

PHYSICAL ACTIVITY IN LEICESTER ADULTS: JOINT STRATEGIC NEEDS ASSESSMENT

A Joint Strategic Needs Assessment (JSNA) is a statutory process by which local authorities and commissioning groups assess the current and future health, care and wellbeing needs of the local community to inform decision making.

The JSNA:

Is concerned with wider social factors that have an impact on people's health and wellbeing such as poverty and employment.

Looks at the health of the population with a focus on behaviours which affect health, such as smoking, diet and exercise.

Provides a view of health and care needs in the local community

Identifies health inequalities

Indicates current service provision

Identifies gaps in health and care services, documenting unmet needs

CONTENTS

1.	Introduction	3
2.	Who's at risk and why?	8
2.1	Inactivity and sedentary behaviour.....	8
2.2	Physical activity and age	10
2.3	Physical activity and gender	11
2.4	Physical activity and social status.....	13
2.5	Physical activity and disability	13
2.6	Physical activity and ethnicity	14
2.7	Physical activity and weight	15
2.8	Other	17
3.	The level of need in the population.....	18
3.1	Physical activity in Leicester	18
3.2	Leicester and comparators.....	20
3.3	Types of physical activity in leicester	21
3.4	Active Travel.....	22
4.	Current services in relation to need	24
5.	Projected services use and outcomes in 3-5 years and 5-10 years	27
6.	Unmet needs and service gaps	27
7.	Recommendations for consideration by commissioners.....	28
8.	key contacts:.....	29
9.	References	30

1. INTRODUCTION

Physical activity is defined as any bodily movement produced by skeletal muscles that requires energy expenditure. It takes many forms, occurs in many settings, and has many purposes (e.g., daily activity, active recreation, and sport).¹ Regular physical activity provides a range of physical and mental health benefits, these include reducing the risk of disease, managing existing conditions, and developing and maintaining physical and mental function.

Physical activity that improves health includes multiple types of activity cardiovascular, muscle and bone strengthening and balance training.

Cardiovascular activity

Cardiovascular activity, sometimes called aerobic activity, increases breathing rate, and makes the heart and muscles work harder. It can be of low, moderate, or vigorous intensity and is relative to an individual's fitness.

Muscle and bone strengthening and balance training

Muscle strength, bone health and the ability to balance underpin physical function, particularly later in life. Strengthening activities are important throughout life for different reasons:

- to develop strength and build healthy bones during childhood and young adulthood
- to maintain strength in adulthood
- to delay the natural decline in muscle mass and bone density which occurs from around 50 years of age, maintaining function in later life

Balance training involves a combination of movements that challenge balance and reduce the likelihood of falling.

Physical activity not only promotes good health and helps prevent and manage disease; it also contributes to a range of wider social benefits for individuals and communities. The importance of the wider benefits of physical activity for individuals vary according to life stage and various other factors but include: improved learning and attainment; managing stress; self-efficacy; improved sleep; the development of social skills; and better social interaction.

Engaging in regular physical activity has been shown to improve mental health by reducing stress, anxiety, and depression while promoting the release of mood-enhancing chemicals in the brain. Furthermore, it can boost self-esteem and enhance cognitive function, contributing to an overall sense of well-being.

The Chief Medical Officer (CMO) has recently released new Physical Activity Guidelines (September 2019)¹, in summary:

Physical activity for adults and older adults

Benefits health	Reduces your chance of	Type II Diabetes	-40%		
Improves sleep		Cardiovascular disease	-35%		
Maintains healthy weight		Falls, depression etc.	-30%		
Manages stress		Joint and back pain	-25%		
Improves quality of life		Cancers (colon and breast)	-20%		
Some is good, more is better		Make a start today: it's never too late		Every minute counts	

Be active

at least

150

minutes moderate intensity per week

increased breathing able to talk

OR

or a combination of both

at least

75

minutes vigorous intensity per week

breathing fast difficult talking

to keep muscles, bones and joints strong

Build strength

on at least **2** days a week

Minimise sedentary time

Break up periods of inactivity

Improve balance

For older adults, to reduce the chance of frailty and falls

2 days a week

Dance

Physical Activity for Disabled Adults

Make it a daily habit



Do strength and balance activities on at least two days per week

For substantial health gains aim for at least 150 minutes each week of moderate intensity activity

Remember the talk test:



Can talk, but not sing = moderate intensity activity



Difficulty talking without pausing = vigorous intensity activity

UK Chief Medical Officers' Physical Activity Guidelines, 2019

Physical activity for pregnant women

- Helps to control weight gain
- Helps reduce high blood pressure problems
- Helps to prevent diabetes of pregnancy
- Improves fitness
- Improves sleep
- Improves mood



UK Chief Medical Officers' Physical Activity Guidelines, 2019

Physical activity for women after childbirth (birth to 12 months)



Time for yourself - reduces worries and depression



Helps to control weight and return to pre-pregnancy weight



Improves tummy muscle tone and strength



Improves fitness



Improves mood



Improves sleep

Not active?
Start gradually

Active before?
Restart gradually



Start pelvic floor exercises as soon as you can and continue daily

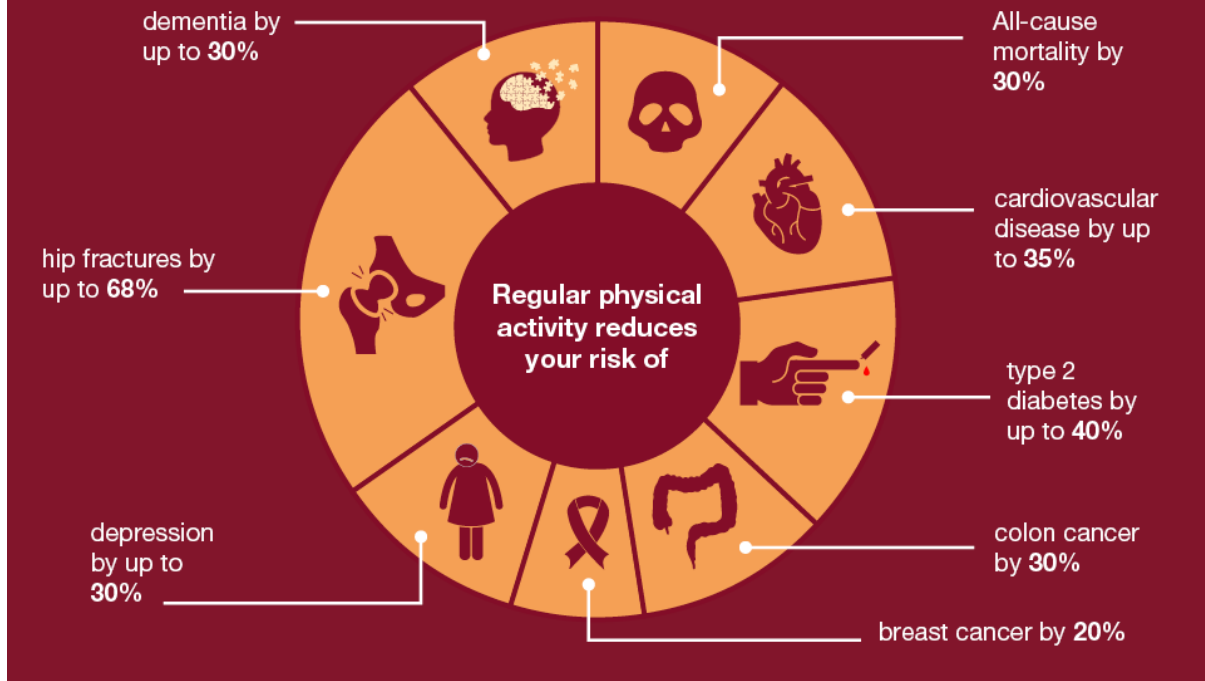
Build back up to muscle strengthening activities twice a week

It's safe to be active. No evidence of harm for post partum women

Depending on your delivery listen to your body and start gently 

You can be active while breastfeeding

What are the health benefits of physical activity?



2. WHO'S AT RISK AND WHY?

2.1 INACTIVITY AND SEDENTARY BEHAVIOUR

Inactive and sedentary behaviours are those which involve being in a sitting, reclining, or lying posture during waking hours, undertaking little movement or activity and using little energy above what is used at rest. Examples of sedentary behaviours include sitting in a chair while using a screen or reading, or a child sitting in a car seat or buggy. Periods of inactivity or sedentary behaviour are an independent risk factor for poor health outcomes and should be minimised when possible. Extended periods should be broken up by at least light physical activity.¹

The 2021/22 Active Lives Survey shows significantly higher rates of inactivity in Leicester compared to England. 35.2% of Leicester's population aged 16+ did less than 30 minutes of physical activity per week and are therefore classed as physically inactive compared to 25.8% in England overall.² A local household survey of Leicester residents³ found inactivity levels to be lower than this (11% in 2018), although the two data sources should not be directly compared. There are significant health inequalities in relation to physical inactivity according to age, gender, ethnicity, socio-economic status, and disability.⁴

