

May 2019

GM Moving

Summary of qualitative and quantitative research with residents of Greater Manchester conducted for GM Moving

External report (Part 1 of 2)

britainthinks.com

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01 Introduction

- Objectives and methodology
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Objectives and methodology

Background and objectives

GM Moving's goal is for 75% of the population of Greater Manchester to be active by 2025.

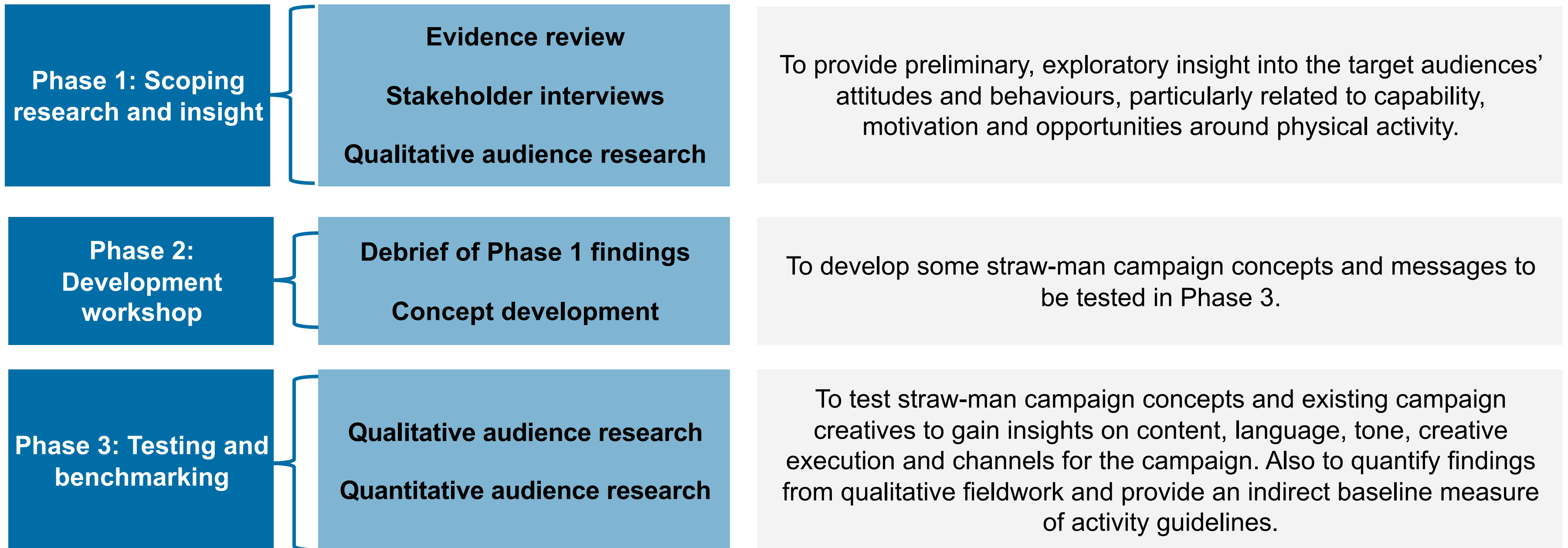


In order to achieve this, it is developing a behaviour change campaign that will encourage the inactive population of Greater Manchester (GM) to increase their activity levels.

While aiming to target the inactive population overall, the campaign is also aimed at three specific groups who are less likely to be active: workless individuals, people with a LTHC, and young people aged 5-18.

Under Brief 1, BritainThinks is delivering a programme of research to inform the development of the campaign.

This report draws on three phases of research



Phase 1: Scoping research and insight



Evidence Review

- 47 sources reviewed
- Reports and campaign examples
- Identifying insights about inactive populations and learnings from previous campaigns



Stakeholder interviews

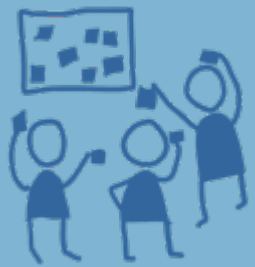
- 10 qualitative interviews
- 45 mins, conducted via telephone
- 7th – 25th January 2019
- Understanding existing insights about inactive populations and advice for campaign



Audience research

- 37 qualitative interviews
- 1hr long, conducted face-to-face
- 15th – 19th January 2019
- Exploring experiences of activity, awareness of guidelines, motivations and barriers to activity and advice for campaign

Phase 2: Concept Development Workshop



Co-creative workshop

- Presentation of Phase 1 findings
- Discussion of implications for campaign
- Concept development workshop, focused on identifying a wide range of possible territories for the campaign
- Clarification of outstanding questions for Phase 3
- 31st January 2019



Concept development

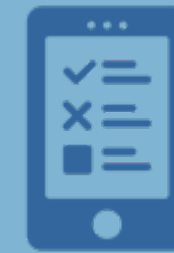
- Theming of campaign concepts
- Development into materials for testing in Phase 3

Phase 3: Further audience research



Qualitative audience research

- 8 x mini-focus groups
- Each with 3-6 participants
- 1hr 30mins and conducted face-to-face
- 14th – 20th February 2019
- Gaining feedback on campaign concepts, clarifying preferred language and targets, identifying desired channels and sources



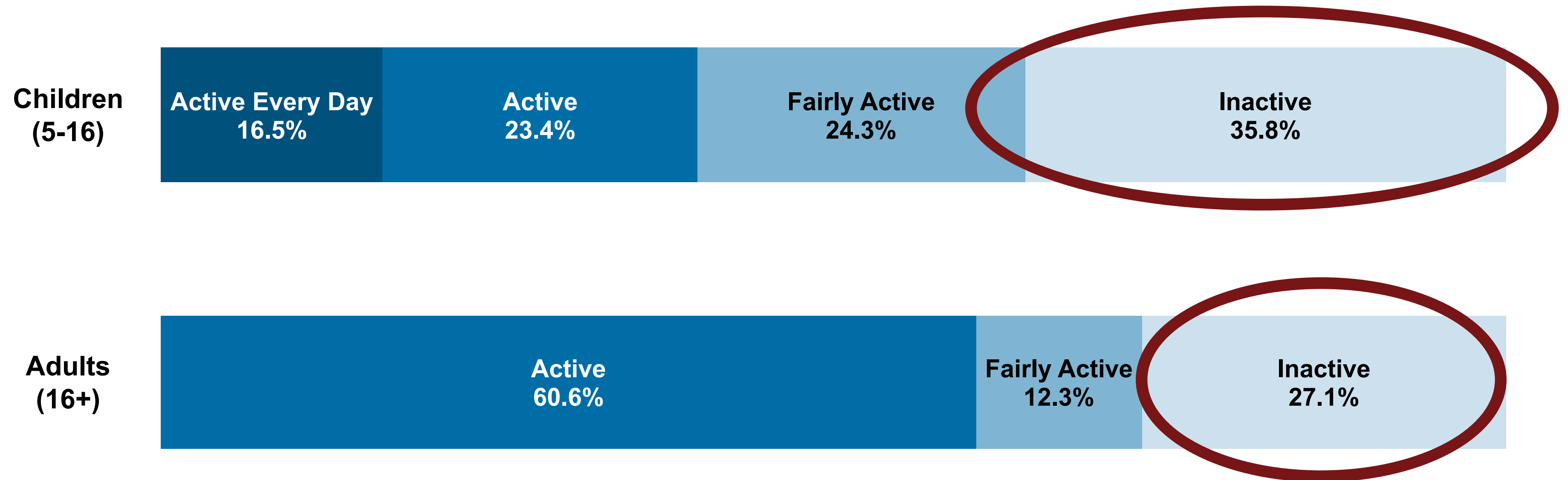
Quantitative audience research

- Representative online survey of 500 Greater Manchester residents
- Additional 'open link' survey distributed via GM Moving's channels*
- 5 minutes long
- Quantifying key findings from qualitative research & establishing a range of 'indirect' baseline measures to evaluate the campaign

* The findings from this 'open link' survey have not been included in the core analysis as they are not representative of the GM population. Instead, the data is shown in the appendix.

About the audiences

Our priority audience for this research was the inactive population of Greater Manchester



Activity levels in Greater Manchester | Sport England, Active Lives Survey (2017/2018)

The overall inactive population in Greater Manchester is diverse

Overall, 29% of the Greater Manchester population is inactive

A number of subgroups are more inactive than average:

- Women
- Black and South Asian ethnicities
- Lower SEGs
- Disabled people
- Older people

BUT

Inactivity levels are also too high among:

- Men
- White and other ethnicities
- Higher SEGs
- People without disabilities
- Younger people

“I don’t think you think about anyone specifically [when you think of the inactive population], it’s such a wide range of individuals. At every age group you’ve got a whole range of people who are inactive for a range of reasons”

Stakeholder interview

Three specific target audiences have been identified for the GM Moving campaign



LTHC

Adult residents of Greater Manchester aged 40-60 who are disabled or have a long-term health condition



Workless

Adult residents of Greater Manchester either short-term or long-term unemployed



Young people

Young residents of Greater Manchester aged 16-18 and parents of young residents aged 5-15

Note that there is overlap between these target audiences. For example, 81% of workless residents have a long-term illness, health condition, disability or impairment.

We primarily focused on these audiences (plus a control group) in our research



LTHC

Adult residents of Greater Manchester aged 40-60 who are disabled or have a long-term health condition



Workless

Adult residents of Greater Manchester either short-term or long-term unemployed



Young people

Young residents of Greater Manchester aged 16-18 and parents of young residents aged 5-15



Control

Adult residents of Greater Manchester in work and without long-term health condition

While the qualitative research was conducted only with the above four subgroups, the quantitative survey we conducted was demographically representative of the entire Greater Manchester population. This allowed us to compare inactive residents with the wider population, as well as enabling us to analyse findings by the above target audience subgroups.

