

MK Place Insight and Consultation Partner Report

For MK PEP Board, April 2026

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Executive Summary

This insight study forms part of a wider research and development programme focused on increasing physical activity among residents in eleven Milton Keynes estates identified by Sport England as inactive. The study contributes to the evidence base by examining residents' own perceptions of barriers to physical activity.

The research began with a targeted review of recent literature on physical activity participation within socioeconomically disadvantaged and culturally diverse UK communities. Findings from this review were strongly reflected in residents' reported barriers. While residents share common community contexts, individual perceptions of physical activity are shaped by personal experience, knowledge, and attitudes. Understanding these lived experiences is essential to identifying how barriers might be addressed.

Four research questions guided the study. These explored what residents valued about their estates, how they spent their leisure time, and which involved physical activity. The study also examined which activities residents would like to pursue and the barriers preventing participation.

A total of 462 residents took part, representing all age groups and all eleven target estates, and drawn from the cultural diversity of the local population. Data were collected through interviews, focus groups, and creative workshops. The final stage of the study is ongoing collecting further responses via a final survey to ensure the diversity of resident views.

Several strong themes emerged. Adult participants were largely motivated by opportunities to socialise within familiar community settings. Apart from new mothers prioritising their own and their infants' wellbeing, few adults expressed aspirations to increase their own physical activity. In contrast, participants consistently emphasised the importance of physical activity and outdoor play for children and young people. Both adults and young people perceived limited opportunities and motivation for young people to be active within their estates.

Barriers to physical activity included personal factors, such as individual wellbeing and perceptions of safety, as well as structural factors relating to limited local amenities, facilities, and programmes. Contrasting views were

evident across all themes, highlighting the diversity of lived experiences within and across estates.

The study concludes by synthesising key barriers, residents' perspectives on potential solutions, and opportunities for addressing these barriers in future interventions.

Introduction

This report builds upon interim reports to the Milton Keynes Places Expansion Project (MKPEP) Board and the 'Summary of Insight' report part way through data collection.

We start by reviewing what is already known by visiting existing research literature and learning from Sport England's pilot projects. We then reflect upon the effectiveness of our approach to consulting with residents and the development of insight about how to nurture more active communities as set out in our 'Summary of Insight' report.

We then go on to report key themes that emerged from resident data. In our interim report we focused upon the lead question to better understand the barriers residents expressed to being more active. In this report we also explore the underlying factors which contributed to the barriers expressed. Increased understanding of what residents enjoy about their communities, the activities they were intrinsically motivated to pursue and the aspirations they had for increased activity for themselves and those they cared for provided a base for developing better understanding. A discussion of findings from resident data then leads to insight which we trust will support the Board's next task to identify investment and interventions which can nurture more sustainably active communities.

We conclude by highlighting potential actions to support the Local Co-design process recommended by the insight and by reflecting upon the limitations of this insight gathering study with recommendations for further investigation consultative work with residents.

Purpose of this report

The purpose of this report is to equip the Board for the next stage of its work to co-design interventions and investment in the target estates to nurture more active communities by providing insight that reveals residents' lived experiences of physical activity, their beliefs and understandings. This report sets out:

- A brief review of the most recent literature to reveal what is already known about barriers to communities being more active in the UK, particularly in

low socio-economic areas with characteristically higher levels of inactivity.

- Residents' stated chosen recreational pursuits, particularly their active pursuits, and their aspirations for further opportunities to be active.
- Residents' perceptions of barriers to being more active.
- Insights that could help to shape the Board's approach to co-designing interventions and investment that build upon residents' chosen recreational experiences and mitigate perceived barriers to increased activity.
- The limitations of the study and recommendations for further insight development.
- A summary of potential next actions.

In our expression of interest to undertake this role with the Milton Keynes Place Expansion Project MKPEP Board we set out our approach to the assignment and the challenges of insight gathering and consultation with inactive communities. Our understanding of that challenge was underpinned by the community engagement and promotion of physical activity experience of the research team. This was updated by a review of literature reporting challenges of engagement with inactive communities particularly the experiences of the Sport England piloting projects. We recognised that this project is the first of a multi-stage programme to facilitate behaviour change in inactive communities.

Our approach to the project has been to contribute to the overall aim of engaging the community in the ownership and codesign of interventions to support sustainable community behaviour change. This stage of the overall programme has contributed to the next co-design stage engaging with local community leaders, many of whom have facilitated community insight gathering. We believe we have been able to provide rich insight and help in nurturing strong community partnerships for the next delivery phase of the Board's work.

What we already know – review of recent research literature

The review of recent literature contained in Annex B addresses sociocultural barriers in UK inactive communities recognising the layers of social, cultural and economic factors which reduce activity and increase inactivity.

Here we summarise the impact of socioeconomic and cultural challenges for residents of low socioeconomic areas on their activity levels to support the development of insight from residents' data. It is highly appropriate to recognise these well documented challenges. It is also important to recognise the unique experience of every resident. Being sensitised to instances where participation in physical activity defies the barrier norms can also lead to valuable learning and amplify the impact of factors which support positive aspects of residents' lived experiences despite socio-economic and cultural barriers.

The literature review highlights the deeply embedded and multifactorial nature of physical inactivity within low-socioeconomic-status (SES) communities in the UK. Evidence consistently demonstrates that inactivity is not simply a matter of individual choice, but is shaped by intersecting socioeconomic, environmental, health-related, psychological, and sociocultural barriers which collectively reduce people's capability, opportunity, and motivation to be physically active.

Structural and environmental inequalities are central determinants of physical activity. Deprived neighbourhoods experience long-standing underinvestment in infrastructure, poorer environmental quality, and reduced access to safe and attractive spaces for walking, cycling, and recreation. Safety concerns—including crime, poor lighting, traffic hazards, and poorly maintained routes—are widely reported deterrents, particularly for older adults. Even where green space exists, issues such as poor connectivity, shared-use conflicts, and large road systems can generate psychological and social barriers by fragmenting communities and limiting perceived accessibility.

Economic constraints further restrict participation. Low-SES populations face financial barriers associated with the cost of activities, transport, childcare, and time away from work. Within highly deprived contexts, physical activity provision is often expected to be free or voluntary, reflecting reliance on community goodwill and third-sector support. While such provision can sustain

engagement in the short term, it raises challenges around sustainability, equity, and long-term delivery.

Health inequalities significantly reduce physical capability among disadvantaged groups. Higher prevalence of chronic conditions, mobility limitations, and poorer baseline fitness levels limit both perceived and actual ability to engage in physical activity. Mental health difficulties are also frequently cited as absolute barriers. Nonetheless, the literature also notes variation within communities, with some individuals viewing physical activity as a means of managing health and wellbeing, suggesting potential leverage points for intervention.

Psychological factors play a decisive role in shaping behaviour. Lower confidence, reduced self-efficacy, limited awareness of opportunities, and difficulties with behavioural planning are more prevalent in low-SES groups. These challenges are compounded by time constraints arising from irregular employment, caregiving responsibilities, and complex family structures. While some groups face acute time poverty, others—such as early retirees or those not in employment—may have available time but still experience motivational or confidence barriers.

Social capital and physical activity norms are consistently lower in disadvantaged communities. Weak social networks, lack of active role models, and entrenched norms of inactivity reduce both uptake and maintenance of physical activity across the life course. Evidence suggests these patterns often span generations, with children growing up in environments where physical activity is not socially embedded, limiting the development of long-term active habits. Notably, new parents—particularly mothers—appear more receptive to physical activity messages during key life transitions.

