

50,000
MORE
ACTIVE
LIVES BY 2021



TOWARDS AN ACTIVE HIGH PEAK

High Peak Borough Council
working for our community

A physical activity and sport strategy

2017 and
beyond



All residents leading more active lives

High Peak Borough Council and its partners are seeking to redress an increasing trend of inactivity through engagement in physical activity.

An 'active life' with regular engagement in physical activity, sport, volunteering or coaching can have a hugely beneficial impact on people's lives, local communities and the High Peak.

Establishing positive behaviour change and a resilient physical activity habit among those people that are inactive will only come about by providing choice, motivation and support in a co-ordinated way, across many different partners and services.

To achieve this, we have set five strategic objectives. These are the focus of this strategy. At the same time, we commit to developing a universal service that supports, encourages and provides for our entire community to engage in physical activity and sport throughout their lives.

1 Supporting the inactive to become active through a universal physical activity offer.

2 Addressing the inequalities in physical activity and sport engagement with a focus on:

- a Women and girls
- b People with a limiting illness or disability
- c People aged 55 years and over
- d Children and young people aged 5 to 18.

3 Establishing a 'place based approach' with strategic partners to improve the health and wellbeing of residents in the areas facing multiple challenges and deprivation:

- a. Gamesley & Hadfield
- b. Fairfield (Buxton)
- c. Glossop
- d. New Mills East
- e. Chapel West and Limestone Peak

4. Maximise physical activity and sporting opportunities using the outdoor and natural environment.

5. Supporting our existing club and voluntary sector base to build local capacity, strengthen their community offer, and encourage diversity.

We are working together, towards a clear target of 2,000 people living more active lives by the start of 2022. This is easy to understand, simple to measure and can be embraced across all sectors so that each organisation can identify and measure their contribution to achieving it.

This strategy document:

Presents the case for the strategy, together with the evidence and analysis that has been used to determine the priorities.

Defines what success will look like for future generations in the High Peak

Describes the key shared priorities for the next five years, which will take us towards our common vision.

Invited wide commitment from across sectors, at the highest level, to tackle the problem of inactivity and low physical activity engagement and participation.

Announces a call to action to the people of High Peak to commit to an active life and to support each other to achieve this.

Explains how we will work together to achieve this shared vision.

Scope and Evidence

A shared ambition to 'turn the tide of inactivity' is gathering pace across the UK. Our collective narrative is changing. There is clear recognition across sectors, that despite our collective efforts, activity is being designed out of our lives.

We are facing an inactivity epidemic with huge costs of the economy, our physical and mental health and wellbeing.

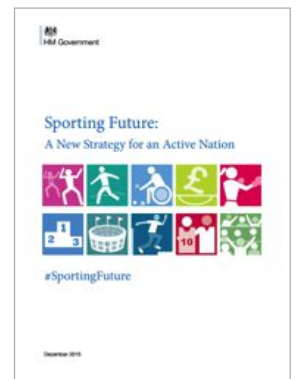
Within the UK, there are a number of published documents that clearly set out the evidence of need and the policy and investment approach for addressing physical activity.



The Young Foundation (2013)



UK Active (2014)



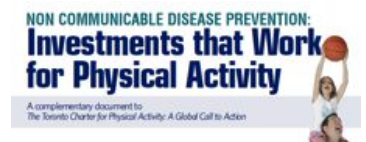
HM Government (2015)



Sport England (2016)



Public Health England (2014)



Global Alliance for Physical Activity (2011)

Figure 1: UK policy and evidence documents on the need for physical activity

Being physically active is crucial for people to maintain good health and wellbeing. The Chief Medical Officer (CMO) for the UK has clearly set out how much physical activity people should do, on a weekly basis, for it to benefit their health.

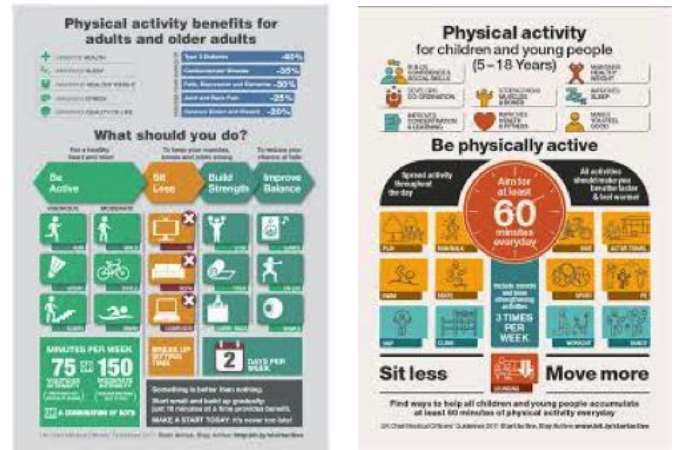


Figure 2: Chief Medical Officer (CMO) Guidelines, 2011

The following diagram represents the relationship between physical activity, sport, active recreation and everyday activity and explains what we mean when we use these terms.

