

Prevention Green Paper – Submission by the Sport and Recreation Alliance

The Sport and Recreation Alliance

The Sport and Recreation Alliance believes that the power of sport and recreation can change lives and bring communities together. Together with our members and in partnership with the wider sector, we make the most of opportunities and tackle the areas that provide a challenge. We provide advice, support and guidance to our members who represent traditional governing bodies of games and sport, active partnerships, outdoor recreation, water pursuits and movement and dance exercise. As the voice of the sector, we work with Government, policy makers and the media to make sure grassroots sport and recreation grows and thrives. Having an active nation is important as it delivers huge benefits to society and the millions of participants, volunteers, staff and spectators.

General comments

Before turning to the specific consultation questions, we would make the following key points:

- Physical inactivity costs the NHS almost £1bn a year and including costs to wider society this rises to around £7.4bn a year.¹ Likewise, the levels of childhood inactivity and obesity remain far too high with the risk that our children will develop long-term health problems. We now need a fundamental shift towards a preventative approach with a much greater emphasis on getting people active as part of the solution.
- While a significant amount of funding for sport and physical activity is directed through DCMS and its arm's length bodies, other government departments including DHSC and local government (where there is responsibility for local public health) should commit funding where it meets wider policy objectives including improved health and wellbeing outcomes.
- Similarly, government departments must work more closely to align policy and to maximise the impact sport and physical activity can have in terms of preventing ill-health. In this context we would encourage closer working between DHSC and DCMS on the preventative health agenda as well as greater coordination with other relevant departments including DfE and MHCLG given their responsibility for school sport and local government respectively.
- We believe government needs to make an ambitious and long-term investment in sport and physical activity in next year's Spending Review. This investment should span across government departments with a view to delivering a step change in physical and mental health outcomes.
- In addition, we would urge consideration of extending the existing Soft Drinks Industry Levy (SDIL) to a wider range of products with the proceeds used to fund a further significant expansion of sport in schools as part of a broader ambition to improve the health and wellbeing of our children.

Comments on specific consultation questions:

¹ National Institute for Health and Care Excellence, *Physical inactivity and the environment*.
<https://www.nice.org.uk/guidance/ng90/chapter/Context>

Which health and social care policies should be reviewed to improve the health of people living in poorer communities or excluded groups?

It is clear from the evidence that physical inactivity and obesity are far more prevalent within lower socio-economic groups and less wealthy local authorities. The Sport and Recreation Alliance's childhood [inactivity heatmap](#) demonstrates that some of the lowest activity levels for children and are found in England's most deprived areas.

Similarly, the Chief Medical Officer's recent report into childhood obesity shows there is a close correlation between obesity and deprivation and indeed the gap in obesity between the least and most deprived areas has increased in recent years.²

However, equally importantly, the Chief Medical Officer's recently updated activity physical activity guidelines notes that the gains of physical activity "are especially significant for those currently doing the lowest levels of activity (fewer than 30 minutes per week), as the improvements in health per additional minute of physical activity will be proportionately greater."³ Therefore, supporting lower-income groups to become active through sport and physical activity is critical to addressing health inequalities and improving the life chances of our children and young people.

More broadly, there is significant scope for DHSC to support the expansion of sport, physical activity and recreation as a preventative health tool in more deprived areas. Sport England funding does aim to promote physical activity for under-privileged families and lower socio-economic groups, however this funding can only go so far and should be supplemented by additional DHSC and local government resources.

Similarly, we would encourage DHSC to consider further extending social prescribing and the role it can play in facilitating this, particularly given the emerging [evidence](#) that shows social prescribing of community sport and organised physical activity can lead to a range of positive health and wellbeing outcomes.

How else can we help people reach and stay at a healthier weight?

The UK CMO's physical activity guidelines clearly state that "physical activity contributes to healthy weight status" for children and young people and sedentary behaviour in children and young people has a negative effect on not only cardiovascular fitness but obesity as well. In adults, the report explains that "there is strong evidence to demonstrate the protective effect of physical activity on a range of many chronic conditions" including obesity and type 2 diabetes, both symptoms of weight gain.

However, we know that 34% of men and over 40% of women are not active enough for good health⁴ and across the country 82.5% of children are not active for at least one hour per day.⁵

If the DHSC is determined to help people reach and stay at a healthier weight then it must prioritise prevention as the 'first resort' and support this by sufficient and targeted funding to make activity an affordable and viable option for all regardless of their income, age, physical impairment or location.