Sociocultural barriers add further layers of complexity, particularly in ethnically diverse and marginalised communities. Cultural expectations, gender norms, modesty concerns, and perceptions of appropriateness restrict engagement, especially among women and older adults from minority ethnic backgrounds. A lack of culturally tailored provision—including women-only sessions, faith-sensitive spaces, and accessible communication—limits reach and inclusion. Experiences of racism, discrimination, and social exclusion further undermine trust in institutions, reduce feelings of belonging, and discourage participation.

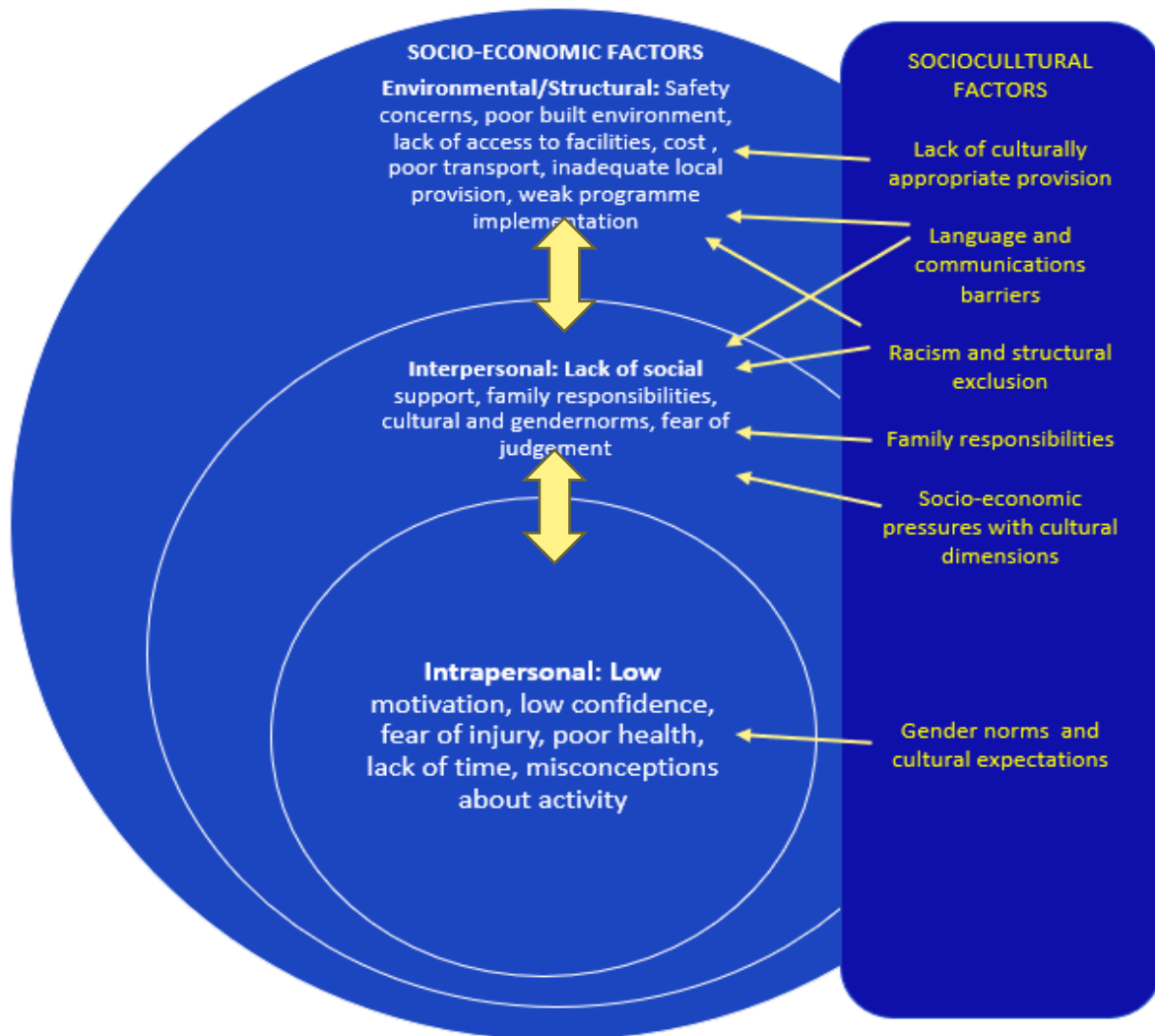
Language barriers, family and community obligations, and culturally shaped economic pressures also constrain opportunities for physical activity. Extended family responsibilities, long working hours, and expectations to prioritise collective needs over individual wellbeing reduce time and autonomy for engagement, reinforcing socioeconomic inequalities through culturally mediated pathways.

Overall, the literature emphasises that physical inactivity in low-SES UK communities is produced by intersecting and reinforcing barriers operating at individual, social, environmental, and structural levels. Effective responses therefore require multi-level, community-driven approaches that address systemic inequities, build social and physical activity capital across the life course, and deliver inclusive, culturally responsive provision aligned with the lived realities of disadvantaged populations.

Recent research demonstrates that physical activity levels are shaped by economic factors but also by a complex interplay of other factors. Consideration of the social, economic and cultural factors impacting residents in low socio-economic and culturally diverse communities will prepare the Board to work with the target communities and equip them to co-design physical opportunities which address inequalities and challenges residents experience to be more active.

The schematic below illustrates the interplay between social, economic and cultural factors identified in the literature as underpinning barriers to individual participation and creating inactive communities. It highlights the impact of multiple factors impacting individual residents particularly the potential for low levels of individual confidence and experience of being active (intrapersonal factor) leading to less socialising (interpersonal factor) which can lead to weak support for use of places and programmes for physical activity and eventual loss. There is overall a reduction in social cultural capital for physical activity – generational lack of experience of participation, knowledge about how to engage in physical activity, essential memories of the joy and benefits of participation. A spiral of decline which needs to be reversed to engage individuals to build communities of active residents and a culture of activity that can thrive. This will require coordinated interventions that look beyond individual behaviour and target the broader systems that shape opportunity and motivation i.e. at the structural and interpersonal levels. Continued investment

in community programmes, accessible facilities, and targeted support is essential for reducing the activity gap across diverse cultural and socioeconomic groups.



Schematic to show the interplay of socio-economic-cultural factors impacting physical activity participation.

Methodology

The study gained a favourable opinion to proceed from the Open University Human Research Ethics Committee 2025-1028-2.

Our approach to the study followed that set out in the schematic below.