Physical activity (Energy expenditure)



P E and School Sport (Early Years)

Figure 3 : Components of physical activity (adapted from Start Active, Stay Active)

The UK strategies send some clear messages about the scale of the problem, and set a challenge for us to work differently to bring about a population level change in physical activity behaviour.

We are using this to guide our approach here in the High Peak area.

It is clear that the biggest difference we could make would be to move people out of inactivity, as shown in the diagram Figure 4.

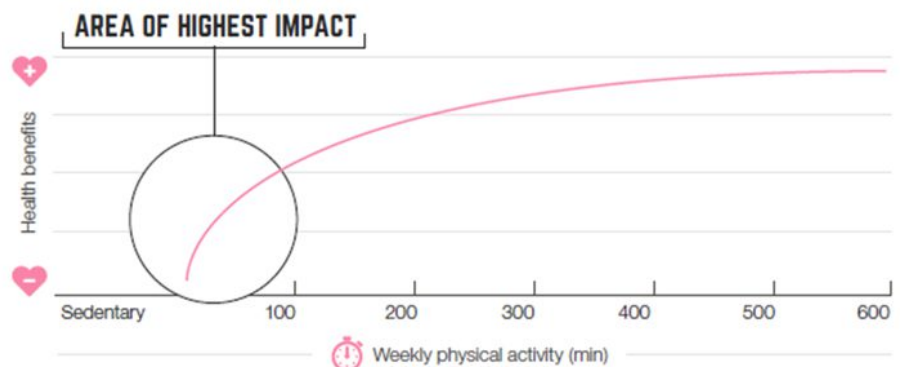


Figure 4 : Area of highest impact in physical activity (Sport England Towards an Active Nation, 2016)

For the past nine years, the sporting sector has been primarily focused on increasing the number of people achieving at least one session per week of 30 continuous minutes of sport – commonly known as 1x30.

For the past three years, the sector has also been monitoring behaviours against the Chief Medical Officers' (CMO) recommended levels of physical activity and examining the proportions of our population whose behaviour can be described as 'active' or 'inactive'.

ACTIVE:

The percentage of people doing at least 150 minutes of physical activity per week in bouts of 10 minutes of at least moderate intensity.

INACTIVE:

The percentage of people doing less than 30 minutes of physical activity per week in bouts of 10 minutes of at least moderate intensity.

The focus has now shifted onto helping people to lead active lives with a significant emphasis on:

Decreasing the percentage of people physically inactive.

Increasing the percentage of the population taking part in sport and physical activity at least twice in the last month.

What's the situation in High Peak?

Available evidence on sport and physical activity behaviour indicates that among High Peak residents, the situation is slightly better than across Derbyshire or England. We have fewer inactive people and more people both deemed to be both active and playing sport for 30 minutes at least once a week. But still, 38.5% of our population are inactive or not doing sufficient levels of activity for it to benefit their health.

A slightly different picture emerges when we consider trends in physical activity behaviour patterns, as opposed to snapshots in time.

For inactivity, while the overall situation is better than that of Derbyshire or England, the trend over the last 3 years is on the rise. Meaning we have an increasing number of people living inactive lifestyles in High Peak. This is the opposite of what is happening in Derbyshire and England where inactivity trends are on the decline. Further investigation shows that this increase has been partly fuelled by increasing levels of inactivity among females to a lesser extent, people in lower social grades.

For those meeting the Chief Medical Officers' guidelines for an active lifestyle, and those doing sport for 30 minutes at least once a week, the trends are encouraging, showing that both are increasing and that the situation in High Peak is better than Derbyshire and England. We seem to be doing well at getting those who are already active or sporty to maintain or increase their habit.

How behaviour patterns differ within our population

These figures and trends hide less positive patterns of behaviour within certain groups of our population. For example, we know at national level that women are less active than men, older people less active than young people, disabled people less active than those without a disability, and people from lower social grades are less active than their counterparts from higher social grades. Similar inequalities in behaviour are also evident in High Peak as demonstrated in the chart below.

