

Committee	HEALTH AND WELLBEING BOARD
Date	18 MARCH 2021
Title	IMPACT OF COVID-19 ON PHYSICAL ACTIVITY PLANS
Report Of	JULIE AMIES, CHIEF EXECUTIVE ENERGISE ME

Purpose of this Report

1. The purpose of this report is to raise awareness and highlight the risks of the impact of COVID-19 on:
 - physical activity levels across the Isle of Wight with particular attention to inequalities
 - the physical activity sector
2. This report will be relevant to all Board members and all wards will be affected.

Recommendations

3. The Board is asked to discuss and note:
 - Using the insight to inform recovery / restoration plans
 - Using physical activity as a resource to improve people's physical and mental wellbeing.
 - Encouraging the schools that are selected, to take part in the Children and Young People Active Lives Survey to gather better data to inform future actions and investments.
 - Embedding physical activity in all care pathways.
4. The Board is asked to discuss and decide on:
 - Adopting the next Hampshire and Isle of Wight Physical Activity Strategy as part of the Board's strategic priorities for health and wellbeing.
 - Sharing relevant insight across IOW partners and develop an annual action plan with them that informs actions and investments.

Executive Summary

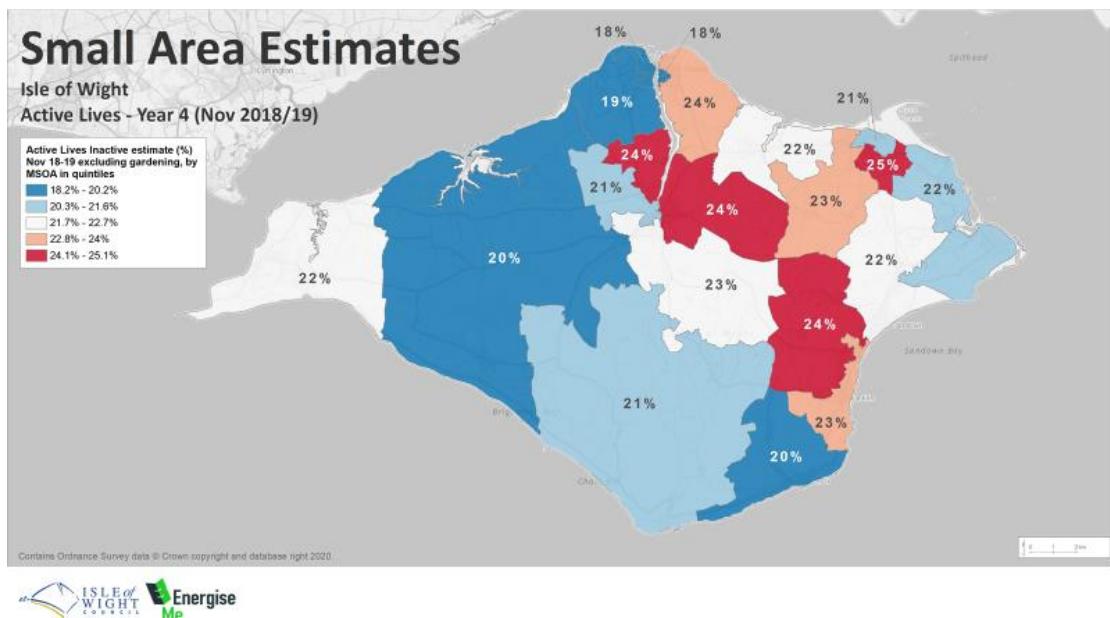
5. Chief Medical Officer, Chris Whitty said in a COVID-19 daily briefing, “there is no situation, there is no age and no condition where exercise is not a good thing”. Government messaging was strong during the first lockdown and people could leave their homes for one hour of exercise each day. Being active mattered to people. As clubs and facilities closed their doors, people tried new things and built new habits and experiences. Many people discovered walking, jogging and cycling and said that they wanted to continue these beyond lockdown. For example, more than 858,000 people downloaded the NHS-backed Couch to 5K app between March and the end of June 2019, up 92% on the previous year. That said, almost 20% of every demographic group was doing a ‘lot less’ activity. It was also apparent that a person’s gender, affluence, ethnicity, disability, and age all had a huge impact on their likelihood to be active. The demographic groups that are prioritised in the Hampshire and Isle of Wight Physical Activity [Strategy](#) and the audiences partners were focused on prior to the pandemic were still finding it harder to be active.
6. This report sets out the impact of COVID-19 especially on these priority groups across Hampshire and the Isle of Wight (where we can be specific about the Island, we will make this clear). It draws upon national research conducted by Sport England, the Youth Sport Trust, and others.
7. The report looks at some of the actions that are being taken by the physical activity, voluntary and public sectors to address inequalities. Also, to maintain and build on the progress made over the last 4 years to reduce levels of inactivity in our population.
8. It also looks to the future and how, this board, and partners across the Isle of Wight will need to play their part because no one organisation can achieve this on their own.

