A means to an end – increasing participation in sport and physical activity
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Reports that have been submitted to Council can be downloaded from www.birmingham.gov.uk/scrutiny.
Preface

Cllr Zafar Iqbal, Chair of the Culture, Learning and Skills Overview and Scrutiny Committee

As Chair of the new Culture, Learning and Skills Overview and Scrutiny Committee, I have taken a broad view of the culture component of the committee’s remit. I suggested that committee members look at the potential to increase participation in sport and physical activity after being struck by examples in my own ward where supporting people to be physically active changed not only the lives of the relevant individuals but their wider communities. In some cases activity was informal, such as a walking group. In other instances efforts enabled women who had never taken part in a team sport before to do so.

More local authorities are connecting their sports strategies with the health and physical activity agenda. I have been heartened to hear from witnesses who work nationally that Birmingham is recognised as one of the lead local authorities in this area and delighted to hear that witnesses have made new links as a result of our evidence gathering. I hope that this report highlights where Birmingham is making a positive difference on a very important subject and where there is still work to do that needs to be a long-term Council priority despite the continuing resource challenges the authority faces.

Any inquiry is only as good as the evidence it received and I would like to thank all those who took the time to give evidence to the inquiry. I would also like to thank Scrutiny officers for supporting the committee in producing our report.

[Signature]
## Summary of Recommendations

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| **R01** | a) Continue work to identify and remove barriers to engagement for all citizens, especially the hardest to reach and most inactive.  

b) Work with existing structures like Sport Birmingham's Network, the Active Wellbeing Delivery Board, Wellbeing Service Operations Board and NGB forums to take a whole systems approach to identifying and building an effective delivery network for sport and physical activity such as walking; so that resources are grown and put to best use in order to bring the biggest benefit to inactive communities.  
c) Bring all stakeholders together on an annual basis to agree a shared action plan that goes beyond sport into wider activity initiatives and active travel. | Deputy Leader/Cabinet Member for Health and Wellbeing in partnership with Sport Birmingham and University of Birmingham School of Sport, Exercise and Rehabilitation Sciences | September 2015 |
<p>| <strong>R02</strong> | Ensure that a target is set and signed up to across all relevant agencies to aim to make Birmingham the most improved City/City Region, in terms of physical activity levels, in the country (by 2017) to recognise the importance of work in this area. | Deputy Leader/ Cabinet Member for Health and Wellbeing in partnership with Sport Birmingham and University of Birmingham School of Sport, Exercise and Rehabilitation Sciences | September 2015 |
| <strong>R03</strong> | Ensure that the City Council and partners explore how to incorporate innovation and the ‘unusual suspects’ such as Saheli and others into delivery, so that the inactive are catered for within the sport and physical activity pathway. Examples could include ‘buddying’ into current and future sports and physical activity projects to encourage sustainable physical activity. | Deputy Leader/ Cabinet Member for Health and Wellbeing | September 2015 |</p>
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| R04 | a) Ensure that the City Council continues work to develop an evidence base for future work with national and local partners to evaluate lessons learned on ensuring the diversity of the city's population in increasing participation in sport and physical activity.  
   b) This should include further specific work identifying the barriers for women and specifically for women from BME groups in engagement in sport and physical activity.  
   c) Explore the feasibility of a further Overview and Scrutiny committee investigation in the new municipal year to report back on b). | Deputy Leader/ Cabinet Member for Health and Wellbeing | September 2015 |
| R05 | That the potential for workforce initiatives that include student placements/volunteers to support an improved evidence base and increased range of 'community activators' for physical activity projects (for example those undertaken with third sector partners) be explored with University partners and other third sector providers. Work with schools, particularly primary schools, is key and this should be integrated into any initiative. | Deputy Leader in partnership with the University of Birmingham School of Sport, Exercise and Rehabilitation Sciences and other relevant Further and Higher Education establishments along with Third Sector Organisations | September 2015 |
| R06 | That the City Council looks at ways to reduce bureaucratic processes that might act as barriers to engagement and participation within its service provision, for example exploring the scope to streamline existing induction processes and those for new wellbeing centres to make it easier for potential users to use them. | Deputy Leader | September 2015 |
| R07 | That the StreetGames approach is incorporated into future work on sport and physical activity, to ensure that young people in Birmingham have access to non-traditional sporting activities in their local area. The concept of recognising Birmingham as a 'StreetGames' city be explored and further capitalised on. | Deputy Leader | September 2015 |
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| R08 a) That Councillors be both kept up-to-date with local activities in which the Council is a partner (e.g. relevant Active Parks programme schedules) and contacted at the project inception stage to inform who the Council and partners might work with locally to recognise their local knowledge and connections which could support active lifestyles. 

b) That this is integrated into work with Public Health and District Committees on healthy priorities and outcomes for Districts. | Deputy Leader/Cabinet Member for Health and Wellbeing | September 2015 |
| R09 That the City Council develops further existing policies to increase activity at work and campaigns both internally to its staff and Councillors and with partners to encourage the breaking up of sedentary time during the working day alongside increasing physical activity using lessons learned from local evidence-based campaigns. | Deputy Leader/ Cabinet Member for Health and Wellbeing 
In partnership with University of Birmingham School of Sport, Exercise and Rehabilitation Sciences | September 2015 |
| R10 Ensure all future major developments including transport are ‘active lifestyle-proofed’ to avoid inadvertently reducing opportunities for physical activity and active lifestyles through the use of the Cabinet Report Public Health Test for reports, shortly being introduced into the reporting template. | Cabinet Member for Health and Wellbeing/ Cabinet Member for Development, Transport and Economy/Chair of the Planning Committee | September 2015 |
| R11 That Planning colleagues provide clarity about the best way for the local authority to ensure that work on the Community Infrastructure Levy (CIL) Regulation 123 enables an appropriate percentage of CIL monies to be directed towards capital and particularly revenue which support active lifestyles and wellbeing – these could include public art. | Deputy Leader/Cabinet Member for Health and Wellbeing/ Cabinet Member for Development, Transport and Economy/ Cabinet Member for Skills, Learning and Culture | September 2015 |
| R12 That progress towards achievement of these recommendations is reported to the Culture, Learning and Skills Overview and Scrutiny Committee in September 2015. The Committee will schedule regular progress reports until all agreed recommendations are implemented. | Deputy Leader | September 2015 |
1 Introduction

1.1 Purpose of the Inquiry

1.1.1 Physical inactivity is increasingly recognised as an important precursor of chronic ill health with large costs for individuals and society in economic, social and cultural as well as health terms. Some powerful data made the case for our looking at how to support Birmingham’s citizens to be more physically active:

- Nationally, physical inactivity is responsible for around 17% of deaths or 1 in 6 and costing the country an estimated £7.4 billion a year\(^1\);
- Around 80% of Birmingham’s population are considered to be inactive\(^2\);
- Inactivity levels in Birmingham are estimated to cost over £20 million each year\(^3\).