Figure 1 Physical activity Levels for Leicester and England

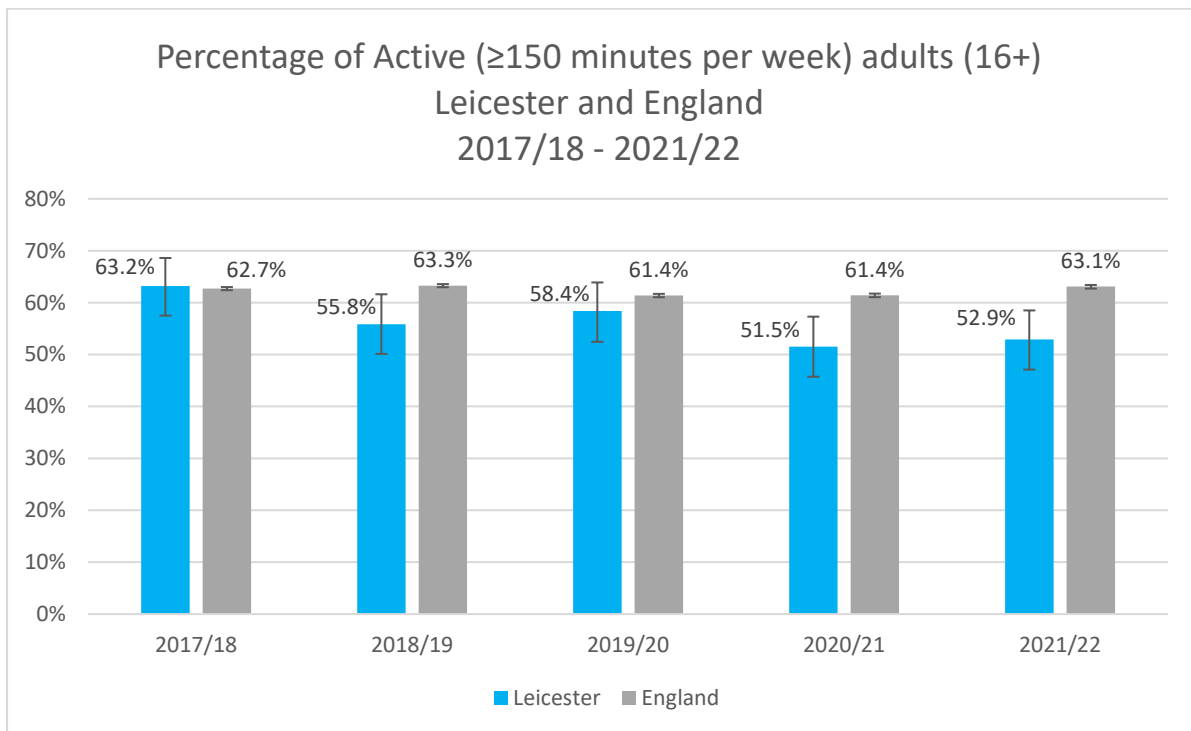
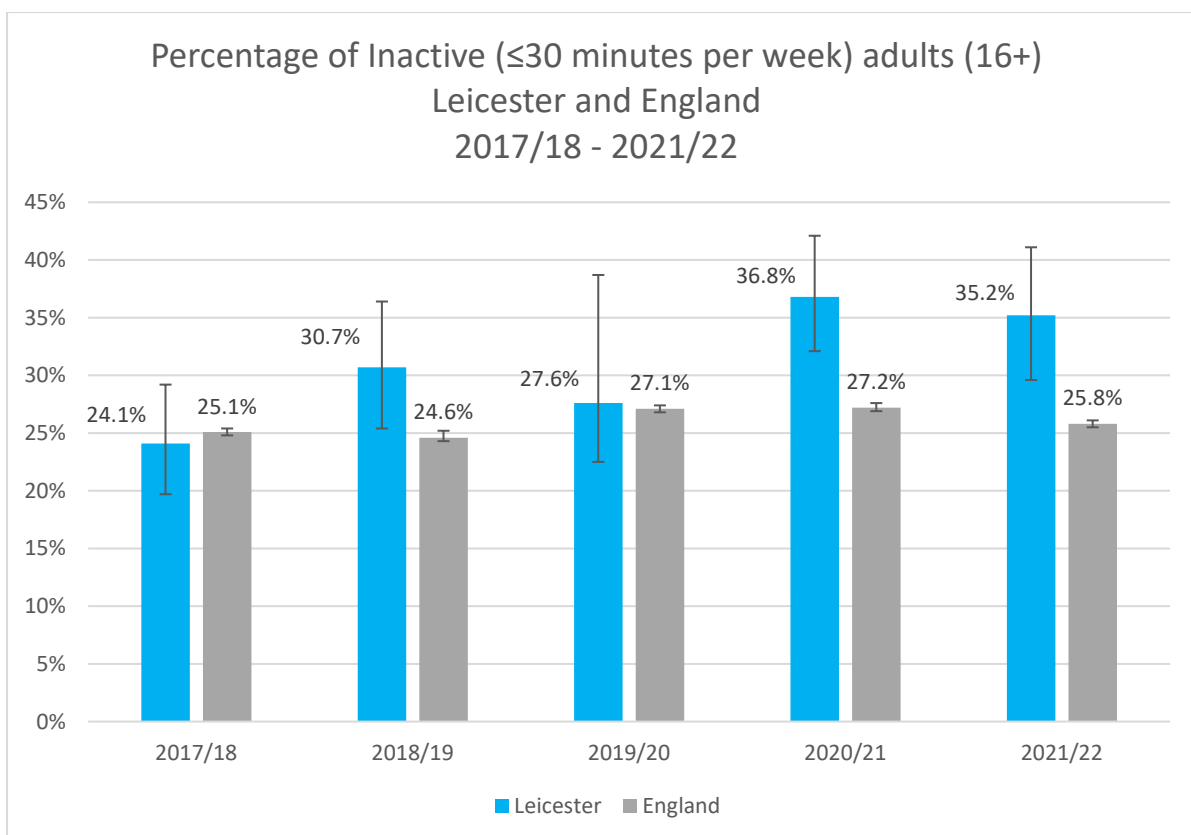


Figure 2 Physical activity Levels for Leicester and England



Source: Active Lives Survey, 2021-22

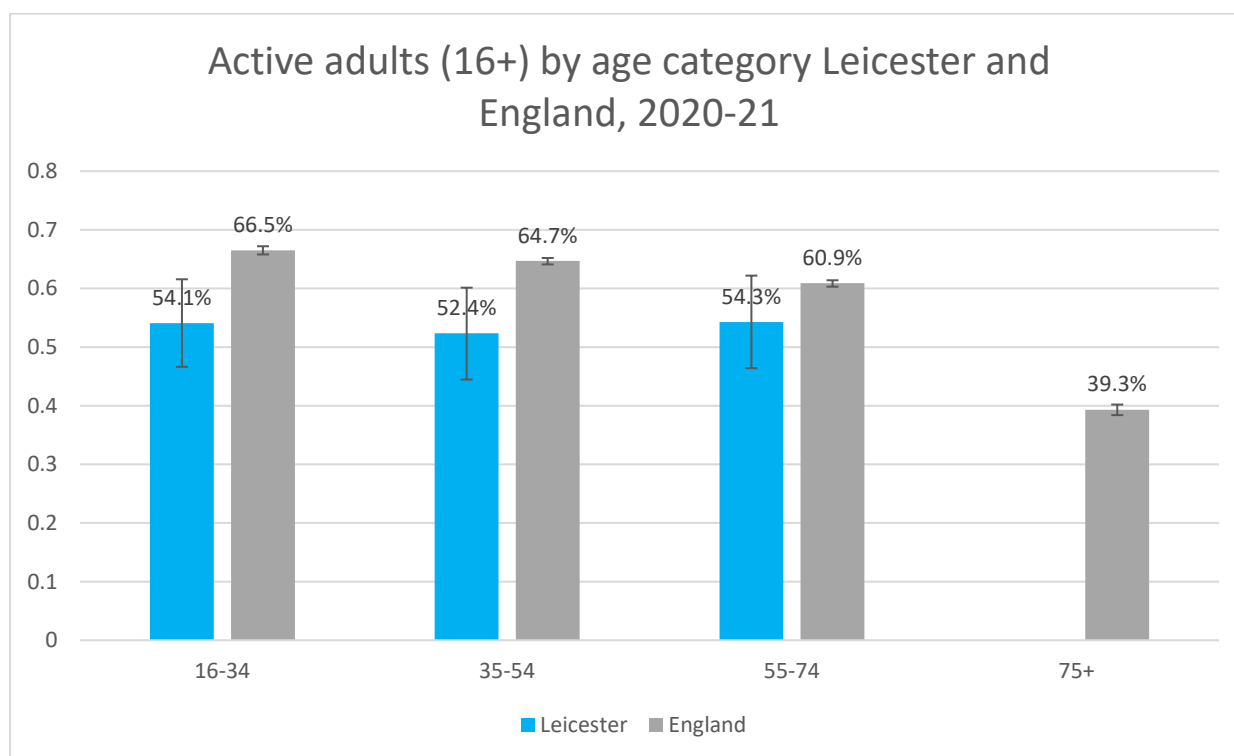
2.2 PHYSICAL ACTIVITY AND AGE

Physical activity levels are generally higher in younger ages and lower in older age groups. Demographic data from the Active Lives Survey (ALS) is unavailable for the 2021/22 period; the most recent demographic data available is for 2020/21.

Figure 3 presents the data from ALS 2020/21. This recent data shows levels of active and inactive adults (aged 16+) in England across 4 age categories. National data clearly shows that physical activity levels decline with age while the local data shows no significant difference in physical activity levels by age group. Data is not available for those aged 75+ in Leicester.