Contextual Information

9. In 2017 the physical activity strategy recognised that physical activity is one of the leading risk factors for death worldwide. It provided a framework for all organisations involved in the development and co-ordination of physical activity and sport across the Isle of Wight to:
 - accelerate the reduction of inactivity amongst adults
 - reverse the rising trend of inactivity amongst females
 - narrow the gap in levels of inactivity between those adults with (or at risk of) a long-term health condition and those without
 - improve levels of physical activity among children and young people

10. Prior to COVID-19, activity levels were on the rise across the Isle of Wight. Using data from the [Active Lives Survey](#)¹ from November 15/17 to Nov 17/19 more people were active². Nearly 5% more adults are active in 2017/19 than they were in 2015/17. Amongst these adults, greater numbers of women, older people and those with a disability or long-term health condition were getting active. In fact, improvements in female inactivity levels had seen the gender inequality gap reverse, more women than men were active. Across all the groups, the number of adults who are active has increased and the Isle of Wight is ranked 1 out of 5 when compared with its nearest neighbours. This was positive progress against the ambitions set out in the physical activity strategy 2018-21. Appendix 1 provides some visual examples of the improvement in physical activity levels on the island.
11. The results did however show some inequalities linked to affluence and limiting illness. Those in lower socio-economic groups and those not in employment, such as looking after family and home, retired, long-term sick or disabled are more likely to be inactive. In addition, those with a limiting illness are less likely to be active. Figure 1 uses small area estimates to illustrate levels of inactivity across the island.

Figure 1



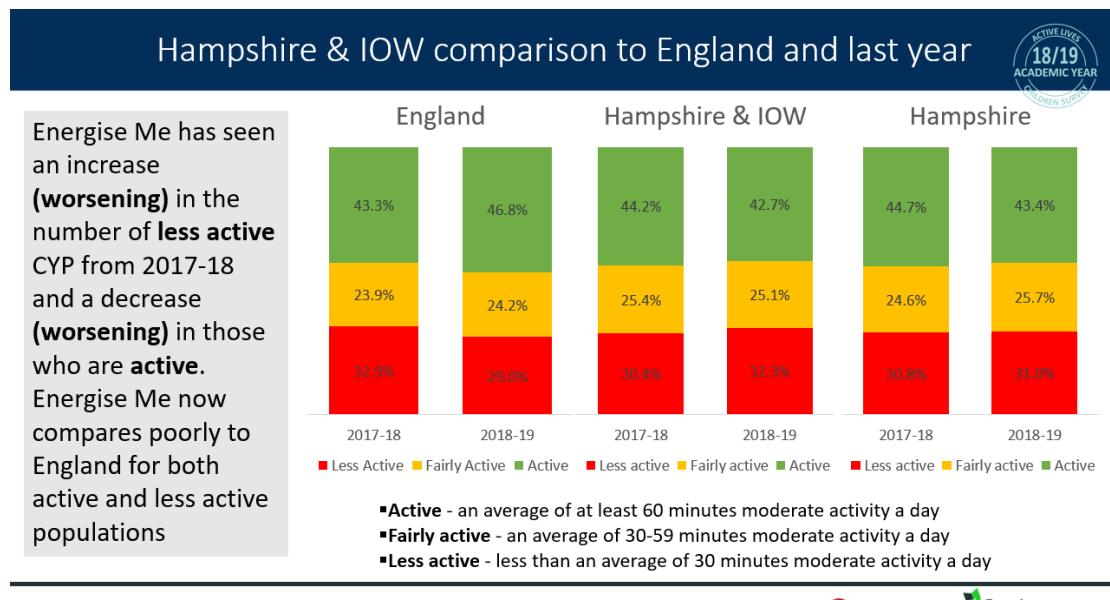
12. Active Lives data for children and young people (CYP) began in 2017. Due to small sample sizes, we are not able to extract data for the island. From the most recent Hampshire and Isle of Wight data, activity levels amongst CYP were getting worse between 2017-18 and 2018-19, figure 2. They also fell way below the CMO guidelines of every child achieving 60

¹ Source: Sport England, Active Lives Adults, Nov 15/16 to Nov 18/19, age 16+, excluding gardening

² Percentage of people aged 16+ doing at least 150 minutes of physical activity per week. Bouts of 10 minutes of moderate intensity, vigorous activity counts as double

minutes of moderate physical activity a day. Further, national research commissioned by Sport England, found “despite the vast majority (more than nine in 10) of children doing something to stay active, the amount they have done has been impacted by the restrictions, and declined for many in lockdown (March-May) with some recovery back to ‘normal’ levels on the return to school in September (4)”.

Figure 2



Impact of COVID-19 – what do we know?

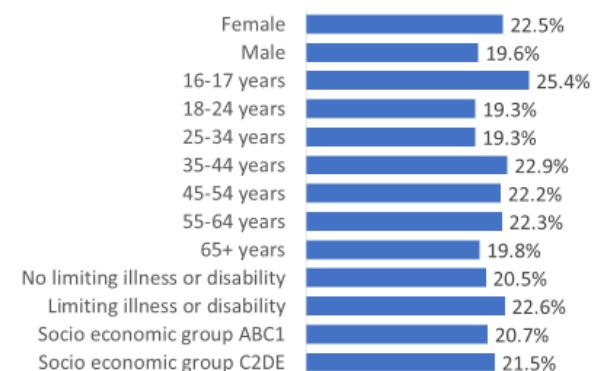
13. While the effects of the ongoing COVID-19 pandemic and the requirement for social distancing for some physical activities are not clear, there are risks that this period could slow or halt the increase in activity that we have seen since the start of our physical activity strategy. We could also see a widening of inequalities.
14. We have been able to contextualise national findings in the Hampshire and Isle of Wight area through regular communications, written and virtual, with a range of partners across the voluntary and public sectors throughout COVID-19.