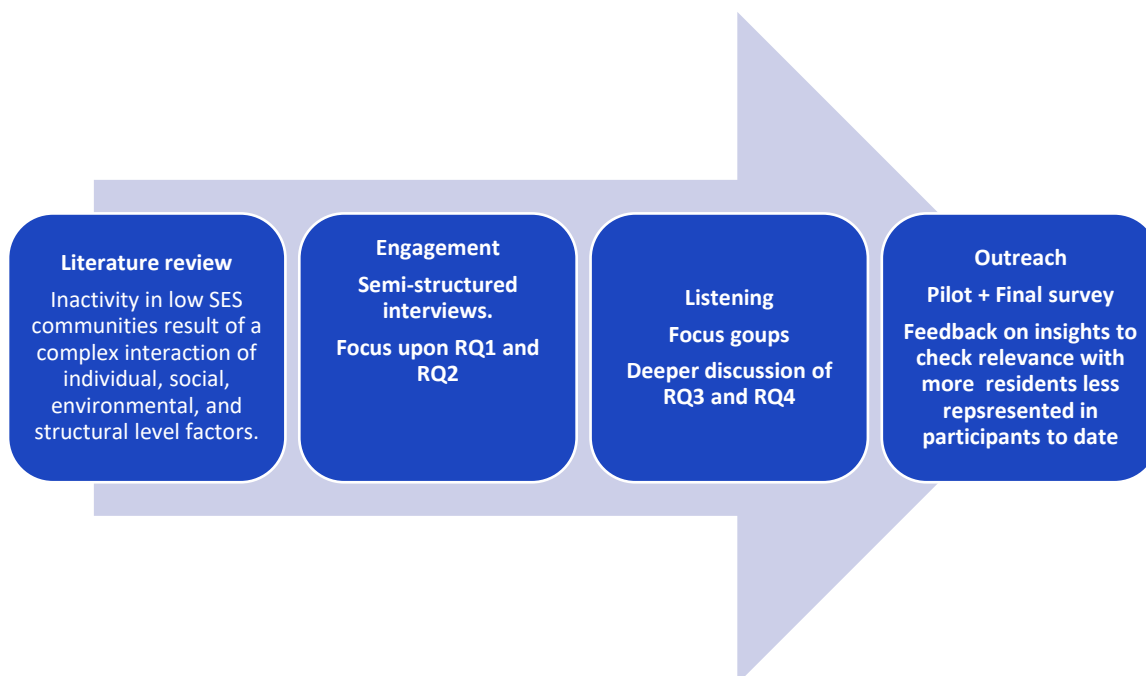


Figure 1 Schematic to show the research process

Literature review

A review of the most recent literature confirmed that physical inactivity in low-SES UK communities is produced by a complex interaction of factors operating at individual, social, environmental, and structural levels. Simultaneously we believe that individuals construct their beliefs and understandings about concepts such as leading physically active lifestyles through their lived experiences. This supported the importance of developing insight from residents lived experiences of their estates to reveal the personal, social and environmental/structural barriers to being active.

The engagement and listening phases

Our approach was to gather residents' experiences of living in their estates, in their own words, particularly their chosen free time pursuits and the place of physical activities in those pursuits. However, **insight** is more than data. **Data**

tells us what people think and believe, what they do and how they do it. **Insight** is the understanding that emerges *after* data is interpreted, contextualised, and connected to community realities. It reveals how people perceive the world and phenomena like physically active lives. It reveals why people think and believe what they do which can lead to greater understanding about why they behave in the way that they do. It is this insight we need to inform future investment to assist inactive/low active communities to engage in sustainable behaviour change. Insight can guide the shaping of support needed to enable residents to engage in something they enjoy that raises their activity level – something that is intrinsically motivating to sustain more active lifestyles for wellbeing.

Insight gathering is a people/community-centred research approach. It recognises that each of us constructs our understanding of the world and phenomena like physical activity in it from our lived experiences. Each person's understanding and beliefs is relevant to the MKPEP Board's task of shaping investment that can motivate more active lifestyles.

Insight gathering is simultaneously part of empowering the community to contribute to the task of lifestyle change. Acknowledging and listening to what people say, believe, and understand about their lives builds confidence and potential commitment to support change.

RQ1 What residents liked to do in their free time.

RQ2 What was active within their free time pursuit choices.

RQ3 What activities people would like to do but cannot.

RQ4 What are the barriers to being more active?

A core set of research questions were used to engage residents in discussion about the pursuits they enjoyed in their communities and what was active about those pursuits. This would elicit understanding of sources of enjoyment in residents' chosen leisure time pursuits which might be harnessed to motivate future participation in physical activity. It also helped to engage in positive discussions which revealed potential strengths and opportunities to support future physical activity interventions. Residents were then able to address the

main study question about activities in which they would like to participate and the barriers to doing so.

Data collection tools:

Approximately 462 residents were engaged in a combination of informal semi-structured individual and group interviews and an ongoing survey. Community leaders guided researchers to opportunities to meet with residents. Community events such as summer estate festivals, community garden open days enabled us to meet a broad range of residents from the host estates and surrounding areas. Community meeting spaces and such as cafes, schools and parks, open spaces and playgrounds were also places to meet with residents.

Participants by data collection source:

Informal semi-structured personal and group interviews	255
Children's (5-10yrs) focus groups/creative focus groups	32
Young people (11-16yrs) creative focus groups	96
BAME focus groups / community leader meetings	25
Pilot survey to elicit responses to initial findings	27
Ongoing survey to elicit responses to mature findings	27

Outreach activities

Focus groups were held alongside ongoing interview data gathering connecting with existing community groups and called together for us by community leaders to access specific groups. Table 1: Data capture sources, summarises the range of interviews and focus groups undertaken and range of residents engaged:

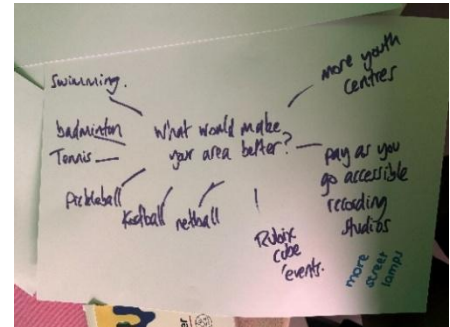
Having collected approximately 300 responses, data was analysed to reveal early themes in emerging barriers to participating in physical activity. These were shared with the MK PEP Board and an infographic prepared to provide community feedback on the insight gathering project. A pilot survey to elicit resident's feedback on early themes was prepared based upon the infographic findings. That survey was successful in gathering further data and developed for

the final stage of data collection gathering further feedback from the community. These early insights were also shared in the launch of the local co-design stage of the overall Places Expansion Project.

The final stage of insight gathering inviting residents to respond to themes in interim results is ongoing and has been a useful method of informing and feeding back information to residents who have contributed to the data collection. It is helping to raise awareness of the project and to build collaborative relationships with residents moving into the co-design stage of the project.

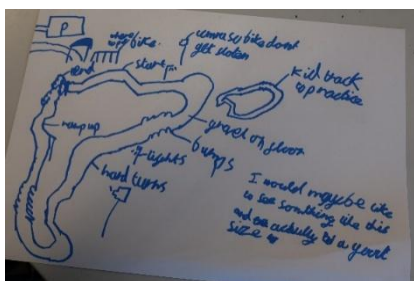
Data analysis

Data comprised interview audio recordings, written notes, and digital copies of children and young person's creative responses including artwork and performance recordings. This was uploaded into NVivo 15 Computer Aided Qualitative Data Analysis Software (CAQDAS) for thematic analysis. The four research questions were used to structure coding of residents' views, experiences and understandings from which insight has been developed.



Early themes in resident responses established the shape of the overall data set and proved to reach an early saturation point in the gathering of data. Focus groups, particularly those with young people pictured here, provided a rich depth of information about experiences of living in estates. It has not been

possible to do full justice here to the young people's work which is planned for an additional short report to honour the insights they contributed.



Research participants

We set out to achieve as diverse a range of research participants across the two groups of estates, by gender, age, and ethnicity as possible.

The nature of community data collection is characterised by brief, sometimes spontaneous opportunities to engage with respondents. In addition, residents of low SES communities frequently feel unheard, often with good reason, and are reticent to participate in community consultation even when invited. These factors and time constraints can mitigate against collection of personal details. This results in a level of incomplete participant profiles. However, data was collected from sufficient participants to give confidence in the themes in data which resulted. Care was needed to ensure that the development of insight from participant data took notice of the personal characteristics of those responding to identify bias and the need to increase engagement with resident characteristics.. We continue to work towards achieving as broad and balanced contribution from residents by the chosen personal characteristics with focused use of the final study survey. A breakdown of participants by key characteristics is given in Annex D.

