













Moving More

Introduction

We believe passionately in inspiring people to lead active, healthier, and happier lives. This multi-agency strategy is committed to encouraging everyone in Buckinghamshire to move more and be more active, with a particular focus on those who are currently inactive – defined as doing less than 30 minutes moderate intensity physical activity per week.



One in five adults in Buckinghamshire do less than 30 minutes of activity a week and will see the greatest gains from moving more and increasing their levels of activity.

Movement benefits everyone, whatever age or ability, being physically active supports better mental and physical health and reduces the risk of developing many long-term conditions such as heart disease, cancer and dementia.

Regular physical activity can deliver cost savings for the health and care system and has wider social benefits for individuals and communities. In fact, it has been widely acknowledged that if exercise were a pill, it would be the most cost-effective medicine available.

Preventing ill-health through physical activity supports a number of key Buckinghamshire priorities including the Buckinghamshire Joint Local Health and Wellbeing Strategy, Opportunity Bucks, as well as helping people to live independently for as long as possible, reducing social isolation and increasing active travel which can reduce congestion and air pollution.

Together, we are committed to understand the needs of our residents to reduce inactivity and inequality. We want to create a movement in Buckinghamshire so that moving more and being active is everyone's business and part of everyone's daily life.

We encourage you to join us to implement this strategy to help our residents live more active, healthier and happier lives.







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1. PURPOSE

The purpose of this strategy is to provide clear guidance to strategic leads, policy makers, commissioners and providers across different areas of responsibility to help drive an increase in movement and physical activity levels of Buckinghamshire residents and support delivery of the Buckinghamshire Joint Local <u>Health and Wellbeing Strategy 2022–2025</u> and Opportunity Bucks.

This strategy sets out 4 key evidence-based principles that provide the framework for incorporating activity into everyday life, across the life course, and making activity the social 'norm'. Achieving this ambition isn't possible by any one organisation alone and relies on a whole-system, joined-up approach to action.

The strategy will be overseen by a multi-agency steering group and will link to the Buckinghamshire Health & Wellbeing Board.





VISION

People moving more, more often.

To create a future where all residents across Buckinghamshire lead an active and healthy lifestyle.

MISSION

Taking effective action.

To work together with our partners to deliver a system-wide annual action plan to reduce barriers and create a more active county.





"We are proud to share our updated Physical Activity Strategy for Buckinghamshire, which demonstrates our commitment to supporting and empowering communities to move more and be more active. Through collaboration with our partners, we can continue to create a movement so that moving more and being active is part of everyone's daily lives."

2. AIMS AND OUTCOMES

More people moving more often

AIMS



To reduce sedentary behaviour.

Inspiring the least active residents to engage in a more active lifestyle.

People who do less than 30 minutes per week of moderate intensity physical activity are defined as being inactive. In Buckinghamshire almost 1 in 5 adults aged 16+ are inactive. The greatest health gains are made by moving people from "inactive" to more active categories.

To increase physical activity levels for all.

Supporting all residents to increase and sustain their levels of physical activity and benefit their health.

Guidelines for adults aged 16+ years recommend 150 minutes of moderately intense physical activity per week and for young people age specific recommendations are even higher.

OUTCOMES



A reduction in the proportion of Buckinghamshire residents who are inactive by 2029.

An increase in the proportion of Buckinghamshire residents who achieve the Chief Medical Officer guidelines for physical activity by 2029.

Groups we will be targeting

National research identifies that a higher proportion of people from the following groups are more likely to be inactive and therefore we will be targeting these groups to prevent and reduce risk of a number of health conditions linked to inactivity:

Lower Socio-economic groups	Those in routine/semi-routine jobs and those who are long-term unemployed or have never worked are the least likely to be active (52%). ¹ Those from deprived backgrounds are least likely to be active (39%) compared to high family affluence (50%). ²				
Women	Women (40%) are more likely to be inactive than men (37%) 1				
Older people	Inactivity levels increase with age. Older people aged 75+ (61%) are most likely to be inactive. 1				
People with disability or long-term health conditions	Meeting the recommended activity levels is less common for disabled people or those with a long-term condition (45%) than those without (66%).				
People from some ethnic groups	Whilst nationally 35% of White British people are inactive the levels of inactivity for some ethnic groups are higher, Asian 50%, Black 45% and Chinese 42%. ¹				