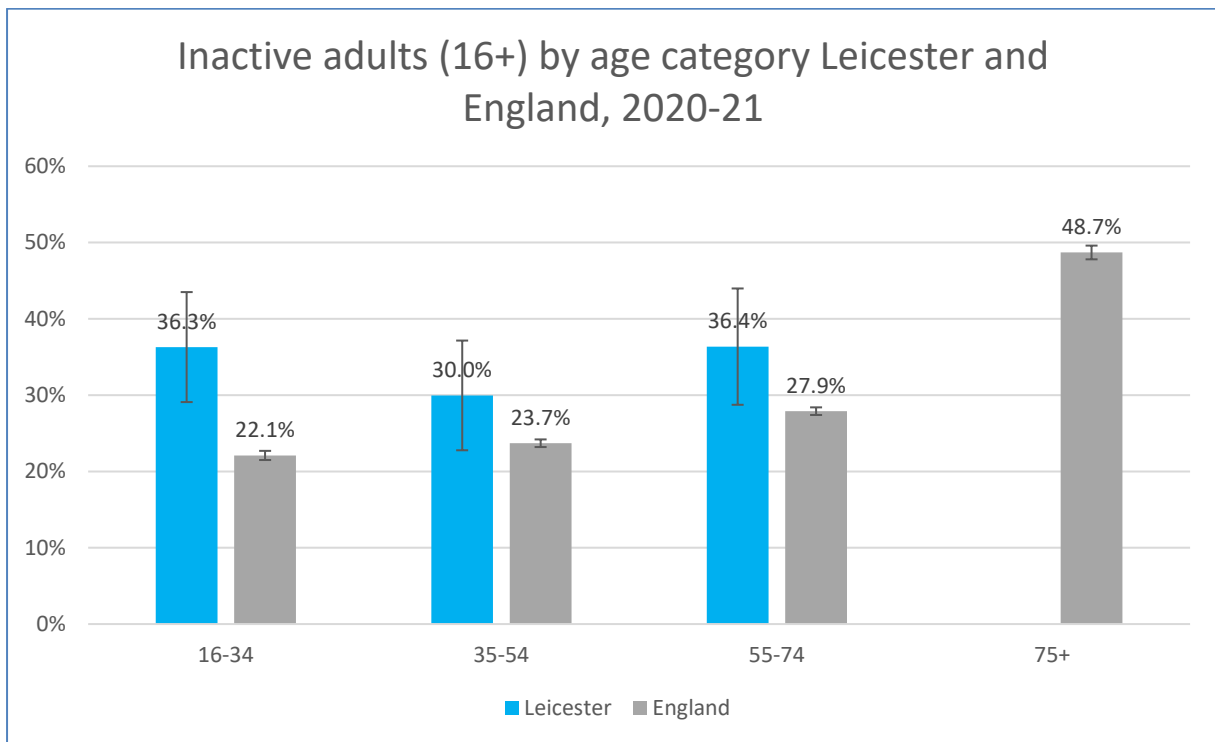
Figure 4 shows a similar pattern represented among inactive adults in Leicester, 36% of 16–34-year-olds and 55–74-year-olds report less than 30 minutes of physical activity per week. Among the age groups, individuals aged 35-54 report the smallest proportion, with only 30% engaging in less than 30 minutes of physical activity per week.

Figure 3 Active adults by age category in Leicester and England



Source: Active Lives Survey, 2020-21

Figure 4 Inactive adults by age category in Leicester and England



Source: Active Lives Survey, 2020-21

2.3 PHYSICAL ACTIVITY AND GENDER

The ALS 2020/21 shows that nationally females are less active than males, whereas Leicester data does not show any significant difference in physical activity by gender. In Leicester, 47.8% of men participate in 150+ minutes of activity a week in comparison to 54.2% of women.

From 2019/20 to 2020/21 physical activity rate for women increased by 2.5% while in contrast, it decreased by 14.9% for men.

Similarly, the proportion of inactive males has increased by 14% from 2019/20 to 2020/21 while females saw only a 3% increase.

Figure 5 Active adults by gender in Leicester and England

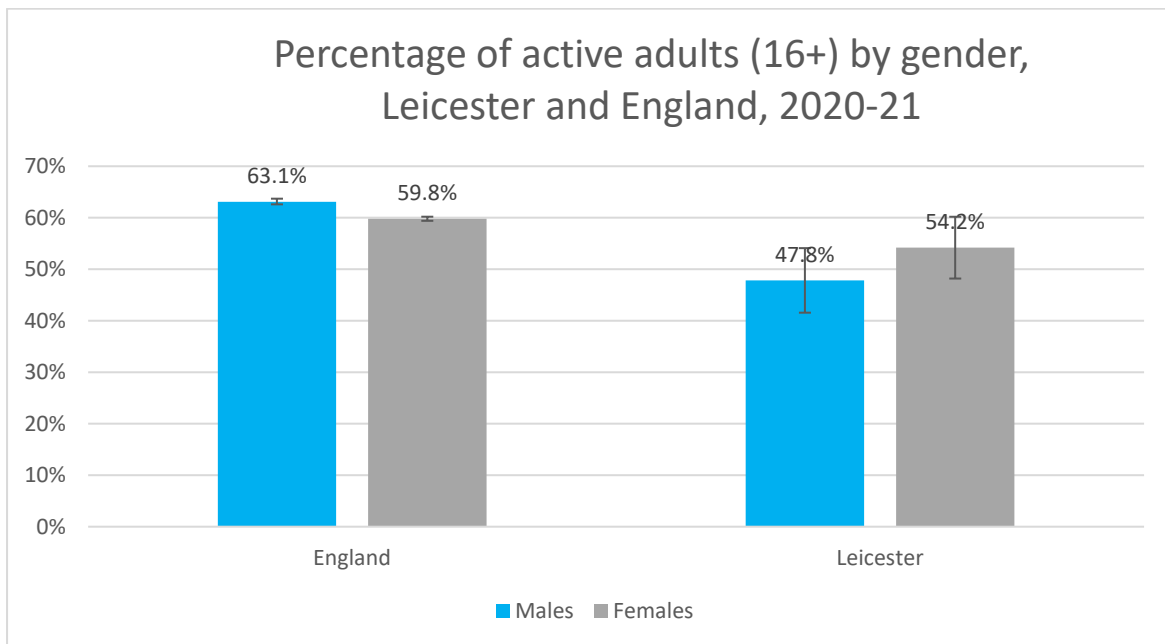
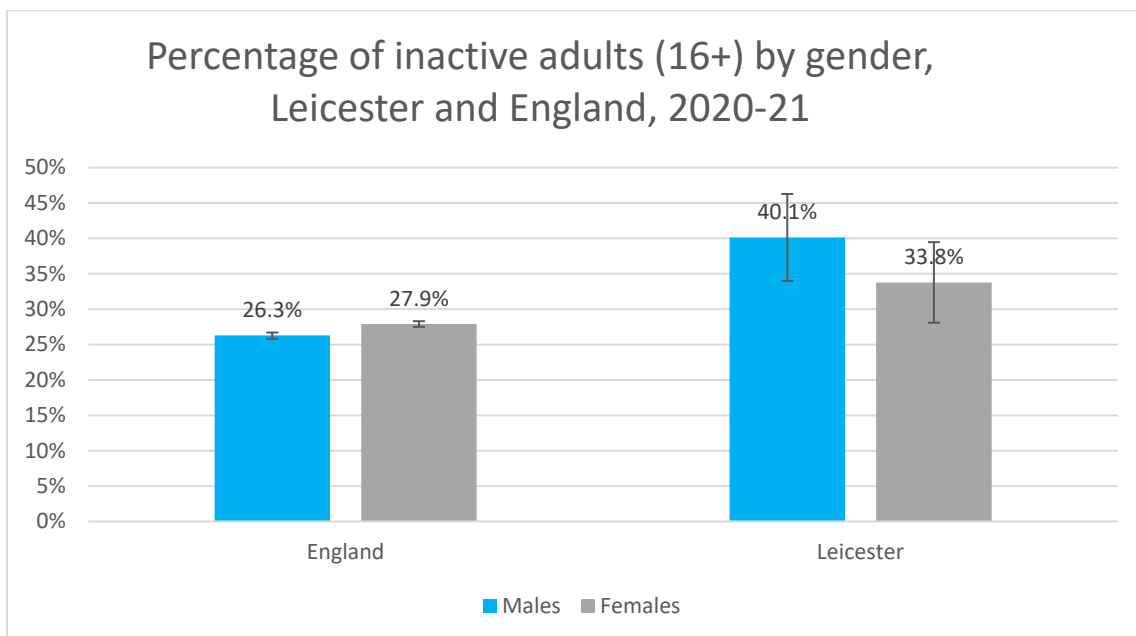