We included a total of 73 GM residents in the qualitative fieldwork and surveyed 500+ GM residents quantitatively



LTHC

20 qualitative participants

47 survey respondents*



Workless

18 qualitative participants

44 survey respondents*



Young people

22 qualitative participants

97 survey respondents*



Control

13 qualitative participants

215 survey respondents*

**Whereas all qualitative participants were inactive (or recently fairly active), the number of survey respondents belonging to each of the above target audiences who are also inactive is too small to be statistically reliable. As such, when reporting on quantitative findings, we have referred the total number of respondents in each subgroup (i.e. including those who are more active) – and otherwise reported on inactive residents as a whole.*

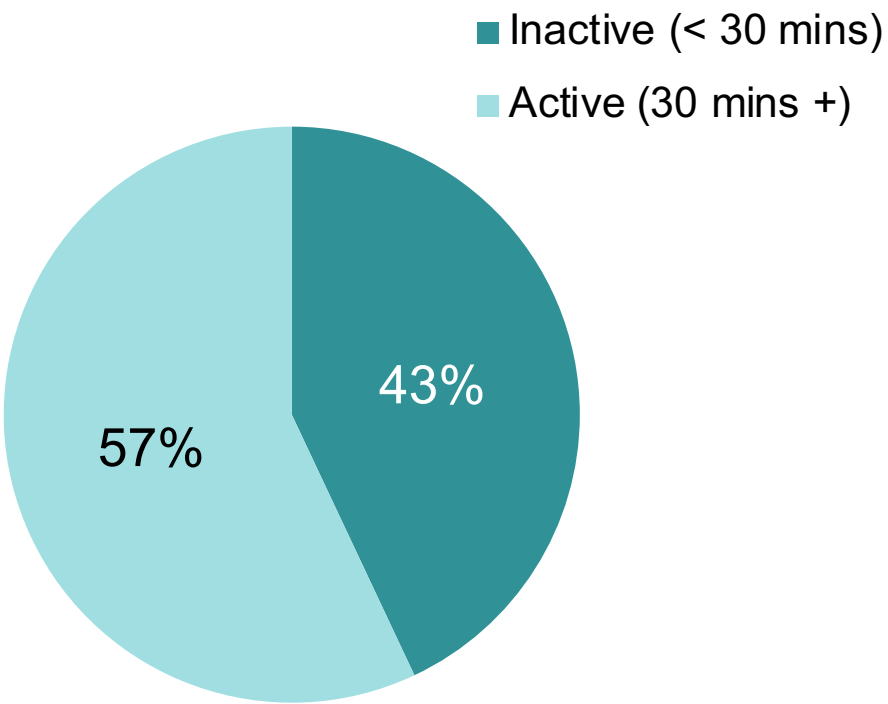


LTHC

Overview

Adult residents of Greater Manchester aged 40-60 who are disabled or have a long-term health condition

Activity levels among LTHC residents



Case study: Amanda | Female | 57 | Bury

Lives alone but has very close relationship with 21-year-old daughter. Has osteoarthritis and is in constant pain, as well as feeling exhausted. Spends most of her days in bed, although tries to take her dog for a 5-10 minute walk a few times a week.

Was diagnosed 6-7 years ago and her HCP told her to stop going to the gym and rest. Thinks taking that advice was the worst thing she ever did. Completely seized up after being inactive and pain increased. Is now bored, frustrated and lonely – she used to be a lot more sociable.

Is worried about the pain getting worse if she does certain activities, as well as not being able to afford gym membership. Wants facilities that are accessible and supportive of disabled people. Thinks campaign messages should have an explicit ‘blue badge’ to make it relevant to her and show her what ‘small steps’ she can do based on her ability.

Q.11 Thinking about a typical week, please estimate - to the best of your ability - how long you spend doing physical activity in total per week. Base: LTHC [n=47]

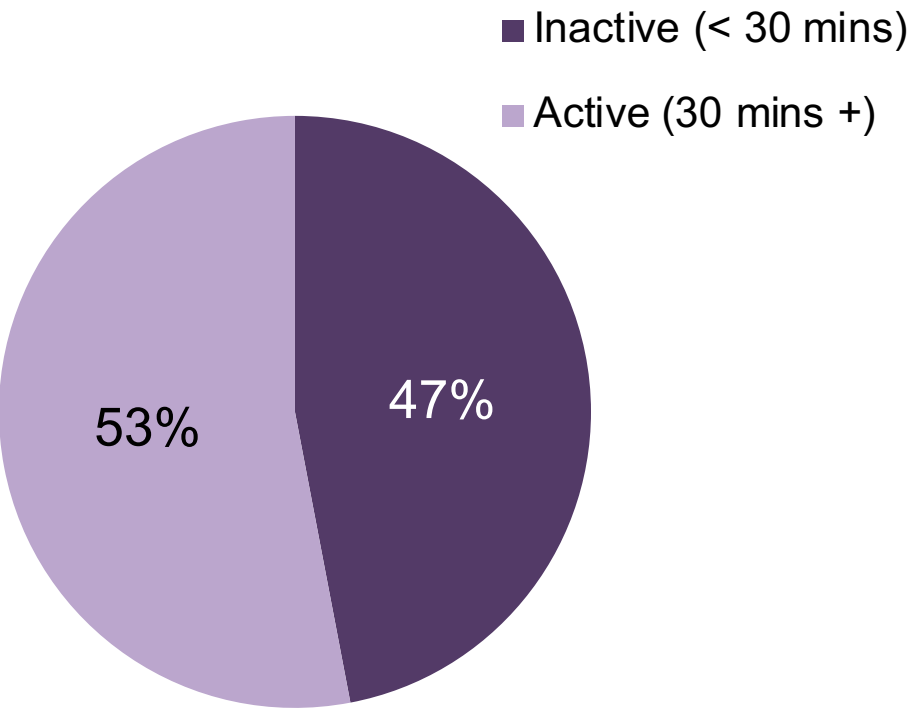


Workless

Overview

Adult residents of Greater Manchester who are unemployed

Activity levels among Workless residents



Case study: Leanne | Female | 37 | Salford

Leanne has been unemployed for approaching 6 months. She was working at a call centre, but was made redundant at the end of the summer. When she was working, Leanne was fairly active, going to the gym 2-3 times a week after work with her colleagues and going for a walk most weekends. She enjoyed being active, particularly for the mental health benefits.

She fell out of the habit of going to the gym when she lost her job – it was part of her work routine which she doesn’t have now, and she has lost touch with the colleagues she went with. Her boyfriend suggested cancelling the gym membership as she wasn’t using it, and because he pays for everything else she felt she couldn’t argue.

She thinks she should be able to do more activity – there is a park opposite her house she could run in – but she feels ‘stuck in a rut’ and doesn’t feel confident trying new things. She also worries about the cost of buying running gear, particularly warm clothes for the winter.

Q.11 Thinking about a typical week, please estimate - to the best of your ability - how long you spend doing physical activity in total per week. Base: Workless [n=44]

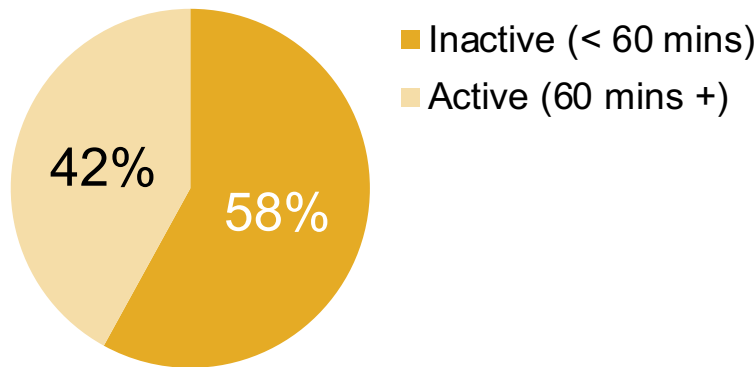


Young people

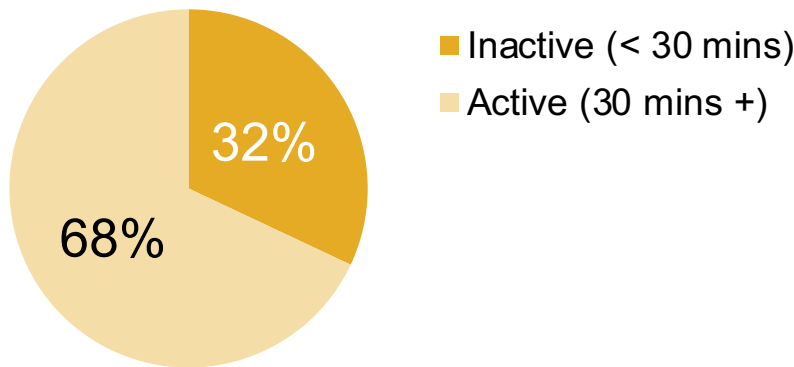
Overview

Young residents of Greater Manchester aged 16-18 and parents of young residents aged 5-15

Activity levels among 5-15 year old residents (reported by parents)



Activity levels among 16-18 year old residents



Case study: Mark | Male | Parent of child age 14 | Manchester

Mark has one son age 14 who lives with his ex-wife during the week and with him at the weekend. He walks to school once or twice a week (30 mins each way) and plays football for 1 hour at the weekend, but otherwise does very little activity. Mark wishes his son did more activity – he sees lots of health benefits to being active.

Mark thinks a long school-day is a factor in his son’s activity. His son’s Jewish school has a usual school day of 8 – 5pm, and Sunday school. When he gets home from school, he says he is tired and wants to relax.

‘Relaxing’ tends to mean playing on his Playstation. Mark doesn’t endorse this, but his ex-wife bought it and they want to show a ‘united front’ to their son so he doesn’t complain. He thinks that video games are bad for his son’s mental health and wishes he spent this time playing sport.

Q.11 Thinking about a typical week, please estimate - to the best of your ability - how long you spend doing physical activity in total per week. Base: 16-18 year olds [n=25], Parents [n=72]

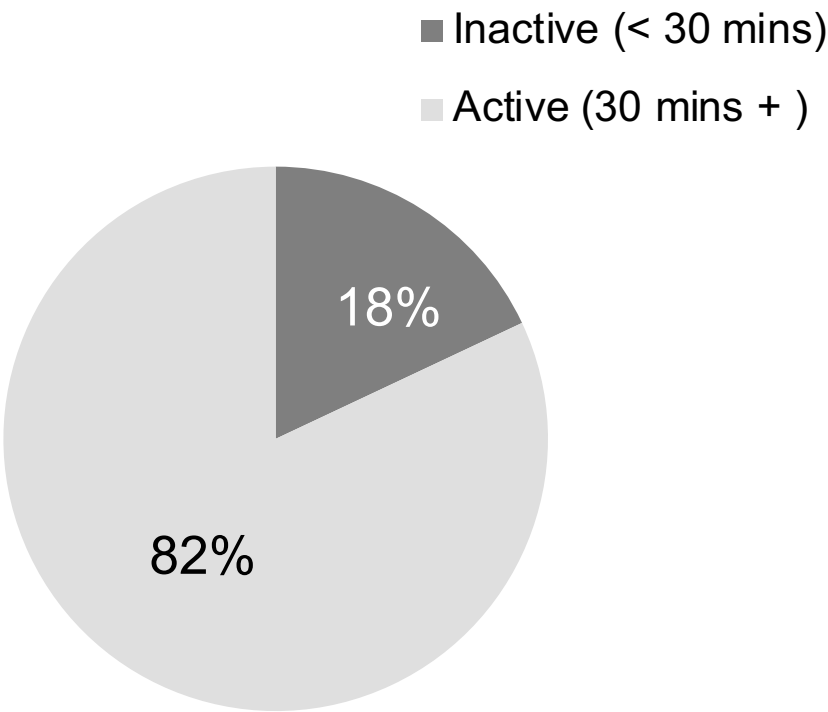


Control

Overview

Adult residents of Greater Manchester in work and without long-term health conditions

Activity levels among control group



Case study: Arathi | Female | 43 | Tameside

Arathi lives with her two children, aged 9 and 7. Her partner lives in Liverpool so doesn't share childcare responsibilities. She works full-time as a social worker and has additional part-time volunteering responsibilities as a foster-care assessor.