What residents told us

We have previously shared interim themes from residents' information about our main research question – barriers to physical activity. These themes formed early in the data collection and analysis and remained largely unchanged.

However, in this full report, informed by the literature review, we focus more broadly upon resident experience of their estates and physical activity to try to establish the nature of those barriers and why they have occurred.

What residents liked to do in their free time (RQ1)

A significant body of international research supports the assertion that enjoyment shapes how individuals experience physical activity and that exercise enjoyment is a predictor of sustained physical activity participation across all age groups (Bajamal et al., 2022; Tolitol, 2026; N. Zhang & Su, 2026). Wellard (2014) '*established*' the importance of pleasure and fun as a factor in our initial informative experiences of sport activity and as a factor in participation and continued participation'. Positive memories of physical activity could be a significant motivator for adults to return to activities they had enjoyed in their childhood. One key source of enjoyment motivation is framed by activities which individuals undertake of their own free choice and in ways they choose,, enable social connection with others and in which they have a sense of competence to give them confidence to take part (Cote et al., 2014; Perlman & Karp, 2010; T. Zhang et al., 2021) .

Engagement in physical activity can result in emotions of pleasure and enthusiasm which encourage repeated engagement creating positive emotional feedback loops.(Işıkğöz, 2025) and sustained participation which could become embedded in active lifestyles.

Intrinsic motivation i.e. participation prompted by the pleasure experienced in participating in an activity is also far more powerful than extrinsic motivations such as the wish to increase fitness, improve health and wellbeing; and leads better to sustained engagement(Alecu et al., 2025).

We wanted to know how residents chose to spend their recreational free choice time to better understand sources of fun and enjoyment which might be harnessed in new opportunities for physical activity that might intrinsically motivate sustained participation.

I wouldn't normally go out in the evening, but with an organised event with people that are local, that I know, ... someone's going to be there to support me (ID 1,2,3)

Socialising was the dominant pursuit enjoyed by all age groups.

Socialising and 'getting out'

Socialising was important to a range of ages. Retired and non-working adults frequently commented that 'getting out' in the community positively impacted their day-to-day lives, giving structure and purpose. Some attended multiple weekly lunch and coffee clubs which provided a variety of social gatherings and important support

New parents (normally mothers) sought more opportunities to socialise with other new parents to share their new life experiences at a major transition in their lifestyles.

For young people meeting friends to just 'mess about' was an important relief from school. Hanging out spaces typically comprised local centres, near shops, playgrounds and play spaces. Young people would meet up in local shops and if older in MK Centre. Where conducive to activity, informal self-directed games and activity could naturally erupt from social gatherings at playgrounds and parks meeting. Nonetheless, simply talking and updating was an important relaxation from school (ID 7,8,15,54). Young people also socialised in youth clubs and organised youth activities such as Young Farmers, Scouts and Guides groups (ID:229). Some however commented upon a need for more meeting spaces and a variety of organised activities to provide interest in social gatherings.

...being impaired ... a massive help ... to socialise and get out ... that's important for me. (ID:1,2,3)

Residents enjoyed and strongly supported an annual programme of regular festivals in local parks and celebrations in community allotments/gardens organised by local town and community councils. Simultaneously residents

also enjoyed voluntary social group-organised activities such as bingo and entertainment nights, estate activities such as Halloween 'treat or tricking'. Voluntary groups including MK-wide faith-based coach trips for their communities including residents of the target estates such as an MK Bangladesh Association seaside outing (ID:205).

Creative activities

Adults, particularly retired or non-working women enjoyed a variety of group creative activities which included sewing circles, knitting, crochet and crafting, reading and singing groups. These were highly social activities and often created for older community members to specifically provide opportunities for socialising. Others pursued creative activities individually as well and a number crafted as a paying hobby selling their artefacts at festivals and fairs and community outlets.

Men also mentioned belonging or having belonged to 'Men in Sheds' groups. They valued the opportunity to meet and socialise with other men whilst engaging in interesting crafting and/or repair projects. Some also mentioned the mental health and wellbeing benefits of getting out of the home and meeting others reducing a sense of isolation.

Reflection:

Residents travelled between estates for both regular social gatherings such as weekly lunch and coffee clubs and special events such as coach trips and local outdoor festivals on parks and community allotments (ID: 1,2,3)

The opportunity to socialise caused adults and young people (ID: 218,244) alike to perceive their community as safe friendly spaces and for some supported them in mitigating long-term health and wellbeing challenges.

Volunteering

Volunteering was frequently cited as a recreational pursuit and was essential to much social activity. Residents formed groups in many of the estates to

we're all about equality, diversity and inclusion. Yeah, ... everybody's welcome. ... the idea was to get people to come out of their homes and learn how to socialise again. ... learn how to interact and learn how to have a good time. (ID 1,2,3)

support those in most need to help build stronger more cohesive communities through social programmes.

Reflection:

There were many voluntary initiatives providing safe spaces and activities for socialising. These operated within and outside formal community management structures and were characterised by well-established organising friendship groups, trusted charismatic community leaders and established routine provision.

Residents frequently offered their services.

Actually, my children have introduced me to Pokémon Go,

Screen-based pursuits, gaming, social media and

TV

Adults liked to watch TV as a relaxation but only in exceptional cases mentioned use of technology. Indeed, one adult was embarrassed to admit her daughter had introduced her to the fun of using technology to enhance her love of walking.

In contrast, most children and young people enjoyed using social media, playing online games using their mobile devices. This was most strongly borne out by adults who were concerned about the safety of young people online, the amount of time and seeming preoccupation their children had with social media, computers and gaming.

Teenagers said they spent a lot of their free time indoors computer gaming because they did not feel safe going out in their estate (ID:233,234). Older teenagers referred to *staying up late gaming* (ID:5).

*Mobile phones are killing physical activity (ID:101)
Today kids are happy to stay home watching media. (ID: 160)
Technology means kids don't get out like we used to. (ID:100)
My kids (7yrs and 9yrs) are on their iPads a lot. (ID:113)*

Reflection:

Adults and young people had polarised views about the use of technology. Most adults were concerned about use of technology reducing physical activity, and potentially adversely impacting wellbeing. However, we also identified at least one example of embracing gaming as an active family pursuit.

What was active in residents' free choice pursuits? (RQ2)

Since the study focused upon better understanding the barriers experienced by inactive or low active residents we might have expected a limited range of physical activity to be reported. However, residents referred to a variety of activities under the following themes:

- Informal use of the outdoors.
- Participation in outdoor sports and games.
- Indoor sports, informal play, fitness and exercise.

Being active as a family cut across each of these themes increasing enjoyment and motivation to take part. Simultaneously much 'unconscious' physical activity was happening through necessary active travel.

Being active as a family

When asked, adults frequently expressed no aspirations for additional opportunities to be more active for themselves. However, parents and grandparents invariably expressed the need for more and better opportunities for their children from early years to late teenage.

Parents frequently cited '*time with children*' as their first free time choice (ID:21). Parents enjoyed being outdoors as a family and taking part in activities such as family bike rides (ID: 214/5/6). This was often to the detriment of finding sufficient time to follow other personal activity interests (ID: 69).

Family Centres provided drop-in opportunities for parents and children of different ages that were valued as well as a wide range of play, creative and physical activity sessions (ID:25,41). These drew participants from a much wider area than the target and host estates. Parents took their children into parks to walk and play as a family providing cost-free opportunities to spend active time together which was particularly important for large families (ID:91) and those with limited income. Extended families gathered for community events and festivities. Young people would take child family members to parks to play when visiting. Family outings helped some deal with anxiety and gave them confidence to venture out of the home (ID:27).