Adults

15. Sport England commissioned [Savanta ComRes](#) to survey the English public to assess their activity levels during lockdown. This took place each week for the first 8 weeks of the lockdown. Almost 20% of each demographic group reported doing “a lot less” physical activity compared to an average week before COVID-19 restrictions. Of concern would be the widening gap between male and female activity levels and lower activity levels amongst those 75+ years, those with a limiting illness, single occupancy households and children. Refer to appendix 2. We will not know the full extent of the impact of COVID-19 until Active Lives data is released in May 2021.

Impact of COVID-19 on physical activity

Those doing 'a lot less' physical activity or exercise compared to a typical week



Each week for the initial eight weeks of lockdown, Savanta ComRes surveyed the English public to assess their activity levels.

Almost 20% of each demographic group was doing 'a lot less' physical activity compared to an average week before Covid-19 restrictions.

This may have had a larger impact on those demographic groups with low 'active' levels and further exaggerated inequalities.

We will not know the full extent of the impact until future Active Lives data is released.



16. Sport England also conducted [local voices research](#) to give a voice to local communities and places reflecting their current experiences of living with Covid-19. Some of the findings that resonate across Hampshire and the Isle of Wight include:

- widening inequalities was impacting on wellbeing. People are adversely affected by poor mental health, access to education, financial hardship and increased risk of experiencing domestic violence.
- access to a garden or local green space; housing type and access to information are contributing factors to people's ability to be active during this time.
- The agility of the voluntary sector as trusted partners with the right relationships has helped others to connect to communities. New relationships have opened. This has been especially helpful to distribute investment to those in most need.
- The redeployment of staff contributed to the formation of new relationships and blurring of sectoral boundaries (page 11 of the report provides a quote from our experience in Hampshire and the Isle of Wight).
- Hyper-local thinking is critical now and into the foreseeable future. People have been discovering what is on their doorstep and continuing to make best use of very local and accessible assets.

- The importance of feeling safe has reinforced some communities' need to stay local. This is particularly significant for vulnerable and poorer communities where existing health conditions are prevalent.
- People are valuing time spent with children and partners discovering new shared activities or responsibilities. This includes being active and often exercise has joined households together. Where families are active, children and young people are more likely to be active.
- There seems to be a lot more 'obvious' evidence of the linkages between physical activity and mental wellbeing.
- Some people are walking and cycling more, using their commute time differently as well as valuing the difference clean air and safe spaces bring.
- Digital poverty is a significant concern for places working with the vulnerable, disabled people and disadvantaged; yet it's also opened up new connections and enabled some places to reach new audiences.
- Councils are working hard to keep supporting leisure providers during the coronavirus crisis but the huge pressure on council funding has meant it is not easy to meet the needs of the leisure trusts.
- Councils and trusts want to explore what service redesign in addition to looking at how future operating models can be developed collaboratively.

Children and Young People

17. An [evidence paper](#) was commissioned by The Youth Sport Trust (YST), a national children's charity for play and sport. It looked at the impact of COVID-19 restrictions on children and young people and found that there are "substantial and wide-ranging implications for young people's mental health and wellbeing³. Cited in the report were feelings of loneliness, missing things during lockdown, older children worrying about life after lockdown, uncertainty about future employment, the impact of physical distancing and consequent social deprivation, and mental health issues – disproportionately reported amongst those of Black, Asian, and minority ethnic (BAME) origin⁴.
18. Sport England conducted research into [Children's experience of physical activity in lockdown](#). Their lives have been massively disrupted with widespread closure of spaces and places e.g. playgrounds, leisure centres, pitches, courts etc. According to parents and carers, just 19% of children were doing an hour of physical activity (meeting CMO guidelines)

³ [Evidence Paper: The Impact of Covid-19 Restrictions on Children and Young People July 2020](#)

⁴ It is recognised that the term BAME is inadequate for describing such a large and varied population. Alternatives can only be used where a research sample allows. This is why you will read different references throughout the report.

on a typical day. Most worryingly perhaps of all, 7% of children aged 7 – 16 years said they were doing nothing at all to stay active in lockdown. Children from a less affluent or a Black and minority ethnic background are likely to be doing less activity than their peers. The closure of schools (except for children of key workers) has made it harder for some children, especially teen girls, less affluent children and those from Black and Asian backgrounds, to stay active as they rely on at school provision to be active in their everyday lives.

The Physical Activity Sector

19. Community Leisure UK, a members' association representing registered charities, societies, or community interest companies (with a public benefit asset lock) delivering public leisure, sport and/or culture services for communities across the UK has produced two impact reports. The latest can be found here: [impact report](#). Cited is the loss of reserves and deficits that are accruing, lack of access to sector support and changes to staffing structures. Encouragingly, most groups with protected characteristics, including ethnic minority groups, women only religious groups, low socio-economic groups, disabled and older people, have returned to members' facilities upon reopening.
20. We do not have Isle of Wight specific data, but colleagues have reported ongoing dialogue relating to these challenges. Many, including the Isle of Wight are exploring a new [recovery fund](#) that Sport England has opened to help the island's sports facilities.