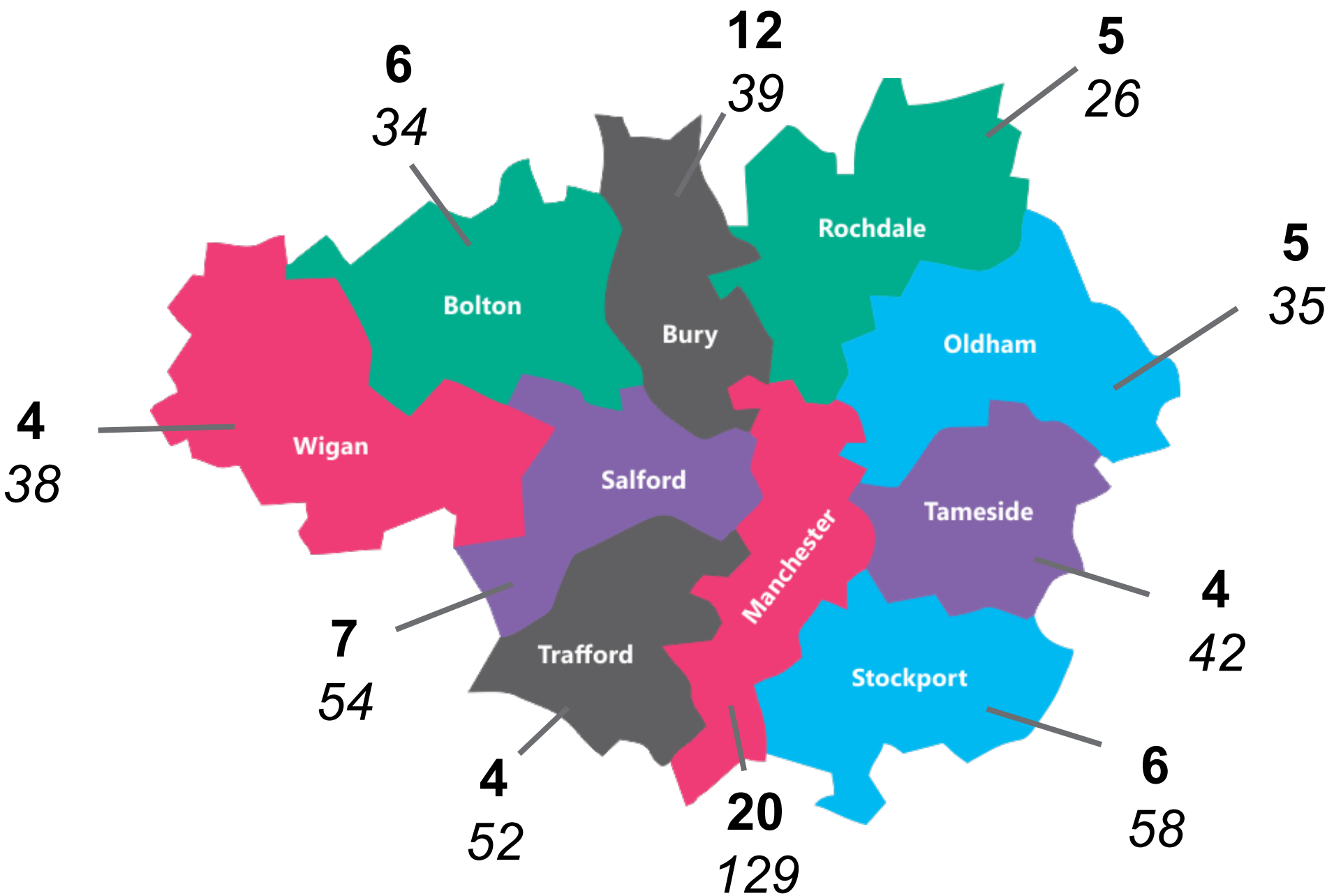
She is very busy all week, rushing around between jobs and her children's activities – driving everywhere. Her routine is very structured, to the extent her children could reel it off. She does no physical activity because she has little time to herself and, if she's not exhausted, wants to use that 'for herself'.

Before she had kids, she used to go to the gym all day on Saturdays and feel great for it. She feels guilty about no longer doing physical activity and thinks her personal health would benefit, as well as enjoying it like she used to.

Q.11 Thinking about a typical week, please estimate - to the best of your ability - how long you spend doing physical activity in total per week. Base: Control [n=215]

Beyond our focus on the target audiences, we recruited a broad, diverse sample from across Greater Manchester for this research

		Qualitative fieldwork participants	Quantitative survey respondents
Gender	Man	37	247
	Woman	36	259
Age	5-10*	8	-
	11-15*	10	-
	16-24	6	80
	25-34	9	95
	35-44	11	80
	45-54	7	85
	55+	14	165
Ethnicity	White	47	457
	BAME	26	45
SEG	ABC1	30	253
	C2DE	43	254
Total		73	507



Bold denotes number of participants from borough taking part in qualitative fieldwork (e.g. depth interview) / *Italic* denotes number of respondents from borough in quantitative survey
*Rather than interview residents aged 5-15 directly, we interviewed their parents directly or in focus groups. Parents were also included in the quantitative survey. Here their own age is captured.

There are some important differences between (and within) the audiences which must be taken into consideration

Between audiences

- Certain motivations and barriers tend to be more prominent among certain audiences
- Preferences for campaigns also subtly different

"You can't make a generalisation why people might be inactive or not across Greater Manchester."

Stakeholder

Within audiences

- Not all individuals within an audience have the same combination of motivations and barriers
- Age range for young people is broad
- LTHCs vary significantly and impact individuals in very different ways

"Disabled people are less likely to be active overall. But disabled people are across all ten boroughs, they're women and girls, they're BAME, they're not just one group."

Stakeholder

Within individuals

- The same individual can perceive different attitudes and barriers, depending on the weather, time of year and work/school commitments

"We think of people as either inactive or active. But their activities shift throughout the year...we have to get away from thinking about things as static."

Stakeholder

Despite the important differences between (and within) audience groups, there are nevertheless some common themes



These common themes are presented throughout the main body of this report. We have provided an additional section in the appendix which summarises the key differences between the target audiences.

Key findings

Key findings (general)

- 1** There is very low awareness of existing campaigns to increase physical activity and of recommended activity guidelines
- 2** Despite this, most inactive residents assume that they are not doing enough activity and say they want to do more – though this is not always a ‘front of mind’ desire
- 3** There is clear recognition of the benefits of activity, though short-term benefits can be more motivating than the reduction of longer-term health risks
- 4** There are numerous barriers to activity which vary significantly between inactive residents, who often feel that their circumstances are unique
- 5** Many of these barriers are exacerbated because ‘activity’ is often associated with relatively strenuous exercise which can seem both daunting and unenjoyable to the least active residents
- 6** Despite attitudes to activity being reasonably consistent between inactive residents, there are some important differences between the three target audiences (LTHC, workless, young people)

Key findings (target audiences)

LTHC

- Range of feasible 'activity' particularly narrow for some due to limited capability and/or poor medical advice
- CMO guidelines feel insufficiently flexible and thus unrealistic for some conditions
- Improved fitness, improved mental health and opportunities to socialise particularly motivating benefits
- Medical condition & limited ability most prominent barrier, but accessibility of local facilities also important

Workless

- Memories of being more active often very positive and connected to time before becoming unemployed
- Benefits relating to mental health and self-esteem resonate particularly strongly with this group
- Perceived expense of activity, mental health issues like anxiety or low self-esteem and a lack of routine that makes forming new habits difficult are all particularly prominent barriers

Young people

- Especially low awareness of CMO guidelines for children, which seem unrealistically demanding for older (16+) and younger children (5-8)
- Short-term benefits – improved sleep, improved mood, quality time with family, physical appearance – are especially motivating, while long-term health risks feel particularly remote and less relevant
- Largest barriers for this audience are: physical activity having to compete directly with 'more fun' activities; peer influences; lack of time (both of young people & parents); and reliance on parents to access facilities