Reflection:

A focus upon family activity harnesses parental interest in supporting their children's physical activity development whilst supporting their own activity levels and building positive memories of being active for all involved.

Active travel.

Many residents have no access to a car or the option to drive to activities. During data collection residents also commented on the impact of a rise in the minimum taxi/uber fare which encouraged walking or cycling for necessary travel. Parents walked their children to and from school daily - we were made aware of quite long journeys of 25 minutes each way (ID:96). Shopping and other domestic commitments and commuting to work (ID:174), contributed considerable physical activity alongside travelling to recreational pursuits. Residents could engage in considerable active travel, whilst still considering themselves inactive or only engaged in a low level of activity.

Reflection:

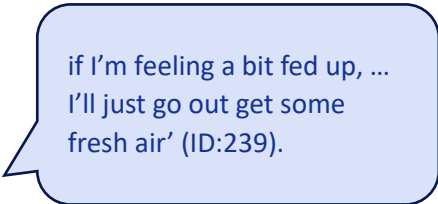
Residents' activity levels based upon participation in recognised 'physical activities' such as informal walking, and wheel power, active play, sport and games could possibly misrepresent residents' actual activity levels if taking account of active travel. There is a mismatch between the public promotion of being active and the lives of many of these residents around the 'nature of being active'. Furthermore, this is potentially eroding the confidence of residents about participation in physical activity for recreational purposes.

Expression of lack of confidence to participate in physical activity because of perceived low fitness levels may be unfounded. Considerable active travel demonstrated residents' abilities to be active even if they perceived otherwise.

Where motivation is sufficient residents can access many local venues using active travel.

Informal use of the outdoors

Informal use of the outside was about unstructured enjoyment of the sensations of being active outdoors, active play and informally self-organised sports and games.



if I'm feeling a bit fed up, ...
I'll just go out get some
fresh air' (ID:239).

Walking, wandering, exercising and wheels

Walking for pleasure was a popular activity even for generally inactive/low active adults and young people. It was frequently linked to informal, unstructured enjoyment of local parks and open spaces and a wish to experience the benefits of being outdoors and *'just getting outside, just getting out'* in a natural environment. Walking could lift resident's mood.

I love the wind blowing in my face - makes me feel amazing. (ID: 174)

Meanwhile young people spoke of just walking around their estates to avoid boredom and to get exercise rather than *'doing nothing, staying fat indoors'* (ID: 95); simply being outside to help mental health even if not interested in exercise (ID:400). Families travelled to different outdoor spaces across estates and further afield such as woodlands outside Milton Keynes where young people described a sense of adventure: *'really good, massive woods'* where they *got lost* (ID: 230). Adults also enjoyed community gardens as quiet outdoor spaces (ID:29)

Similarly, others described the uplifting experience of cycling. Being outdoors in the greenery and cycling lanes as a family (ID: 69) and the sensation of cycling.

Young people created challenges and practiced new cycle skills. Children learned to cycle and use scooters in their local parks encouraged by community cycle events (ID: 28, 136,245,).

sometimes I go around on my bike, and I try find, like, ramps that I can ride on and stuff. (ID:16)

For some walking, jogging and cycling could also be more purposeful. Park visits were often to *'help children to get out and air'* (ID: 91, 40, 73), particularly when children were too young or parents did not want them to be out of the home

alone. Others were prompted by the need to walk dogs (ID:50) and reported walking and running regularly because it was very important for their physical and mental health (ID:4). New parents were particularly alert to the importance of getting outside for health and wellbeing: *'fresh air really important for mum and baby'* (ID: 93,94).

Reflection:

Adults valued the experience of being outdoors both for themselves and their children. They reported feeling refreshed and believed getting outdoors could support good mental health. Children and young people enjoyed the freedom to roam and engage in self-directed active play.

Walking and running groups

Residents who enjoyed walking on their own could gravitate towards joining walking groups. Residents often joined walking groups to walk more, citing the benefits of walking regularly for their mental health and wellbeing. Residents could also be introduced to the idea of walking by invitations to join a group. There were several informally organised and planned walking groups within and connecting the target estates. Community leaders working with Sikh, Muslim and African groups highlighted the success of walking and running groups that had engaged otherwise inactive communities (ID: 203; 206; 205. 408). Connecting individually and socially with people was essential to launching and sustaining these activity groups, often starting or finishing in shared refreshment.

Reflection:

For some having the support of informal walking/cycling groups would build their confidence to participate in physical activity.

Active outdoor play – playgrounds and MUGAs

Residents liked the convenience of nearby playgrounds. However, families also travelled across estates to visit different playgrounds. Newly equipped playgrounds particularly attracted parents with pre-school and young children (ID:29, 216,) who

would walk between estates to visit (ID:144,). Parents used the outdoor gym equipment whilst their children used the playground (ID:127). Visiting grandparents accompanied grandsons to use the gym equipment (ID: 169, 170).

It makes us go because it's right on our doorstep. ... So we go every day, yeah, sometimes twice a day, three times a day, (ID:95)

Outdoor sports, games and activities

Youth football was the most frequently occurring sport within estates. Young people gathered informally on local grassed areas close to their houses as well

Just a bunch of kids at the big park get bored. Someone has a football shout out to the whole park. We want to play a football match. We organise teams. We play a football match. And obviously it's concrete football, it's street football, no rules. Is that in here? Yeah, literally up there on the MUGA. (ID:243)

as more central park areas (ID: 54, 15/16/17) for self-organised games on local multi-use games areas (MUGAs)(ID:98) or hard-court areas:

Others spoke about devising spontaneous street games including street football played against garage doors for goals (ID:211). Only a few played for organised teams, and these were all based outside the target estates (ID: 223). Team players reported enjoyment from 'seeing mates every week, at least twice a week' (ID:223).

MUGAs hosted informal basketball practice organised by groups of young people who would gather regularly as friendship groups (ID:401). Those friendship groups could be longstanding and draw from a wide area beyond MK.

Reflection:

Engaging in games whether recognised sport such as football or street games devised by young people themselves relieved young people's boredom of staying home and could provide positive social engagement with peers.

Young people can and do self-organise activity.

Indoor sports, games and activities

Few adults of working age took part in organised indoor sports and games as may be expected focusing upon low/inactive residents. Generally, work and domestic priorities left no time to pursue their own interests. Much took place outside the estates and often near workplaces. Men used their own gym equipment at home (ID:49,118,158,174). Young people were also interested in

using gyms (ID: 402), and a few took part in martial arts (ID:29) and boxing (ID:410). Women/girls travelled out of their estate to take classes or attend clubs e.g. to Zumba classes (ID:61), dance (ID: 413) and cheerleading (ID:407).

Older retired adults enjoyed low impact/intensity activity such as members of a thriving bowls club, which engaged a few members of the target estates but also drew from a much wider geography. All enjoyed the social aspects of playing regularly with fellow club members. They valued membership as a way of encouraging them to move regularly in an enjoyable social low intensity activity that they were confident in playing. Club members reminisced about called activities they had enjoyed when younger. Injury prevented some from pursuing activities they had once played e.g., Badminton (ID:48, 87).

Other retired residents valued and enjoyed low intensity chair/standing exercise classes (ID:49) particularly those with mobility issues or long-term health conditions. Classes were held in at least one retirement housing estate (ID: 145).

Reflection:

Retired adults valued low intensity / impact activities to support health and wellbeing and to provide opportunities for regular social engagement.

Gymnasium, martial arts and boxing related activities were attractive to men and youths whilst exercise classes attracted some women.