Figure 6 Inactive adults by gender in Leicester and England

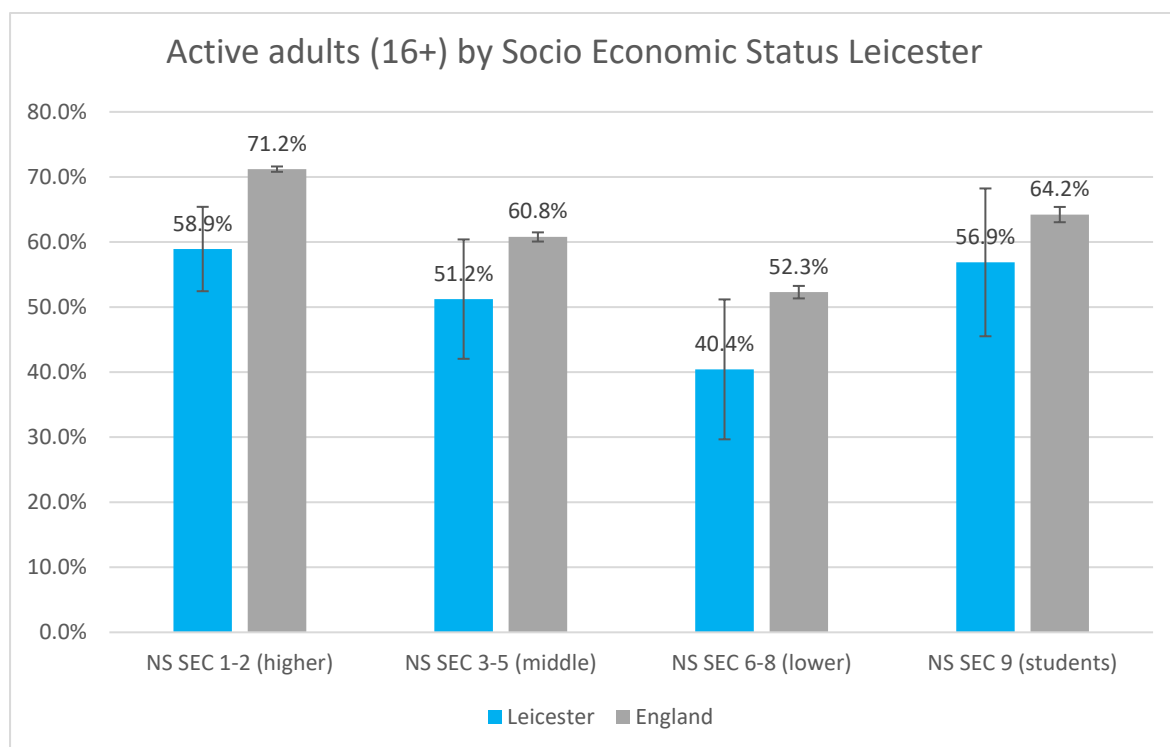


Source: Active Lives Survey, 2020-21

2.4 PHYSICAL ACTIVITY AND SOCIAL STATUS

Figure 7 shows a clear association with social status and inactivity (<30 minutes a week); People who are in routine/semi-routine jobs and those who are long term unemployed or have never worked (NS-SEC 6-8) are the least active group of all social classes (40.4%).

Figure 7 Active adults by social status in Leicester

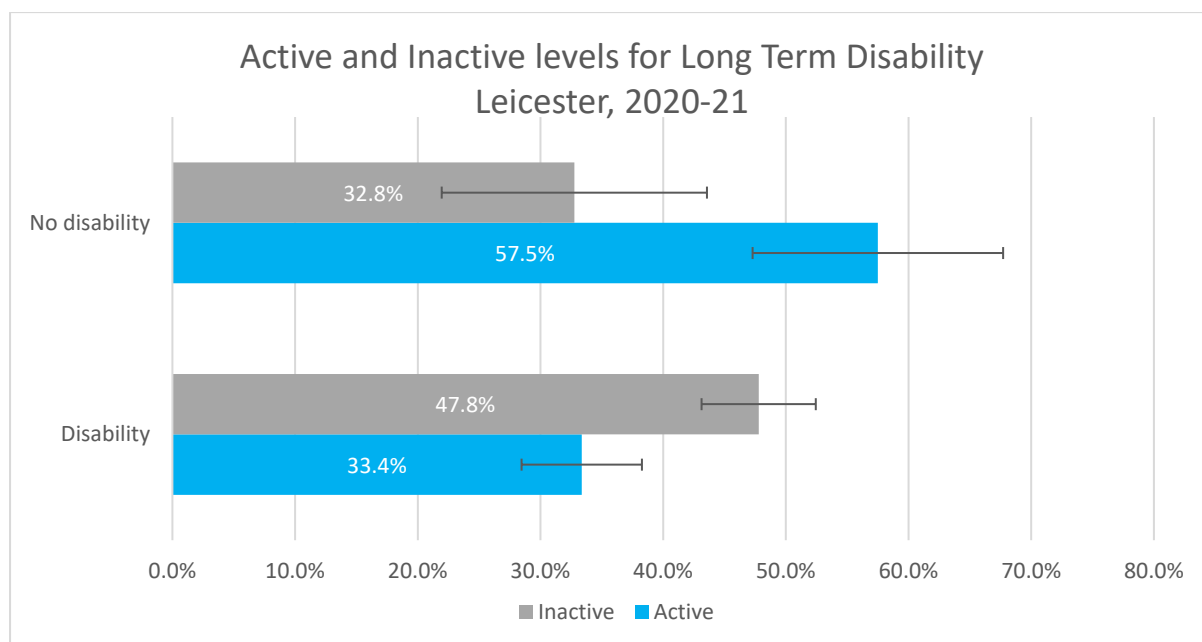


Source: Active Lives Survey, 2020-21

2.5 PHYSICAL ACTIVITY AND DISABILITY

The Active Lives Survey 2020-21 shows that in England those living with a long-term limiting disability are more likely to be inactive (42.4%) than those without a disability (22.6%). Leicester shows the similar pattern where 47.8% of those with disability and 32.8% those without a disability are inactive. Unlike national averages Leicester's rates are not significantly different. Moreover, national data shows that physical inactivity increases sharply as the number of impairments an individual has increases; 50% of those with three or more impairments are inactive.⁵

Figure 8 Activity levels for people with a long-term limiting disability in Leicester



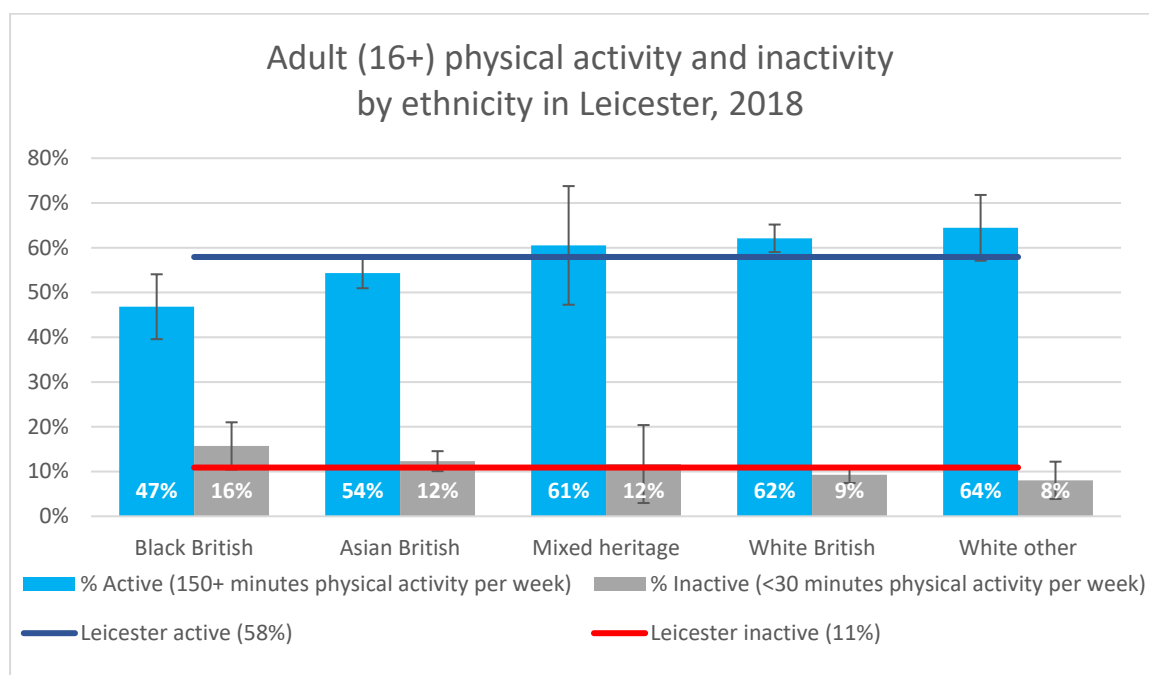
Source: Active Lives Survey, 2020-21

2.6 PHYSICAL ACTIVITY AND ETHNICITY

Limited evidence is available regarding how various religions and beliefs influence weight management and physical activity, but there is some indication that people with South Asian religions may prioritise collective health, emphasizing the family over the individual.⁶ Religious norms, such as Muslim or South Asian dress codes, limitations on women's movement outside the home, and post-marriage cultural obligations, can hinder physical activity participation, particularly for South Asian or Muslim women, who may prioritise tradition over physical activity. Additionally, the lack of culturally sensitive and segregated indoor facilities and services can discourage physical activity among some individuals from Black and Minority Ethnic (BME) groups, as they expect facilities to align with their religious and cultural practices, including single-sex options.

Figure 9 shows levels of physical activity vary between ethnic groups. In Leicester, the highest levels of inactivity are found in Black British and the lowest levels are seen in Other White ethnic groups but there is no statistical difference between these groups and the Leicester average.