Summary of our campaign guidelines

Guidelines for campaign design

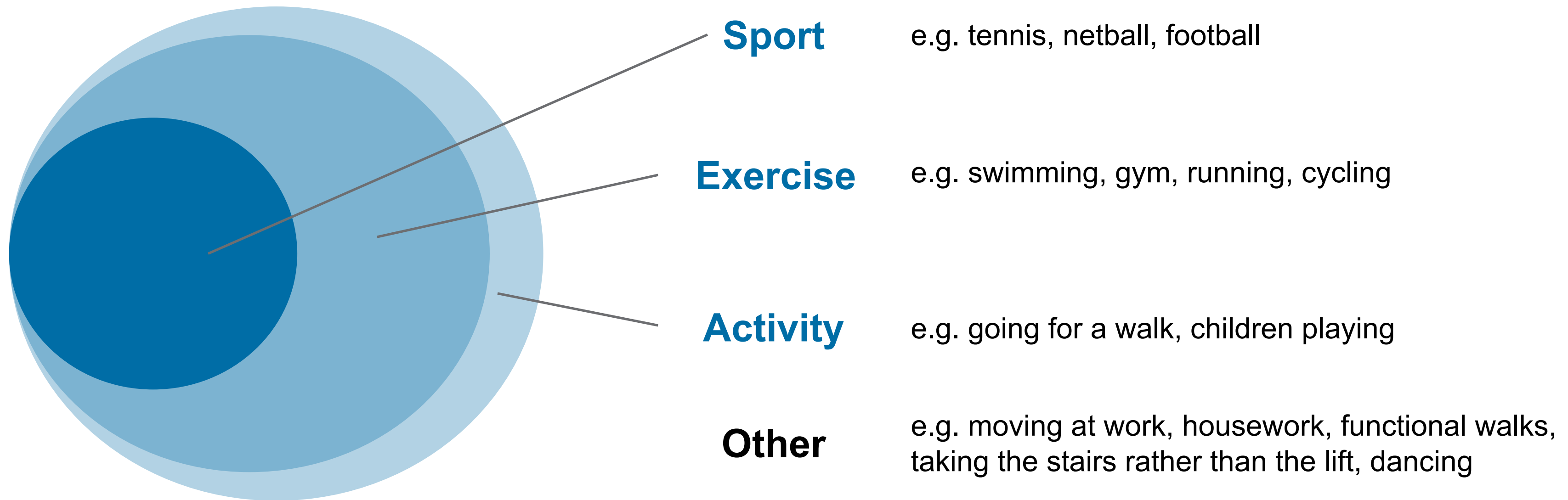
- 1** **Decide between ‘physical activity’ and ‘moving’ to describe the desired behaviour**
- 2** **Include a simple numeric, bitesize activity target for residents to aim for**
- 3** **Remind residents of the short-term benefits of activity to motivate them**
- 4** **Don’t dwell on the barriers to inactivity (but don’t dismiss them either)**
- 5** **Show residents diverse, attainable ways of being active beyond ‘exercise’ or ‘sport’**
- 6** **Make the tone and creative execution of the campaign upbeat, positive and fun**

Guidelines for campaign design

- 7** Ensure the campaign feels relatable to residents and their very different circumstances
- 8** Use a broad range of channels – and not just those associated with sport or exercise
- 9** Tailor messages and channels in order to reach the three target audiences
- 10** Supplement the campaign messaging with local initiatives, activities and resources
- 11** Ensure provision of local infrastructure, services and stakeholder messaging is aligned with the campaign
- 12** Be persistent with campaign initiatives and messaging

02 Attitudes towards activity

Physical activity is often interpreted narrowly and can exclude everyday forms of movement



It is often assumed that 'physical activity' refers to discrete pursuits (e.g. a run, trip to the gym) which require dedicated time set aside – rather than something that can be incorporated into everyday life.

Physical activity can therefore seem daunting and there is low awareness of everyday, more achievable forms of movement



Starting point:
<10 mins per day of walking,
largely sedentary

"I do a fair bit of loading and unloading on the lorries. But that's just work... I wouldn't count that as activity."

Control, male, 35-54



Overlooked forms of activity:
Walking, gardening, carrying
shopping, taking stairs over lift

"Dancing around the house while doing the housework... Does that count?"

Workless, female, 35-54



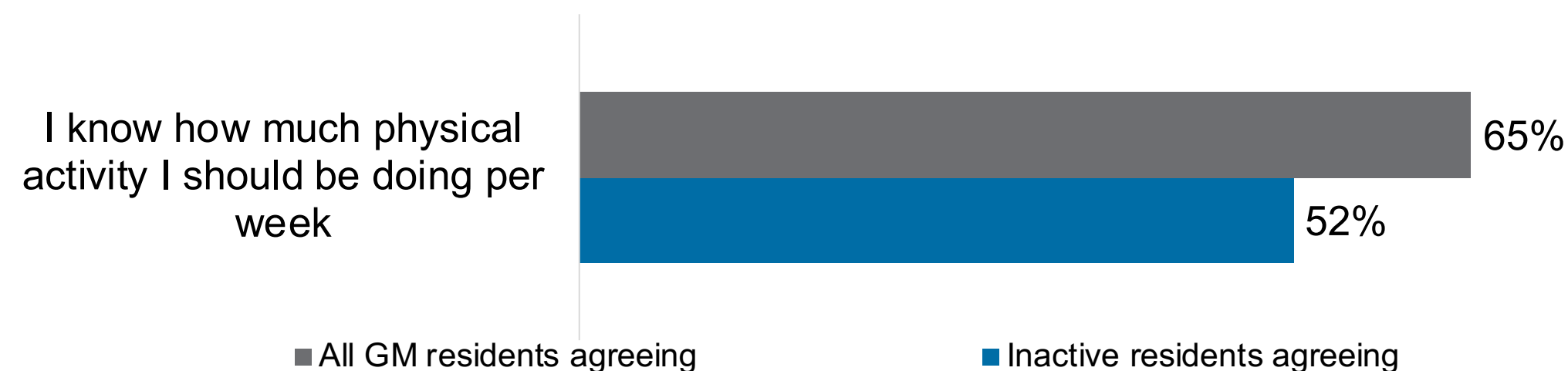
Presumed typical activity:
sports, running, cycling,
gym work

"I don't think I could play netball now, I don't think I'm fit enough. It's hard to get back into it really."

Workless, female, 35-54

Few are aware of specific activity guidelines but most are able to make a reasonable estimate

- Two-thirds (65%) of all GM residents feel like they know how much physical activity they should be doing – but only half (52%) of inactive residents share that confidence
- Few are able to recall specific activity guidelines, though a small minority mention 10,000 steps
- Nevertheless, most adults make reasonably accurate estimates when pressed and very few assume *less* than 150 minutes per week
- The exception is parents who tend to *underestimate* the guideline amount of activity for children (with many assuming the amount of time dedicated to PE at school must be the guideline amount)

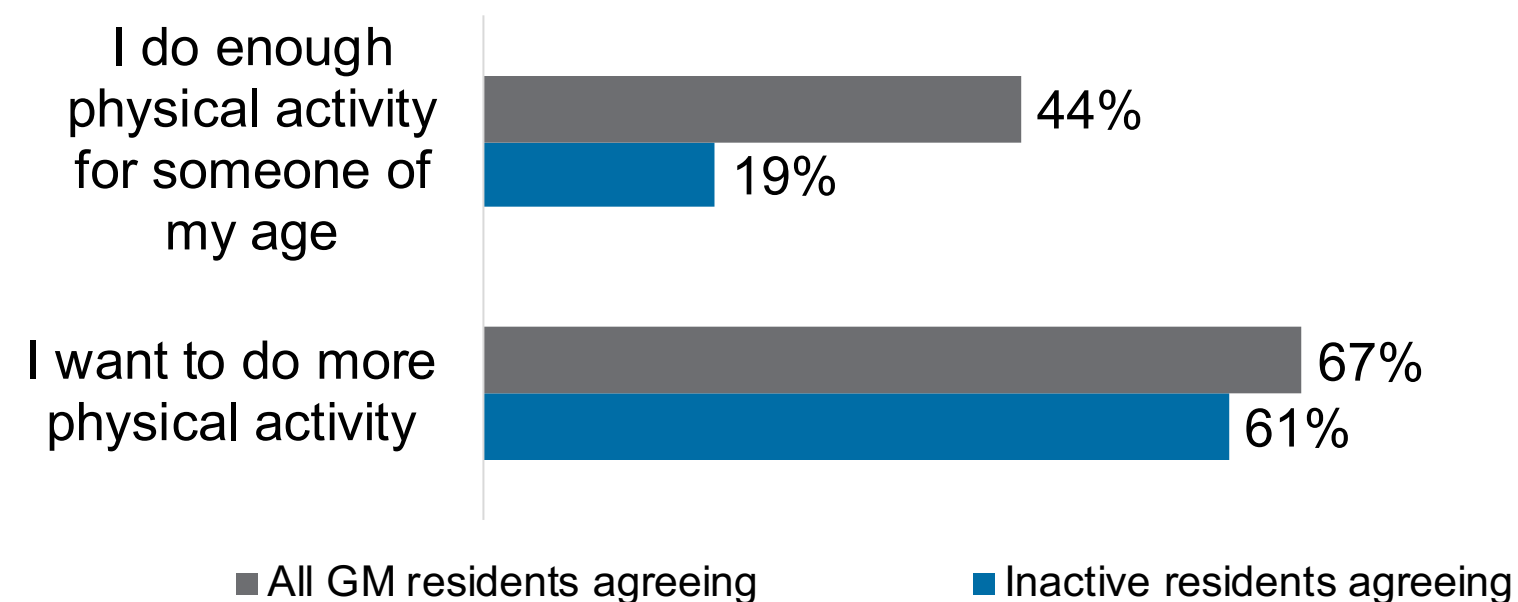


*"I assume it's around 30 minutes a day.
Enough activity so that you get out of
breath and sweat a bit."*
Control, male, 35-54

Q.9 Listed below are some statements. For each, please tell us how far you agree or disagree with each statement. Base: All respondents (n=507), all inactive respondents (n=121)

On reflection, few inactive residents think they do enough activity and most say they want to be more active than they currently are

- Most inactive residents (61%) say they want to be more active on prompting – but this isn't always a 'live' or front-of-mind desire
- Only around 1 in 5 inactive residents think they currently do enough physical activity
 - Many feel a sense of guilt about the amount of activity they are doing compared to what they 'should' be doing
 - And some – particularly those with long-term health conditions – feel frustration at not being able to do more



"I do just think sometimes I've gotten so lazy. I just sit around doing nothing all day. It's awful isn't it?"