Over represented groups in physical inactivity High Peak

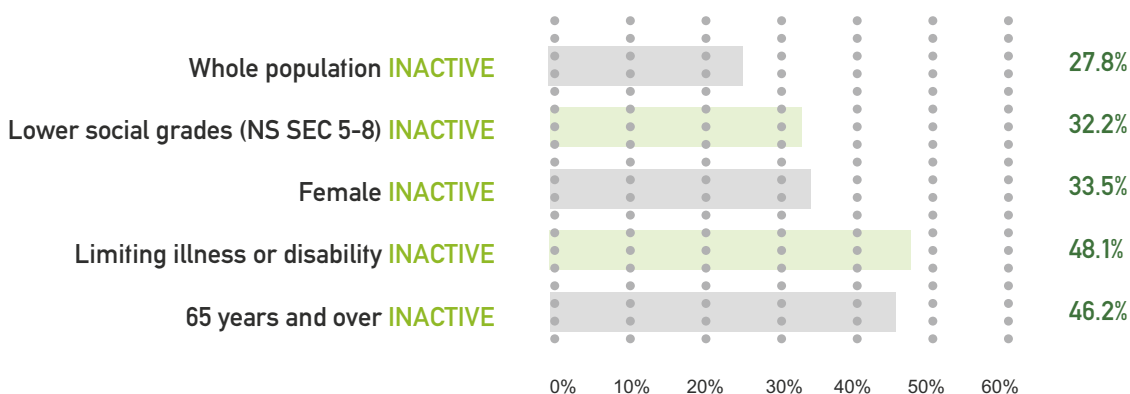


Figure 5: Over represented groups in physical inactivity High Peak (Latest trend point APS Jan 2012-Jan 2016)

A closer look at these different population groups will explain why they have become a priority. Understanding how patterns of physical activity or inactive behaviour are changing over time helps us to identify which groups our strategies are working for, i.e. who is getting more active, and who is not. Below we explore trends and use appropriate comparators to gauge how effectively we are serving these groups.

PRIORITY GROUP: WOMEN¹

THE ISSUES

- There has been a steep rise in the trend for inactive behaviour among women in High Peak.
- There is still a gap between the level of women's physical activity and sports participation behaviour and that of men in High Peak.

>> WHY THEY ARE A PRIORITY – THE EVIDENCE



33.5% of women in High Peak are **inactive** compared to **21.8%** of men.

Over 3 years, the trend point for **female inactivity** has increased by **6.2 percentage points**. This is a deviation

from trends at county and national levels, where inactivity levels are decreasing.

Inactivity rates for men in High Peak are decreasing, meaning the inequality gap between men and women is widening. **It currently sits at 11.7 percentage points.**

Compared to our Nearest Neighbours' gender inequality gaps, High Peak is **5th out of 5** and the only local authority to see an increasing trend for female inactivity. The smallest gap is **2.7 percentage points**.

56.4% of women in High Peak are **active** compared to **65.2%** of men.



While the inequality gap between women and men is narrowing, **It currently sits at 8.8 percentage points.**

Compared to our Nearest Neighbours' gender inequality gaps, High Peak is **3rd out of 5** with **5.6%** being the smallest gap.

PRIORITY GROUP: PEOPLE WITH A LIMITING ILLNESS OR DISABILITY²

THE ISSUES

- The proportion of people who identify themselves as having a limiting illness or disability and that demonstrate inactive behaviour is twice the size of those that are not.
- Similarly, far fewer people with a limiting illness or disability are leading active lifestyles, as those without this classification.

>> WHY THEY ARE A PRIORITY – THE EVIDENCE



48.1% of people with a limiting illness or disability are **inactive**, compared to **23.6%** without (latest trend point).

Compared to our Nearest Neighbours' disability inequality gaps, High Peak is **4th out of 5** for both active and inactive behaviours, with **17.9 and 19.3 percentage points** respectively being the smallest gaps.

36.3% of people with a limiting illness or disability are **active**, compared to **59.9%** without.



While the inactivity gaps between disabled and non-disabled people in High Peak are not getting any bigger, they still sit at **24.5 percentage points** for inactive and **24.4 percentage points** for active.

^{1,2} Sport England's Active People Survey Jan 2012 – Jan 15 data (latest trend points)



PRIORITY GROUP: PEOPLE AGED 65 AND OVER
THE ISSUE

- More than half of High Peak residents aged 65 years and over, are not doing enough physical activity to benefit their health

>> WHY THEY ARE A PRIORITY – THE EVIDENCE

High Peak has a **higher proportion of people aged 45-54 years of age (15.9%)** compared to Derbyshire Sport (**14.5%**) and England (**13.7%**).



We also have a **higher proportion of people aged 55 years and over (30.9%)** than England (**27.9%**).

Levels of physical activity decline with age, significantly after the age of 65.

Looking to the future, High Peak will have an increasingly aged population with associated health concerns and costs that are linked to low levels of physical activity. For this age group, sedentary time is a significant risk factor for poor health independent from physical activity and is therefore also an important consideration.

In High Peak, **46.2% of people aged 65 years and over** are **inactive**, compared with **27.8%** of the whole population.

There is considerable overlap between this age group and people classified as having a limiting illness or disability.⁶

PRIORITY GROUP: CHILDREN & YOUNG PEOPLE AGED 5-18 YEARS OF AGE
THE ISSUE

- Insufficient children and young people are developing a physical activity habit from an early age.