1.1.2 Physical inactivity is recognised as potentially the most important modifiable health behaviour for chronic disease. There is good evidence to indicate that regular physical activity can reduce:

- Risk of cardiovascular disease, stroke and dementia;
- Type II diabetes;
- Blood pressure and
- Certain types of cancer.

1.1.3 Physical activity can also:

- Improve mental health and wellbeing including elevating mood and increasing cognitive function;
- Improve strength and flexibility and
- Contribute to healthy weight maintenance.

1.1.4 While Birmingham has made significant progress in encouraging its residents to be more active through the Be Active initiative and successor Active Parks programme, our witnesses were all clear that there is more work to do. Our core aim for the inquiry has been to strengthen the Council’s approach to increasing participation in sport and physical activity. As a result, we have focused in discussions on community-level participation over elite sport in the city.

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\(^1\) Evidence Gathering Session 1 (2014)
\(^2\) We recognised that some physical inactivity is the result of chronically limiting conditions.
\(^3\) Evidence Gathering Session 1 (2014)
1.2 Definitions

1.2.1 Physical activity is a general term used to describe any and all movements of the body. This deliberately broad definition means that virtually all types of activity can be of benefit including: exercise, sport, play, dance and ‘active living’ such as walking, cycling for transport also known as ‘active travel’, housework, gardening and work. The terms physical activity and exercise are often used interchangeably. UK guidelines for minimum levels of activity for health are set out in section 2 of this paper.

1.3 Terms of Reference

1.3.1 The key question for our Inquiry was: How is the Council enabling more people to take part in sport and physical activity?

1.3.2 Key lines of inquiry or further questions included:

- How are the Council and partners removing barriers to sport and physical activity, especially for those:
  - Currently inactive?
  - From the most deprived communities?
  - Where there are fewest facilities/least formal provision?
- What is working well in Birmingham and elsewhere?
- How are the Council and partners ensuring links between existing and planned programmes and projects to make the most of their potential to deliver across a number of Council priorities including:
  - Health and Wellbeing;
  - Community Cohesion and
  - Learning and Skills?
- How are the Council and partners enabling volunteers to develop and sustain opportunities for increasing participation in sport and physical activity - recognising increasing financial and organisational challenges?

1.3.3 The Inquiry was conducted via two formal committee meetings during October and November 2014 following an initial call for evidence in September; we heard evidence from a range of stakeholders.

1.3.4 The tight timetable for our inquiry meant that there were several aspects of potential work we were unable to look at. These included workforce issues and the role of national governing bodies
for sport. A full list of witnesses is set out in Appendix A and we are grateful for their time and contributions.

1.3.5 In producing this report we have taken into account findings and recommendations from the following Overview and Scrutiny Inquiry reports:

- 2014 Tackling Childhood Obesity in Birmingham;
- 2013 Changing Gear: Transforming Urban Movement through Cycling and Walking in Birmingham and
- 2011 Community and Sport – A Cricket Case Study
2 Inquiry Context

2.1 National

Physical Activity Guidelines

2.1.1 The first UK guidelines for physical activity were adopted relatively recently in 2004. Between then and the timeframe for our inquiry the structural and policy landscape for organisations with a remit for physical activity and sport has changed significantly. Public Health England (PHE) published the latest national framework to address the UK-wide problem of physical inactivity, ‘Everybody active, every day’, \(^4\) during our evidence gathering towards the end of 2014.

2.1.2 According to current UK guidance, how much physical activity you need to do to stay healthy or improve health each week depends on your age. Adults need to do two types of physical activity each week: aerobic or something which raises heart rate and muscle-strengthening activity. It is pointed out that adults can be active daily by accumulating activity in minimum duration chunks of 10 minutes and do:

- At least 150 minutes (2 hours and 30 minutes) of moderate-intensity aerobic activity that require moderate effort for most people such as cycling leisurely on flat ground or fast walking every week, and muscle-strengthening activities, such as gardening or yoga, on 2 or more days a week that work all major muscle groups.

OR

- 75 minutes (1 hour and 15 minutes) of vigorous-intensity aerobic activity such as running, cycling fast or a game of singles tennis every week, and muscle-strengthening activities on 2 or more days a week. Some vigorous-intensity aerobic activities may also provide sufficient strength-training for example circuit training. However, muscle-training activities don’t count towards the aerobic activity total so need to be undertaken in addition to aerobic activity.

OR

- An equivalent mix of moderate- and vigorous-intensity aerobic activity every week (for example 2 30-minute runs plus 30 minutes of fast walking), and muscle-strengthening activities on 2 or more days a week.

2.1.3 Guidelines for children are much higher. Children who can walk on their own should be physically active every day for at least 180 minutes (3 hours).

**Sport England**

2.1.4 Sport England’s role is to work to get more people in England playing sport regularly (defining sport broadly to include a range of physical activities) at a grassroots level and to develop sporting talent. Sport England’s counterpart UK Sport is responsible for supporting teams and individuals once they have been identified as elite athletes. Participation is the key performance measure for its own work and the organisations it supports.

2.1.5 It aims to work in partnership to create an environment in which more people in England aged 14 and above choose to play sport regularly. This work includes distributing grants across the country as one of the Lottery good causes. It also includes undertaking and commissioning research and analysis, notably the bi-annual Active People Survey, both to develop the evidence base for its own activities and to inform the wider sports sector.

2.1.6 Local government is a key partner for Sport England in delivering increased participation. Sport England is a consultee on sport-related planning decisions and works in an advisory role on sports development including infrastructure particularly with local authorities.

2.1.7 Sport England research shows that there is a correlation between deprivation and low levels of participation. In particular it indicates how poor sporting and active recreation infrastructure aligned to low levels of income and other deprivation factors can prevent sport and physical activity from becoming a central feature of people’s lives.

**2.2 Birmingham**

**Birmingham’s population and sport and physical activity**

2.2.1 Health inequalities within Birmingham and the city experiencing some of the highest incidences of poor health are well-documented. For example, male life expectancy varies by nearly 11 years between those living in the least deprived areas of the city and those living in the most deprived. The city experiences higher rates of death than the national average from preventable diseases such as coronary heart disease, stroke and certain cancers, as well as high levels of diabetes amongst its residents. All of these can be improved by increased levels of physical activity.

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5 NB Sport England’s counterpart UK Sport is responsible for supporting teams and individuals once they have been identified as elite athletes.
6 The Active People survey measures the number of people taking part in sport across the nation and in local communities. It is the largest survey of sport and physical activity carried out in Europe.
2.2.2 In the most recent Active People Survey (2013/14)\(^9\) 20.5% of those aged 16+ in Birmingham (said that they took part in sport and active recreation three times a week compared to the national average of 26.0%. More specifically women’s participation in sport and physical activity in Birmingham is low at 14.1% compared to the national average of 22.3%.

2.2.3 We know from local work that people classified within lower social grades\(^{10}\) and some Black and Ethnic Minority Groups are less likely to participate in physical activity and sport. We also know that disadvantaged young people in Birmingham participate in sport far less than their more affluent peers.