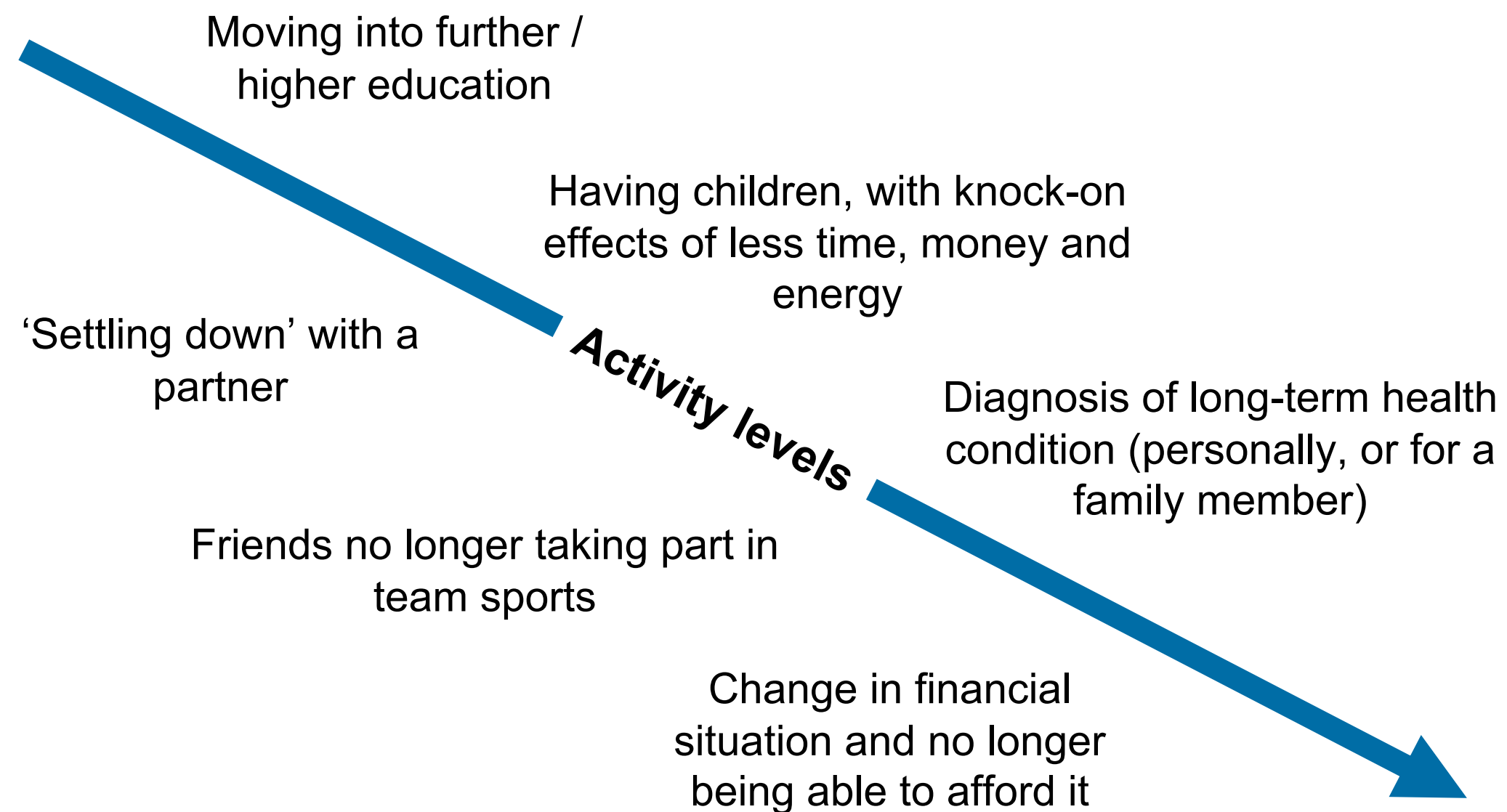
Workless, female, 19-34

"I would like to do more, definitely. I probably did more before I had cancer."

LTHC, female, 55+

Q.9 Listed below are some statements. For each, please tell us how far you agree or disagree with each statement. Base: All respondents (n=507), all inactive respondents (n=121)

Most inactive adults are able to remember a time when they were more active – before ‘life got in the way’



Case study: LTHC, male 35-54

Mark used to play golf and football every week. He would love to continue to do this but can’t afford the financial commitment anymore – when he combines his and his current girlfriend’s salary, they have less disposable income than in his previous relationship. In order to better their financial situation, he has to put in more hours at work, but this means he has little energy for activity at the end of the day.

“I suppose it [golf] is not that expensive, but I’m also a sucker for all the kit and the socials that come with it. We just can’t afford it.”

LTHC, male, 35-54

Public Health England’s report ‘Everyone Active, Everyday’ found that 70% of 16 to 24 cite transitions in life as the reason they gave up sports.

There is widespread recognition of the benefits of physical activity (and more active times are looked back on fondly)

- Long-term health benefits are most often spontaneously cited as the main benefit of physical activity
- But many vividly associate their previously higher levels of activity with other benefits, such as better physical appearance, improved sleep and higher confidence/wellbeing

“You should have seen me when I was working - I'm a different person. I'm very upbeat.”

Workless, male, 35-54

“I met so many people through football. You meet friends, friends of friends – it widens your circle of people.”

Control, male, 35-54

“I suppose that it helps with not putting on weight. It's starting to become a concern for me.”

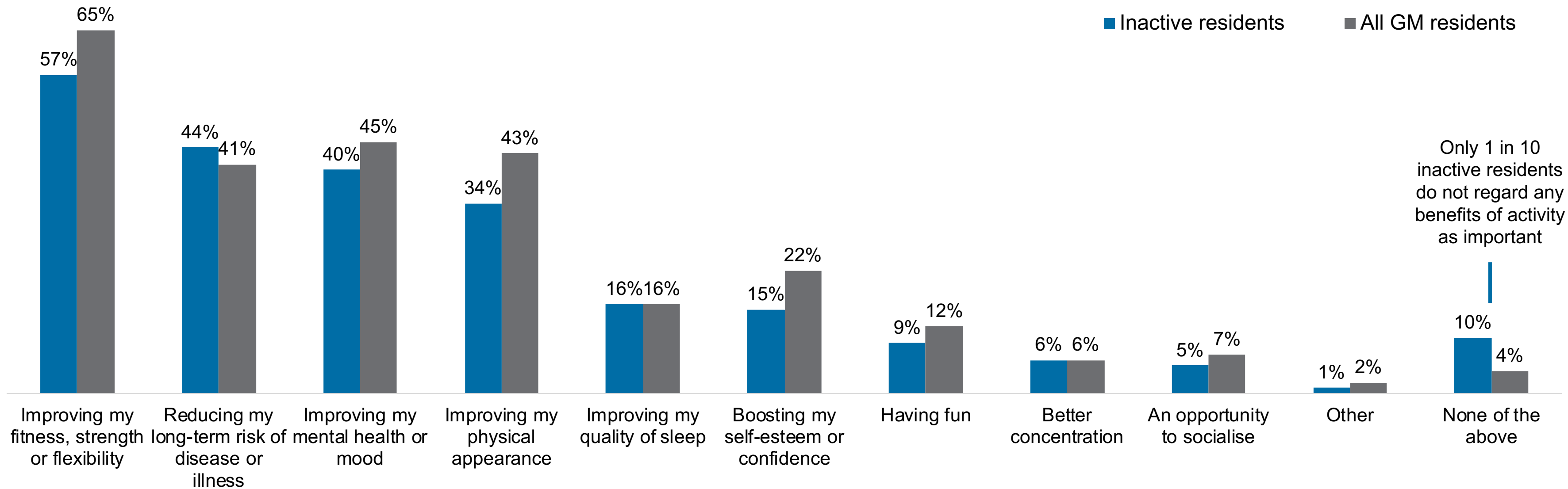
Workless, female, 55+

“I used to chat to loads of people at the gym. It gives you confidence too because you feel more comfortable with yourself”

Young person, female, 16-18

Improved physical ability, physical/mental health and appearance tend to be considered the most important benefits of activity

Showing % of Greater Manchester residents who selected each option as one of the top 3 most important reasons for doing physical activity



Q.13 Which of the following reasons for doing physical activity, if any, do you think are the most important for you? Please select up to 3. Base: All respondents (n=507), inactive respondents (n=121)

Improving my fitness, strength or flexibility	All GM residents*: 65%	Inactive*: 57%	LTHC*: 60%	Workless*: 45%	Parents*: 59%
- Improving fitness, strength and flexibility was the most frequently-cited benefit of physical activity, with almost 6 in 10 inactive residents selecting it as one the most important benefits - Qualitatively, participants often mentioned a desire to be able to do things that they previously enjoyed and/or did regularly that they are currently unable to (e.g. play with children for longer periods, play sports, walk without being out of breath or, for some with long-term health conditions, be able to move freely without pain)					
Reducing my long-term risk of disease or illness	All GM residents*: 41%	Inactive*: 44%	LTHC*: 56%	Workless*: 41%	Parents*: 32%
- Health – usually defined as long-term physical health – was frequently mentioned spontaneously as a benefit of activity and almost half (44%) of inactive residents cited it as one of the most important benefits - It is particularly important to older residents and those with existing long-term health conditions - However, despite being ‘rationally’ deemed important, it is not always the most motivating as it feels less immediate than other benefits – particularly for younger residents and those without existing health conditions					

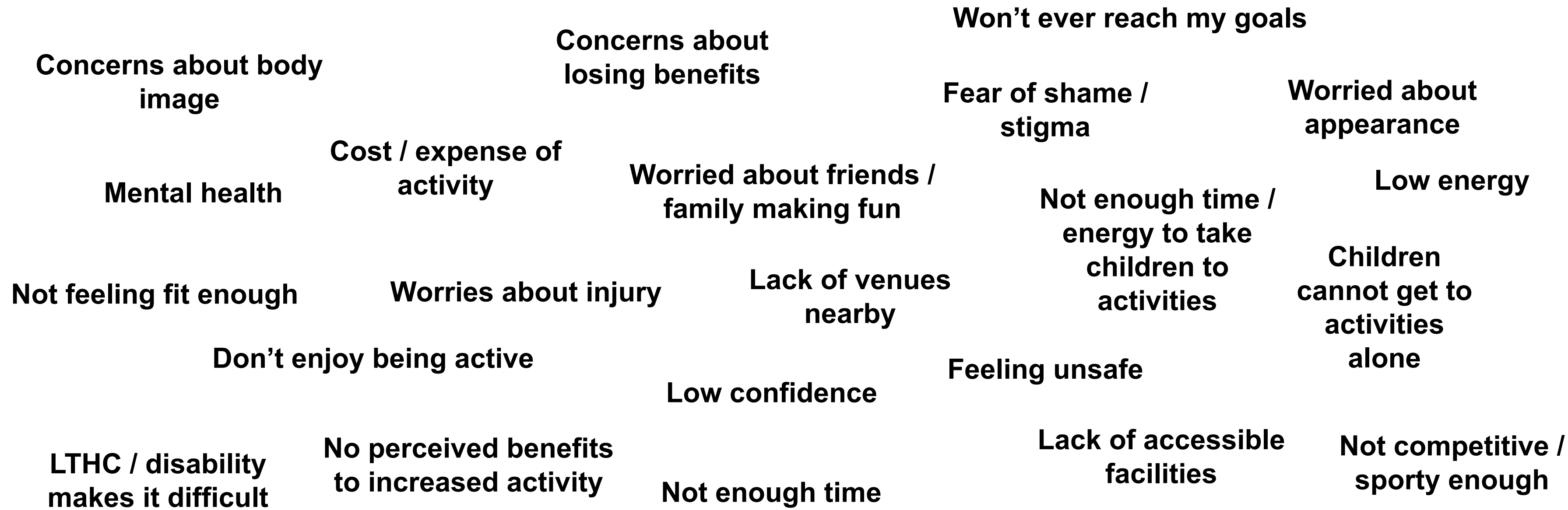
*Proportion of each group selecting this as one of top three most important reasons for doing physical activity (see question detail on slide 36). Note that ‘Parents’ refers to parents of children aged 5-15.