>> WHY THEY ARE A PRIORITY – THE EVIDENCE

There is a **lack of a systematic approach** to gathering data on the sport and physical activity behaviour of children and young people either locally or nationally. However, there are a few indicators that begin to build a picture.

In England, **21% of boys and 16% of girls** aged 5 to 15 years were meeting the CMO recommended levels of physical activity (60 minutes a day)⁷. In both boys and girls these proportions fell between 2008 and 2012. These are national figures and not available at a local level.

15.7% of Derbyshire 15 year olds are **physically active** for at least one hour per day seven days a week⁵

70.9% of Derbyshire 15 year olds with a mean daily sedentary time in the last week over 7 hours per day⁸

At **9.3%** High Peak has the highest prevalence of **obesity** among children aged 4-5 years (reception year) of all Districts within Derbyshire. By Year 6, this figure rises to **14.7% of children in High Peak**¹⁰.

A recent survey of young people carried out for Derbyshire Sport's PE and sport plan evaluation suggest that **52%** of young people that responded to the survey from across the County are achieving the CMO recommended levels of physical activity (60 minutes per day for those aged 5-18).

³ ⁴ ONS 2011 Census

⁵ Sport England's Active People Survey Jan 12–Jan 15 (latest trend points)

⁶ www.gov.uk/government/publications/disability-facts-and-figures/disability-facts-and-figures#fn

⁷ Health Survey England, 2012

⁸ What About YOUTH (WAY) survey, 2014/15

¹⁰ NHS Digital, National Child Measurement Programme



PRIORITY GROUP: A PLACE BASED APPROACH TO 5 PRIORITY AREAS

THE ISSUE

- There are pockets of High Peak where residents experience poorer than average health outcomes, which could be alleviated by living more active lives.

>> WHY THEY ARE A PRIORITY – THE EVIDENCE

While the proportion of inactive residents from lower social grades is noticeably lower in High Peak than in Derbyshire or England it does appear to be increasing.

Life expectancy is 9.1 years lower for men and 7.3% lower for women in the most deprived areas of High Peak than in the least deprived areas¹¹.

Our more deprived communities tend to have greater proportions of residents from lower social grades and residents with a limiting illness or disability. The map below identifies our communities that have higher proportions of both these groups.

Due to the demographic profile of these communities, it is likely that they have a higher proportion of people that have inactive lifestyles and lower life expectancy.

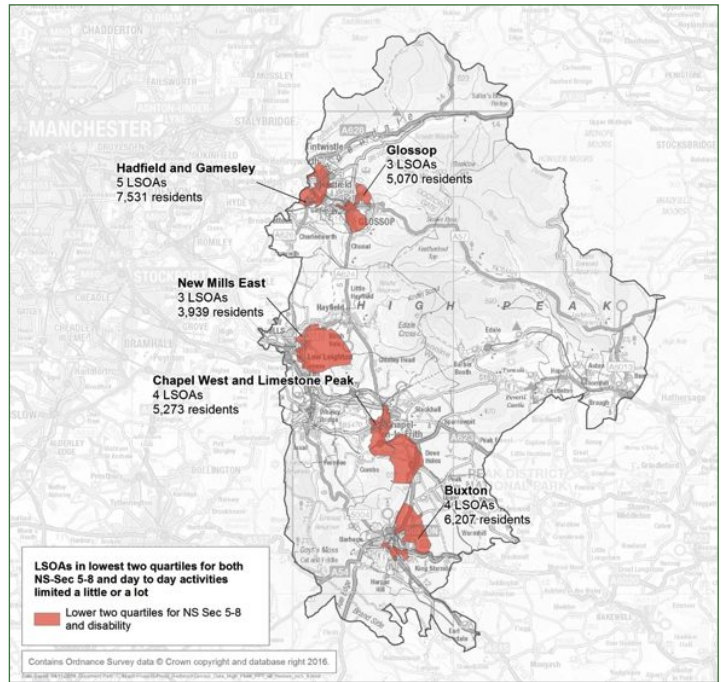


Figure 6: High Peak communities with the highest proportions of residents in lower social grades and/or with a limiting illness and disability

¹¹ Public Health England Health Profile June 2015



Delivering against outcomes and measuring success

By collectively focusing on the priorities of this strategy across the High Peak we will be able to have the biggest impact on the five outcomes in the government strategy **Sporting Future** and High Peak’s corporate plan key aims. The following table shows the connectivity between these outcomes and the key performance indicators that will be used to measure success at both national and local level. Success in delivering this strategy will mean:

- **People in the High Peak will be happier and healthier** because of the active lives they lead, with physical activity and sport playing a central role. They will have improved physical and mental wellbeing, and individual development. People will have a strong belief in their own ability to succeed and in their capability to accomplish their personal goals.
- **The High Peak’s communities will be stronger and safer** because physical activity and sport will play a bigger part in enhancing relationships and social networks within communities. People will have the opportunity to access healthy environments where the healthier choice is the easiest choice.
- **The High Peak will be more prosperous** because of its healthy, active and productive workforce, and because of the growing role that physical activity and sport play in the economy.