Risks

21. It has been widely reported that COVID-19 has disproportionately affected those people who were already facing challenges in their lives. The same is true for participation in physical activity. The groups and audiences most at risk on the Isle of Wight include:
 - Those 75+ years and especially those who have been shielding or those who have been caring or have needed to start caring for someone
 - Those 55-74 years
 - Those with a longstanding condition or illness and especially those who have been shielding
 - People living alone
 - People without children in the household
 - Some ethnically diverse communities
 - Children and young people
 - People on low income
 - People without access to private outdoor space

Action taken during the COVID-19 pandemic in the physical activity sector

22. A timeline of events can be seen at appendix 3.
23. At the start of the pandemic, two very clear priorities were set out for the physical activity sector by the national lead body for the sector, Sport England:

- **Supporting the sector:** Action to ensure it comes through this period in as strong a position as possible; and
- **Keeping the nation moving:** Doing everything we can to encourage people to stay active, wherever possible.

24. To deliver on these priorities, Sport England:

- Set up a webpage for up-to-date information: <https://www.sportengland.org/news/coronavirus-information-sector>
- Launched **#StayInWorkOut** asking the sector to [Join the Movement](#), a consumer-focused campaign to inspire and encourage people to #StayInWorkOut while adhering to government guidelines.
- Provided a [multi-million pound package of support](#) for organisations that help the nation stay active. Further funding for the recovery fund as outlined above has been added.

25. To support these clear priorities, Energise Me provided local support:

- Provided up to date webpages with news of what people can do to [stay active](#). This was also translated into a resource for social prescribers working on the Isle of Wight to use during welfare calls.
- Sent weekly sector news to sector partners including coaches, volunteers, local authorities, and others working in the sector.
- Organised regular virtual calls with local authorities and joined many voluntary sector calls to understand needs and provide support.
- Sent monthly newsletters to individuals who were signed up and wanted support to get active.
- Provided regular updates via social media.
- Supported School Games Organisers to help keep children active [#HSGDailyChallenge](#)
- Worked with the voluntary sector to get funding to groups adversely affected by COVID-19 (see below for more information)

Investing in Communities

26. Very early in the pandemic, Sport England committed up to £210 million to help the sport and physical activity sector through the pandemic.

27. To help reduce the negative impact of COVID-19 and the widening of inequalities in the nation's health and physical activity levels, Sport England partnered with Active Partnerships, and a few national partners, all of whom had established relationships with local organisations or the ability to connect to new local organisations. Energise Me has received £150k so far to distribute to organisations working with the identified priority groups; disabled people, those with long-term health conditions, those from Black, Asian and minority ethnic groups and those from lower socio-economic backgrounds. Existing partners and new ones have

benefited from this funding and those in receipt of funds on the Isle of Wight can be seen at Appendix 4.

28. This work has had benefits beyond the investment. New partner organisations and the role that they play have been discovered and new connections made. Training and development needs have been identified and will inform workforce development and ‘influencing the sector’ areas of work.

29. Analysing the award applications and reflecting on the conversations that have taken place, the following insight has been uncovered:

- Small charities struggling financially with fundraising events cancelled and grant funding sources paused. At the same time, many charities and Voluntary Community Sector Organisations (VCSO's) are reporting increased demand for services.
- Delivery costs have risen, both for online provision and small group, social distanced activity.
- More people experiencing mental health challenges. Both those who had pre-existing conditions and those who didn't.
- Research has found that disabled people are more likely to be self-isolating or shielding and report feeling isolated as a result. The research also showed that disabled people are less likely to be active
[The impact of COVID 19 on disabled people October 2020](#)
- People with long-term health conditions doing less activity. A result of reduced opportunities to be active coupled with loss of motivation and lack of confidence.
- Rising anxiety among people with long-term health conditions and carers leaving their homes for fear of catching or passing the virus on.
- Those who have been shielding report feeling ‘forgotten’ and are experiencing extreme isolation.
- Support networks, regular social interaction, and opportunities to leave home having disappeared. This has left adults from priority groups feeling isolated and lonely. Also true of young people, particularly from disadvantaged backgrounds and vulnerable groups. For example, young carers and young people who identify as LGBTQ+.
- Lockdown restrictions placed significant pressure on families and on those with [caring responsibilities](#)
- Published in [Carers Week](#) nationally, 4.5 million additional adults are caring for older, disabled or seriously ill relatives or friends since the Covid-19 pandemic.

- 11% of young carers and 19.7% of young adult carers report an increase of 30 hours or more in the amount of time they spend caring per week. [New Carers Trust Survey](#)
- Organisations have shown great resilience and agility to adapt, and at pace. Moving services and activities online gave a lifeline to the groups and individuals these organisations support. But with limited resources to operate these, the injection of Investing in Communities funding was timely.
- There is still a strong call and need for continued online provision. At the same time, increasing numbers of people are reporting zoom fatigue.
- Covid-19 has resulted in changes to circumstances and behaviours. People in the priority groups who were active have become less active/inactive. Households who were not on low income have become so.
- Leisure providers re-opening facilities are under pressure to focus on profit-making activities. This limits their ability to provide activities needing a cross-subsidy e.g. Cardiac rehab, etc.
- The lasting effects of long COVID, both mentally and physically are emerging.
- Insight gathered through this pandemic has exposed gaps in voluntary sector provision and/or capacity in communities where there are inequalities.