2.2.4 This evidence of poor health and low participation profiles suggests that people with a health condition might well find exercising, or movement in general, difficult initially. This poses significant challenges to engaging people in sustained moderate levels of physical activity before they can take steps to enjoy more active lifestyles.

**Birmingham’s aims**

2.2.5 The Council agreed three priorities in 2014 for sport and physical activity which aim to balance sporting excellence and wider community participation:

- Promote health and develop the prosperity of our citizens through removing the barriers to sport and physical activity, especially for those currently inactive and from the most deprived communities;
- Develop high quality facilities for national and international events as well as effectively manage as well as refurbish and re-provision existing leisure and sport stock across the city, creating affordable and sustainable facility provision to meet current and future needs of residents and
- Support and coordinate an excellence pathway from participation of the inactive through to elite participation.\(^{11}\)

**Leisure Transformation**

2.2.6 In support of these priorities, the Council agreed a Sport and Leisure Facilities Strategy and Framework Agreement with the aim of providing cost effective modern leisure facilities while safeguarding their future at a time of considerable budgetary restraint.

2.2.7 Following on from the redevelopment of Harborne Pool and Fitness Centre and the contract award for Sparkhill Pool and Fitness Centre, the Council’s Cabinet approved work to transform the provision of sports facilities across the city - including five brand new leisure centres - in September 2014. Tenders for these were being evaluated at the time of writing.

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\(^{10}\) As defined by Sport England which correspond with National Statistics Socio-economic Classification Categories 5-8

\(^{11}\) Evidence Gathering Session 1, October 2014
Relevant Council projects and programmes

2.2.8 The Be Active scheme was launched in September 2009 as a partnership between the Council and the NHS to tackle health inequalities such as low levels of activity, high rates of Coronary Heart Disease, Stroke, Diabetes, Obesity and certain Cancers by providing free access to physical activities for all city residents. It allocates free hours to local leisure centres based on local deprivation levels and the offer is differentiated across the city. Those living locally to sites in the most deprived communities have the most free access. The range of activities has been extended to include several sports alongside gym access although the total number of free hours has been reduced. It has successfully increased the number of people from the most deprived communities using leisure services – 74% of scheme users were not previously a member of a gym, leisure centre or swimming pool before joining.

2.2.9 Evaluation has indicated that those who have registered with the scheme are more likely to be young, black and poor and proportionately groups using the scheme the most include Bangladeshi and Pakistani women. While the scheme has seen a reduction in some of the income that some leisure sites have generated historically and an increase in associated costs across the city through increased use, independent cost benefit analysis has indicated reduced system-wide costs - that every £1 spent on the scheme has generated £21.30 of benefit to the system. In April 2013 the Public Health Function of what was previously NHS Primary Care Trusts transferred to the Local Authority and so the programme is now funded from Birmingham City Council's Public Health allocation.

2.2.10 The Active Parks programme builds on the original Be Active scheme by aiming to make the most of a selection of the city's 600+ parks and open spaces, in partnership with Birmingham Open Spaces Forum, as assets for structured physical activity effectively creating “Leisure Centres Without Walls”. A pilot scheme was held in 2014 using five city parks and Edgbaston reservoir. This was expanded to over 40 parks and open spaces from autumn 2014. Early findings (of the scheme) indicate new intergenerational take up and families exercising together. Feedback has been that by using the natural environment it has attracted people who would not have used a leisure centre and has changed perceptions about who can be active and where. From taking part in the scheme many people have then become involved in volunteering in their local communities.

2.2.11 In addition to these universal physical activity interventions, the Council’s Be Active Programme team have also worked with a range of partners to develop bespoke programmes for people with chronic conditions that can be improved with physical activity. Partnering with the NHS, this programme provides a referral route from people’s local GPs into the city’s leisure centres for patients to access support to exercise to improve a range of health conditions. We heard that this type of co-ordinated model of support for residents will be strengthened under the new Health and Wellbeing model for Leisure Centres.

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12 Evidence gathering session 1 (2014)
2.2.12 Council provision is clearly only one part of community provision for sport and physical activity in the city. Physical activity can and does take place in a wide range of settings. For example there are 800-900 groups in Birmingham that could be classified as sports clubs. We were reminded during evidence gathering that some are very small, inclusive and not about performance pathways for elite sport.

**Sport Birmingham**

2.2.13 Sport Birmingham is an independent charity established as a separate entity from the Council in 2014 and is one of a network of 45 County Sports Partnerships. It is currently funded primarily by Sport England and is tasked with being the gateway to the City's communities and ensuring that national and regional sport and physical activity resources have local reach.

2.2.14 It operates as a business-to-business entity that is working with other organisations such as National Governing Bodies rather than directly with individuals. We heard about its key role in coordinating and making connections throughout “all that space in middle area between getting people initially active and elite sport.” This includes raising awareness of sporting opportunities, inspiring people through sport and physical activity and encouraging more people to be active and stay active through supporting coach development and other volunteering.

2.2.15 The bulk of Sport Birmingham’s work is focused on 11-25 year olds. However it has recently taken on some new responsibilities and associated programmes which give it much broader reach. These include influencing the primary school physical education offer and running Schools Games in the city - an intra-schools competition in the city linking to a national competition. It also includes work on workplace wellbeing and activity. It is currently reviewing its action plan and is looking to develop its networks over the next few months.

2.2.16 The current structural landscape for sport and physical activity in Birmingham is summarised in Figure 1.
Figure 1 Sport and Physical activity structures in Birmingham

- **Sport England**
  - Birmingham City Council
    - World class events (WACG’s)
    - World class facilities (GMAC/NIA etc)
  - Schools
    - Leisure Centres
      - Be active
      - Playing fields
      - Parks
      - Facilities (swimming pools/leisure centres)
  - Sport Birmingham
    3rd sector
    Clubs
    NGB’s
    Universities & Colleges
    Private sector
    Etc.
  - BCC delivery
    - Elite sport and events
  - BCC strategic coordinator
  - Physically inactive

Highly competitive continuum of sport and physical activity informal
3 Findings

3.1 Remembering the transformative power of sport and physical activity

3.1.1 While we started the inquiry with some appreciation of the transformative power of sport and physical activity the various case studies presented during evidence gathering reinforced its importance. We heard that as individuals can be reinvigorated through physical activity and sport this in turn can reinvigorate communities.

3.1.2 Bringing people together to be active is an important way to make new connections within communities and perhaps even overcome some local fractures. Increasing accessibility and lessening barriers to opportunities are vital to making this happen and we were encouraged to hear that Birmingham is the subject of a national pilot project with Sport England and other partners in developing a toolkit to support opening up secondary school and community facilities so that they can be used safely for sport and physical activity.

3.1.3 All of the case studies we heard (see sections 3.2 and 3.6) highlighted the community aspect of their projects and the role of individuals also known as ‘community activators’ or community leaders. These are local people who, with suitable support, can enable other individuals to become active initially and then more active through training, mentoring and associated development. Sport England encouraged the Council and partners to continue to work with community groups to identify and assist individuals who can be community champions through sport.