National outcomes	Physical Wellbeing	Mental Wellbeing	Individual Development	Social & Community	Economic Development
Staffordshire Moorlands outcomes	To help create a safer and healthier environment for our residents to live and work			To protect and improve the environment	To help create a strong economy by supporting further regeneration
National measures	Increase in % of population meeting CMO guidelines	Improved subjective wellbeing	Levels of perceived self-efficacy	Levels of social trust	Gross value added by sport sector
	Decrease in % of population inactive				
High Peak measures	Improved health				
	Quality parks and open spaces and clean streets				
				Sustainable towns and rural communities	
			High level of resident and customer satisfaction	Council services provide value for money	Increased economic growth
High Peak outputs	Vision: High Peak residents leading more active lives				
	Priority audiences: Women & girls, People with limiting illness or disability, Children & young people, People aged 65 years and above				
	Priority areas: High Gamesley and Hadfield, Fairfield (Buxton), Glossop, New Mills East, Chapel West, Limestone Peak				
KPIs	KPI 1: Increase in % of population taking part in sport and physical activity at least twice a week				
	KPI 2: Decrease in % of people physically inactive				
	KPI 4: Increase in % of children achieving physical literacy standards				
	KPI 6: Increase in % of young people 11-18 with a positive attitude towards sport and being active				
				KPI 18: % of publicly owned facilities with under used capacity	
	KPI 3: Increase in % of young people 11-18 with a positive attitude towards sport and being active				
			KPI 7: Increase in number of young people volunteering in sport at least twice in		
		KPI 8: The demographic of volunteers in sport to become more representative of society as a whole			
				KPI 16: Employment in the sport sector	

Figure 7: Measuring success: Connectivity between this strategy, High Peak corporate plan and government outcomes

How will we achieve the vision and KPIs?

The approach in the High Peak will be based on the following overarching principles:

1 Insight Led, Evidence Based

In order to make the biggest difference to active lives in the High Peak, we will work to understand local trends through data analysis and local profiling. This will enable us to prioritise. This has already started, as part of the work to produce this strategy.

We will continue to undertake research and further engagement locally, into the physical activity behaviour, barriers and enablers of priority audiences with a particular need around young and older people and the communities in the priority places.

We will draw on international and national evidence about what works best to help people to live active lives. The Global Alliance on Physical Activity identified interventions that work. There is a vast array of research, evidence and insight about system change and what works to support priority groups and communities. We will use this evidence to guide us. We will also share and use the learning in a meaningful way with those who are supporting people to live active lives in Staffordshire Moorlands.

- 1 Whole school programmes
- 2 Transport policies and systems that prioritise walking, cycling and public transport
- 3 Urban design regulations and infrastructure that provide for equitable and safe access for recreational physical activity, and recreational and transport related walking and cycling across the life course.
- 4 Physical activity and non-communicable disease prevention integrated into primary health care systems.
- 5 Public education including mass media to raise awareness and change social norms on activity.
- 6 Community wide programmes involving multiple settings and sectors and that mobilise and integrate community engagement and resources.
- 7 Sport systems and programmes that promote 'sport for all' and encourage participation across the life span.

We will develop a deeper understanding of people and communities, which differ greatly across the High Peak. This will involve listening to people from our target groups and priority communities to understand their lives, fears, barriers, before we can work with them to find and develop the approaches and support that will help. It will also help us to identify those partners and groups who will have the most impact on providing appropriate sport and physical activity opportunities.

By proactively bringing together data from sport, physical activity, health and other non-traditional sources, we will create and share insight to help inform the design of provision and investment decisions.