Some of our priority groups told us



"I don't feel comfortable going to a mixed gym. I would like a women's only gym with full facilities available." (Bucks Resident)



"I use a mobility scooter and am very restricted in my mobility. Places of exercise would have to be local and disabled friendly i.e. no steps." (Bucks Resident)

"I just want someone
who provides
something for people
like us who can go to
do yoga and all that
in a free session
really." (Female, Asian
or Asian British, 3544)



"I find that a lot of imagery used in advertising where they're talking...or think they're talking to the over-60s for instance, or over-70s... I just think they're very sanitised images of people. And I think, well... most of the people I know who are older do not look like that, they're not as neat and tidy and clean and made up, etc. I just feel those images are unrealistic, so I think these images need to be more true to life." (Female, White British, aged 75+)

3. Physical Activity - an overview

3.1 What is physical activity?

Being physically active can incorporate many types of informal and structured activity:

Physical Activity

(slightly out of breath, raised heart rate)

Everyday movement:

- Active travel (cycling/walking/ wheeling)
- Heavy housework
- Gardening
- DIY
- Occupational activity (active/manual work)



Active recreation:

- Recreational walking
- Recreational cycling
- Active play
- Dance

Sport and exercise:

- Sport walking
- Regular cycling (≥ 30 min/week)
- Swimming
- Exercise and fitness training
- Structured competitive activity
- Individual pursuits
- Informal sport





Economy



£7.4 billion

approx. cost of physical inactivity across the country each year

Businesses with active employees are more **productive** and have a **lower** staff turnover







Active employees take **27%** fewer days sick leave than inactive employees⁵

Health



Number of chronic health conditions that physical activity can help prevent and treat Inactive adults have a 30% higher risk of high blood pressure than active adults





Physical inactivity directly contributes to **1 in 6** deaths in the UK

Active adults have approx. 20% - 30% lower risk of 7 depression and dementia



Physical activity can help with:



Improving sleep



Maintaining weight



Managing Stress



Improving quality of life

Education[®]



Improves concentration and learning

GCSE results of active young people are 10-20% higher than those of inactive young people





Participating in extracurricular activities has a positive effect on Physically active young people are **15%** more ikely to go to university



3.3 What are the guidelines?

Early Years (0-5 years)

What?

Floor-based play and water-based activities in safe environments.

Time spent being sedentary.

How much?

At least 180 minutes spread throughout the day.

Minimise time (except time sleeping).

How active are the Early Years (2-4)?

National data (local data not available)



10% 9% of boys of girls meet recommended activity guidelines

83%

of boys and girls are classified as 'less active' (the lowest activity category) 22% of boys 27% of girls

are sedentary for between 4-6 hours on weekend days



What?

Activities to develop movement and skills.

Activities to develop muscle and bone strength.

How much?

At least 60 minutes per day.

Spread activity throughout the day.

How active are we in Buckinghamshire? Children and Young People (5-16)

Self reported data

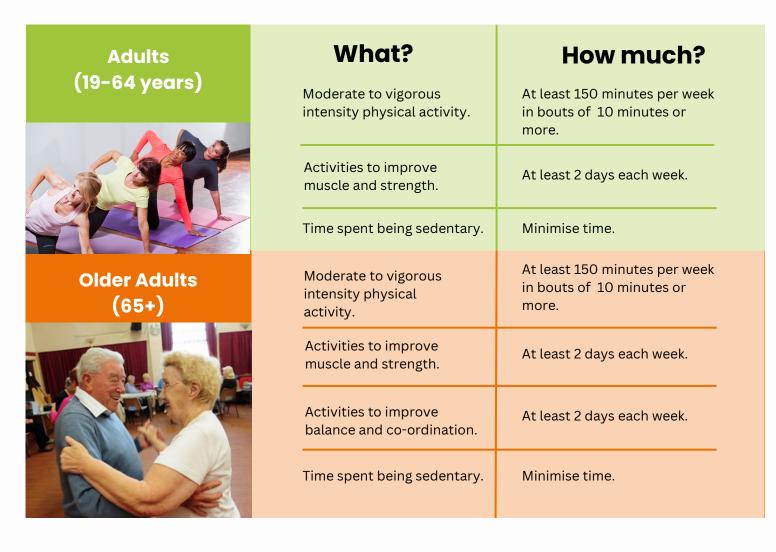


48.8%

of children meet recommended activity guidelines 25.1%

of children are classified as 'less active' (the lowest activity category) 19% of boys 27% of girls

are sedentary for between 4-6 hours on weekend days



How active are we in Buckinghamshire?