3.2 Moving from inactivity to some activity generates the greatest health benefits

3.2.1 We heard a range of evidence that stressed that people moving from being inactive to being active in some way generates the greatest health improvements and benefits. That said we also heard from both academic and clinical experts that it is important not to confuse increasing physical activity with a cure for obesity.

3.2.2 While it is possible to be both fit and fat, being fit does not eliminate the challenges associated with obesity and meeting current national physical activity guidelines is unlikely, in itself, to support weight loss or prevent weight regain. Evidence indicates that activity is needed above and beyond national guidelines that is more often and/or of greater intensity to support weight loss. However meeting current physical activity guidelines does make a big difference, notably in reducing visceral fat or hidden fat around organs. Visceral fat is more difficult to measure than...
visible fat but is more detrimental to health. Being fit reduces the risk of premature mortality by half\(^{13}\). Contracting muscles through physical activity releases powerful anti-inflammatory chemicals which by reducing low-grade, long-term inflammation related to chronic stress can also reduce depression, anxiety, arthritis and many other conditions as well as those diseases already mentioned.

3.2.3 We heard that there is much that can be done at policy level to create activity-friendly environments with potential for community wide action linked to educational campaigns. One successful example of this, which Dr William Bird presented to committee, has been the ‘Beat the Street\(^{14}\) Walk to School Competition.

**Case Study – ‘Beat The Street’**

The ‘Beat The Street’ challenge has encouraged children to walk to school, and compete with schools to walk the greatest total distance. All participants have been issued with a fob which registers on sensors - or "beat-boxes"- sited at strategic points around the neighbourhood (initially Caversham in Berkshire). The higher the tally of "swipes" at different beat boxes, the more points won. 10% more people have met guidelines for physical activity after Beat the Street, and 22% are no longer inactive. Although it has focused on schools it also encouraged participation from GP practices, local clubs and businesses which helped to foster new community connections and so community spirit as well as greater physical activity.

3.2.4 Given the extent of the city’s inactivity and obesity problems across the lifespan, for example only 10.5% of residents aged 55+ engage in 30 minutes of moderate physical activity at least three times per week,\(^{15}\) it was made clear that, despite the financial challenges the city is facing, the Council and partners cannot afford to invest solely in preventative work to limit childhood obesity. We need to continue to devote resources to increasing physical activity in adults of all ages.

3.3 Breaking up sedentary time is as important as increasing physical activity

3.3.1 We learned that sedentary time and physical activity are independent risk factors for all-cause mortality and it was emphasised that physical activity only partially compensates for the risks associated with hours spent sitting no matter how much exercise is undertaken. This means that breaking up sedentary time is as important as increasing physical activity in supporting health improvements although the latter is perhaps emphasised over the former.

3.3.2 Witnesses highlighted places of work as an important target for reducing hours of sitting time as well as increasing accumulation of physical activity. They saw support for employee efforts to

\(^{13}\) Evidence gathering sessions 1 and 2, October and November 2014  
make both happen *during the working day* rather than around working hours as essential. So this might include actively encouraging staff to get up from their desks or during meetings a couple of times an hour to stretch, use stairs rather than lifts in their workplace and shorten meeting times as well as to ensure to take lunch breaks and incorporate some form of activity within them.

3.3.3 stair climbing was emphasised as an especially helpful activity to promote through the use of signage in view of its intensity - it burns more calories per minute than jogging - its low cost and the significant likelihood of it being incorporated into a working day. We heard about campaigns that had targeted particular groups successfully, for example a pilot scheme at Snow Hill station in Birmingham where people who were overweight had been more likely to respond to prompts to use stairs than those who were of healthy weight.

3.3.4 signs put in place to promote stair use are interventions termed ‘point-of-choice prompts’ as they are positioned at the point where pedestrians choose one alternative. They work by interrupting habitual behaviours at the point of their occurrence, allowing the replacement of unhealthy habits with health boosting alternatives. As a result, point-of-choice prompts circumvent the problems of memory and planning that may prevent the translation of good intentions into behaviour or action. Witnesses from the University of Birmingham’s School of Exercise, Sport and Rehabilitation Sciences emphasised that prompts were effective for all demographic subgroups and, with the right design, future campaigns could be devised to target specific groups of people.

3.3.5 less encouragingly, witnesses highlighted examples of redevelopment where stairs had been removed, and so possibilities for active ‘nudging’ or encouraging ‘covert activity’ as part of daily life, for example by using stairs at New Street station, had also been taken away.16 They hoped that future major development - be it for new work sites, public spaces, housing or transport hubs - addressed the importance of encouraging activity in their design incorporating appropriate inclines as well as stairs alongside lifts to support accessibility. The City Council and its partners were urged to be creative in identifying both potential resources to secure suitable infrastructure improvements and means to encourage people to be active in different ways including considering the potential for public art as an attraction for activity outdoors.

3.3.6 Witnesses recognised that enabling staff to be more active at work would require a significant change in culture for most workplaces across sectors while also recognising opportunities from some large organisations that offer employee wellbeing plans. As a result they emphasised the need for ownership of efforts by senior management to actively reassure staff, beyond broad guidance, that it is both acceptable and important to take time away from desks to be active. They emphasised the potential benefit to employers in increased staff retention, engagement and effectiveness alongside the health benefits to individual employees. *Workplace Challenge*17 was a

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16 We have since been advised that stairs will be reinstated at New Street station at a later stage in the upgrade scheme
17 [http://www.workplacechallenge.org.uk/birmingham/](http://www.workplacechallenge.org.uk/birmingham/)
motivational online tool referenced that the Council and partners could be promoting and using to supplement existing work.

3.4 Understanding what is meaningful to individuals is essential

3.4.1 Our starting point for the inquiry was looking at opportunities for structured physical activity. However witnesses quickly enlightened us that a physically active lifestyle comes in many shapes and forms. Many witnesses emphasised the necessity of increasing participation in sport and physical activity, both in enabling people to get started and to do more, as a means to an end not the end in itself. In this way, exercise in whatever form it takes can become a part of a much greater experience and is more likely to deliver sustainable change at the scale required.

3.4.2 We heard that research has made clear that inactive people require a tailored, flexible approach that meets their need if they are to become and stay active. So the starting point for thinking about ways to increase participation needs to be at the level of individuals and who is around them. The social aspects of sport and physical activity are a major contributor to why people stay involved. People who enjoy being active via informal routes, such as recreational walking or cycling, often turn to sport where it is available to them as a way of getting more of the ‘feel good’ factor and spending more time with family and friends. Embedding opportunities for physical activity within existing community activities was cited as an important way to do this. For example, Sport England highlighted work on the potential to work with faith groups to do this.

3.4.3 Reflecting what is meaningful to individuals is essential in the marketing of activities as well as the type of activity offered along with using marketing methods which mean most to them. Who communicates the message and how as well as what they communicate are important considerations.