Improving my mental health or mood	All GM residents*: 45%	Inactive*: 40%	LTHC*: 51%	Workless*: 51%	Parents*: 50%
- Improved mental health is a prominent and explicit benefit for many inactive residents: 4 in 10 select it as a top 3 benefit, rising to 5 in 10 for residents with long-term conditions, unemployed residents and parents/young people - For some, this benefit simply means feeling better and happier after doing activity; for others, it is about activity helping to tackle specific mental health issues such as anxiety or depression					
Improving my physical appearance	All GM residents*: 43%	Inactive*: 34%	LTHC*: 36%	Workless*: 41%	Parents*: 43%
- Around 1 in 3 inactive residents select improving physical appearance as one of the most important reasons for doing activity. This is particularly important to unemployed residents and young people, who were most likely to talk about confidence and self-esteem issues - For many, this was primarily about losing weight – but several other qualitative participants discussed gaining muscle or having more of a ‘glow’					

*Proportion of each group selecting this as one of top three most important reasons for doing physical activity (see question detail on slide 36). Note that ‘Parents’ refers to parents of children aged 5-15.

03 Barriers to increasing activity

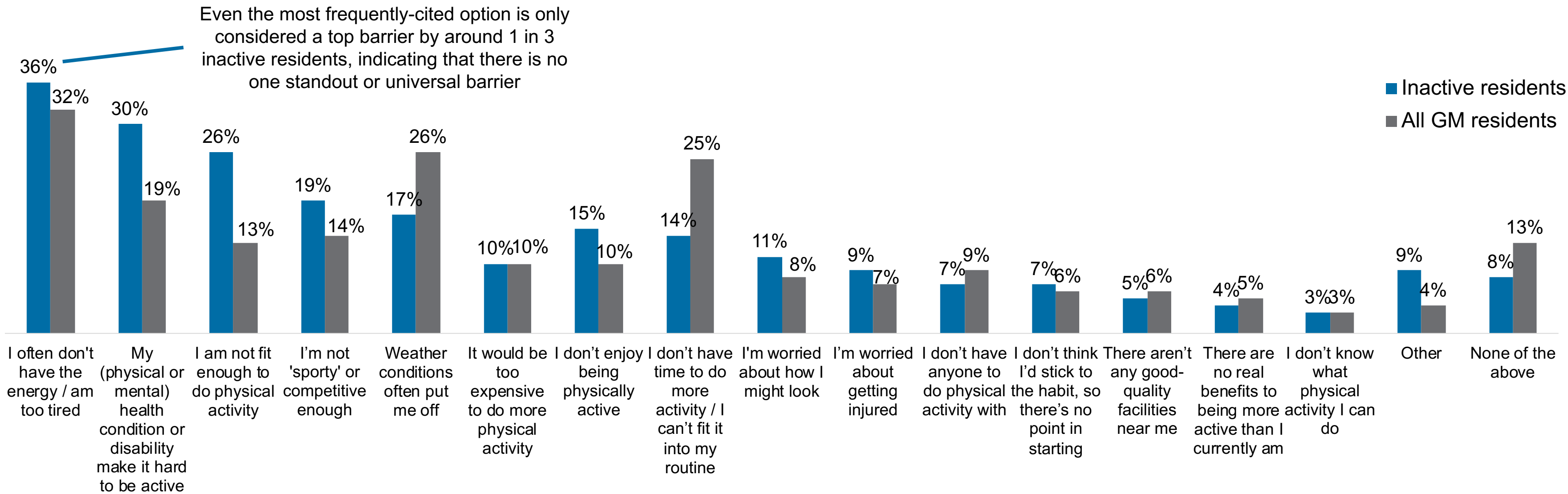
Despite a general desire to do more activity, inactive residents face a wide range of barriers



Perceptions that ‘activity’ means high-intensity, structured sport or exercise often exacerbates these barriers

Perceptions of which barriers are most important vary significantly between residents, although some are more common than others

Showing % of Greater Manchester residents who selected each option as one of the top 3 reasons most likely to prevent them from doing more physical activity



Q.14 Which of the following reasons, if any, are most likely to prevent you from doing more physical activity? Please select up to 3. Base: All respondents (n=507), Inactive respondents (n=120)

Moreover, there are many complex, irregular combinations of barriers – and a widespread feeling that ‘my circumstances are unique’

Case study: Workless, male, 18-34

Jack feels the main barriers that stop him being active are his **mental health**, the **distance to his local gym**, and the **cost** of being active.

He feels these are interlinked: if he is struggling with his mental health, the effort to travel to the gym feels too great for him to go.

The cost of paying for his membership makes him anxious, so has a negative effect on his mental health.

Case study: Control, female, 55+

Lindsey works a four-day week at a law practice with condensed hours. This means she is typically at work from 8am – 8pm Mon-Thurs and **doesn’t have time** in the week to be active. The long days at work mean that she usually **feels tired at the weekend** and wants to spend time relaxing rather than being active.

The form of activity she does like and could imagine doing more of is Pilates. But at £10 per session she **doesn’t think it’s affordable** to do it more often, despite her well-paid job.

I often don't have the energy / am too tired	<i>All GM residents*:</i> 32%	<i>Inactive*:</i> 36%	<i>LTHC*:</i> 39%	<i>Workless*:</i> 56%	<i>Parents*:</i> 37%
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- Many inactive residents report feeling too tired and lacking energy to do physical activity (and this is one of the most important reasons for over a third of inactive residents)
 - For those with long-term health conditions, this is linked to condition, perceived need for rest or being busy with hospital appointments
 - For unemployed, this was often due to low mood and feeling lethargic
 - Children were deemed to lack energy after long school days and homework, while parents themselves also reported being too tired after work
- Despite agreeing that increasing activity could improve energy levels, most think that rest / relaxation is important in the context of busy lives

“After finishing work, making tea, picking her up, doing the cleaning, factoring in time to rest and learn... My day has just started when it's her bed time at 7.30.”
Parent of child age 5-10, female

"After a long day at work I'd rather go and watch the telly, drink a glass of wine than go out to the gym."
Control, female, 55+

*Proportion of each group selecting this as one of top three most important reasons for doing physical activity (see question detail on slide 41). Note that 'Parents' refers to parents of children aged 5-15.

My health condition or disability makes it hard to be active	<i>All GM residents*:</i> 19%	<i>Inactive*:</i> 30%	<i>LTHC*:</i> 65%	<i>Workless*:</i> 56%	<i>Parents*:</i> 15%
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- Physical and mental health conditions are one of the most important barriers for 3 in 10 of inactive residents (and around two-thirds of those with long-term health conditions)
- Health conditions or disabilities can be a barrier for several different reasons
 - Perceived need for more rest (and conflicting medical advice)
 - Pain, restricted mobility or low mood
 - Unpredictability of conditions (inc. mental health)

“Some people are ruled by doctor’s orders and being scared-off trying physical activity because of their condition. Not all medical professionals give out accurate advice.”

Stakeholder

“I’d love to go swimming and my doctor has recommended that I go to an aqua aerobics session. It’s the best activity I could do but I really struggle to get in and out of the pool and feel unsteady even just walking to the edge of the pool as there are no handrails.”

LTHC, female, 55+

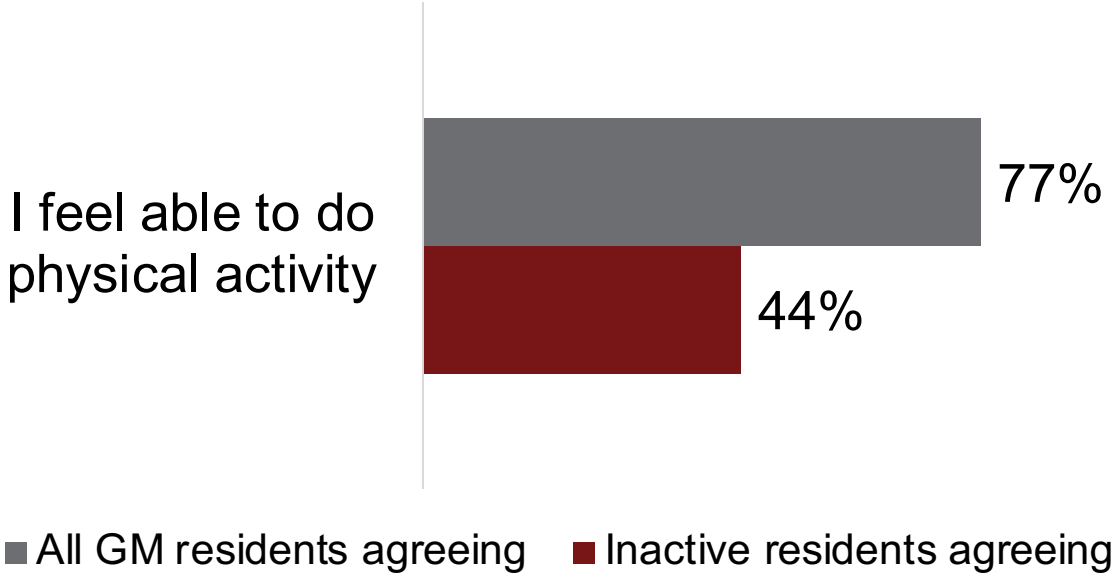
*Proportion of each group selecting this as one of top three most important reasons for doing physical activity (see question detail on slide 41). Note that ‘Parents’ refers to parents of children aged 5-15.

I am not fit enough to do physical activity	<i>All GM residents*:</i> 13%	<i>Inactive*:</i> 26%	<i>LTHC*:</i> 31%	<i>Workless*:</i> 23%	<i>Parents*:</i> 11%
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- A narrow interpretation of ‘activity’ (as something strenuous) means those who are least active often consider themselves physically incapable of doing it
 - Whereas 77% of all GM residents feel able to do physical activity, only 44% of inactive residents agree
- This is a particularly significant barrier for those with long-term health conditions and those who have been inactive for long periods

“I would assume ‘moderate-intensity’ means running, going to the gym, that kind of thing.”
Parent of child age 11-16, male

“I used to play netball but I don’t think I could anymore. I think that’s a long way off for me.”
Control, female, 55+



Q.9 Listed below are some statements. For each, please tell us how far you agree or disagree with each statement. Base: All respondents (n=507), all inactive respondents (n=121)

*Proportion of each group selecting this as one of top three most important reasons for doing physical activity (see question detail on slide 41). Note that ‘Parents’ refers to parents of children aged 5-15.