Adults (19+)¹¹
Self reported data

73.2% of adults meet recommended activity guidelines

16.1% of adults are classified as 'inactive'

40%
of men are sedentary
for 6+ hours on
weekend days

35%
of women are sedentary
for 6+ hours on
weekend days

Did you know?

Moderate intensity

means you can talk during an activity but you can't sing.



Vigorous intensity

means you struggle to say more than a few words during an activity.



Sedentary behaviour

is not simply a lack of physical activity - it is spending too much time in positions that do not use energy - such as watching TV, playing computer games or sitting at a desk that lead to poor health.











One in four people would be more active if advised by a healthcare professional.



The children of parents regularly taking up physical activity participated more often.¹²

4 What our residents told us

Through a range of focus groups we gathered information about barriers to being physically active.

"I think recreational spaces are a positive thing. I mean, obviously, when you see children playing or dogs being walked and that sort of thing, sometimes people fly kites and it's a nice environment and it's a free exercise, you know." (Female, aged 65-74)

"Services seem to complain to me because my weight's high for my height but then the services are not guiding me and helping me." "I would like to see more information on showing the effectiveness of physical activity on the different elements of health."

"I've tried using the gym in the past but I don't really get on that well with it, but one exercise I do quite enjoy is swimming. But the gym membership which includes the swimming is quite expensive and I've got mental health issues. Some days I would feel like going other days I wouldn't feel like going so I don't really want to pay a gym membership that is for me to be able to go swimming if I'm not going to use it."

Themes identified from the resident feedback sessions:

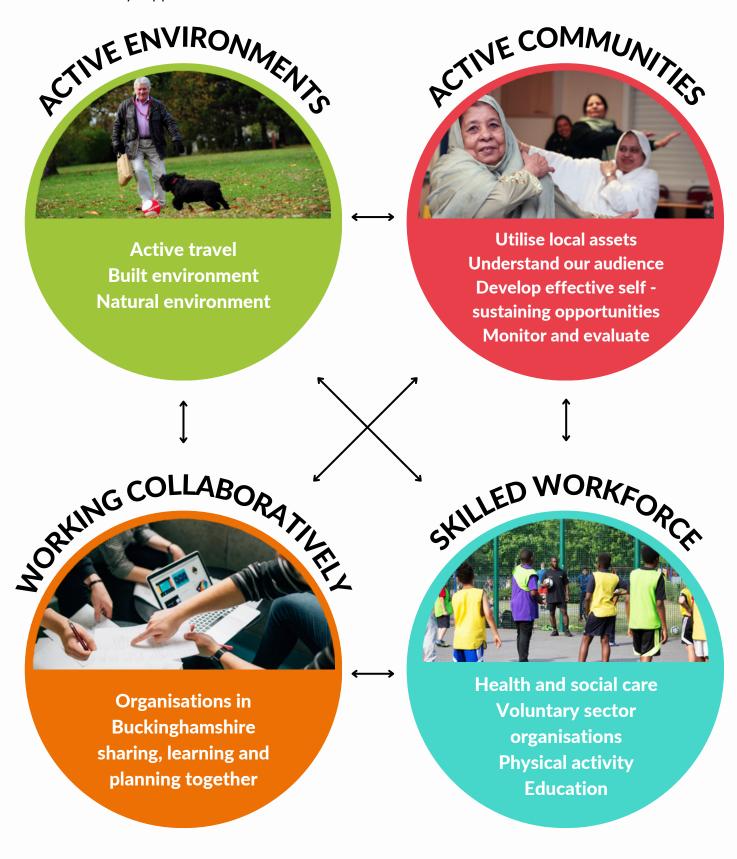
Workforces should be skilled in supporting residents to be active and moving more by providing brief advice and signposting particularly to those who are inactive and to encourage sustainable physical activity opportunities in key communities where levels of inactivity are higher.

Provide flexible memberships and pay as you go options for targeted individuals to support them accessing leisure facilities and structured activity.

Increase usage and enjoyment of our local parks and green spaces.

5. Achieving our aims through 4 principles

The following four principles are based on national policy, evidence, best practice and local insight. Each principle interlinks so that each Area for Action supports achieving other principles. For example, increasing active travel not only supports active environments but contributes towards active communities too.