What residents would like to do (RQ3)

Residents' recreational pursuits both social and active were a strong indicator of aspirations they expressed for their recreation time going forwards comprising:

- Spaces and opportunities for socialising
- Spaces and programmes to get active.
- Special support to get active
- Culturally specific activities

More activities like Wheelie Big Picnic would really help (ID:104)

Spaces and opportunities for further socialising

It's the people that make the community, not the equipment. The people in ... are a clique, some of their kids are bullies. Events like this are brilliant. (ID:131)

Residents wanted more community activities and events like those they already enjoyed and to have places and spaces to informally 'drop-in' locally.

Social, group activities and community events

Residents frequently requested 'Whole family activities' (ID:22,62,70) in which parents and children could participate together. This was characterised by socially based, family events building upon

experiences of existing social activities they already enjoyed.

Many residents wanted to build on socialising opportunities for instance more community Fun Days (ID:28) and places to meet people (ID: 49, 120, 237, 238):

Group activities were a way of giving residents more confidence. Some did not feel comfortable in their community and attending their local community centre enabled them to '*feel part of a group and safe*' (ID:49). Community events break down barriers.

The loss of youth clubs from the estates was frequently commented upon by adults who had enjoyed them themselves (ID: 131,132). Youth clubs were needed to support a broad range of interests e.g., creative graffiti walls and DJ practice (ID:238).

Informal 'drop-in' places and spaces for socialising

Would like a diverse range of social activities to suit everyone and give more opportunity to interact with other people outside of school. (ID:236)

Adults wanted informal spaces and places to go to meet others, build confidence to engage in the community and build more cohesive communities.

Simultaneously, parents with early years children wanted local community cafés for informal gatherings and sheltered seating as part of playground design where they could meet others and supervise youngsters.

Young people particularly struggled to find places to meet with friends (ID:97, 426). Informal youth spaces for socialising (ID:120) were a high priority comprising informal outdoor gathering 'hanging out' spaces (ID:426).

There need to be more local places for [young] people to meet (ID: 120)

Reflection:

There remains high demand to further build on the existing social provision of local community lunch and coffee clubs, and family centre drop-in provision and to facilitate socialising in outdoor spaces..

Spaces and programmes to get active

Social engagement was also a key characteristic of interest expressed in physical activity spaces and programmes. Adults requested increased organised activities within social venues. Residents felt more community activities (ID:51) or group activity sessions (ID:52,53,68, 72) built upon socialising would help people get active. Activities needed to be at entry level and fun. For one young person this meant something 'not very sporty' (ID: 424)

Community leaders also suggested adding physical activity to existing social activities emphasising the motivational power of socialising to engage in physical activity.

Community Centre is good socially, can there be more help to be active on the other days. (ID: 423)

This strategy connected with residents who liked to go to estate community places to meet people and thought 'it would be good to do something to help fitness too' (ID:421, 423).

More easy opportunities for activities to do socially – perhaps active but fun/creative opportunities, not just basic exercises as can't be involved. (ID:425)

Young people also felt that more local opportunities were needed for teenagers who couldn't travel far, to get out and be active (ID:425). Park areas needed equipment to challenge and provide interest for older children (ID:229) for instance some suggested Bluetooth enabled areas for them to use social media outside (ID:220,221). Similarly, children and young people wanted cycle and skateboarding areas (ID:16,241).

Reflection:

Residents were open to the idea of building activity into their social pursuits. This demonstrates a level of confidence within safe friendship groups to get active.

New parents with early years children and babies wanted to be more active with their babies and toddlers (ID:51). Nursery places were fully booked and costs associated with childcare prohibitive. One parent described feeling trapped inside needing more options for getting outside and more groups to attend (ID:72).

Mothers described a range of activities they would like to do with their children or for themselves if childcare could be provided (ID:55,88,90,47) for instance swimming and stay and play sessions (ID:56) exercise groups (ID:69, 415), as well as social places to meet with other new parents (ID:415).

They enjoyed informal time outside but often found parks and playgrounds to be unsuitable and unsafe (ID:55) for babies and early years children. Parents who had several children wanted playgrounds designed to appeal to a full range of ages and needed parks for no cost day outings (ID:57)

it would be good to have more organised activities for adults and kids (ID:55)

Sports and activities in which residents

expressed interest

Aside from outdoor facilities to support formal and informal outdoor activity residents expressed interest in youth football, swimming and gym work outs/exercise and martial arts classes.

we all love swimming in our household place so expensive, and I find that actually stops us going because it's too expensive (ID:413, 415)

Youth football was universally popular. Young people wanted more and better maintained grass football pitches (ID:9,10,11,13, 109,131,) with goals as well as practice areas (ID:7,8). Older teenagers wanted an all-weather pitch and/or grass pitches instead of the hardcourt areas (ID:140) they played on which they played (ID:137,138). They and their parents also wanted organised clubs, teams and competitions

Some activities could be prohibitively expensive. Families could not go swimming as a family due to the overall cost and would tend to go with only one parent (ID:27):

Women expressed interest in doing a range of exercise classes e.g. Boot Camp-styled (ID:28). New mothers wanted exercise classes after having their babies e.g. 'sit and fit' (ID:135) many emphasising the need for creche facilities (ID:22,62).

Young people were particularly interested in being of an age to attend gyms in the area (ID:220,221). The outdoor gym equipment was not a fulfilling substitute seeming to indicate it was about belonging to the fitness gym culture that was attractive. However, cost and accessibility were barriers to gym membership (ID: 246) and related fitness classes, and residents were keen to find ways of making gym participation possible.

Each estate could have their own gym, as paying gym membership and having to go off the estate is tricky (ID:154)

Older teenagers were also attracted to related fitness sports such as boxing and kick boxing (ID: 246,410).

Residents'

Residents' aspirations for spaces and programmes of activity were relatively modest. There was a sense that they built their aspirations upon realistic intentional future engagement both for themselves and for their families. It could also reflect modest knowledge and experience of what might be possible and attractive.

Special support to get active

Facilities were requested for those with mobility problems, long term health issues and young people with special education needs (SEN).

Long-term physical and mental health challenges were a frequent characteristic of inactive/low active residents. As stated by one adult resident:

'a lot of us do have different medical problems',

(ID:1,2,3) resulting in mobility issues. This prompted resident requests for seated exercise classes for those with mobility issues (ID:97) *'would like to see activity classes for wheelchair users' (ID:75), 'sitting yoga' (ID:120, 222).*

'Would like more SEN clubs and soft play sessions at appropriate times, weekends during afternoons 1-4pm, peak hours' (ID: 52.53.68)

Parents of children with special needs such as ADHD wanted youth clubs for their children which provided manageable small groups, less crowded spaces (ID:52,53,68) and spaces where parents could stay. Another parent identified the value of participation in organised sport helping their children with autism to focus and wanted more *'organised sports which are inclusive'* (ID: 163).

Scheduling of activities was also important.

Accessible playground equipment was requested for children with special needs such as mobility problems who would benefit from lay down swings, sensory boards etc. (ID: 89).

Culturally diverse activity offers

Culturally important/necessary requirements need to be addressed for activity offers such as the provision of women and girls only sessions for some Muslim females (ID: 6):

swimming lessons for women, and a ladies' gym, would be good. (ID:205)

Faith groups were providing a range of activities for their communities providing safe environments in which to start to engage in exercise and build confidence.

my 17-year-old daughter and I would love to learn Somali dancing (ID:204)

Community leaders also highlighted the diversity of cultural activities which would potentially be welcomed within the communities. They identified the opportunity to fund existing activities developed within minority ethnic communities such as a range of dance styles. (ID:205,208) to extend those activities.