WHAT WE WANT TO ACHIEVE

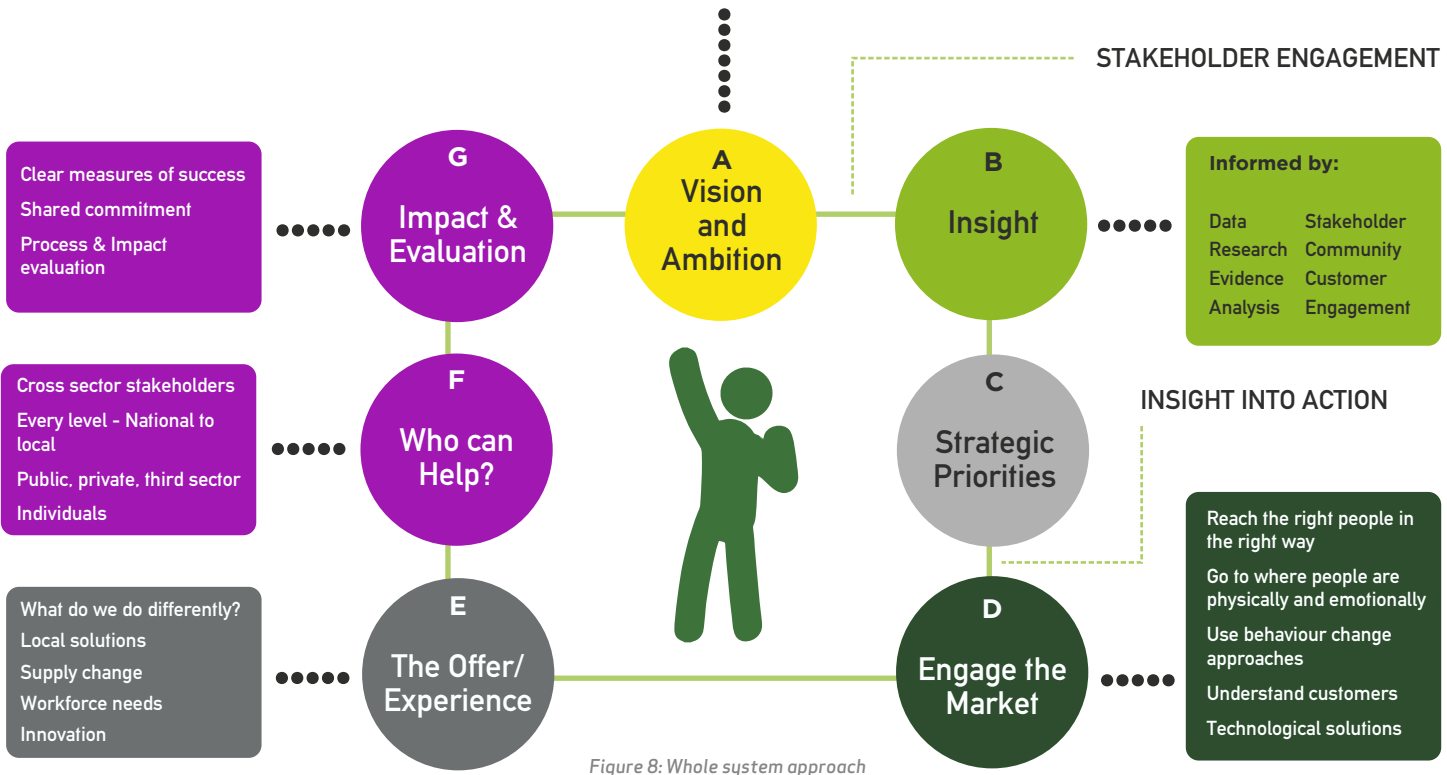


Figure 8: Whole system approach

2 Values Driven

Our work will be most successful if those leading, supporting, coaching, volunteering, teaching and enabling active lives, are working to a shared set of values. These will need to be developed as the work begins.

3 A Place Based Approach

➤ Addressing inequalities and establishing a resilient habit – across the High Peak.

We will work across the High Peak with focussed effort on the low participant groups, the most inactive and those who would benefit most from engagement with physical activity.

➤ Bringing together focussed effort and resources into our priority communities:

- a. Gamesley & Hadfield
- b. Fairfield (Buxton)
- c. Glossop
- d. New Mills East
- e. Chapel West and Limestone Peak

In these communities, we will seek to:

- Establish joint service planning and pooling of resources.
- Position physical activity as part of a wider health and wellbeing approach.
- Fully engage residents so that they are central to the planning and delivery of services in their community.
- Build on the assets already available in these communities rather than creating something new where it is not needed.
- Growing the capacity of people within communities to deliver lasting benefits.



4 A People Centred, Behaviour Change Approach

We will take a people centred approach.

Our paid and voluntary workforces across the High Peak will seek to better understand people from a diverse range of backgrounds and life circumstances. We will seek to understand the challenges and barriers they face, and put things in place to support them on a journey towards an active life.

This approach will focus our efforts on those who tend not to take part.

It challenges us to engage those who are just beginning to contemplate activity; working out how to support them in removing barriers to change. In order to achieve this we will identify the personal and social factors at play, as well as factors in the wider physical and technological environment of the High Peak.

5 Community led development

In order to deliver this strategy, the energy, enthusiasm and commitment of local people needs to be developed and supported.

This is particularly needed in places where volunteering, local leadership and community capacity isn't as strong. People coming together to make things happen in their community, is the most sustainable way of leading change.

6 Working with the whole system

In the past, we have worked primarily through the leisure, sport and recreation sector to increase participation in sport, and improve activity levels.

We have tended to focus our attention on the supply of activities, and programmes. This approach hasn't brought about significant population level changes in physical activity behaviour.

In future, we will seek engagement from a wider range of people, companies and institutions in the public, private and voluntary sectors to help tackle the issue of inactivity in the High Peak.