3.4.4 Hearing about activities and being encouraged to take part in them from a trusted source is the course most likely to be favoured by those individuals the Council has been looking to target most in its work on participation, that is people who are the most inactive from the most deprived parts of the city. Making the tone of supporting materials friendly, realistic (for example using images from Be Active participants rather than models) and Birmingham-oriented has been deliberate and important as people are more likely to value and act on advice from people they can relate to.
Case Study – Bob

We heard the composite case study of ‘Bob’ who was a fictional character based on several real life examples. Bob was likely to be unmoved by traditional and generic marketing approaches for behaviour change for example urging him to get off the bus a stop early and walk home or to work, or to commute by bike. These, while well-meaning, ignored the barriers such as poor weather, safety concerns or limited cycle routes to what would constitute significant change for him. However Bob was much more likely to develop his fortnightly walk of several miles to his team’s football ground to watch a home game in order to become a walk leader at his grandson’s school not least because he did not view the walk as exercise (as valid as it is) and his grandson was a strong enough motivation to overcome potential barriers to activity.

In devising and communicating a city offer, Bob’s case study highlights that the starting point needs to be one of sport and physical activity for all, identifying individual motivations as far as possible and encouraging participation across the lifespan that emphasises functionality over age. We cannot assume what people can or cannot do and choose to do purely on the basis of how old they are.

3.5 Being realistic about relapse

3.5.1 We heard that within sport and physical activity, a relapsing/starting again pattern of behaviours while a challenge is almost inevitable as a feature of all behaviour change models and a natural stage. Recruiting and then supporting people to be involved in a project or short term promotion they enjoy is one thing - supporting them into a habit for life is a much bigger challenge.

3.5.2 Crucially we do not know definitively how to encourage and support the majority of people to stay active over their lifespan. However enabling people to understand that not being active is damaging and to feel that support to be more active is available are important aspects of successful behaviour change. We also heard that the more people try, relapse and crucially try again, the more likely it is that behaviour change to a more active lifestyle can be sustained as feelings of failure can be lessened and more fitting approaches can be identified from experience.

3.5.3 Evidence was clear that enabling activity is not solely about the individual deciding to exercise – it is also about providing a range of ways for them that fit with what they want to do to be active. Witnesses saw this as an important role for the Council in working with a range of partners.

3.6 Birmingham is delivering some of the most influential work

3.6.1 Sport England and witnesses who work nationally emphasised that Birmingham is undertaking some of the most influential work in the country around increasing physical activity. There are a

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number of successful local case studies from the city and other authorities can learn from along with keeping an eye on learning from elsewhere and we heard from several.

Case Study – StreetGames

StreetGames is a charity commissioned by Sport England to share its learning about enabling disadvantaged young people to be active and it has a strong national track record in promoting youth sport and physical activity/health with various awards including Lottery Sports Project of the Year 2013. Its experience has been that latent demand for sport and physical activity is high amongst disadvantaged young people “Provide the right type of offer and disadvantaged young people will get active and stay active.”

In Birmingham the organisation has delivered the ‘Let’s Get Fizzical’ programme¹⁹ in South and Central Birmingham to overweight and inactive young people for the past three years as part of the Be Active programme funded firstly by a primary care trust and now by the Council’s Public Health team. It has also worked with the Council to pilot a new Doorstep Sports Club programme that aims to bring various, informal, fun sport, defined in the broadest sense, to disadvantaged young people aged 14 to 25. Doorstep sport aims to break the cycle that can emerge in times of austerity where a reduction in sports provision means less provision across sectors as well as a reduction in related community organisations and volunteering. StreetGames has heavily subsidised training workshops for community sports workers and volunteers to grow local capacity and sustain participation as well as offered links to festivals and major sporting events to inspire young participants. Doorstep sport also has few of the costs, social expectations and commitments that can shape traditional sport. To reflect its attractiveness to teenage girls StreetGames runs the Us Girls campaign²⁰.

¹⁹ See http://www.streetgames.org/www/sgplus/content/lets-get-fizzical
²⁰ See http://www.streetgames.org/www/ug/content/home?
Case Study – Saheli

Saheli is a charity which incorporates Saheli Hub. The latter is a social enterprise part-funded by Sport England based around an independent gym in Balsall Heath and established in 2006 as an organisation run by women for women targeting (although not working exclusively with) women of Black and Minority Ethnic origin to be more active. It now works in 4 postcode areas in some of the most deprived parts of Birmingham supporting women new to exercise to use both local leisure centres and to take part in outdoor pursuits. Partners include local GPs and the City Council’s Health and Wellbeing and Be Active teams. A fundamental part of Saheli’s approach is to recruit and train women from local communities to work with and motivate peers in turn to be more active. Once women are confident in exercising, Saheli then tapers its support with the aim of enabling women to be active independently.

It has delivered a range of activities through the pilot Active Parks programme as well as developed a door step club funded through Street Games. The latter offers non-mainstream and culturally sensitive opportunities for young women to be active and build confidence such as canoeing and rock climbing. Since then Saheli has established a parallel boys-only club.

Most recently Saheli trained 17 women over a year who had not run previously to complete the 2014 Great Birmingham Run half-marathon. The result of this work has been, with support from the Council and sponsorship from a healthcare company, the establishment of 2k and 5k runs in both Ward End Park and Handsworth Park to enable continuing training and to support more women to run in future.
Case Study – Bike North Birmingham

Bike North Birmingham is a £4.1 million project funded by the Department for Transport’s Local Sustainable Transport Fund to support active travel through cycling in the districts of Erdington and Sutton Coldfield from 2011-2015. It comprises a programme of new cycle routes and associated infrastructure as well as supporting cycling activities in and around workplaces, schools and communities. These have been designed to make cycling more accessible and get people cycling more of the time so helping to improve the environment, the local economy (by opening up employment opportunities) and health and fitness.

The project is partnership-based led by the Council’s Transportation team with support from Sport and Leisure colleagues notably through the Be Active programme and externally from Sustrans. A core aim of the project has been to develop a replicable, sustainable model that could be put in place as part of future programmes.

Initial monitoring indicated an increase in cycling on key routes in the project area between 2012 and 2013. Activities to which supported this increase include those targeted at commuters through the ‘Bike Work’ component of the project such as cycle surgeries at rail stations and establishing cycling user groups in a number of the 34 workplaces with which the project worked.

The whole school approach of the ‘Bike School’ strand of the project was highlighted as being particularly successful in both primary and secondary schools. It incorporates a mix of classroom sessions and skills development outside of the school day for staff and parents as well as students. In one primary school the cycle-to-school rate increased from 3% to 23% after a year of participating in the project. In another, women of primarily Asian and African Caribbean origin who learned to cycle as adults through one of Bike North Birmingham’s community schemes and are under-represented in cycling participation are now training children and parents how to cycle as they wanted to share their knowledge and skills following their own cycling success. As new, passionate advocates for cycling they are ensuring sustainable peer learning rooted in their local community21 with spin-off project partners including parks, the police and local churches.

Birmingham is regarded as leading the way in project work with secondary schools where there was initially little established good practice upon which to draw. Mountain Biking for GCSE PE has been established in several schools within the Erdington and Sutton Coldfield Districts as a brand new qualification developed through the project and is unique (there was no equivalent programme previously). It is now being expanded into a wider cycling GCSE which could be adopted elsewhere. The parallel Frame Academy programme is equally innovative through working with school design and technology and in some cases engineering departments to purchase cycling tools and equipment and training staff. It enables young people to learn sufficient cycle repair and maintenance skills to rebuild a salvaged bike that they get to keep at the end of a six week programme.