Reflection: Further investigation is ongoing in relation to barriers and aspirations for residents who have culturally based interests and requirements for physical activity participation.

Barriers to being more active (RQ4)

Annex C: illustrates the key themes that emerged early in data collection in an infographic used to feedback findings to participating communities and which are being used in the final study survey of views.

Barriers to being more active gathered under two main themes: Personal factors and Amenity related factors. These had strong links to intrapersonal and environmental/structural factors within the socio-economic and cultural factors modelled within existing research literature [#Socio-economic/cultural factors impacting physical activity participation](#), found in Annex B.

Personal barriers to being active

Themes within the personal barriers highlighted by residents comprised:

- Personal safety concerns, fear of antisocial behaviours and the need to confront safety fears.
- Limited time to be active.
- Long-term health and wellbeing factors
- Lack of motivation and confidence to participate
- Cultural/faith related barriers

Intrapersonal factors – (low motivation, low confidence, fear of injury, poor health, lack of time and misconceptions about activity) – are highly visible in the barriers residents identify to being physically active. However, taking account of residents' experience of chosen pursuits and activities in their estates might provide potential ways of mitigating those barriers.

Personal safety concerns and their impact on mobility and activity.

Feeling unsafe when travelling to activities, especially during dark winter months, when alone or at night, in poorly lit or isolated areas. These concerns led some otherwise active residents to avoid going out and instead exercise at home.

As kids we used to go outside because we were bored. But we were safe in those days. It's definitely more dangerous now. (e,f,1865,ow,in)

Groups most vulnerable to safety fears comprised older adults, women with babies or toddlers, and people with anxiety or low confidence. Mothers with babies described avoiding outdoor walking entirely. Wheelchair and mobility scooter users highlighted the need for safer, more accessible streets and improved lighting.

... exercise has to be part of my lifestyle. So, I walk here ... it's a 20-minute walk. (fs, f,0+, ukbr, low)

Parents and grandparents expressed anxiety about allowing children to play or move around their estates. Their concerns were intensified by media coverage of knife crime, visible signs of drug use, drunkenness, such as syringes in parks and broken glass and associated litter. These issues led parents to restrict children's freedom and outdoor play. Adults' concerns were exacerbated by comparisons to their own childhoods, feeling that estates were

once safer. Rising awareness of knife crime and drugs contributed to a sense of decline in community safety together with concerns about 'stranger danger' and antisocial behaviour. Whilst often a cause of concern young people themselves felt unsafe avoiding areas where youth behaved poorly or gathered in intimidating groups. One young person described where they lived as very small leaving them feeling vulnerable.

it's [estate] very small, so I think people are scared to come out, because if they are arguing with people, it's very easy to [be found] (ID: 7,8)

around my school, yeah, everything's good. I walk there every morning, so not been mugged yet, yeah? ... All always going every week. I quite like the place. Yeah, the field, the field I love. (ID: 54, 15/6/7)

Notwithstanding these widespread concerns other residents felt safe in their estates. Adults argued that media exaggeration fuelled unnecessary fear and that estates remained as safe as in previous generations. Young people report being warned about by parents to avoid drug needle litter but remained confident about their communities:

A divide was shown between those who felt unsafe and those who felt confident in their environment. Trusted neighbours and social connections helped both adults and young people feel secure and played a key role in shaping perceptions of safety.

You need to educate the parents; they shouldn't be put off by the bad media stories. It's no more dangerous today than it was. (f,m,1865,bb,in)

Limited time

Work, childcare, and caring responsibilities were major barriers to physical activity for parents and grandparents, leaving many unable to prioritise time to enjoy some active time for themselves. Many cared for older children, ageing relatives, or family members with special needs. These responsibilities contributed to **tiredness and low energy**, further reducing capacity to exercise.

New mothers were a notable exception, actively seeking ways to support their own wellbeing alongside caring for their baby. This led to frequent requests for more **creche facilities** and **parent-and-baby/toddler activities** to enable exercise within limited time windows. Despite this motivation, they still struggled to find time “for themselves” and needed **simple, flexible activity options** that fitted around school routines. Grandparents with childcare support responsibilities also found it difficult to prioritise their own activity time.

Scheduling of activities strongly influenced accessibility: Parents with new babies needed **daytime sessions**. Parents returning to work relied on **weekend activities**, which were often their only opportunity for family bonding and physical activity.

Lack of time and fatigue were recurring themes across all parent groups, not only new mothers. **Despite these challenges**, some parents adopted creative strategies. One new mother, not typically an “organised sports person,” integrated activity into daily life through **active travel**, such as walking to baby appointments.

... 'used to play football regularly but now not enough time for that due to parenting and work.'
(g,m,1865,ow,act)

Long-Term Health Factors Affecting Activity Levels

Mental and physical health challenges acted as both barriers and motivators

for physical activity. **Mental**

health-related barriers included: anxiety, low confidence, and fear of being judged; discomfort in busy or unfamiliar environments; reluctance to socialise. **Physical health barriers** included poor mobility, joint problems, and long-term health

conditions such as asthma, diabetes. Residents with mental or physical health challenges frequently assumed that movement or exercise was not open to them. They appeared to have lost confidence for movement in their lives.

*Unable to exercise as disabled
(mobility scooter user)
(bh,m,1865,ukbr,in).*

*Illness has meant I had to stop
armchair exercises (o, f, adret,
ukbr,in)*

Contrasting experiences showed that the same conditions could motivate

*one thing that I've asked for
previously is like a sitting exercise
class. Okay, I can't use my legs, ...
but I can do things. (bh, f,1865,
ukbr,in)*

activity: Some residents used exercise to improve mental wellbeing. Others exercised to manage or prepare for physical health challenges (e.g., walking to get fit for surgery, exercising to support asthma management). These individuals described feeling more positive or better able to cope because of being active. Young people mentioned the need for places they could go to 'just vent'

and get rid of angry emotions (ID: 246).

Lack of motivation, and confidence about taking part

For adults socialising opportunities were highly valued comprising regular coffee mornings, lunch/tea clubs especially by inactive, retired and non-working adults across the estates. Social engagement was seen as essential for community cohesion, supporting mental health and wellbeing and helping isolated residents reconnect with others. Parents of younger children were motivated to engage with their children in outdoor play, use of parks and open spaces. Occasional interest was expressed in using a gym to work out.

Many working parents described high levels of active travel and active manual labour leaving them both time and energy-poor.

Whilst adults expressed little motivation for physical activity for themselves, family activities and social gatherings could provide a platform to introduce low active and inactive community adults to fun-based, recreational movement.

Meanwhile adults widely viewed screen-based entertainment as a major demotivator for **young people's outdoor activity and universally cited the importance of activities for children and young people**. They frequently compared current youth behaviour with their own childhoods and repeatedly cited use of mobile phones, social media, and gaming as barriers to young people being active.

Responsibility for motivating young people was often attributed to **parents**, for setting boundaries around screen time and **schools**, for educating children about the importance of active lifestyles. Some residents felt government should invest in parent education to encourage outdoor activity.

Some newly retired residents however noticed an increase in their own sedentary behaviours such as watching TV. Others reflected upon lack of confidence or knowledge about how to join or participate in community activities. **Confidence-building was seen as important** for increasing participation, especially for adults unsure about group-based activities.

Young people cited need for social, fun, and creative activities, and safe spaces to socialise informally to 'just go to;' not just exercising opportunities to support a more active community. Many people of this age did not want to exercise alone and there were few social or group-based activities they found welcoming, non-competitive, and fun, rather than fitness focused and consequently activity felt isolating rather than enjoyable. Traditional 'exercise' was seen as boring or intimidating.