Our conversations will extend to transport policy and urban design, whole school approaches with a whole system approach through education, primary health care and within our communities.

This will be a challenge, with investment required in the ability and capacity of our existing workforces and extended advocacy, reach and influence into other sectors.



7 Optimum Impact from investment

Taking a whole system approach, we seek to make the most of existing investments made by a range of different partner organisations and services.

Investing together will help to bring greater results, during a time when organisational budgets need to be made to go further.

Similarly, where appropriate, an approach that brings partners together to secure new investment into the High Peak in a co-ordinated and collaborative manner, rather than partners competing, will be necessary if we are to achieve our ambition.

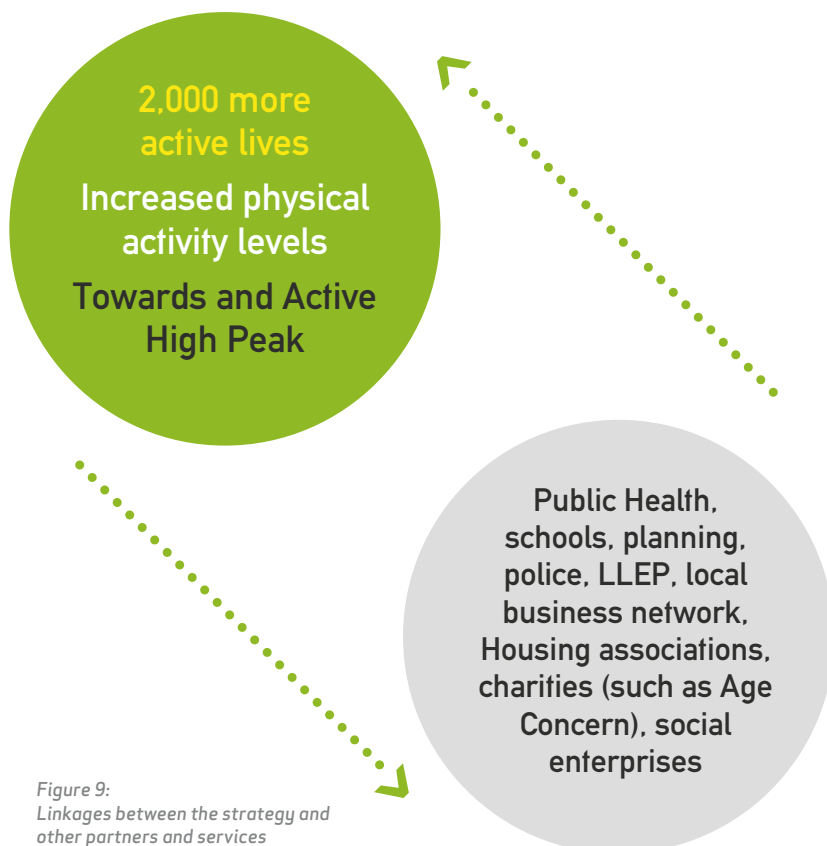


Figure 9:
Linkages between the strategy and other partners and services



The role of High Peak Borough Council

The role of local authorities has changed considerably over recent years and will continue to do so throughout the period of this strategy. The role of High Peak Borough Council in helping to deliver this strategy includes the following:

- Establishing a 'Towards an Active High Peak' Steering Group.
- Leading and supporting a collaborative approach, with skilled partners in all sectors.
- Investing in and supporting the growth of social capital within communities.
- Supporting the development of a place based approach, where people in communities take the lead and are supported to bring about positive change locally.
- Reducing the net cost of Leisure Centre operations and increase the focus on inactive and priority groups in their communities. During the life of this strategy the contract for the provision of our Leisure centres will be renewed. We will use this opportunity with partners to undertake a transformative review of leisure provision, examine opportunities to reinvest into addressing the needs of our priority population groups and places.
- Encourage a widening the services made through leisure facilities and existing providers.
- Aligning future facilities provision to making a stronger contribution to the provision of physical activity opportunities to priority audiences as well as their core market.
- Using data and insight more effectively to inform the design and programming of facility based activities for all user groups.
- Building the capacity of local clubs, community organisations, social enterprises and community interest companies to support the delivery of the strategy.
- Maximising the local voluntary sector as a resource to support increased and a wider variety of sport and physical opportunities for local communities.
- Developing a larger base of volunteers, coaches and officials in the local sports club network.
- Widening the network of contributors to Towards an active High Peak, engaging a wider range of appropriate partners to reach priority groups, people and communities, such as disability charities, Age UK, Sheltered Housing, women's groups, community associations and youth organisations. Working with them to understand the role and contribution they can make to achieve the vision.
- Developing and maintaining a cross sector business case for sport and physical provision that demonstrates wider social, health and economic benefits
- Making the most of green and open spaces. We will make better use of our parks, open spaces and the outstanding natural environment in meeting the needs of the priority audiences and places.
- We will take a lead on raising awareness of the benefits of physical activity, the opportunities to be active, and the support available to do this through a targeted marketing and communications strategy. This will enable us to effectively reach, inspire, motivate, inform and support priority audiences.
- Building greater awareness of the benefits of physical activity across services and partners to bring more understanding of the contribution it can play to the achievement of other outcomes.
- We will develop a platform for enhanced networking and communication opportunities between clubs and the wider sport and physical activity environment.