Figure 9 Inactive adults by ethnic group in Leicester



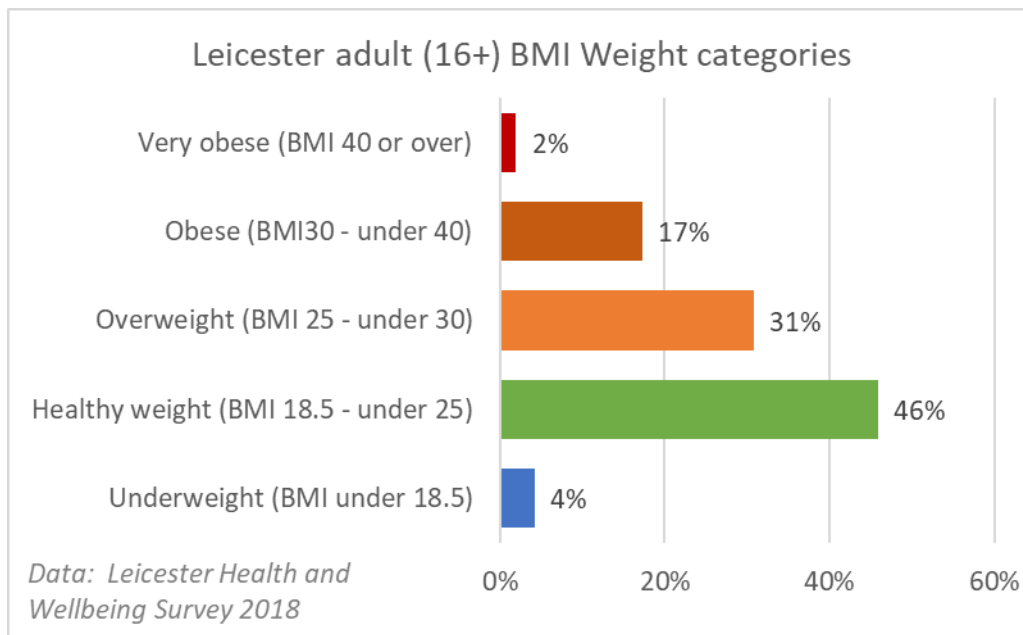
Source: Leicester Health and Wellbeing Survey 2018

2.7 PHYSICAL ACTIVITY AND WEIGHT

The Active Lives Survey covers the whole of England and provides estimates for excess weight (overweight or obese BMI classification) at a local authority level for adults aged 18+. This indicator is age-standardised and accounts for underestimation and overestimation when respondents provide their height and weight used in the BMI calculation. This makes the Active Lives Survey the most reliable indicator for comparison of excess weight between local authorities and England. In 2019/20 the Active Lives Survey estimated the level of excess weight among adults (18+) in Leicester at 65.9%, which is statistically similar to England overall at 62.8%.⁷

The Leicester Health and Wellbeing Survey is a local survey of a representative sample of Leicester residents aged 16+. This survey draws on respondents from a different age group and is processed in a different way to the indicators derived from the Active Lives Survey so the two should not be directly compared. The Health and Wellbeing Survey allows for distinction between BMI categorisations and variation across demographic groups within Leicester. The overall prevalence of obesity (adults aged 16+) in Leicester is 20% while 31% are overweight but not obese. Less than half of Leicester’s population are classified as having a healthy weight (46%), and 4% are underweight.³

Figure 10 Weight categories in Leicester residents



Source: Leicester Health and Wellbeing Survey 2018

BMI is a useful indicator for classifying individuals and comparing populations. However, a 2004 World Health Organisation expert consultation found the general BMI classifications are intended to understand the risks associated with excess weight in White European populations and are not appropriate for understanding risk in Asian populations, who are at greater risk of conditions such as Diabetes Type 2 and cardiovascular disease at lower BMI thresholds.⁸ As a result, risk thresholds, but not BMI classifications, are lower for Asian people. As of the 2011 census 37% of Leicester’s population was Asian. This means BMI data should be understood on the basis that crude overweight and obesity prevalence is likely to significantly underestimate the level of risk to Leicester’s population associated with excess weight.

Most Leicester residents (87%), including the majority of obese people, feel they have a healthy diet. However only 21% of Leicester residents say they eat the recommended 5 or more portions of fruit and veg per day, lower than the national rate of 29%.^{3,9} This suggests a poor understanding of what constitutes a healthy diet among Leicester residents.

Meals eaten outside of the home tend to be associated with higher intakes of sugar, fat and salt, and portion sizes tend to be bigger. The increasing consumption of out-of-home meals has been identified as an important contributing factor in increasing rates of obesity.¹⁰ At 137.6 fast food outlets per 100,000 population, Leicester has the 22nd highest rate in the country and is significantly higher than the national rate of 96.5.¹¹ 39% of Leicester adults have takeaway food at least once a week with those who are workless, sick/disabled, BME,

and aged between 16-34 are all more likely to eat fast food more than once a week, as are those with a poor mental health and wellbeing score.

As the most effective way of increasing our daily energy expenditure, physical activity plays a role in maintaining a healthy weight – including the prevention of weight gain and reduction in body fat – by balancing energy intake from our dietary intake. It also plays a role in the prevention of weight regain after substantial weight loss. However, irrespective of any change in weight, people who are overweight or obese will reduce their risk of cardiovascular disease and improve their health by being physically active. In combination with dietary change, physical activity can support weight loss.

The Leicester healthy weight JSNA is available here:

<https://www.leicester.gov.uk/your-council/policies-plans-and-strategies/health-and-social-care/data-reports-information/jsna/adults-joint-strategic-needs-assessments/>

2.8 OTHER

There are many other barriers to physical activity such as lack of facilities, lack of money, built environment, social peers, weather and having a health problem.

3. THE LEVEL OF NEED IN THE POPULATION

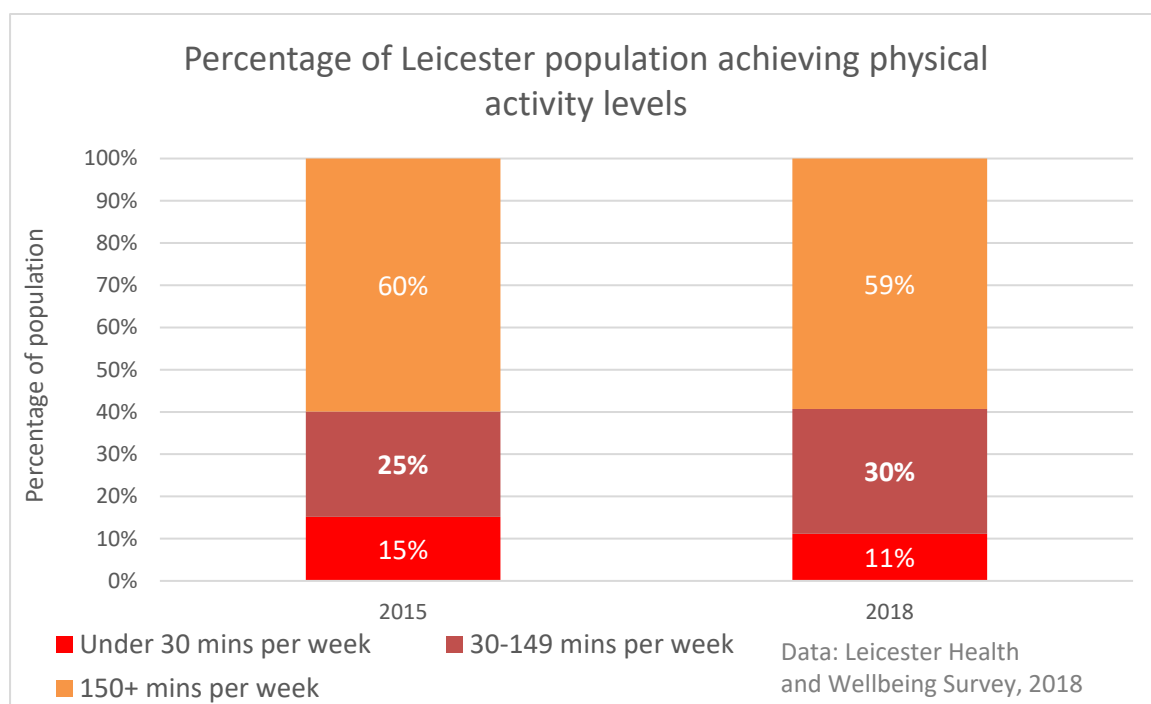
3.1 PHYSICAL ACTIVITY IN LEICESTER

The most reliable source of local data for Leicester residents' physical activity is the Leicester Health and Wellbeing Survey. This survey's sample is sufficiently large and representative of Leicester's population to allow analyses of variation between demographic groups and small geographies within Leicester.

The Leicester Health and Wellbeing Survey 2018 reports almost three in five (58%) of Leicester residents aged 16+ meet the recommended physical activity levels of 150+ minutes per week. Conversely, one in 10 (11%) of residents reported doing less than 30 minutes of physical activity a week and are therefore classified as physically inactive, and the remaining third (30%) of residents are do some, but not enough, physical activity each week.

Figure 11 shows overall physical activity levels in Leicester from the 2015 and 2018 health and wellbeing surveys. While there does appear to be a small change in the proportion of Leicester's population classified as physically inactive between 2015 and 2018, differences in overall physical activity and inactivity levels were not statistically significant.

Figure 11 Physical activity levels in Leicester

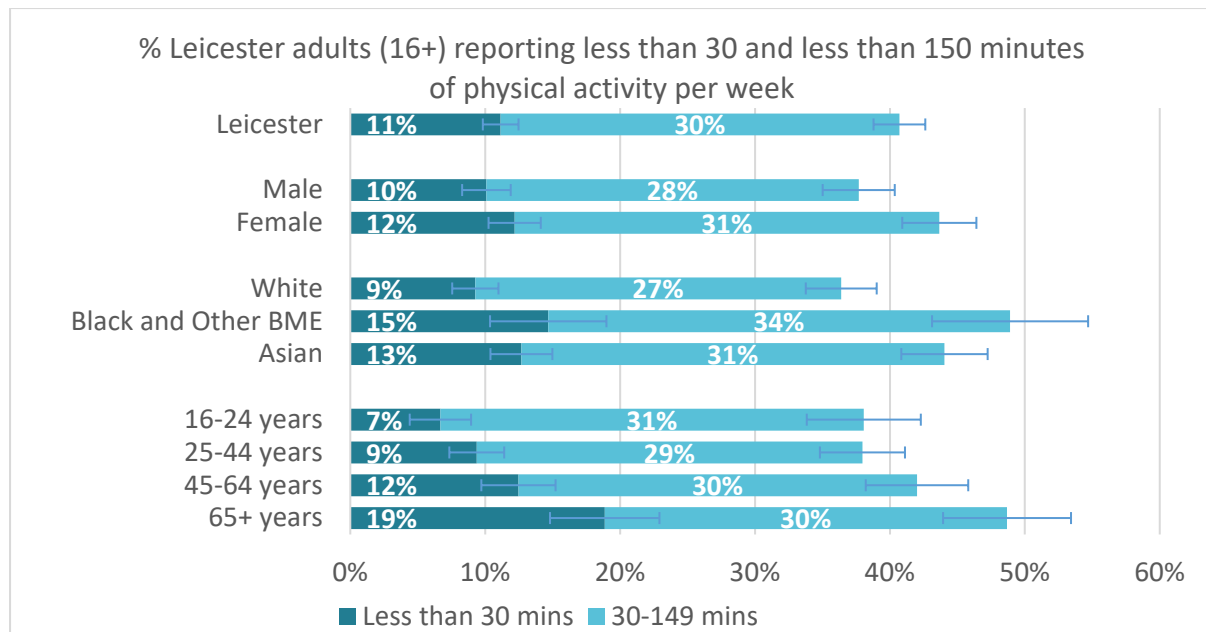


Source: Leicester Health and Wellbeing Survey 2018

Variation in physical activity levels in Leicester generally conforms to the picture described in section 2. Women are generally less likely to achieve the recommended 150 minutes of physical activity each week compared to men, although the difference is not statistically

significant at the Leicester level. People of Asian heritage are significantly less likely to achieve the recommended physical activity levels (56%), compared to ethnically White residents (62%). People of Black British ethnicity are significantly more likely to be inactive (16%). Physical inactivity rates increase with age group: 65+ year olds are three times more likely to be inactive than 16-24 years olds.

