

## Written evidence submitted by Sport England (PHS0476)

Sport England is an arm's length body of the Department for Culture, Media and Sport with the responsibility in England to transform people's lives by getting them active and playing sport. We are committed to using our advocacy, insight and investment of Exchequer and National Lottery funding to harness the wide-ranging benefits of sport and physical activity for individuals and communities across the country.

1. Sport England welcomes physical activity being identified as a topic for the Committee's consideration. There is significant evidence that movement and physical activity can play a key role in preventing and managing poor health, and helping people to age well.
2. Physical activity contributes to the prevention of over 20 chronic conditions and diseases, including some cancers, heart disease, type 2 diabetes and depression<sup>1</sup>.
3. Health and wellbeing is one of the central issues within Sport England's *Uniting the Movement* strategy<sup>2</sup>. We believe sport and physical activity should be at the heart of how we support the nation's - and our individual - health and wellbeing.
4. While we believe physical activity is key to preventative health more broadly, we have highlighted two specific areas where it can play an important role: mental health and multimorbidity.

### **Physical activity and mental health**

5. Physical activity is well-placed to make a significant contribution to preventing mental ill-health across the population: there is demonstrable evidence of a strong association between physical activity and positive mental wellbeing outcomes. People with higher activity levels have higher wellbeing scores and conversely; those with lower activity levels have lower wellbeing scores<sup>3</sup>.
6. Being active contributes to a range of wellbeing outcomes, including a positive impact on happiness, confidence and self-esteem, as well as helping to manage and relieve the symptoms of anxiety, stress, and depression<sup>4</sup>.
7. Evidence suggests that less active adults are almost twice as likely to have depression than those who are active for just one or two hours a week<sup>5</sup>. People of all ages who are more physically active than the general population have a 17% lower risk of developing depression than those who are less active<sup>6</sup>.

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<sup>1</sup> <https://www.gov.uk/government/publications/physical-activity-applying-all-our-health/physical-activity-applying-all-our-health>

<sup>2</sup> <https://www.sportengland.org/about-us/uniting-movement/what-well-do/connecting-health-and-wellbeing>

<sup>3</sup> <https://www.sportengland.org/research-and-data/data/active-lives>

<sup>4</sup> <https://sportengland-production-files.s3.eu-west-2.amazonaws.com/s3fs-public/sport-outcomes-evidence-review-report.pdf>

<sup>5</sup> <https://pubmed.ncbi.nlm.nih.gov/28969440/>

<sup>6</sup> <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8638711/>

8. The COVID-19 pandemic and the cost-of-living crisis have had a significant negative impact on the population's mental health<sup>7</sup>. There is an immediate opportunity to deploy physical activity to help improve people's mental health.

### ***Physical activity and multimorbidity***

9. The number and proportion of people living with multiple long-term health conditions (LTHCs) is increasing, particularly amongst lower-socioeconomic groups, older adults, women and some ethnic groups<sup>8</sup>. This is leading to widening health inequalities and increasing pressures on health and social care systems.
10. Estimates for the percentage of people living with more than one LTHC in England vary from 15% to 30% according to different national and local sources. In the UK this number is expected to rise to 68% in 2035<sup>9</sup>.
11. Activity levels are significantly lower amongst people with multimorbidity due to a range of challenges<sup>10</sup>. The evidence is clear that physical activity is safe for the vast majority of people living with symptoms of multiple LTHCs<sup>11</sup>.
12. People with multimorbidity can share common problems such as reduced mobility, chronic pain, reduced social networks, incapacity to engage with work, and lower mental wellbeing<sup>12</sup> - all things that physical activity can support.

### ***Why further scrutiny and action is needed***

13. There is an economic case for promoting physical activity. Research<sup>13</sup> has found that community sport and physical activity generates a combined £51.5 billion across physical and mental health and mental wellbeing.
14. There are substantial opportunities to better utilise and promote the role of physical activity in preventative health:
  - a. Including physical inactivity as a recognised risk factor for poor health outcomes within NHS and social care policy and priorities – for example, Core20Plus5, the emerging Integrated Care System plans to support the delivery of local strategic place-based prevention priorities that support better physical and mental health.

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<sup>7</sup> Since the pandemic, depression occurrences in adults [have doubled from 1-in-10 to 1-in-5](#), while for children mental health challenges have [increased from 1-in-9 to 1-in-6](#).

<sup>8</sup> <https://evidence.nihr.ac.uk/collection/making-sense-of-the-evidence-multiple-long-term-conditions-multimorbidity/>

<sup>9</sup> <http://sro.sussex.ac.uk/id/eprint/89665/>

<sup>10</sup> <https://bjgp.org/content/71/713/e921>

<sup>11</sup> Reid H, Ridout AJ, Tomaz SA on behalf the Physical Activity Risk Consensus group, et al Benefits outweigh the risks: a consensus statement on the risks of physical activity for people living with long-term conditions British Journal of Sports Medicine 2022;56:427-438.

<sup>12</sup> <https://evidence.nihr.ac.uk/collection/making-sense-of-the-evidence-multiple-long-term-conditions-multimorbidity/>

<sup>13</sup> [https://www.sportengland.org/guidance-and-support/measuring-impact?section=social\\_and\\_economic\\_value\\_of\\_community\\_sport](https://www.sportengland.org/guidance-and-support/measuring-impact?section=social_and_economic_value_of_community_sport)

- b. Training health and care professionals to talk about physical activity so it can be recommended as a core part of treatment and waiting well to anyone (CYP and adults) accessing the health system for physical or mental health and wellbeing, and with those who could benefit most from being signposted or referred onto physical activity.
  - c. Encouraging greater recognition of the role sport and physical activity can play in supporting national and local mental health prevention plans i.e. new mothers, suicide, and secondary prevention.
15. It is important to acknowledge that participation in physical activity – particularly as a means to manage and improve population health or wellbeing – cannot be approached as a standalone issue. No individual sector can achieve this in isolation.
16. Health, sport, education, transport and community initiatives have a critical part to play, and cross-sector working will be essential. Whether through the design of active environments, introducing physical activity within treatment pathways, or ensuring opportunities to be active are co-created with the people they are seeking to engage, all will have a significant impact on the way people live and move more.
17. It is important that the Committee considers physical activity and obesity as separate agendas. The wide-ranging benefits of physical activity go far beyond weight management alone, and the evidence-base for what works in obesity reduction spans much wider determinants and diet-related issues.

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