

**UPDATE ON THE STOCKPORT ACTIVE COMMUNITIES REFRESH 2022-2030****Report of the Director of Public Health****1. INTRODUCTION AND PURPOSE OF REPORT**

- 1.1 Stockport's current Active Communities Strategy 2019-2021 was launched in Autumn 2019 and, despite the challenges presented by the pandemic since March 2020, has demonstrated positive impact over the past 20 months.
- 1.2 Although the principles and priorities of the strategy to support and facilitate physical activity for the most inactive residents of Stockport remained unchanged, the focus shifted to targeted support for residents as part of the Covid-19 response, including community support for people experiencing the effects of Long Covid. This specific programme is called Stockport Moving Together and was a UK Active Awards Finalist for 'Developing & Supporting Communities During Covid-19'.
- 1.3 Since the 2019 launch, not only have we seen the impact of Covid restrictions on both the physical and mental wellbeing of residents across Stockport, but we have also seen the launch of both the new Sport England Strategy (Uniting the Movement) and the refreshed Greater Manchester Strategy (GM Moving in Action).
- 1.4 This report provides an update on the proposed refresh of the Stockport Active Communities Strategy. The intention is to continue to adopt a whole systems methodology, but one that is aligned to the new national, Greater Manchester and local priorities, as well as continuing to mitigate against the negative impact of Covid-19 on the wider health and wellbeing of people in Stockport.
- 1.5 Local strategic priorities will focus on alignment to the Stockport Climate Action Now Strategy, the ONE Stockport Borough Plan and the Stockport ONE Health and Care Plan.
- 1.6 The first working draft copy of the refreshed strategy and the proposed engagement timeline are included for comment and feedback as part of the initiation of the next phase of the wider engagement process.

**2. BACKGROUND**

- 2.1 Evidence that physical activity and movement are good for us is undisputed. However, the factors that currently result in a more sedentary and less active lifestyle are complex. As a result, on average people in the United Kingdom today are 24% less active than in 1961 across all age groups.
- 2.2 Evidence from other high-income countries in Europe, such as Finland, the Netherlands and Germany, shows that behaviour change across all sections of society requires large scale and sustained effort at all levels, if daily physical activity is to be regarded as the norm in the modern world.

- 2.3 It requires all sectors to accept the need for change, think long term and build on what the evidence demonstrates to both work and be cost effective. Tackling physical inactivity is pivotal to addressing many of the local health, social, regeneration, transport, environmental and educational inequalities and priorities. Even small increases in levels of physical activity can result in significant improvement to the health of both individuals and populations.
- 2.4 Humans are designed for physical activity. Our bodies have evolved to be active for sustained periods of time, being able to walk long distances interspersed with short and explosive bursts of energy, in order to search for shelter, gather food and capture prey.
- 2.5 It is only in the latter half of the 20th century that physical fitness and activity have become non-essential to our daily lives. We walk and cycle less, as cars become more affordable and convenient; automated and computerised jobs require us to be less physically active and electrical appliances have made domestic chores less physically demanding.
- 2.6 Whilst technology has improved our quality of life in many ways, it provides us with many sedentary ways to both carry out our daily routines and fill our leisure time. Consequently, we are less active, walk less, sit down more, and expend less energy.
- 2.7 The physical demands placed on our bodies are now so low that our functional capacity has reduced and public levels of fitness have fallen to the extent where it is now impacting negatively on the health of all sections within the population. For the first time in the evolution of humans, it is now necessary to find ways of consciously building physical activity into our daily routines to remain healthy.
- 2.8 Stockport has traditionally compared well in terms of levels of physical activity across all age groups – indeed, the very latest Sport England Active Lives data for adults (aged 16+) indicates that Stockport is the most active Borough across GM and that Stockport is above the England, Northwest & GM averages for both ‘active’ and ‘active & fairly active’ adults

	Active (150 mins+ per week)	Fairly active & Active
Stockport	64.8%	74.4%
England	60.9%	71.3%
NW	59.6%	71.1%
GM	58.0%	69.5%

(Sport England Active Lives Survey October 2021)

- 2.9 Whilst this may initially seem positive – and it is a good foundation on which to build – it also means that around 80,000 adults in Stockport are not meeting the Chief Medical Officer’s minimum physical activity recommendations.
- 2.10 The most recent data for children and young people indicates that approximately 20,600 5–16 year olds in Stockport are not meeting the Chief Medical Officer’s minimum physical activity recommendations.