5.1 Active Environments

The World Health Organisation defines a 'Healthy City' as one that supports health, recreation and wellbeing, safety, social interaction, easy mobility, a sense of pride and cultural identity and is accessible to the needs of all citizens. The same can be applied to towns and villages throughout Buckinghamshire. Living in an activity-friendly neighbourhood can provide up to 59% of weekly activity. There is strong evidence that improving environments to increase active travel can significantly increase levels of physical activity – as well as provide the following benefits:

"We really want to bring up active children, going to a park should be an enjoyable and safe experience" Bucks Resident





Reduce vehiclebicycle collisions (through marked cycle lanes) by up to

50%



Reduce air pollution by swapping to walking/cycling for journeys under 5 miles which account for

of carbon dioxide



INCREASE

Social connectivity through better links to people and places



The benefits of active travel nave been found to outweigh the

11 times

Neighbourhood design, housing and transport can all support active lifestyles but it's crucial that pedestrians and cyclists are prioritised when developing or maintaining streets and roads.

Areas of Buckinghamshire will be undergoing significant growth over the coming years which presents opportunity to design activity into people's lives right from the planning stages.

The built environment is key to maintaining wellbeing, mobility and independence in older adults through factors such as including pedestrian infrastructure, safety, access to amenities and services, aesthetics and environmental conditions.

If all Buckinghamshire adults walked for 30 minutes a day, this would lead to a reduction in death rates of 14%, with 30 minutes of daily cycling leading to a reduction in death rates of 21%

As well as ensuring we have fit-for purpose facilities such as leisure centres and places to be physically active, the National Institute for Health and Care Excellence (NICE) recommends that other spaces support active travel:



Access to open and green space – parks, gardens, tree-lined streets, communal squares and allotments – is not only important to support increased physical activity, but important for quality of life and for the sustainability of towns and cities. Public green space needs to be maintained to a high standard, be safe, attractive, and welcoming and be accessible on foot, bicycle, wheeling and public transport.

Key Facts

- Those with access to good quality green space report: better self-rated health, lower body mass index, lower overweight and obesity levels.
- The creation or improvement of a park/open space leads to an increase in local peoples' activity levels by up to 48%.¹⁸
- Every 10% increase in green space is associated with a reduction in disease equivalent to a gain of 5 years of life. 19
- **18%** of Buckinghamshire households live within 300m of a natural green space of at least 2 hectares, and only **58%** of households live within 2km of a natural green space of at least 20 hectares.²⁰
- 11.4% drop since 2013/14 in the proportion of Buckinghamshire residents that use green space for exercise/health reasons.²¹

Increasing the use of good quality green space for all social groups can improve health outcomes and reduce health inequalities. It can also bring other benefits such as greater community cohesion and reduced social isolation.

Although Buckinghamshire is renowned as a green and rural county, much of its green infrastructure is not directly accessible to residents. When applying the Accessible Natural Green Space Standard (ANGSt), a large proportion of households aren't near to large (20+hectares) accessible areas of green space, affecting opportunities

to be regularly active. Given that significant growth in Buckinghamshire is planned over the next 10+ years, prioritisation must be given in these areas to incorporating good quality, accessible green and open spaces.

Certain socio-demographic groups, including those with a long-term illness or disability, aged 65 and over, and of Black or Minority Ethnic origin, are consistently less likely to use the natural environment for physical activity.

Active Environments - Areas for Action

- 1. Implement and improve opportunities to increase Active Travel, particularly reducing short car jouneys and utilising existing green spaces and parks. We will prioritise levelling up areas and/or areas of most need.
- 2. Improve accessibility to council owned leisure and community facilities for the most deprived residents to be physically active across Buckinghamshire.
- 3. Increase access and use of green spaces and local parks for all social groups.

5.2 Active Communities

Creating social networks

People are more likely to be active if it is seen as 'the norm', and if their friends and peers are also active. The evidence shows that to change attitudes and behaviour at a local level, we must involve residents in designing solutions to increase activity levels. Achieving small shifts in behaviour across whole communities could give more significant public health benefits than just increasing activity among small, targeted groups.

"I feel better physically after some activity, whether it's walking or gardening or even housework. If I can raise my heartrate I know that I feel better after that." Bucks resident



Individuals who are socially isolated are between 2-5 times more likely than those who have strong social ties to die prematurely.