Summer Activities and winter package

30. Romsey and Park Community (Havant) Schools organised a programme of summer activities and free childcare for families across Hampshire and the Isle of Wight. The programme was aimed at families whose children qualified for free school meals or those who were vulnerable or experiencing issues with transitioning out of lockdown. Each family was given a two-course cooked lunch and took part in activities including arts, cultural and physical, cooking, the Daily Mile and daily storytelling. On average family groups of 9+ regularly attended the venues. Average attendance was 8 visits, with many families coming more often. The island delivered 3 family fun days, 2 holiday childcare and 1 teen projects.
31. A winter package was announced on 20 November 2020 to support children and their families. The package came too late to organise activities over the Christmas school holidays, but it is expected that they will be in place for February half term and the easter school holidays.

32. A Mental Health Alliance, led by Public Health, was formed in the summer 2020 on the Isle of Wight. The group recognises the role physical activity can play helping individuals to maintain positive mental health. The alliance will focus on physical activity capitalising on the natural environment assets available locally.

Returning to physical activity

33. Also, in the summer of 2020, the Out and About project was developed. It provided personal support to individuals to enable them to leave their home and return to some semblance of their pre-COVID activities whilst maintaining their own safety and adhering to government guidelines. Local volunteers encouraged people to go on short walks to improve their physical activity to pre-COVID levels. Residents were supported to walk to their local shops, or to go for a walk in their local area.

Falls reduction

34. A leaflet has been produced to encourage light physical activity focusing on strength and balance in older people (and carers) who may have been shielding or have been less active than usual during COVID-19. The aim is to reduce the number of falls amongst older people and the potential consequences such as broken bones, hospital stays and long-term reduced mobility. The leaflet will be circulated to pharmacies and care navigators at the beginning of February.

Moving Forward

Social Prescribing

35. Energise Me has received funding from Sport England, to employ a Regional Physical Activity & Health lead, who will work as part of a wider team of cross sector leads, to support the National Academy of Social Prescribing's Thriving Communities programme. The project will support local communities to create, extend and improve activities, for and alongside, those most impacted by COVID and will work with other sectors including Arts Council England, Natural England, NHS England, NHS Charities, NASP and Money and Pension Services. Will it be working with primary care too?

Development of a new Physical Activity Strategy 2021

36. Work is nearing completion on the next physical activity strategy for Hampshire and the Isle of Wight. All public health teams are sponsoring the project to develop the strategy. An online conversation took place over 4 weeks before Christmas and the findings shared with the project board in January 2021. Partnering with an external organisation, an online platform was used to reach and speak to people. 353 people registered to join the conversation and 255 people logged in to share their ideas and experiences, and to read what others had shared. 1,234 contributions were made— a combination of ideas, comments, and votes.

37. These voices, many from under-represented groups across Hampshire and the Isle of Wight, will be used to inform a [planning workshop](#) on 30 March 2021. Over 150 people are already signed up from a range of

backgrounds; transport, health, education, voluntary and faith sector, arts and culture etc. Wide leadership and support from public, private and voluntary sector organisations as well as communities and people is crucial to the successful delivery of the strategy. No one person, community or organisation can do this on their own.

38. A draft of this strategy will be brought to the board in the next few months.

Conclusion

39. Being physically active is one of the ways individuals can modify the risks to their health. For the COVID virus, and other health related illnesses and diseases. In the last 3 years, the island has made some excellent progress in physical activity levels amongst adults. More adults are active than 4 years ago, and some inequalities have reduced and even reversed amongst male and female participation. It is evident though that where there were existing inequalities, these are likely to have been exacerbated by the pandemic and we need to maintain the focus on these groups during this pandemic and beyond. It requires leadership and a collective response from the board. How partners respond collectively to the challenge can and will make a difference to activity levels and inequalities.

Recommendations

40. The Board is asked to discuss and note:

- Using the insight to inform recovery / restoration plans
- Using physical activity as a resource to improve people's physical and mental wellbeing.
- Encouraging the schools that are selected, to take part in the Children and Young People Active Lives Survey to gather better data to inform future actions and investments.
- Embedding physical activity in all care pathways.

41. The Board is asked to discuss and decide on:

- Adopting the next Hampshire and Isle of Wight Physical Activity Strategy as part of the Board's strategic priorities for health and wellbeing.

- Sharing relevant insight across IOW partners and develop an annual action plan with them that informs actions and investments.

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Appendix I

Population breakdown by local authority area

	England	Hampshire and IOW	Isle of Wight
Male	49.2%	49.3%	48.8%
Female	50.8%	50.7%	51.2%
No limiting illness	82.4%	83.7%	77.4%
Limiting illness	17.6%	16.3%	22.6%
0-15 years	18.9%	18.3%	16.4%
16-34 years	25.4%	24.1%	19.0%
35-54 years	27.8%	27.8%	26.2%
55-74 years	20.2%	21.2%	27.0%
75+ years	7.7%	8.5%	11.5%
NS SeC 1-2	31.3%	34.0%	28.0%
NS SeC 3-5	29.1%	30.0%	33.1%
NS SeC 6-8	30.6%	27.1%	33.2%
Unclassified	9.0%	8.9%	5.7%
White British	79.8%	89.4%	94.8%
White: Other White	5.7%	3.9%	2.5%
Asian/Asian British	7.8%	3.6%	1.1%
Black/African/Caribbean/Black British	3.5%	0.9%	0.2%
Mixed/multiple ethnic groups	2.3%	1.6%	1.2%
Other ethnic group	1.0%	0.5%	0.1%