Figure 12 Levels of inactivity in Leicester by age, gender, and ethnicity

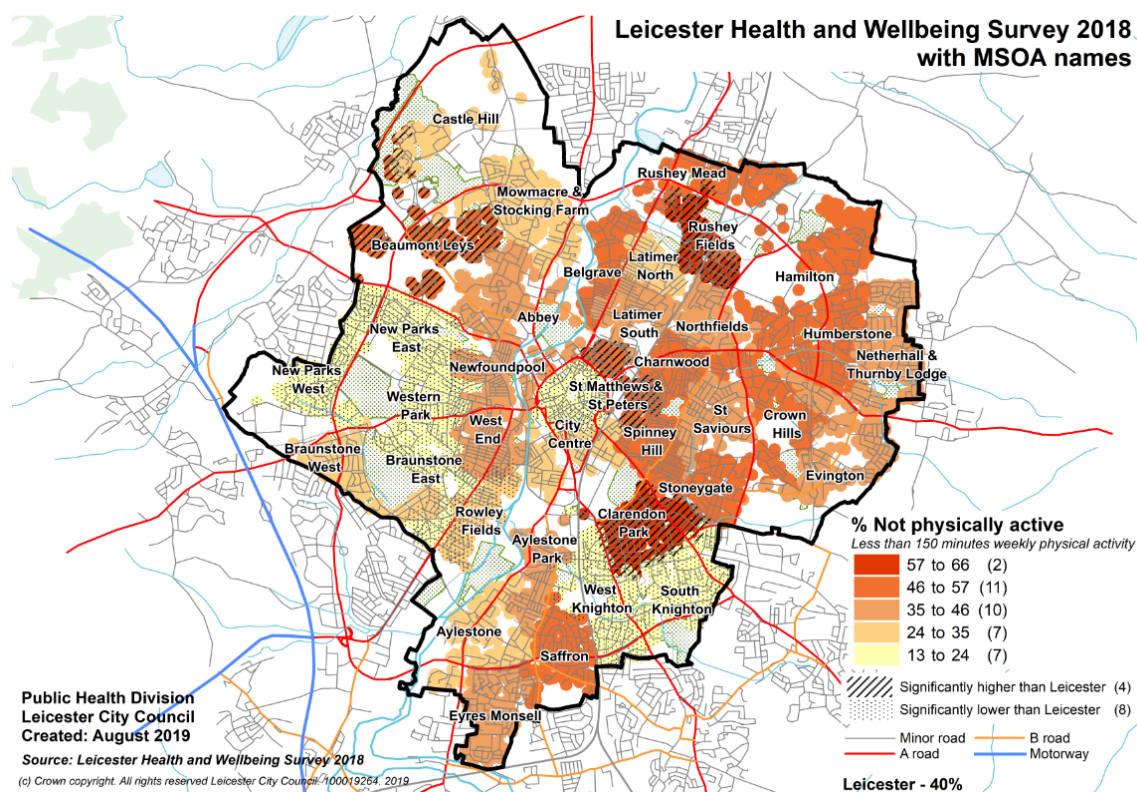


Source: Leicester Health and Wellbeing Survey 2018

Those in poor health, lacking formal qualifications, disabled, retired or with poor mental wellbeing were also significantly more likely to be physically inactive.

The figure below presents levels of inactivity across Leicester. The map below highlights that people in the East of the city are more likely to be physically inactive than those in the South and West. Rushey Mead, Clarendon Park and Beaumont Leys are areas that show the highest concentrations of adults achieving less than 150 minutes of physical activity a week.

Figure 13 Inactivity levels by MSOA area in Leicester



Source: Leicester Health and Wellbeing Survey 2018

3.2 LEICESTER AND COMPARATORS

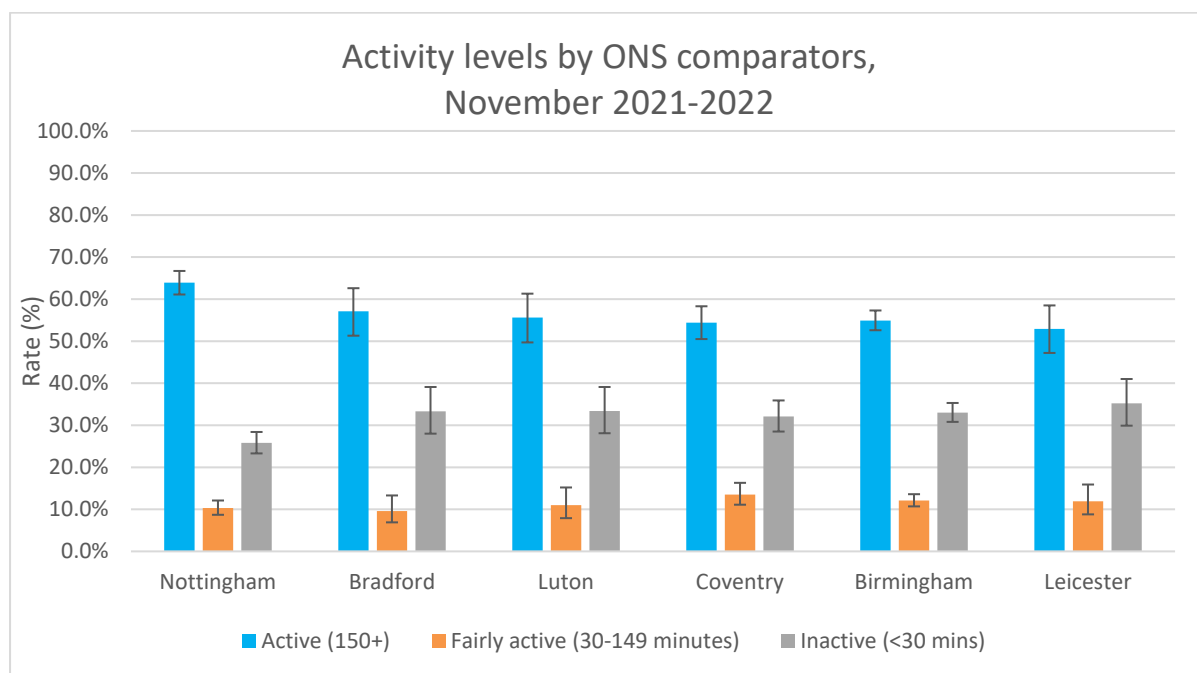
The Active Lives Survey covers the whole of England and provides estimates of physical activity rates for adults aged 16+ at the local authority level. The survey is the most authoritative data source for comparison of physical activity levels between Leicester, other local authorities and England, although it is not age-standardised to account for differences in population structure. The Active Lives Survey should not be directly compared to the Leicester Health and Wellbeing Survey as the questions used to calculate activity rates and the types of activity included are different.

In 2021/22 the Active Lives Survey estimated that 52.9% of Leicester residents met the recommended 150+ minutes of physical activity recommended by the Chief Medical Officer’s Guidelines¹, 11.9% were fairly active but did not achieve the recommended amount of activity, and 35.2% were classified as physically inactive, doing less than 30 minutes physical activity each week. Both Leicester’s residents meeting the recommended 150+ minutes of physical activity and physically inactive rates are significantly worse than England overall. The proportion of Leicester’s fairly active residents is similar to the National average.

Active Lives Survey data shows physical activity in Leicester has decreased by 5.5% from 2019/20. Over the previous 12 months, those physically active increased by 1.4% and those inactive decreased by 1.5%, although these changes weren't statistically significant.

Figure 14 shows the activity of adults against local authority peer comparators. Amongst its 5 comparators, Leicester ranked lowest for physical activity levels, and was significantly lower than England overall, and highest for inactivity, and significantly higher than England overall.¹²

Figure 14 Local Authority comparator data for physically active



Source: Active Lives Survey, 2021-22

3.3 TYPES OF PHYSICAL ACTIVITY IN LEICESTER

Leicester's Health and Wellbeing Survey 2018 found that walking for leisure (47%) and travel (35%) are the most popular forms of physical activity. Other popular forms of activity were heavy work around the house and participating in sports. There has been a significant increase in participation in sports, jogging/running, heavy gardening and all forms of cycling since 2015.