Framework for delivery and leadership

Towards an active High Peak is produced by the Borough Council in consultation with partners but it is owned by the collective.

Responsibility for shaping the strategy, delivering its objectives and monitoring its impact will rest with a steering group made up of the council and partners.

The steering group members include:

- Education (Head teachers)
- Public Health (Senior Managers)
- CCG Representatives
- Community Safety Partnership Managers
- NGBs / Sports clubs
- Community Regeneration

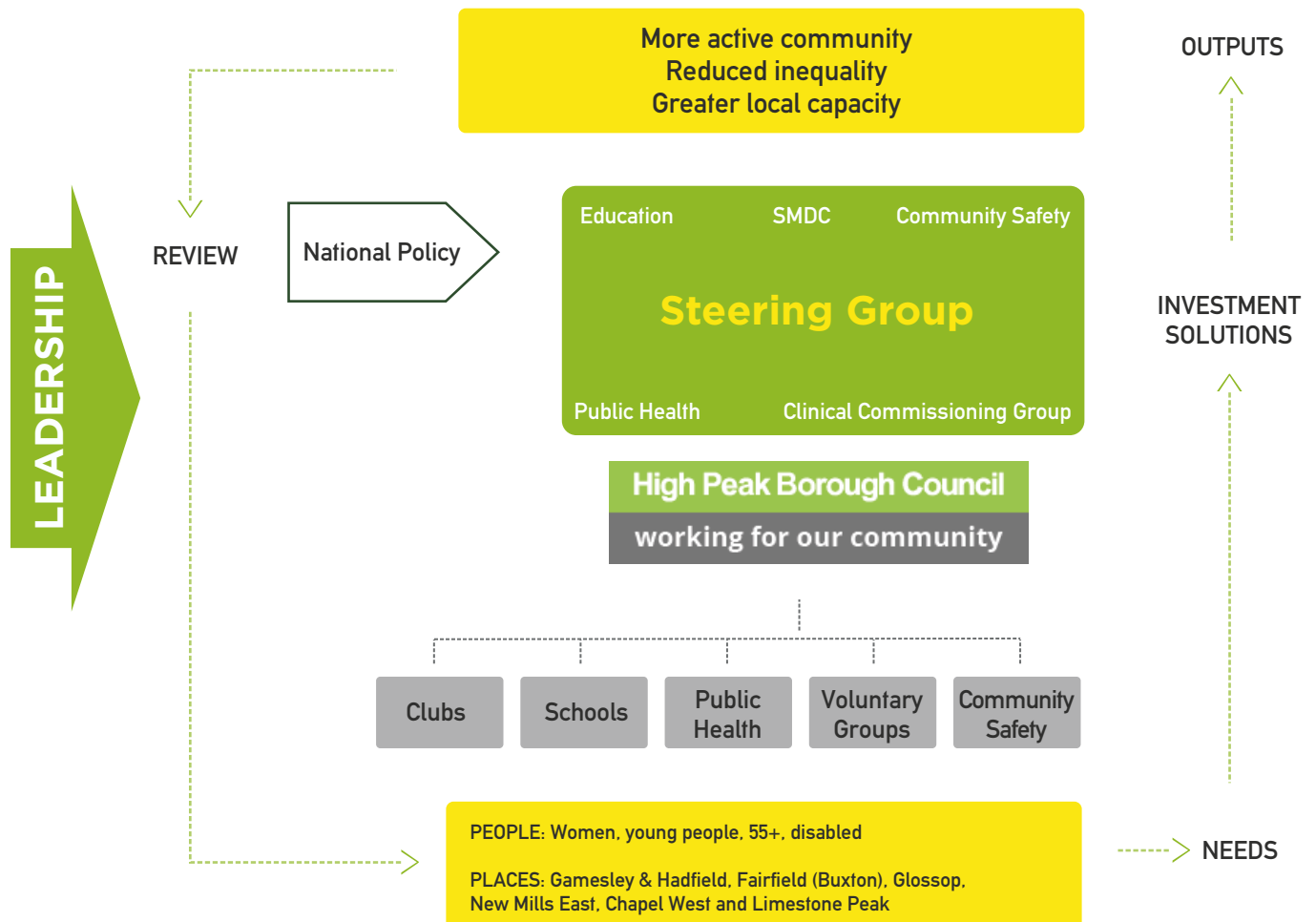


Figure 10: The leadership framework for the delivery of the strategy