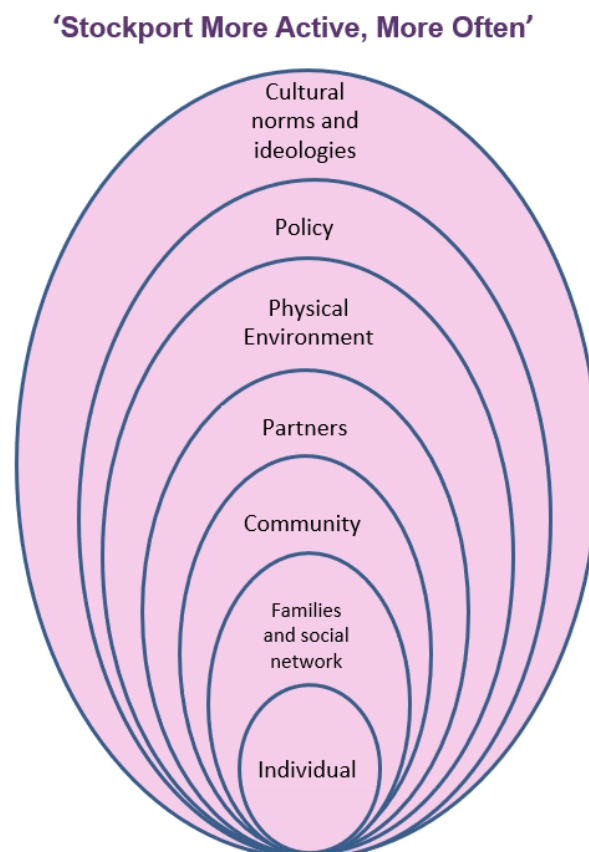
2.11 Inactivity not only places excess strain on the health and social care system, but wide-ranging evidence illustrates the detrimental impact it has on individual achievement, social and economic development, community cohesion and in achieving carbon reduction targets.

2.12 A Stockport population that is 'More Active, More Often' has the potential to play a fundamental role in delivering the ambition of the ONE Stockport Borough Plan, the Stockport Climate Action Now Strategy and the Stockport ONE Health and Care Plan.

### 3. STRATEGY REFRESH DEVELOPMENT

3.1 The refresh of the Stockport Active Communities Strategy will maintain the whole systems methodology, as systems evidence shows (including the Marmot Review into health inequalities in England, published in February 2010) that unless we address the fundamental challenges at each level, sustained improvement is unlikely.

3.2 In terms of physical activity, the model below summarises the identified system levels.



3.3 The first strategy working draft (please see attached), outlines the approach, principles, implementation priorities, success criteria and wider outcomes that we propose to adopt.

- 3.4 Feedback received so far has clearly outlined the requirement to add tangible links to the Stockport Climate Action Now Strategy, the ONE Stockport Borough Plan and the Stockport ONE Health and Care Plan.
- 3.5 In addition, inclusion of case study examples of the positive impact already seen through the current strategy programme work will be actioned, with work currently ongoing to identify the most suitable exemplars.
- 3.5 As part of the strategy development to date, we have undertaken some 'soft' engagement with resident's groups, as well as partner organisations. As we move into the next wider engagement phase, it is proposed that the focus will be on obtaining feedback against the following key questions when sharing formally with partner organisations and Boards;
- i. Do you agree with the proposed systems methodology?
  - ii. Are the proposed principles correct (slides 8-10)?
  - iii. Are the identified priority groups correct? Are any missing? (slide 19)
  - iv. Are there any implementation priorities missing (slides 28-34)?
  - v. Based on current data, are the targets for increased levels of physical activity appropriate & realistic (slides 17-18)?
  - vi. Are there any other wider outcomes that can be impacted by increased levels of physical activity across a population (slide 40)?
- 3.6 Questions for wider public engagement are currently being developed but will use more informal terminology to avoid jargonistic language, whilst still considering the same points.

## **4 CONCLUSIONS**

- 4.1 We know from engagement and conversations over several years that residents in Stockport have a growing understanding of the importance of an active lifestyle and many want to be more active as part of daily life.
- 4.2 However, significant numbers are not active enough to support their health and wellbeing across all stages of life - as referenced by the Chief Medical Officers of all four home nations. This is especially significant as residents move into older age.
- 4.3 The Stockport Active Communities Strategy 2022-2030 will work with residents and communities to support, facilitate and help embed movement into our daily lives.

## **5 RECOMMENDATIONS**

- 5.1 The Board is asked to note and endorse the proposed continuation of a whole systems methodology for the Stockport Active Communities Strategy 2022-2030.
- 5.2 The Board is invited to comment on, and respond to, the key engagement questions outlined section 3.4 of the report.

- 5.3 It is proposed that the Health and Wellbeing Board provide oversight of the refreshed strategy within the governance structure outlined in the strategy.
- 5.4 The Board is asked to endorse the proposed attached 'Key Milestones' timeline for wider engagement on the refreshed strategy
- 5.5 That the final draft strategy be brought back to the Board in March following the wider public engagement, prior to going to the Council's Cabinet.

## BACKGROUND PAPERS

1. Stockport Active Communities Strategy 2022- 2030 Working DRAFT v1 (Attached)
2. Key Milestones Engagement Timeline (Attached)

Anyone wishing to inspect the above background papers or requiring further information should contact Russ Boaler on telephone number Tel: 0161 474 3941 or alternatively email [russ.boaler@stockport.gov.uk](mailto:russ.boaler@stockport.gov.uk)