I am not 'sporty' or competitive enough	<i>All GM residents*:</i> 14%	<i>Inactive*:</i> 19%	<i>LTHC*:</i> 10%	<i>Workless*:</i> 8%	<i>Parents*:</i> 10%
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- Around 1 in 5 inactive residents cited not being sporty or competitive enough as one of the most important barriers to doing more physical activity
- Separately from being physically unable to do more activity (on previous slide), many revealed an 'identity' barrier: they do not consider themselves sporty or competitive – and often (proudly) sought to distinguish themselves from 'gym bunnies'

"I used to be 'very sporty' and do netball, running, karate... I was county badminton champion. Over the years though, this has become less of a priority for me. Having children and just not caring as much about activity and having other things take over."

LTHC, female, 55+

"I do a lot less than everyone else. Once upon a time if you were a gym bunny you were a bit of a weirdo but now it's the norm."

Control, male, 35-54

*Proportion of each group selecting this as one of top three most important reasons for doing physical activity (see question detail on slide 41). Note that 'Parents' refers to parents of children aged 5-15.

Weather conditions often put me off	<i>All GM residents*:</i> 26%	<i>Inactive*:</i> 17%	<i>LTHC*:</i> 20%	<i>Workless*:</i> 27%	<i>Parents*:</i> 26%
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- Weather conditions are one of the most important barriers to doing more physical activity for around a quarter of all GM residents
 - Short daylight hours, cold and rain means outdoor activities seem less appealing – and adds to sense of activity being a chore
 - Available activities in winter feel more limited to indoor activities – which implies expensive, intimidating gym or sports club membership to many
 - Parents especially concerned about letting children play by themselves in the dark

“There is a park opposite my house – I could go running there all the time. But it’s just not nice in winter, it’s cold and I don’t have the proper kit.”

Workless, female, 19-34

"I can tell, during the week, when weather is crappy, and games have been cancelled a few weeks in the row. I can really feel the difference in my fitness."

Young person, female, 16-18

*Proportion of each group selecting this as one of top three most important reasons for doing physical activity (see question detail on slide 41). Note that ‘Parents’ refers to parents of children aged 5-15.

It would be too expensive to do more physical activity	All GM residents*: 10%	Inactive*: 10%	LTHC*: 14%	Workless*: 14%	Parents*: 11%
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- Increased activity is often assumed to entail additional (unaffordable) costs, particularly by the three target audiences
- Perceived expenses include: gym and sports club memberships; clothing and kit; parking charges and public transport costs; and loss of benefits

“When I get back into work the first thing I will do is get my gym membership back. I just can’t ask my boyfriend at the moment given he pays for everything else already.”

Workless, female, 19-34

“Issues around poverty and socio-economic exclusion cannot be under-estimated - GM has considerable pockets of deprivation. That is cross-cutting.”

Stakeholder

“I like doing Pilates, I could do more of that. But it’s £10 a session. It’s not a massive deal, I probably have that, but it is expensive when you think about it.”

Control, female, 55+

47% of disabled adults fear losing their benefits if they are seen to be active (Activity Alliance and the Dwarf Sports Association)

*Proportion of each group selecting this as one of top three most important reasons for doing physical activity (see question detail on slide 41). Note that ‘Parents’ refers to parents of children aged 5-15.

I don't enjoy being physically active	All GM residents*: 10%	Inactive*: 15%	LTHC*: 12%	Workless*: 4%	Parents*: 8%
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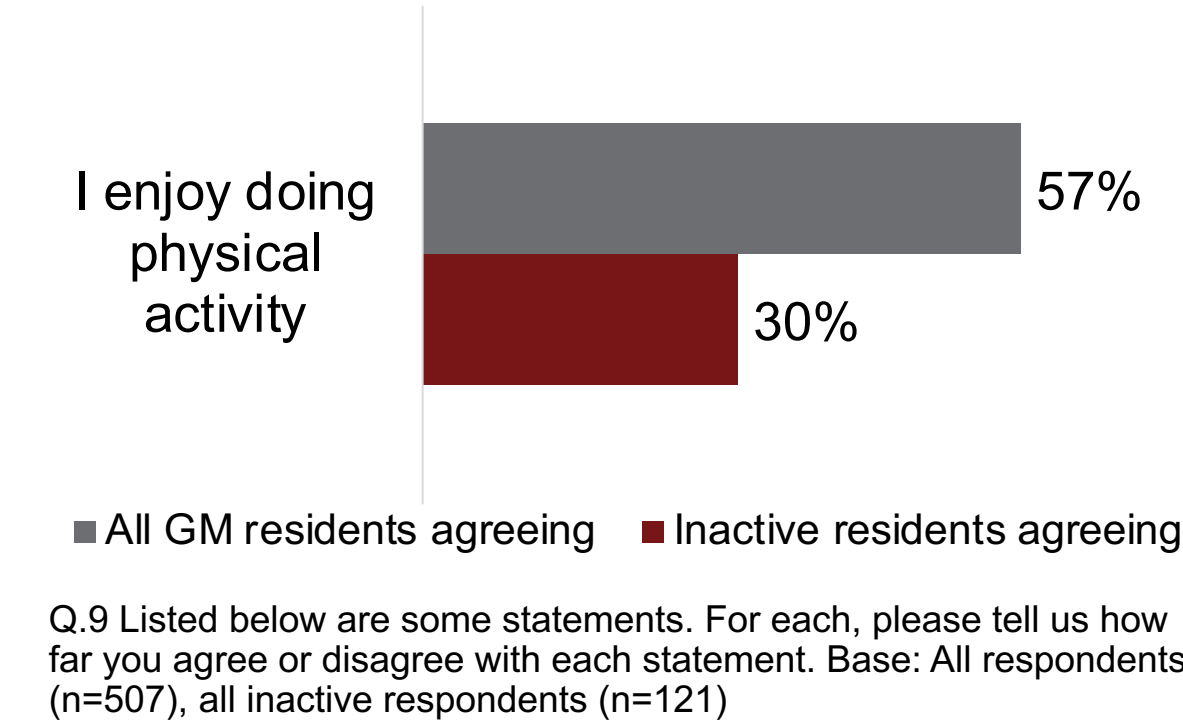
- Activity often regarded as a chore and less fun than other social/leisure activities; whereas 57% of all GM residents enjoy being active, only 30% of inactive residents agree
- Because it is seen as a deliberate and discrete pursuit – rather than something functional built into daily life – it is often seen to be in competition with other (more fun) forms of leisure
- Technology means greater accessibility to non-active entertainment, particularly for young people

For young people, the appeal of other activities may be a particular challenge with the appeal of technology and competitive video games.

StreetGames insight report

“Because of how much I work and how busy I am during the week, Saturday night is pretty much the only time I have that’s really ‘me time’. I usually just want to go for a drink with friends.”

Control, female, 35-54



*Proportion of each group selecting this as one of top three most important reasons for doing physical activity (see question detail on slide 41). Note that 'Parents' refers to parents of children aged 5-15.

I don't have time to do more activity / I can't fit it into my routine	<i>All GM residents*:</i> 25%	<i>Inactive*:</i> 14%	<i>LTHC*:</i> 7%	<i>Workless*:</i> 12%	<i>Parents*:</i> 24%
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- Lack of time is felt to be a big barrier to doing more physical activity for many
- For parents, young people, and working adults it is often simply a lack of spare time
- While for others, it is because of unpredictable routines, unsociable working hours or simply lack of structured routine which means days can ‘slip away’ (particularly among the workless audience)

Case study: Parent of children age <16

Erin and John have two children age 5 and 14. They both work shifts as air flight attendants and their flight times can change at short notice. They would like their daughter to be more active, but struggle to coordinate the school runs let alone fitting in any additional activity during the week.

Case study: LTHC, Female, 55+

Sarah is 58 and has cancer and arthritis. She works on 4 days a week for 5 hours at a time. Her weeks are very repetitive, meeting her daughter every Saturday and watching the same TV programmes at regular times. She likes her homely routines and doesn't feel there's an obvious time for activity.

Case study: Workless, male, 18-25

Tom is 24 and has been unemployed since leaving college 6 months ago. He doesn't have a routine but during a typical day he will watch TV, spend an hour or two looking for jobs online, and speak to his friends on social media. He says he doesn't feel 'busy', but equally doesn't think he has time for more activity.

*Proportion of each group selecting this as one of top three most important reasons for doing physical activity (see question detail on slide 41). Note that 'Parents' refers to parents of children aged 5-15.

I'm worried about how I might look	All GM residents*: 8%	Inactive*: 11%	LTHC*: 9%	Workless*: 7%	Parents*: 13%
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- Some feel embarrassment at their physical appearance if undertaking physical activity
 - Being in worse shape than others in the gym
 - Wearing unflattering clothes
- Others are concerned about being judged for their ability
 - Being inferior to others (e.g. slower running)
 - Not knowing how to use certain equipment properly

This Girl Can was driven by the insight that judgment tended to hold women back from participation and directly aimed to challenge this barrier.

“There are some outdoor gyms in the area, like monkey bars and things. But I wouldn’t want to use that in front of people. You’d look stupid.”

Workless, male, 35-54

“Everyone in the gym looks super ripped. I prefer doing home workouts at the moment because I just don’t look like that. Maybe one day...”

Workless, male, 19-34

*Proportion of each group selecting this as one of top three most important reasons for doing physical activity (see question detail on slide 41). Note that ‘Parents’ refers to parents of children aged 5-15.

I'm worried about getting injured	All GM residents*:	Inactive*:	LTHC*:	Workless*:	Parents*:
	7%	9%	8%	14%	7%

- Around 1 in 10 inactive residents cite fear of injury as one of the most important barriers to becoming more active
- This is often related to concerns about fitness and not knowing what physical activity could safely be undertaken
- Some – particularly those with long-term health conditions – have received specific medical advice recommending avoiding certain types of physical activity

“I’m worried about my back injury – I don’t want to overdo it. It ends up stopping me from doing the things I enjoy.”

