing safer, more inclusive physical activity opportunities.

Executive Summary

Transgender people in Aotearoa New Zealand experience significant inequities in both physical and mental health. While physical activity is widely recognised as beneficial for wellbeing, many transgender people are unable to access or participate in existing opportunities due to safety concerns, a lack of affirming environments, and limited appropriate services—particularly in rural and semi-rural settings such as Whanganui.

This project was developed in response to both national and local research identifying unmet needs in mental health support, social connection, and access to safe, inclusive spaces. It aimed to explore how safe physical activity opportunities could be designed to better support the health and wellbeing of transgender communities.

A two-phase, community-informed approach was used. Phase 1 involved interviews with Health Improvement Practitioners (HIPs) and Health Coaches (HCs) working in primary care. These interviews explored current practice, strengths, and system-level challenges in supporting transgender patients. Phase 2 involved a co-design process with a Transgender Working Group (TWG), bringing together community members to define safety, identify barriers and enablers, and develop practical solutions.

The project was also informed by early engagement with key regional stakeholders to support implementation and ensure the findings could be translated into practical, sustainable physical activity opportunities.

Across both phases, a consistent and important finding emerged: **safety is the foundation of participation**. Safety was understood as multi-dimensional, encompassing physical, social, emotional, and practical factors. Without these conditions in place, participation in physical activity is unlikely to occur.

The Transgender Working Group provided detailed, lived-experience insights into what safe participation requires. Key findings included:

- Participation is **conditional**, shaped by environment, people, and context—not motivation
- Safety is **relational**, built over time through trust, consistency, and connection
- Entry into new environments is a critical barrier and requires **supported, gradual engagement**
- Physical activity is valued not only for physical health, but as a space for **social connection, identity affirmation, and rebuilding trust in the body**
- There is a need to carefully balance **visibility and safety**, using layered and controlled communication approaches
- Sustainable initiatives require **shared ownership and integration into existing systems**

Primary care insights strongly aligned with these findings. Health Improvement Practitioners and Health Coaches described providing relational, holistic care and recognised safety as a key barrier to engagement. However, they also identified significant system constraints, including a lack of clear referral pathways, limited knowledge of safe local options, and insufficient resources to support access. Providers frequently relied on informal workarounds,

highlighting a gap between understanding community needs and being able to respond to them within current systems.

Together, these perspectives demonstrate that improving access to physical activity is not simply about increasing availability, but about creating the **conditions required for safe participation**.

In response, this project developed a **stepped, practice-oriented framework** for designing safe physical activity opportunities for transgender communities. This approach includes:

1. Establishing safety as the foundation
2. Designing for those with the highest barriers
3. Building relationally safe environments
4. Supporting entry into participation
5. Reframing activity around connection and flexibility
6. Creating clear and trusted referral pathways
7. Managing visibility carefully
8. Integrating initiatives for long-term sustainability

This framework provides a practical and transferable model for services, particularly in rural contexts where access is limited and visibility carries additional risk. Importantly, the framework is designed around the needs of those facing the greatest barriers to participation, recognising that improving access for those with the highest support needs creates safer and more inclusive environments for everyone.

Overall, this project demonstrates that safe, affirming physical activity spaces can play a critical role in supporting transgender health and wellbeing. When designed in partnership with communities and supported by primary care, these initiatives offer a meaningful pathway to reduce isolation, strengthen connection, improve physical and mental health outcomes, and reduce inequities in participation. The framework developed through this project provides a practical model that can guide implementation within Whanganui and inform similar rural communities across Aotearoa New Zealand.