As people live increasingly busy lives the types of physical activity that people participate in have changed, with increases in participation in informal activity such as walking, cycling, playing with family in the park, gardening and recreational time spent in outdoor green space. However outdoor space in Leicester continues to be underutilised. Leicester residents are significantly less likely to exercise using outdoor space than England, with only 12% using

parks, the countryside or the coast for health or exercise purposes compared to 17.9% in England on at least a weekly basis.

Figure 15 Percentage of Leicester residents participating in activities in a normal week



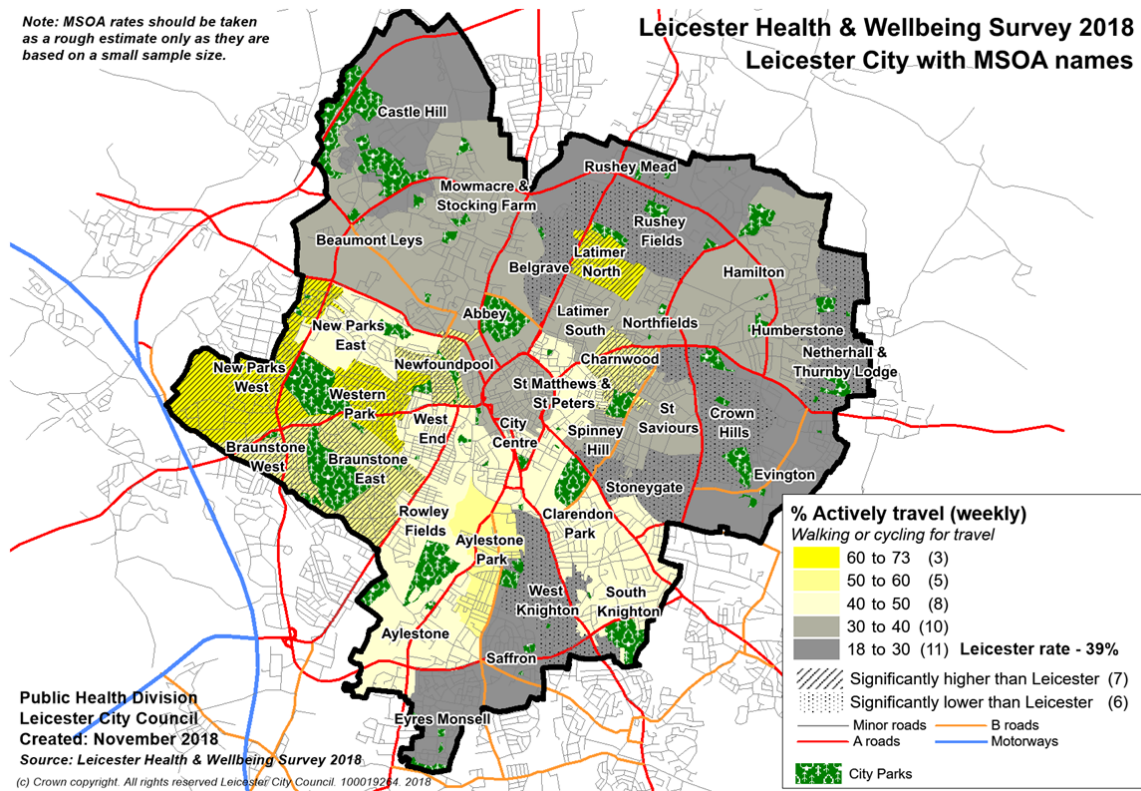
Data: Leicester Health and Wellbeing Survey 2018

Groups more likely to participate in physical activities are those aged 16-34 and residents in the West of Leicester. Groups less likely to participate in physical activities are those aged over 65, unemployed, disabled, those in bad health, social renters, and those with no formal qualifications.

3.4 ACTIVE TRAVEL

Two in five residents use some form of weekly active travel (either walking or cycling as a means of transport). One fifth of residents use a bike. Most residents do not have access to a bike. There are differences across the city when it comes to active travel; those in the West are more likely than those in other areas of the city to actively travel, whereas those residents living in the East are least likely to do so.

Figure 16 Percentage of Leicester population actively travelling (at least weekly)



Data: Leicester Health and Wellbeing Survey 2018

Young people, especially 16-18 year olds are most likely to walk for travel, and older people over 65 years and retired people are less likely to walk for travel.

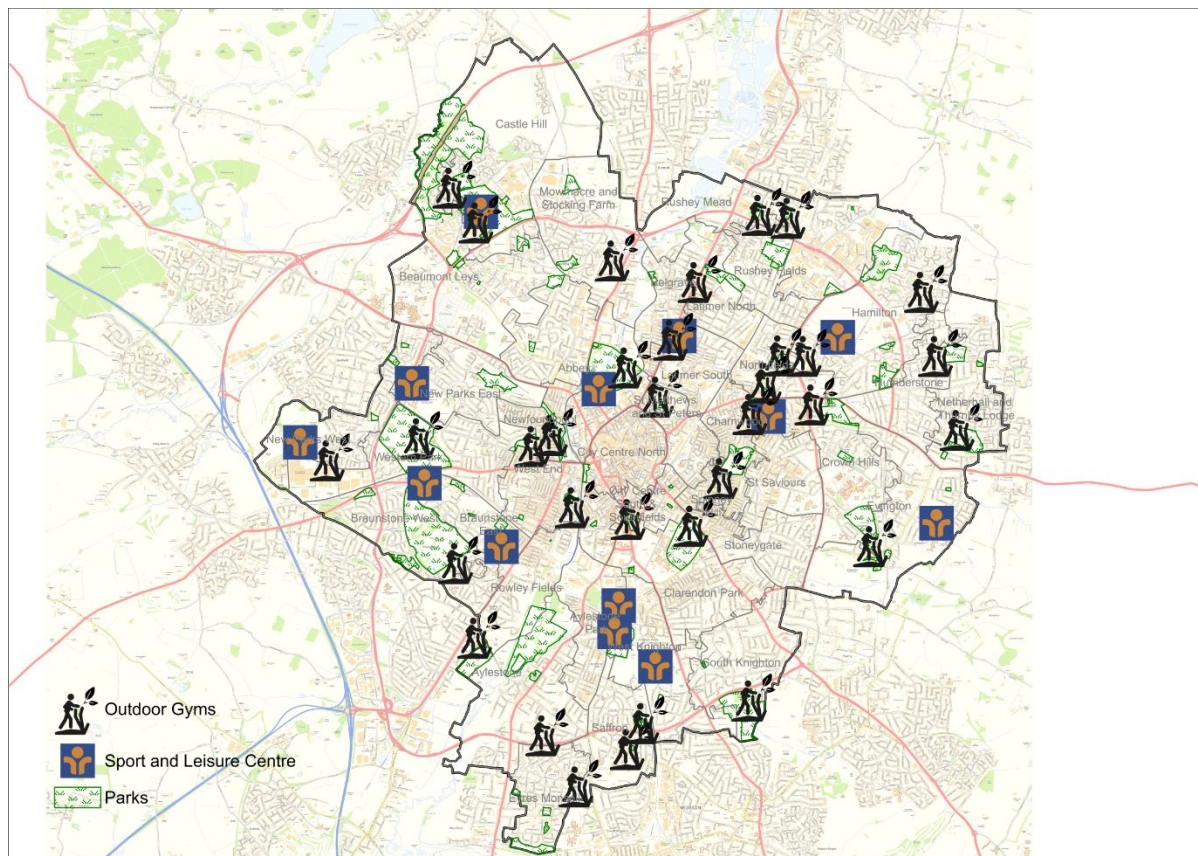
Just under a third of Leicester residents (31%) have access to a bicycle, with a fifth (20%) using their own bike. The proportion of residents who borrow a bike or hire and rent a bike is very small (1%). The majority of Leicester residents (69%) do not have access to a bike.

The over 65s and retired are more likely not to access cycling (87%), whilst young people 16-24 are least likely (59%). Over three quarters of women report having no access to a bike, compared with 61% of men. Asian/British (75%) and Black/British (78%) are also more likely to report having no access to a bike, whilst other White groups are least likely (56%). Other people reporting no cycle access are those living in the most deprived areas, owner occupied housing, and those who are long-term sick and disabled. Wards reporting high levels without cycle access include Belgrave, Wycliffe and Stonegate.

4. CURRENT SERVICES IN RELATION TO NEED

Leicester City has many assets to encourage and support greater participation in physical activity, from leisure centres and sports clubs, to, numerous parks and outdoor gyms to utilise for free.

Figure 17 Outdoor gyms, Sport and Leisure Centres in Leicester



Active Leicester – Sport Services provide Nine sport and leisure facilities across the city, which consists of seven 7 leisure centres, an 18-hole golf course 3g football pitches and an athletics track. The leisure centres offer a range of formal and informal sport and leisure opportunities including swimming, badminton, table tennis, climbing and football. Particular priorities for sports services include increasing the number of children participating in the Learn to Swim programme and those accessing gymnastics. The centre gyms are now accessible to anyone over the age of 11 and work is underway to increase this provision for 5 years and up. Some leisure centres offer holiday camps and this offer is likely to increase over the next few years. All centres offer concessionary pricing for children and a number of incentives to increase memberships. In addition, the service provides a portfolio of outdoor sport and physical activity opportunities across the council’s parks and open spaces. These range from formal sport fixtures i.e. rugby and football pitches and tennis courts to a boating lake for leisure activities. Sports Services, in partnership with a number of key stakeholders have recently launched the Active Leicester Strategy which aims to get 20,000 people more active across

the city over the next few years through both formal and informal activity opportunities in leisure facilities and the community.