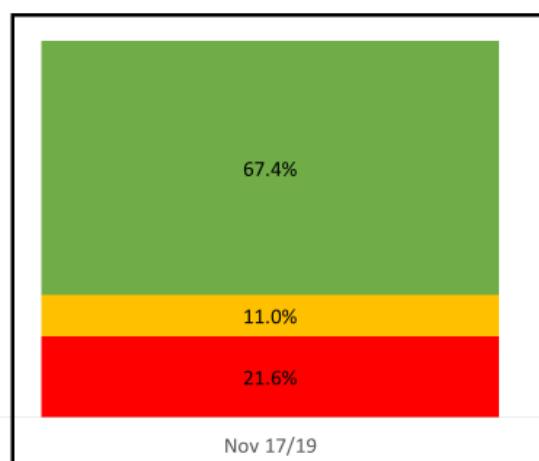
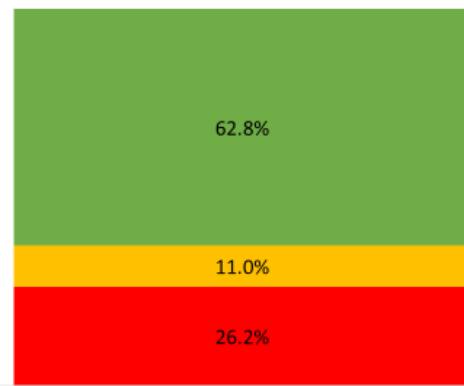


Source: ONS 2011, Census

Physical activity behaviour over time

Data within this document will be from Nov 17/18 and Nov 18/19 combined unless otherwise stated

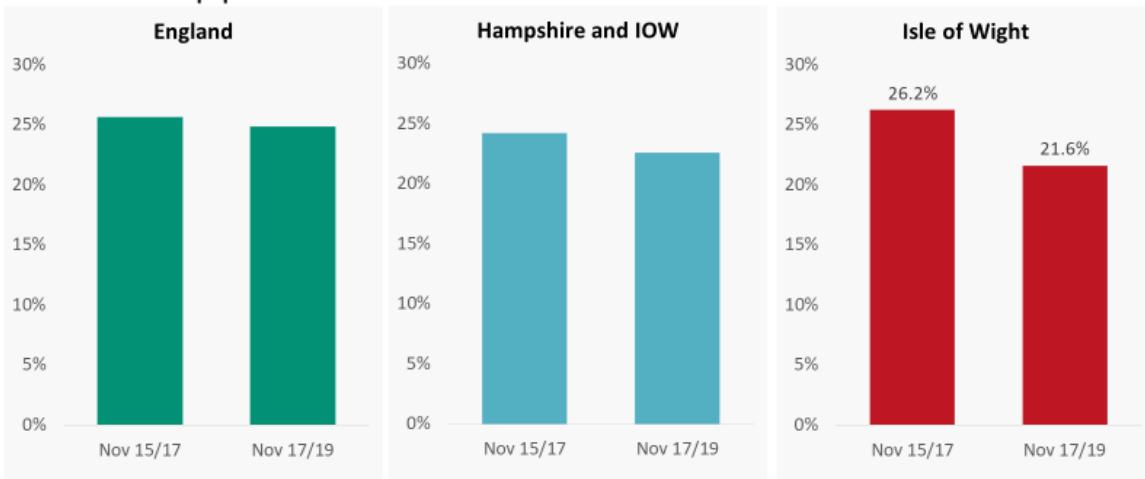
The latest data shows 21.6% of adults in Isle of Wight are inactive



Source: Sport England, Active Lives Adults, Nov 15/16 to Nov 18/19, age 16+, excluding gardening

Physical activity behaviour trends

Inactive: whole population

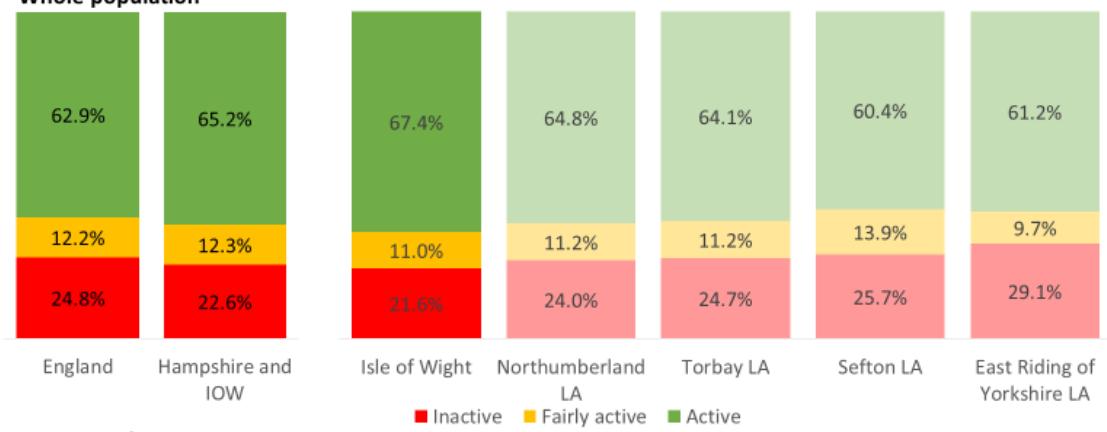


Source: Sport England, Active Lives Adults, Nov 15/16 to Nov 18/19, age 16+, excluding gardening