21 See https://storywoodcycling.wordpress.com/
Bike North Birmingham has informed the city’s new Cycle Revolution programme\textsuperscript{22} which seeks to promote sustainable travel options by increasing the attractiveness of cycling to people of all backgrounds. It includes offering 5000 free-to-use bikes to Birmingham residents through the Big Birmingham bikes programme\textsuperscript{23}, bikes on short and long term loan to individuals and to community groups along with the development of around 20 bike hubs in targeted areas. The target is for cycling to make up 5\% of all journeys by 2023 and for a 27\% increase in cycling in the Cycle City Ambition grant area (a 20 minute cycle commute to/from the city centre).

3.7 Continuing to improve Birmingham’s evidence base

3.7.1 We noted Sport England’s endorsement for the range of city projects we heard about during our evidence gathering from a national perspective as creative and effective good practice. We also heard that the city has established an important evidence base for these and other projects particularly in terms of social return on investment as part of the range of work it has undertaken to address challenges of physical inactivity. Data capture undertaken for the Be Active and Active Parks programmes was cited as vital work in understanding who is taking part or not and relevant behaviours.

3.7.2 Dr William Bird identified six main attributes to a successful physical activity scheme for us to consider in collecting evidence:

- Is it targeting the inactive population? (Baseline measures of who comprises this are needed)
- Is it getting those people more active? (<12 weeks)
- Is it keeping those people active? (>12 weeks)
- Is success measurable? (what metrics are to be used and over what period of time)
- Is it sustainable? (in terms of people, skills and funding)
- Is it scalable?

3.7.3 Continuing to develop this evidence base across all projects is seen as essential for both targeting existing and increasingly limited resources most effectively. It is especially important in attracting future resources at a time of unprecedented financial challenge across the public sector when investing in sport for its intrinsic value is likely to be assessed as less important among competing priorities than delivering on wider outcomes such as health, community cohesion and educational attainment. Ethnically diverse groups are under-represented in health research despite increased

\textsuperscript{22} See \url{http://www.birmingham.gov.uk/bcr}
\textsuperscript{23} See \url{https://www.birmingham.gov.uk/bbb}
rates of morbidity and premature mortality in these groups\textsuperscript{24}. Birmingham is well-placed to set right this issue in research undertaken locally.

### 3.8 Volunteering can help to sustain achievements

3.8.1 All of the projects we heard from emphasised the role of volunteers in enabling greater reach and bringing important community links and knowledge to work. However from most recent figures available from the 2012/13 Active People Survey it seems that nationally volunteering rates have decreased. Sport England also identified a continuing challenge for the Council at a time of reduced resources of really understanding the city’s third sector base that can support sport and physical activity through engaging potential participants and delivering commissioned projects.

3.8.2 Sport Birmingham is one local organisation that can support groups in developing their volunteer base for sport and physical activity and University of Birmingham presenters identified the potential to link suitable students with suitable projects to strengthen both their provision and evidence base. Nevertheless, witnesses were clear that not everyone can be a volunteer and not all projects can be sustained on a purely voluntary basis.

3.8.3 Sport England, Sport Birmingham and University of Birmingham emphasised the importance of the paid workforce in engaging people who are inactive and ensuring they are suitably equipped to work with empathy and in a culturally competent way with people new to and nervous of activity. Sport England recognised the challenge for them and other partner agencies in developing learning pathways and opportunities that were flexible and current enough to meet changing need. The Council is one organisation that Sport England is working with on this learning agenda.

### 3.9 Continuing to develop Birmingham’s related partnerships

3.9.1 Council Leads for Community Sport and Active Lifestyles have undertaken significant work with Public Health colleagues and external organisations including Sport England in order to continue the award-winning Be Active programme. We heard that the scale of change needed to put active lifestyles at the centre of thinking will require strong partnerships and leadership, particularly from the health sector including secondary care. We were encouraged to hear that lead officers are currently piloting work which targets individuals with prostate cancer and breast cancer to improve their health through increased physical activity. Evidence suggests that increased physical activity can reduce the risk of breast cancer returning by 24\%\textsuperscript{25}. Medical advice is therefore to increase physical activity even during chemotherapy and radiation treatment.

\textsuperscript{24} Birmingham Policy Commission (2014) Healthy Ageing in the 21\textsuperscript{st} Century: the best is yet to come

3.9.2 Schools were also highlighted as an important component of developing partnerships. While many schools in Birmingham are delivering a varied sport and physical activity offer not all are. Currently most primary schools receive circa £9k a year directly of additional monies via the PE Premium\(^26\) to support the quality and breadth of sports provision in schools. Sport Birmingham is one of the organisations that can advise on how these limited funds can be maximised to embed sport within the curriculum rather than a bolt-on activity. Partners need to work together to ensure a whole-school approach as set out in evidence from Bike North Birmingham. One area for development identified was how secondary schools using recognised good practice can support primary school clusters.

\(^{26}\) See [https://www.gov.uk/pe-and-sport-premium-for-primary-schools](https://www.gov.uk/pe-and-sport-premium-for-primary-schools)
4 Recommendations

4.1 Coordinating Partners

4.1.1 All of the projects we heard about in our evidence gathering were based on extensive partnership working. Continuing and new forms of collaboration are clearly needed to order to realise any of the potential we heard to reinvigorate communities through individuals becoming more active and potentially more connected to others in their local area. To avoid duplication we propose using existing structures including Sport Birmingham’s network, the developing Active Wellbeing Delivery Board and the Council’s own Wellbeing Service Operations Board to bring all stakeholders together annually to agree a shared action plan to coordinate efforts to identify and build a suitable delivery network for sport and physical activity.

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<td>R01</td>
<td>Deputy Leader/Cabinet Member for Health and Wellbeing in partnership with Sport Birmingham and University of Birmingham School of Sport, Exercise and Rehabilitation Sciences</td>
<td>September 2015</td>
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a) Continue work to identify and remove barriers to engagement for all citizens, especially the hardest to reach and most inactive.

b) Work with existing structures like Sport Birmingham’s Network, the Active Wellbeing Delivery Board, Wellbeing Service Operations Board and NGB forums to take a whole systems approach to identifying and building an effective delivery network for sport and physical activity such as walking; so that resources are grown and put to best use in order to bring the biggest benefit to inactive communities.

c) Bring all stakeholders together on an annual basis to agree a shared action plan that goes beyond sport into wider activity initiatives and active travel.

4.2 A new target to recognise the issues the city is facing

4.2.1 We were encouraged by Sport England’s national view that the Council and partners have taken significant strides in addressing the major challenges the city faces relating to physical inactivity and is broadly on a suitable trajectory to continue to address these. At a time when resources are increasingly limited, it now seems essential for the city to maintain its commitment to supporting efforts to increase physical activity in many forms and associated momentum. This is vital given
A means to an end – increasing participation in sport and physical activity

the benefits to individual health and wellbeing as well as to communities already outlined as well as the risks inherent in reducing Council support.