Live Well Leicester undertakes a holistic assessment with clients referred from their GP or other health professional and some self-referrals. Subject to meeting the service specific referral criteria, the client will select which of the Lifestyle services to be referred to including weight management programmes, exercise on referral scheme, smoking cessation and others. In relation to physical activity Livewell provides tailored support to individuals with a long term condition or at high risk of cardiovascular disease via the exercise referral scheme. The scheme is a free 12 week programme that includes access to 121 and group sessions with a lifestyle advisor who provides tailored. Holistic advice on healthy eating, physical activity, mental wellbeing and advice on the recommendations for safe alcohol intake. As an incentive to encourage long term behaviour change all participants are given subsidised leisure centre memberships for 2 years. A programme of health walks across the city as part of the livewell offer from April 2020.

Outdoor Gyms - Leicester now has 32 outdoor gyms spanning the City. These gyms are a valuable community asset as they provide a free, accessible form of exercise for members of the public. A mixture of resistance and cardiovascular equipment is available in each location ranging from 6 pieces of equipment in Netherhall park to 18 pieces of equipment in Spinney Hill park. The outdoor gym equipment states that it is appropriate for those 14+years, at any level of fitness and is free to use. A link to a map of outdoor gyms can be found here <https://www.leicester.gov.uk/media/184082/outdoor-gym-map-2017.pdf>

Park run – these are free, weekly, 5km timed runs around the world. They are open to everyone, free, and are safe and easy to take part in. These events take place in pleasant parkland surroundings and encourage people of every ability to take part; from those taking their first steps in running to Olympians; from juniors to those with more experience; Park Run welcomes everyone. There are 2 park runs in Leicester city [Victoria Park](#) and [Braunstone Park](#)

Parks and Open Spaces – There are 130 parks in Leicester 13 of which are considered large parks, all offering something different for everyone. Facilities include playgrounds, outdoor gyms, walking and cycling trails and meditation areas. Leicester City's parks, open spaces, community gardens and riverside corridor provide opportunities to participate in [organised sport and fitness sessions](#) along with space to enjoy informal recreational physical activity opportunities with friends and family. Thirty one of our main parks are equipped with [defibrillators](#). Recreational activity, sport and fitness in parks and open spaces can provide long-term benefits to your physical and mental health wellbeing.

Community Activities – there are large number of community sport and activity programmes and links to help individuals and families get out and about and active within their community and be as active as possible such as organised walks, tennis courts and community sports

clubs. Finding an activity locally is a great motivator to build and maintain physical activity in to daily lives. Staying active in the community is a great way to meet new people and stay involved in what's happening where you live.

Workplace Health – it is well documented that a sedentary lifestyle can prove harmful to health, however a number of occupations involve extended periods of sitting for employees. There are many workplace initiatives that aim to reduce the amount of sitting people do through encouraging short breaks at regular intervals, taking the stairs instead of the lift and provision of standing desks. Leicester-shire and Rutland Sport (LRS) support workplaces to improve their health and wellbeing through:

- Workplace Health Needs Assessment - a tested tool to help businesses identify key priority areas of health and wellbeing.
- Opportunities for workplaces to get involved in competitions and Business Games, as well as training and workshops.
- Activity Tracker track your sport and physical activity levels, link to popular tracking apps and create workplace 'challenges'.
- Exercise, health, and wellbeing 'top tips' to support you to lead a healthy lifestyle in and out of work.

Walking in Leicester there are many opportunities across Leicester to walk more including walking to school and health walks. [Find out when and where walking events are in your area](#)

Choose How You Move (CHYM) – This website provides travel information for Leicester and Leicestershire, with a journey planner which allows residents and visitors to consider the different travel options available to them. The journey planner offers a variety of travel methods starting with the most active or sustainable travel options.

Cycling in Leicester increasing opportunities for people to cycle across Leicester City is a priority for the council. The level of change to the built environment and improvements for cyclists in Leicester has been unprecedented. The city has undergone much transformation with many new cycle routes and paths established. There has also been an increase in the availability of secure cycle parking, cycle training and guided rides.

Professional Sports Clubs – Leicester City benefits from 5 professional clubs all of which have extensive community programmes with a number of physical activity sessions on offer to local people who wish to improve their fitness, learn new skills, lose weight or socialise with likeminded people. Types of sessions include walking sports, educational sessions on a wide range of health topics, sporting camps and match day opportunities, more information visit;

Leicester City in the Community - <https://www.lcfc.com/community>

Leicester Tigers Rugby - <https://www.leicestertigers.com/community/tigers-education>

Leicester Riders basketball - <https://leicesterridersfoundation.co.uk/pages/leicester-arena-sessions>

Leicestershire County Cricket Club - <https://www.leicestershireccc.co.uk/lcccitc.html>

Leicester Hockey Club - <http://www.leicesterhc.co.uk/>

5. PROJECTED SERVICES USE AND OUTCOMES IN 3-5 YEARS AND 5-10 YEARS

It is difficult to project service use as physical activity can be increased through wider societal changes. The promotion of physical activity will contribute to preventing and tackling a range of conditions, so the need for future services will need to be in line with projected increases in type 2 diabetes, heart disease, cancer and dementia.

6. UNMET NEEDS AND SERVICE GAPS

The data available highlights some key target groups where greater focus is needed to improve physical activity levels. These are:

- Women of any age
- BME groups
- Older adults
- People living with long term illness and disability
- People living in the most deprived areas
- Opportunities for family participation

Greater attention is needed within current service provision to support these at-risk groups and a better understanding of barriers and facilitators to utilising the many assets that Leicester City attains.

The Chief Medical Officer (CMO) Guidelines¹ suggest that regular exercise and physical activity is beneficial for individuals with a disability however there would appear to be the opportunity to increase the amount of and access to disability sport provision across the City.

There is a lack of suitable, structured activity provision for families to exercise together, whilst parks and open spaces are available for informal family friendly activity our leisure centres and sports clubs often offer adult and child physical activity sessions separately.

Whilst there is a vast array of physical activity opportunities across the city, often there is little uptake of facilities. More support and encouragement for local people to access formal and informal physical activity opportunities is required. A focus on encouraging people to increase their activity through informal activities such as walking, cycling and gardening may increase the number of Leicester residents who meet the CMO physical activity guidelines of 150 minutes per week. Small manageable changes to lifestyle can often be the catalyst for long term behaviour change.

7. RECOMMENDATIONS FOR CONSIDERATION BY COMMISSIONERS

Implementation of the Active Leicester Strategy to get 20,000 people more active. Ensure the development of a governance framework and action plan. Galvanise all those with a part to play in getting Leicester residents more active e.g. council services, professional clubs, amateur clubs, voluntary sector organisations, faith groups, community groups, universities, residential homes.

Promote the new CMO physical activity guidelines, in particular advice for individuals with a disability and support to GPs.

Encourage participation in informal physical activity such as walking, cycling, active travel and gardening through improved links with the community and voluntary sector.

Commission activities that encourage family participation to increase the numbers of local people becoming physically active and increase the opportunity for families to make lifestyle related long term behaviour changes e.g. Beat the Streets type activities. It is recommended that Leicester City Council build family sessions into the LiveWell offer.

Increase the opportunity for local residents to participate in community physical activity both formal and informal through the use of parks and open spaces and outdoor gyms through better promotion of facilities and support to access them.

Encourage and support local business to improve the health and wellbeing of their employees and reduce sedentary behaviour where possible in their workplaces.

Liaise with planning, transport and building partners to protect and encourage access to green space, active travel and other physical activity opportunities within the built environment

Utilise partnerships with key stakeholders such as professional sports clubs to encourage participation in physical activity amongst the hard to reach

Ensure qualitative feedback is gained from services to ensure future provision meets the needs of the community.

8. KEY CONTACTS:

Jo Atkinson, Consultant in Public Health, Public Health, Leicester City Council,
Jo.Atkinson@leicester.gov.uk

9. REFERENCES

- ¹UK Chief Medical Officers' Physical Activity Guidelines (2019). Available at: https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/829841/uk-chief-medical-officers-physical-activity-guidelines.pdf
- ² Active Lives Survey, Sport England (2021/22). Available at: [Active Lives | Sport England](#)
- ³ Leicester Health and Wellbeing Survey 2018. <https://www.leicester.gov.uk/media/185575/leicester-health-and-wellbeing-survey-2018.pdf>
- ⁴Public Health England, Everybody Active, every day: an evidence-based approach to physical activity, (2014) https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/374914/Framework_13.pdf
- ⁵ Active Lives Survey, Sport England (2020/21). Available at: [Active Lives | Sport England](#)
- ⁶ Lucas A, Murray E, Kinra S. Health beliefs of UK South Asians related to lifestyle diseases: a review of qualitative literature. *J Obes.* 2013;2013:827674. doi: 10.1155/2013/827674. Epub 2013 Feb 17. PMID: 23476751; PMCID: PMC3588185.
- ⁷ Public Health England, Public Health Profiles: Percentage of adults (aged 18+) classified as overweight or obese. Available at: <https://fingertips.phe.org.uk/profile/health-profiles/data#page/0/qid/1938132694/pat/6/par/E12000004/ati/101/are/E06000016/iid/93088/age/168/sex/4>
- ⁸ NICE, Public Health Guideline PH46, BMI: preventing ill health and premature death in black, Asian and other minority ethnic groups, (2013) <https://www.nice.org.uk/guidance/ph46/chapter/1-Recommendations>
- ⁹ NHS Digital, *Health Survey for England* 2017, Adult health-related behaviours tables, (2018). Available at: <https://digital.nhs.uk/data-and-information/publications/statistical/health-survey-for-england/2017>
- ¹⁰ Public Health England, Health Matters: Obesity and the food environment, (2018) available at: <https://www.gov.uk/government/publications/health-matters-obesity-and-the-food-environment/health-matters-obesity-and-the-food-environment--2>
- ¹¹ Public Health England, Density of fast food outlets (2018).