Physical activity behaviour comparisons

England and nearest neighbours

Whole population



Source: Sport England, Active Lives Adults, Nov 17/18 - Nov 18/19 combined, age 16+, excluding gardening

Inactive behaviour comparisons

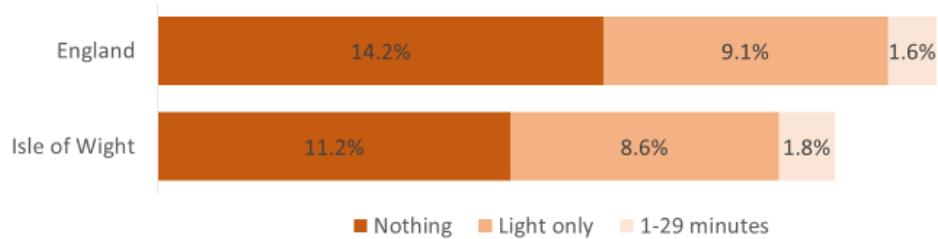
Comparison against all Local Authorities over time

Whole population



The inactive population of Isle of Wight is approximately 26,000 people

- Nothing:** 11.2% do no physical activity at all, approximately 14,000 people
- Light only:** 8.6% of the population are missing the intensity, approximately 10,000 people
- 1-29 minutes:** 1.8% are active but not for 30 minutes per week. This is approximately 2,000 people



Appendix 2

Percentage of adults not doing at least 30 minutes Gender



Percentage of adults not doing at least 30 minutes Age



Percentage of adults not doing at least 30 minutes Social Grade



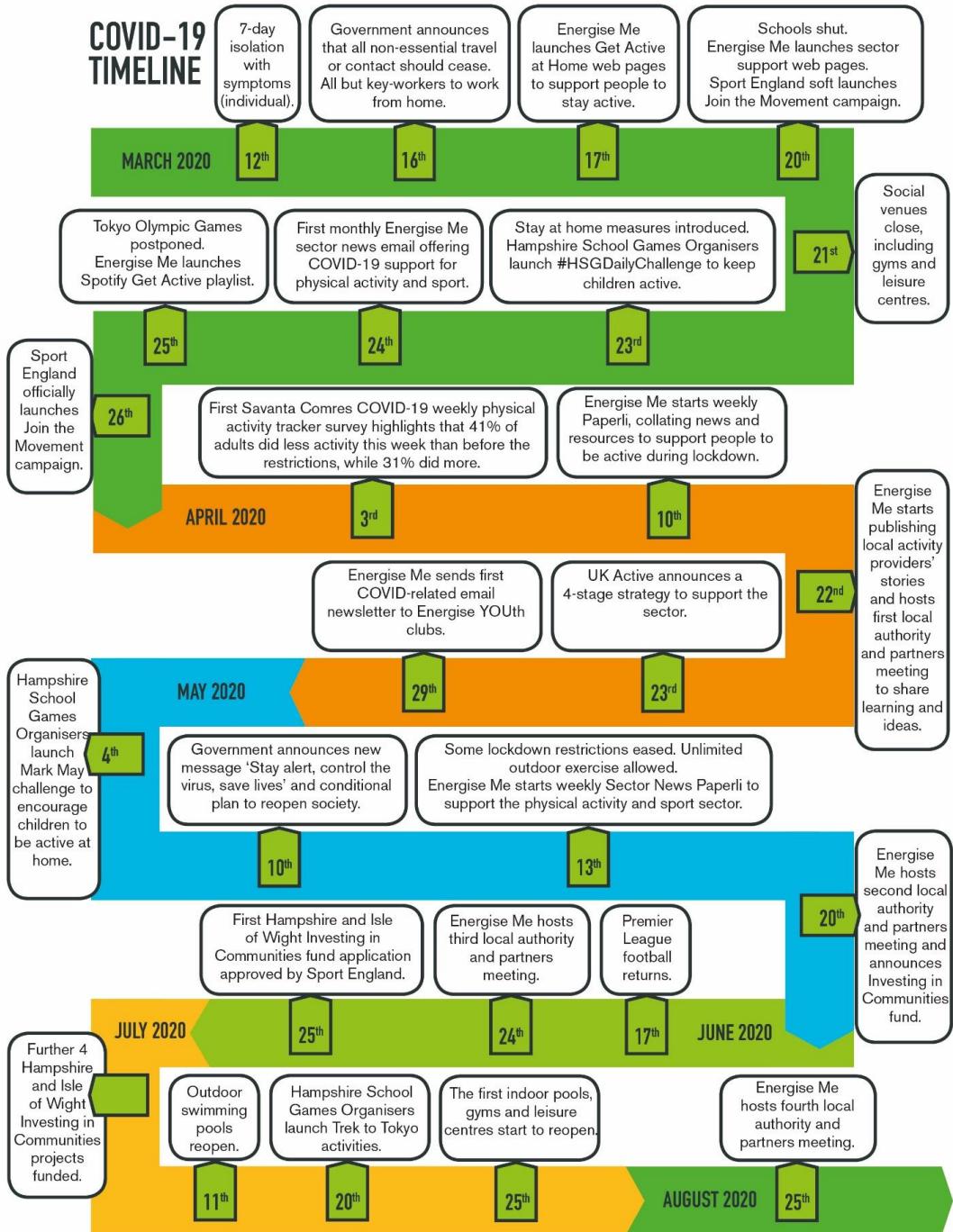
Percentage of adults not doing at least 30 minutes Disability