4.2.2 As a result we welcome Sport Birmingham’s suggestion that the Council and partners adopt a new target to make Birmingham the most improved City/Region, in terms of physical activity levels, in the country (by 2017) to recognise the importance of work in this area and focus collective efforts. We are mindful of the view from witnesses that how this work will be measured and monitored requires careful planning and collaboration with relevant University partners. We also see a role for District Committees in seeking local views on ways to meet the target and in reviewing progress given the relevance of local provision and need to reaching the shared goal.

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<td>R02</td>
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Ensure that a target is set and signed up to across all relevant agencies to aim to make Birmingham the most improved City/Region, in terms of physical activity levels, in the country (by 2017) to recognise the importance of work in this area.

Deputy Leader/Cabinet Member for Health and Wellbeing in partnership with Sport Birmingham and University of Birmingham School of Sport, Exercise and Rehabilitation Sciences

4.3 Exploring the potential to incorporate the ‘unusual suspects’ and their approaches such as ‘buddying’ into programmes

4.3.1 Given some of the difficulties we heard associated with behaviour change it is important that the Council and partners explore how to incorporate the innovative approaches of organisations which could be characterised as ‘unusual suspects’, for example, Saheli and others into delivery, to ensure that the inactive are catered for within the sport and physical activity pathway. Examples of approaches could include supporting ‘buddying’ in current and future sports and physical activity projects in view of the value we heard of encouragement from a trusted source and the importance of individual experience as a starting point for planning. In this context, a buddy may be a more experienced individual or someone at the same level of activity but is essentially someone who can take account of an individual’s specific circumstances and motivation to help them become more active and stay active in a way that suits both participants.
Recommendation | Responsibility | Completion Date
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R03 | Deputy Leader/ Cabinet Member for Health and Wellbeing | September 2015

### 4.4 Continuing to develop the research base

#### 4.4.1
It was recognised that the full mix of populations is not always reflected in research and that in a city of Birmingham’s diversity it is essential that groups are not excluded from the evidence base that determines resource allocation and provision. This takes time to enable communities to inform the work of the Council and partners from the outset. Nevertheless it is essential that developing insight continues to guide the City’s programming and approach.

#### 4.4.2
We see that further work is needed to understand barriers for women and notably women of Black and Minority Ethnic origin participating fully in sport and physical activity and the potential of additional Overview and Scrutiny investigation to support this work in the new municipal year.

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<td>R04</td>
<td>Deputy Leader/ Cabinet Member for Health and Wellbeing</td>
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a) Ensure that the City Council continues work to develop an evidence base for future work with national and local partners to evaluate lessons learned on ensuring the diversity of the city’s population in increasing participation in sport and physical activity.

b) This should include further specific work identifying the barriers for women and specifically for women from BME groups in engagement in sport and physical activity.

c) Explore the feasibility of a further Overview and Scrutiny committee investigation in the new municipal year to report back on b).
4.5 The potential of workforce initiatives including student placements in supporting projects

4.5.1 Birmingham’s universities offer many courses at both undergraduate and postgraduate level that require students to undertake placements of varying lengths and associated course work around them as important parts of course learning. A number of these courses are relevant to increasing participation in sport and physical activity. In addition the city’s universities coordinate a variety of non-course based volunteering opportunities to students.

4.5.2 We welcome the offer from the University of Birmingham’s School of Sport, Exercise and Rehabilitation Sciences to explore the potential with the Council and partners for students from their department and potentially others to support new and existing projects which aim to increase levels of sporting and other physical activity in the city. This could involve, as part of wider workforce initiatives, using student and other volunteer research knowledge and skills in developing project monitoring and evaluation as well as offering exercise advice and sports coaching as community activators. We would like to see a focus for new community activators with schools, particularly primary schools. We see such opportunities as distinct to unpaid internships after a student’s course post-graduation. The emphasis here is on students gaining appropriate and valuable experience as much as benefit to projects in line with good practice for student placements such as that from ASET\(^\text{27}\). We hope that other city University departments will see value in this through the Council's emerging Public Services Academy along with third sector organisations.

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<td>R05</td>
<td>That the potential for workforce initiatives that include student placements/volunteers to support an improved evidence base and increased range of ‘community activators’ for physical activity projects (for example those undertaken with third sector partners) be explored with University partners and other third sector providers. Work with schools, particularly primary schools, is key and this should be integrated into any initiative.</td>
<td>Deputy Leader in partnership with the University of Birmingham School of Sport, Exercise and Rehabilitation Sciences and other relevant Further and Higher Education establishments along with Third Sector Organisations</td>
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\(^{27}\) See [http://www.asetonline.org/advice.htm](http://www.asetonline.org/advice.htm)
4.6 Streamlining processes in Council centres to attract gym users

4.6.1 A number of committee members were concerned that existing Council processes worked against encouraging potential occasional fitness and leisure centre visitors to use facilities. So, for example, a resident may not wish to be a full member of a Council facility but to pay-as-you-go to supplement activity undertaken elsewhere for example within a private health club depending on work or other commitments.

4.6.2 It was felt that centre policies were not as encouraging as they might be to intermittent but experienced users which was particularly relevant to city goals for health and wellbeing given the inevitability of relapse in activity we heard (as outlined in section 3.5) and the importance of making provision as broad and inclusive as possible. Examples were shared of avoidable bureaucracy that demanded potential users fit with particular ideas of a service, for example in requirements for inductions during a limited range of times for standard equipment, rather than being flexible enough to suit infrequent as well as regular users. Committee members therefore recommend that the Council explores how to reduce bureaucratic processes for existing and new fitness and wellbeing centres, such as induction, to make it easier for potential users to access them and to reflect those in place in many private clubs.

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<td>R06</td>
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4.7 Birmingham as a ‘StreetGames city’

4.7.1 We welcome the offer from StreetGames to explore the concept of recognising Birmingham as a ‘StreetGames City’ to acknowledge the commitment of the Council and partners to being creative in finding means to enable disadvantaged young people to access appropriate sport and physical activity on their doorstep. We note from case studies that the flexible StreetGames approach of offering activities when, where and in a format that young people choose has proved to be successful in separate but related areas in the city such as Bike North Birmingham’s work with secondary schools and Saheli’s groups for young men and women.
4.7.2 StreetGames envisage that a continuing partnership with the Council could enable an expansion of existing Fizical projects and up to 50 doorstep sport clubs, supported in part by Lottery funding and hosted within new Wellbeing Centres and Active Parks, to be established in the city. Committee members were keen to explore the potential to incorporate StreetGames within local events to promote this. StreetGames’ business model means that any partnership would not require core funding from the Council.