- We know that physical activity, particularly when groupbased, can bring people together to improve social networks and reduce isolation.
- Evidence suggests that the social element behind physical activity aids enjoyment and that social support encourages sustained behaviour change.
- We need to capitalize on the benefits of technology and use it to connect people with opportunities to be physically active.

Utilising assets



Understanding and utilising community assets (individuals, associations and organisations) can be an effective driver of increasing levels of physical activity.

"We have lots of local initiatives but I don't think they are all collated in one place for us to search or see what's available" Bucks resident

- Asset-based working promotes well-being by building social capital high levels of which are correlated with positive health outcomes, well-being and resilience.
- An asset-based approach also allows for any gaps in physical activity opportunities to be identified and addressed.

Opportunities to be active

Opportunities should take an evidence-based, resident-centred approach:

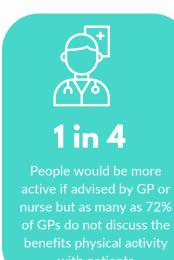
- utilising local data and audience insight
- mapping existing provision to avoid duplication and identify gaps
- understanding what works to recruit and retain your target audience
- ensuring accessibility for those with more complex needs
- focusing from the beginning on becoming self-sustaining
- be robustly and consistently monitored and evaluated to demonstrate impact
- effective promotion of opportunities to be active to suit different audiences

Active Communities - Areas for Action

- 1. Understand our target groups by developing insight to identify their capabilities, opportunities and motivators to tailor support to those who are inactive/less-active.
- 2. Maintain the comprehensive local physical activity profiles to inform and support local planning. 3. Implement robust and consistent messaging and evaluation processes and frameworks developed.

5.3 Skilled Workforce

We can help change behaviour by making every contact count – supporting staff across new health structures such as Integrated Care Systems so they can effectively ensure that updated plans and strategies give prominence to physical activity and underrepresented groups within the prevention agenda. We will also support local authority, social care staff and voluntary sectors, who have contact with residents every day. Sport England states we need to "improve a person's experience of physical activity by providing guidance aligned to their individual needs and aspirations". We must equip key members of the workforce and volunteers in Buckinghamshire with the knowledge, enthusiasm and skills to deliver effective physical activity brief advice to inactive/less-active residents.







Health and social care staff, as well as other professionals such as schools, transport teams, planning and design, are perfectly placed to support residents directly or indirectly to increase their activity levels, by:

- including physical activity advice in face-to-face meetings/consultations
- delivering evidence-based support such as motivational interviewing and Making Every Contact Count
- ensuring physical activity is embedded into long-term condition care pathways
- · embedding physical activity in personalised care and support planning
- increase active travel opportunities when implementing design and local infrastructure
- ensuring movement and physical activity is part of every school day
- signposting/referring to local activity pathways directly, such as Exercise Referral Schemes or for further support through the single point of access of the healthy lifestyle service

Did you know?

As we get older, regular physical activity is key to maintaining independence and wellbeing, helping to prevent or delay the need for health and social care support for conditions such as dementia, disability and frailty.



For the existing physical activity workforce, the biggest challenge is often supporting people new to activity on a journey that supports their gradual introduction to a new behaviour. It is often the 'softer skills' that can have the biggest impact on sustained participation, including providing a welcoming environment, understanding the factors that can put off new attendees and developing supportive and social environments.

Our experiences of being active at an early age can shape lifelong activity habits. We know that children and young people who are aerobically fit have higher academic scores, and that physical activity has been linked to improved classroom behaviour across the whole school – including improved pro–social behaviour and peer relationships.

Training and supporting all education staff, but particularly those in the levelling up areas, can ensure that a positive experience for children translates into an active habit into adulthood.

Opportunities include:



Worryingly, one in three children across the UK are leaving primary school with negative feelings about being physically active.

- Improving 'physical literacy' in the early years
- Improving the PE offer in primary schools through effective use of the Primary Sport Premium funding
- Creating more high-quality opportunities to be regularly active for inactive students at secondary school and in further/higher education



Skilled Workforce - Areas for Action

- 1. Provide training to health and social care staff and the voluntary sector and resident facing teams so they can deliver effective brief physical activity advice and signposting.
- 2. Provide the physical activity workforce with both the knowledge and skills to help tackle inequalities in activity levels amongst our least active communities.
- 3. Provide all staff and volunteers working with children and young people with the knowledge, skills and tools to increase levels of physical activity amongst this group.