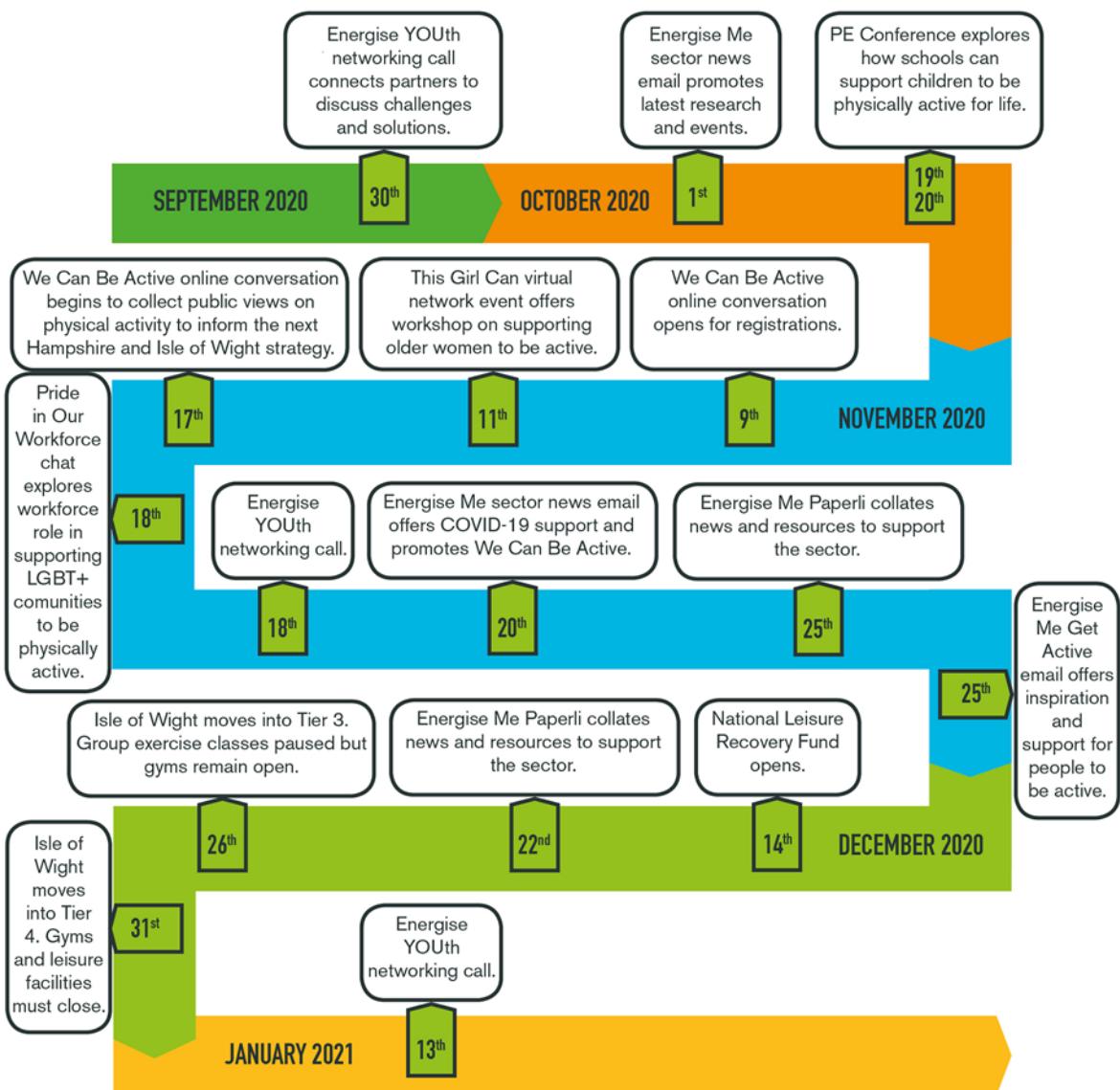


Percentage of adults not doing at least 30 minutes Children



Appendix 3





Appendix 4

Organisation	Organisation type	District	Audience	Project Description	Amount approved
Breathe Easy	Constituted voluntary organisation	IOW	Long term health conditions	Introduction of a new five-week summer programme, Keep Active Restart Exercise (KARE). Outdoor sessions delivered by a respiratory exercise specialist in local parks and seafronts. Small, socially distanced groups of up to 5 people for one hour a week (10 groups). Sessions designed to help participants re-engage with others following lockdown and provide support and encouragement from the instructor through motivation and behaviour change techniques. Opportunity to take part in various aerobic, resistance, flexibility, and balance exercises in preparation for the Keep Active classes resuming indoors later in the year. Exercising at home to be encouraged by providing every participant with a resistance band and a copy of the British Lung Foundation Exercise Handbook. Additional telephone support to be provided.	£2,625.00
Isle Access	Registered Charity	IOW	People with disabilities	Prior to the pandemic Isle Access was providing a cycling programme using adapted bikes. Delivery was put on hold one week before lockdown and their aim is to re-start in September 2020. Isle Access will purchase a stock of cycling helmets to enable a safe resumption of their adapted cycling programme.	£720.00
				Total	3, 345