LTHC, male, 35-54

“When I first got arthritis diagnosed I was told not to do anything if it hurt too much. That helped for a while, but now I think it’s the worst advice I ever got. Everything stiffened right up.”

LTHC, female, 35-54

*Proportion of each group selecting this as one of top three most important reasons for doing physical activity (see question detail on slide 41). Note that ‘Parents’ refers to parents of children aged 5-15.

I don't have anyone to do physical activity with	<i>All GM residents*:</i> 7%	<i>Inactive*:</i> 9%	<i>LTHC*:</i> 8%	<i>Workless*:</i> 8%	<i>Parents*:</i> 9%
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- While socialising is not regarded as a distinctive benefit of physical activity, lacking a social element can make it less appealing
 - Activity often has to compete with opportunities to socialise (e.g. going to pub with mates or watching a film with family)
 - Joining a gym or sports club is more daunting alone
 - Activity is less fun alone
 - Activity is less 'cool' (esp. for teenagers)

Street Games insight report found 'fitting in with peers' and 'maintaining their social status' are two key considerations for young people.

StreetGames insight report

"I go to the gym with a friend sometimes, but if she's not going then I don't either. [When we go], we go to the gym and then go for a coffee afterwards so it's a nice social thing."

Control, female, 35-54

"I think I would be more motivated to do it if I had a friend to exercise with- but I'm not competitive and not bothered about competing."

Control, male, 55+

*Proportion of each group selecting this as one of top three most important reasons for doing physical activity (see question detail on slide 41). Note that 'Parents' refers to parents of children aged 5-15.

I don't think I'd stick to the habit so there's no point in getting started	<i>All GM residents*:</i> 6%	<i>Inactive*:</i> 7%	<i>LTHC*:</i> 3%	<i>Workless*:</i> -	<i>Parents*:</i> 3%
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- While not commonly cited as one of the most important barriers to being more active, many inactive residents suggested (either explicitly or implicitly) that a lack of motivation and determination was a significant reason for inactivity



*Proportion of each group selecting this as one of top three most important reasons for doing physical activity (see question detail on slide 41). Note that 'Parents' refers to parents of children aged 5-15.

There aren't any good quality facilities near me	<i>All GM residents*:</i> 6%	<i>Inactive*:</i> 5%	<i>LTHC*:</i> 6%	<i>Workless*:</i> 9%	<i>Parents*:</i> 6%
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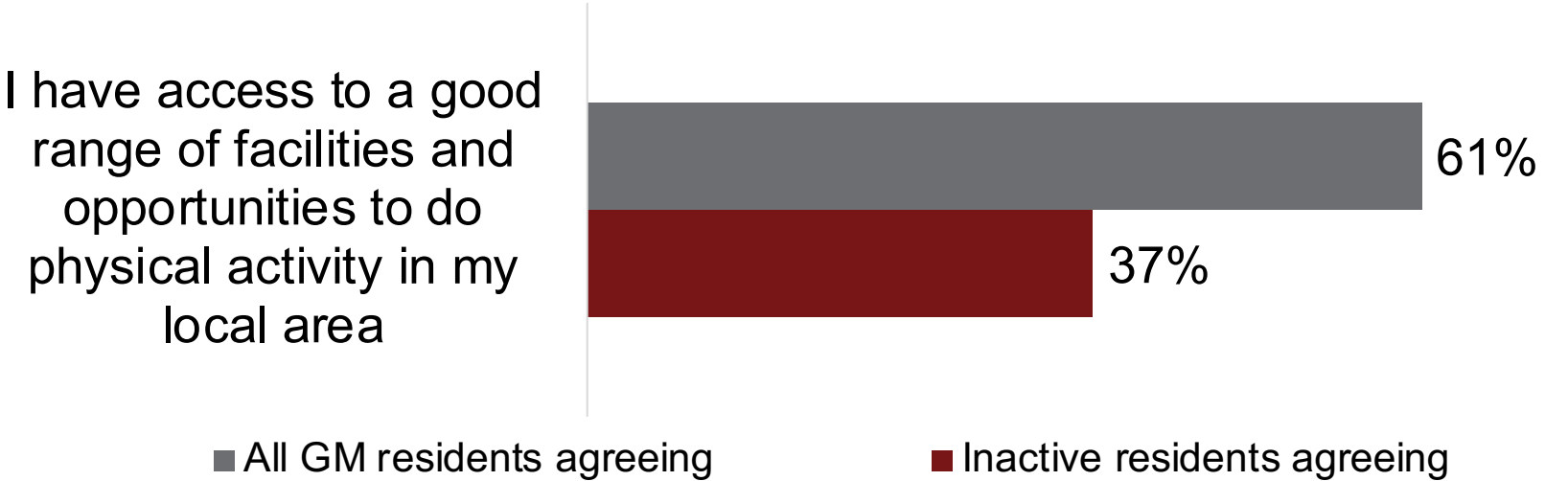
- While rarely one of the top reasons preventing more physical activity, only 37% of inactive residents believe they have access to good facilities in their local area
 - Too few facilities nearby or distances to nearest facilities being too far
 - Lack of information about activities and facilities in the area
 - Quality sometimes questionable (esp. swimming pools)
 - Not always accessible for disabled people or LTHCs – and intimidating for many without

"It's a 20 minute drive to my gym. That sounds okay, but when you add it all up it's 40 mins there and back, so if you do an hour in the gym, it's 2 hours out of my day."

Workless, male, 19-34

"I'd love it if they started something up for people with disabilities [at the swimming pool]... I don't feel steady walking to the pool at the moment."

LTHC, female, 55+



Q.9 Listed below are some statements. For each, please tell us how far you agree or disagree with each statement. Base: All respondents (n=507), all inactive respondents (n=121)

*Proportion of each group selecting this as one of top three most important reasons for doing physical activity (see question detail on slide 41). Note that 'Parents' refers to parents of children aged 5-15.

There are no real benefits to being more active than I currently am	<i>All GM residents*:</i> 5%	<i>Inactive*:</i> 4%	<i>LTHC*:</i> -	<i>Workless*:</i> -	<i>Parents*:</i> 2%
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- Few inactive residents (particularly of the target audiences) denied there being benefits to doing more activity or thought that this was an important barrier
- But the qualitative research suggests that some thought that the health benefits were less relevant to them because: they already had healthy diets; were not visibly overweight; didn't have other unhealthy habits; or did not have any existing health conditions

"I eat pretty well. I eat clean. Lots of sweet potatoes and chicken. I would like to go to the gym more but I'm not that bad."
Workless, female, 19-34

"She [my daughter] doesn't need to do a lot of activity really. I mean she has, well, she has quite a good physique and that's the main thing she cares about."
Parent of child age 11-16

"I don't drink and I don't smoke, so I don't really have any other vices."
Workless, female, 55+

"I've never had a long term illness – no cancer, nothing like that. I'm doing okay."
At risk of LTHC, female, 55+

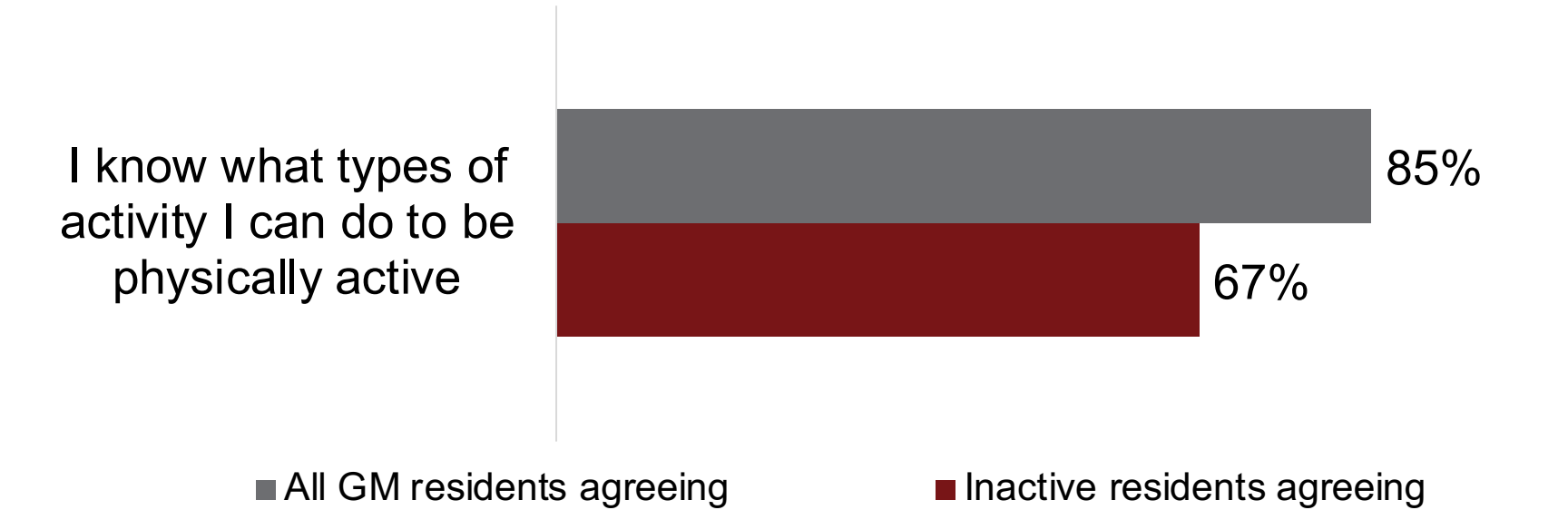
*Proportion of each group selecting this as one of top three most important reasons for doing physical activity (see question detail on slide 41). Note that 'Parents' refers to parents of children aged 5-15.

I don't know what physical activity I can do	All GM residents*:	Inactive*:	LTHC*:	Workless*:	Parents*:
	3%	3%	5%	2%	2%

- Most residents know what physical activities they can do and very few chose a lack of knowledge as one of the most important barriers to doing more activity
- Nevertheless, a significant minority of inactive residents did not know where to start (with only 67% agreeing that they know what types of activity they can do) – and our qualitative research suggested this was particularly true of residents with long-term health conditions or disabilities

"Even if she asked me about what to do [regarding stretches or strength building] I wouldn't know what to say. I have no idea what they could be, and I don't know where to look."

Parent of child age 11-16



Q.9 Listed below are some statements. For each, please tell us how far you agree or disagree with each statement. Base: All respondents (n=507), all inactive respondents (n=121)

*Proportion of each group selecting this as one of top three most important reasons for doing physical activity (see question detail on slide 41). Note that 'Parents' refers to parents of children aged 5-15.