There are many factors affecting people's mental health. How can we support the things that are good for mental health and prevent the things that are bad for mental health, in addition to the mental health actions in the green paper?

There is very strong evidence sport and physical activity can have a significant impact both in terms of preventing mental health problems but also as a vehicle for breaking down the stigma associated with mental health issues.

Aside for increased funding to expand the provision of existing sport and mental wellbeing programmes, we would encourage much greater use of sport and physical activity as a preventative tool, perhaps facilitated

² Chief Medical Officer, *Time to Solve Childhood Obesity*.

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/837907/cmo-special-report-childhood-obesity-october-2019.pdf

³ UK Chief Medical Officer's *Physical Activity Guidelines*:

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/832868/uk-chief-medical-officers-physical-activity-guidelines.pdf

⁴ Public Health England, *Physical Activity: Applying All Our Health*: <https://www.gov.uk/government/publications/physical-activity-applying-all-our-health/physical-activity-applying-all-our-health>

⁵ Sport England, *Active Lives Children and Young People Survey 2017-18*: <https://www.sportengland.org/media/13698/active-lives-children-survey-academic-year-17-18.pdf>

by social prescribing, and improved links between local health services and sport and physical activity providers in the communities they serve.

What could the government do to help people live more healthily: in homes and neighbourhoods, when going somewhere, in workplaces, in communities?

As above we would encourage greater cross-departmental working to ensure that our communities are designed with a presumption in favour of sport and physical activity and that our existing green assets – including playing fields and parks – are protected.

This should involve reviewing what more can be done through the planning system and local government to protect and promote our outdoor spaces as places to bring communities together and for people to be active.

What is your priority for making England the best country in the world to grow old in, alongside the work of PHE and national partner organisations?

Support people with staying in work?

Support people with training to change careers in life?

Support people with caring for a loved one?

Improve homes to meet the needs of older people?

Improve neighbourhoods to meet the needs of older people?

Other?

Considering we now know the importance of strength for physical function, particularly for those later in life as recently reported by the new CMO physical activity guidelines, we feel physical and strengthening activities should be given higher priority.

In adults and older adults strengthening activities help to maintain strength and delay the natural decline in muscle mass and bone density which occurs from around 50 years of age (physical inactivity is proven to reduce the risk of hip fractures by 68%).⁶ The new CMO guidelines reinforce “the additional benefit of balance and flexibility exercises for older adults”.

The CMO guidelines also state that “each week older adults should aim to accumulate 150 minutes (two and a half hours) of moderate intensity aerobic activity”. Not only will helping the older population to adhere to these guidelines, ease the burden on the NHS by preventing and reducing physical injuries but this will ease the strain on mental health services as well - physical activity is proven to reduce the risk of depression by as much as 30%.⁷

We know from government’s Loneliness Strategy that 1.4 million older people are recorded as chronically lonely and it is predicted that if we continue as we are now, the number of older people who are often lonely will increase to 2 million by 2026.⁸ Loneliness has many symptoms including depression, Alzheimer’s and loss of appetite however can be targeted effectively through physical activity.

In the case of dementia, it is understood that what is good for your heart is good for your brain. As such it is no surprise that physical activity can reduce the rate of dementia by a third. It is vital that adults should be supported to remain physically active throughout their lives and well into their older years and access to appropriate sport and physical activity opportunities, including activities like dance, has a key role to play in this.

What government policies (outside of health and social care) do you think have the biggest impact on people’s mental and physical health? Please describe a top 3.

Please see general comments above.

How can we make better use of existing assets – across both the public and private sectors – to promote the prevention agenda?

⁶ See note 4.

⁷ <https://www.kcl.ac.uk/news/engaging-in-physical-activity-decreases-peoples-chance-of-developing-depression-2>

⁸ A Connected Society: A strategy for tackling loneliness: <https://www.gov.uk/government/publications/a-connected-society-a-strategy-for-tackling-loneliness>



The Sport and Recreation Alliance represents over 330 organisations across the sport and recreation sector. We believe that the power of sport and recreation can and does change lives and brings communities and people together.

We urge government to engage with the sector as a key ally in the promotion of the preventative agenda and to work more closely with us to enable more people to enjoy the physical and mental benefits of sport and recreation.

Sport and Recreation Alliance
October 2019