5.4 Working Collaboratively

Achieving a step-change in the activity levels of Buckinghamshire residents isn't the responsibility of any one organisation. Instead, success will only be possible by a network of organisations working together to achieve a shared vision and using resources intelligently.

At a national scale, we know that cross-organisational collaboration can support achieving common goals – such as the Public Health England 'Active10' and Sport England 'This Girl Can' campaigns.

This strategy will build on the great work already taking place across the county to engage residents in regular activity as well as identifying new opportunities to work in partnership. It will support countywide collaboration by making the best use of meetings and creating the local digital platforms that allow us to better share, understand and scale-up best practice.

As part of this, an annual theme each year will enable organisations across Buckinghamshire to work together to increase participation through a particular area of work, enabling greater reach to communities, professionals and utilising local assets.



Working Collaboratively - Areas for Action

- 1. Unite the movement in Buckinghamshire providing regular opportunities for key stakeholders to come together to explore using regular movement and activity to improve the wellbeing of residents.
- 2. All strategy steering group members to contribute via a digital platform on a regular basis to share and collaborate on pieces of work, as well as understand best practice and lessons learned.
- 3. Support key stakeholders with opportunities to highlight the importance of regular movement and activity to support residents wellbeing.
- 4. Develop a yearly collaborative countywide campaign focused on increasing movement and activity to prevent ill-health.

6. Measuring Impact

The anticipated aims of the multi-agency Physical Activity Strategy, highlighted below, will be achieved through the implementation of the annual action plan and the collaboration between partners engaged in the Physical Activity Strategy Steering Group.

Key aims and how we will measure achievement:									
Aim	How we will measure it	Baseline	Target by 2029	England Average	South East Average				
Reduce sedentary behaviour	Proportion of people doing less than 30 mins per week of moderate intensity PA (current data 16.1%)	16.1%	14%	22.3%	18.8%				
Increase physical activity levels of adults	Proportion of adults aged 19+ years achieving 150 mins of moderate PA per week (current data is 73.2%)	73.2%	78%	67.3%	70.5%				
Increase physical activity levels of children and young people	 Proportion of children aged 5-16 achieving 60 active mins daily 	48.8%	54%	47%	47.2%				
Increase the physical activity levels of older adults	Proportion of older adults achieving 2 or more sessions of muscle strength exercises per week	38.1%	43%	35.5%	36.8%				
Reduce the number of adults and children who are overweight or obese	 Proportion of Year 6 children and adults aged 18+ identified as overweight or obese 	Adults 60% —— Children 31.5%	Adults 55% —— Children 26%	Adults 63.6% —— Children 36.6%	Adults 62.1% —— Children 33%				
Increase usage of local leisure centres	Increase in visits to local leisure centres	3,622,115 visits	increase to 3,800,000 visits						

Physical activity levels in Buckinghamshire for adults, older adults and children are higher than both the England and South East England average.

Physical activity benefits both our physical and mental health and can positively impact health, social and economic status. Addressing health inequalities is a priority for Buckinghamshire and we aspire to be the most active county in the country through the defined targets.

The aims proposed will be monitored through a range of datasets including:

- Active Lives Survey for adults (including older adults) and children Sport England (self-reported data)
- Public Health Outcomes Framework (Office for Health Improvement and Disparities (OHID)
 - Physical Activity levels
 - Obesity levels
- Local leisure centre usage data

7. Physical Activity Strategy Acknowledgements

The Physical Activity Strategy is developed and overseen by the Bucks Physical Activity Strategy Steering group (chaired by Buckinghamshire Council, Public Health):

- Leap
- Buckinghamshire Healthcare Trust (BHT)
- Integrated Care Board (ICB)
- Maximus UK Be Healthy Bucks
- Buckinghamshire New University
- Community Transform
- Holiday Activity and Food (HAF team)
- Active in The Community
- · Sport in Mind
- Everyone Active
- · Healthy Minds, Oxford Health Foundation Trust
- Active Medicine, Get Berkshire Active
- · Community Safety, Buckinghamshire Council (BC)
- Sustainable Travel, BC
- Transport Strategy, BC
- · Air Quality, BC
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- · Culture, Sport & Leisure, BC
- · Community Engagement and Development Team, BC
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