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<td>R07</td>
<td>That the StreetGames approach is incorporated into future work on sport and physical activity, to ensure that young people in Birmingham have access to non-traditional sporting activities in their local area. The concept of recognising Birmingham as a ‘StreetGames’ city be explored and further capitalised on.</td>
<td>Deputy Leader</td>
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4.8 The role of Councillors

4.8.1 While several Committee members were able to share their awareness of sport and physical activity projects taking place in their wards, witnesses recognised that more use could be made of Councillors’ local knowledge and networks in reaching as many of Birmingham’s citizens as possible to increase participation. In some instances Councillors’ knowledge of particular communities and sites could help work through barriers to participation and so to enhance existing activity offers. As a result we recommend that Councillors receive regular updates on activities in their ward in which the Council is a partner (for example the Active Parks Programme). In this way they can promote activities to constituents, and if contacted at the project inception stage for new activities, can give them the opportunity to inform who a project might work with. We also see scope for greater links between Councillors and Public Health’s work on healthy priorities and outcomes for Districts.

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| R08 | a) That Councillors be both kept up-to-date with local activities in which the Council is a partner (e.g. relevant Active Parks programme schedules) and contacted at the project inception stage to inform who the Council and partners might work with locally to recognise their local knowledge and connections which could support active lifestyles  
b) That this is integrated into work with Public Health and District Committees on healthy priorities and outcomes for Districts. | Deputy Leader/Cabinet Member for Health and Wellbeing | September 2015 |
4.9 Breaking up sedentary time

4.9.1 Witnesses stressed during evidence gathering that increasing participation in sport and physical activity is not necessarily the same as either decreasing physical inactivity or sedentary behaviour. While research on sedentary time is in its infancy, there are potentially promising findings on the effect of low-cost interventions for the Council and partners to keep an eye on. This is especially important given early views that breaking up sedentary time is possibly more important for health than reducing total sedentary time although ideally we would aim to do both.

4.9.2 We welcome the offer from the University of Birmingham’s School for Sport, Exercise and Rehabilitation Sciences (and potentially from other local universities for example University College Birmingham) to support the Council both in its own work and with partners on developing strategies to counter any reluctance to support corporate health promotion. An additional offer was to share lessons learned and good practice from recent stair climbing campaigns on which they have worked.

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<td>R09</td>
<td>Deputy Leader/Cabinet Member for Health and Wellbeing</td>
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<td></td>
<td>In partnership with University of Birmingham School of Sport, Exercise and Rehabilitation Sciences</td>
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4.10 Ensuring major developments do not limit active lifestyles inadvertently

4.10.1 The Health and Social Care Overview and Scrutiny Committee’s 2013 Inquiry on Tackling Childhood Obesity in Birmingham has already recognised the Council’s role in planning and urban design in supporting a built environment that encourages physical activity, active travel and healthy lifestyle choices in recommendation 08 of its report:

“That the Planning Committee start discussions with a view to adopting a policy development approach which commits to design out the obesogenic environment by following a process similar to the one that was followed when putting together Birmingham’s Green Commission. Through this approach an
environment can be designed that encourages physical activity, active travel and healthy lifestyle choices.”

We would add to this recommendation by advising a new focus on current and upcoming major developments in the city. It seems that significant opportunities have already been missed in making it easier for people to make healthier choices throughout the redevelopment of New Street station project. As a result, it is vital that we make the most of the limited potential within financial limitations for people to move in our urban environment in a healthier way by reviewing major developments for how they contribute or not to active lifestyle goals across Directorates in their design. One way of doing this is through the new Cabinet Report Public Health Test for Cabinet reports.

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<td>R10</td>
<td>Cabinet Member for Health and Wellbeing/Cabinet Member for Development, Transport and Economy/Chair of the Planning Committee</td>
<td>September 2015</td>
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4.11 The Community Infrastructure Levy and supporting active lifestyles

4.11.1 Potential levies were suggested during evidence gathering to secure ongoing revenue and capital monies for physical activity; these were considered to be unviable for the foreseeable future. However the new planned Community Infrastructure Levy (CIL) is a potentially important means of securing infrastructure to support active lifestyles. Several of the areas listed within the draft 'Regulation 123 list' which sets out projects or types of infrastructure that the Council wishes to fund, or part fund through the CIL are relevant to this Inquiry. They include transport hubs and

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28 During recent decades, councils have been able to secure infrastructure improvements secured through planning obligations - called Section 106 agreements. However, from April 2015, the scope of these S106 agreements will be scaled back significantly through statutory regulations and will only relate to matters necessary to make the development acceptable. All other off site contributions will be secured through a Community Infrastructure Levy (CIL): A CIL is a way to ensure certain types of development, where viable, contribute towards the infrastructure needed to support growth in the City as outlined in the Birmingham Development Plan (BDP). Areas relevant to this inquiry that infrastructure could include are green infrastructure, (e.g. improvements to open space), and other physical improvements, (e.g. public transport and highway improvements).

29 Community Infrastructure Levy – Draft Charging Schedule Consultation, Report to Cabinet, 15th September 2014
city wide sport and leisure provision. It is essential that an appropriate proportion of CIL monies are directed towards capital and particularly revenue which support active lifestyles and wellbeing and that a broad view is taken of what these activities might be. We look forward to reports back from Planning colleagues on the best way for the Council to achieve this.

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<td>R11</td>
<td>Deputy Leader/Cabinet Member for Health and Wellbeing/Cabinet Member for Development, Transport and Economy Cabinet Member for Skills, Learning and Culture</td>
<td>September 2015</td>
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**4.12 Progress with implementation**

4.12.1 To keep the Culture, Learning and Skills Overview and Scrutiny Committee informed of progress in implementing the recommendations within this report, the Executive is recommended to report back on progress periodically. This will be carried out through the established tracking process.

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<td>R12</td>
<td>Deputy Leader</td>
<td>September 2015</td>
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At the time of writing, a period of consultation on the draft CIL policy and charging had just come to an end.
Appendix A – Witnesses

We are grateful to the following for their verbal and written contributions to the inquiry:

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<th>Name</th>
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<tr>
<td>Naseem Akhtar</td>
<td>Project Manager, Saheli</td>
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<td>Dr William Bird</td>
<td>GP and Intelligent Health</td>
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<tr>
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<td>Chief Executive, Sport Birmingham</td>
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<td>Karen Creavin</td>
<td>Head of Community Sport and Healthy Lifestyles, Birmingham City Council</td>
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<td>Steve Hollingworth</td>
<td>Assistant Director Sport, Events and Parks, Birmingham City Council</td>
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<td>Mel Jones</td>
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<td>Lecturer in Exercise and Environmental Physiology, University of Birmingham</td>
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<td>Bryn Lewis</td>
<td>Cycling Projects Manager, Birmingham City Council</td>
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<td>Kerry McDonald</td>
<td>Senior Manager, Street Games</td>
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<td>Dr Ross Neville</td>
<td>Research Fellow in the Sociology of Health and Fitness, University of Birmingham</td>
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<td>Adam Rigarlsford</td>
<td>Sport England</td>
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<td>Andy Stow</td>
<td>Sustrans</td>
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<tr>
<td>Professor Janice Thompson</td>
<td>Professor of Public Health, Nutrition and Exercise, University of Birmingham</td>
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