If there was somewhere you could go with your brothers and sisters, you could go and have fun and maybe play pool, and it would all be free, and it's somewhere where you could be safe together. (ID: 225)

Men participated less than women in both social and physical activities. A local "Men in Sheds" initiative had recently closed, reducing opportunities for male

engagement. Some retired men were encouraged to join activities by their partners who were more socially embedded in the community. However **not everyone was motivated by social connection** which highlighted the need for varied activity formats. For instance, one man preferred independent, drop-in activities (e.g., outdoor archery) that did not require group membership.

Cultural and Faith-Related Barriers to Physical Activity

Community leaders emphasised the importance of active lifestyles for minority ethnic communities due to higher risks of lifestyle-related health problems and felt health-focused promotion of activity would be welcomed.

Lack of culturally appropriate provision was a major barrier. Community leaders particularly mentioned that residents had little access to activity or sports clubs suited to the needs and preferences of diverse minority ethnic groups. For instance, whilst football was a universally understood and popular activity choice:

Pickleball not so – people do not tend to understand the game (ID:43)

There is a shortage of leaders able to deliver culturally attractive or culturally familiar activities.

Women-only provision was insufficient, particularly affecting Muslim women who needed segregated activity sessions.

Community leaders also felt **language barriers hindered participation** for non-English-speaking residents. These posed difficulties accessing information about activities and challenges engaging with existing groups unless activities were created from within their own communities. In addition, **children from minority ethnic backgrounds sometimes felt less confident** participating in traditional UK sports, reducing their willingness to join mainstream clubs.

Residents reported discrimination and negative stereotyping occasionally. For instance, safety concerns led to rerouting of group walks to avoid areas where participants felt vulnerable. Some community leaders felt minority ethnic communities were treated as “second class” by larger organisations.

Despite barriers, there were positive examples of integrated youth participation and strong interest across groups for more football opportunities. **Faith groups played a key role** in organising culturally appropriate activities (e.g., low-impact movement classes, walking groups). These were volunteer-run but sustaining them was difficult without financial support and modest funding to pay activity leaders was needed to ensure long-term viability. There were opportunities outside the target estates within the broader faith communities e.g., at the Muslim Sports Club. Others joined activities offered by mainstream providers (ID: 43).

Families travelled across estates to visit different playgrounds and further away attracted to different outdoor spaces outside Milton Keynes such as woodlands where young people described *really good, massive woods* where they got lost (ID: 230).

Amenity related barriers

- Lack of local clubs and activity opportunities
- Parks and outdoor activity spaces – provision, design and maintenance
- Accessibility of existing opportunities for activity

Lack of Clubs, Programmes and Facilities for Activity

Widespread perception was shared of “nothing locally” to do, with repeated reports of closures of community cafés, charity hubs, youth spaces, and programmes, reducing opportunities for socialising and being active.

Community centres were valued socially, but residents felt they offered insufficient physical activity opportunities.

There was a strong consensus across estates that **local, age-appropriate activities for teenagers were inadequate**. Specifically, **youth-friendly spaces were needed**, including Informal drop-in facilities; places open into the evenings as alternatives to gathering on street. Lack of facilities was seen to contribute to increased screen time, teenagers gathering locally with “nothing to do,” often perceived by adults as anti-social behaviour.

Adults noted the **loss of youth clubs and organised activities** they had enjoyed growing up. Teenagers themselves highlighted closure of local youth spaces

and attractive activities in MK city centre being too far, too costly, too crowded, or not age-appropriate.

Parents and grandparents were similarly concerned about the lack of affordable, and accessible activities for their children comprising a wide range of sports clubs formal and informally organised physical activities. High upon parent, children and young people's agendas was the provision for football including teams, clubs, kickabout areas, pitches, and practice goals.

New Parents and Single Parents

Mothers with babies and toddlers wanted to be more active but faced: lack of childcare, insufficient baby-friendly or parent-and-child activity options, fully booked nurseries and too few baby classes. They desired **affordable indoor spaces** (e.g., soft play) and **family-friendly outdoor areas**. Loss of family-centre and school-based activities were seen to have reduced activity opportunities.

Adults expressed modest aspirations for more opportunities to get active including, inclusive beginner-friendly exercise classes that could support older adults and those with mobility issues. Occasional requests were made for active opportunities designed for men. Many residents preferred to not exercise alone, highlighting a gap in free or low-cost group activities that were welcoming, non-competitive and focused upon fun.

Parks and Open Spaces – Provision, Design & Maintenance

Local Provision

Parents valued parks and outdoor spaces as **free, essential resources** for children's activity. However, many residents felt there was a **need for more local provision**, with some parks described as "not great" or insufficient for community needs. There was strong criticism of the **loss of football pitches** and large park areas without practice goals, and high demand for **all-weather football surfaces**.

Some estates benefited from **higher-quality parks** (e.g., Spider Park, ABC Park), and these attracted families across estates. Young people appreciated

hard-court areas, ziplines, and outdoor gyms as places to socialise and be active.

Design of Playgrounds

Provision of playgrounds often did not meet the needs of babies, toddlers, or teenagers.

Teenagers often felt that the playgrounds were *'aimed at the younger kids, like around 8yrs – 10 yrs* (ID:7, 8). Simultaneously parents with early years children and babies often commented that playgrounds needed to cater better for infants *'to interact with the park'* (ID:244). They wanted fenced toddler areas to prevent dog fouling the play areas, baby-appropriate equipment (e.g., baby swing seats) and playgrounds suitable for families with mixed-age siblings.

Provision of sports pitches

The need for new and improved grass football pitches and well-maintained goals in existing local parks and open spaces was widely cited by 11-16 years boys (ID: 9,10,11,13) and some girls (ID:212, 213).

Landscaping and natural design features for relaxed spaces were preferred.

Both parents and teenagers wanted **covered seating areas** – parents for supervising children or being active outdoors in all weather and teenagers for all-weather social gathering spaces

Young people also wanted better-lit, safer social gathering areas and areas where they could use scooters, cycle, and skateboard.

Maintenance

Parks were frequently described as **run down, outdated, and poorly maintained**. Common issues included vandalism and broken equipment left unrepaired and often simply permanently removed, and poor cleanliness, including concerns about **discarded needles and broken glass**. Young people expressed the need for **visible caretaking or supervision** to maintain spaces.

Red Routes and Paths

Residents highlighted the need for red routes and pathways around estates to be cleaner, better maintained and parking better managed to stop routes to parks and activity areas being blocked.:

Safety concerns were common, especially after dark. Red routes felt unsafe due to poor lighting, uneven surfaces, flooding, and intimidating underpasses. Wheelchair and mobility scooter users struggled with accessibility. There were concerns about **antisocial use of scooters and bikes** on pavements. Residents felt that **better lighting and signage** would encourage walking, active travel, and safer use of paths.

Accessibility Challenges

Transport to Activities

Many residents reported **very few local activities within walking distance**, disproportionately affecting older adults, residents with mobility challenges, parents with toddlers and prams, teenagers, low-income households.

*People think everything costs money, but it doesn't.
Parents need to lead by example. (ch, f,1865, ukbr,in)*

Lack of car access meant many relied on **buses or taxis**, increasing the cost of participation outside walking distance. **Bus services were often unreliable** and poorly connected to activity locations. Parents with buggies and disabled residents using mobility aids experienced journeys made difficult by limited buggy/mobility aid space and unsympathetic services at worst buses passing them by. Others needed facilities such as a more local pool closer to their estate (ID:120)

Cost of Participation

Cost was a major barrier across all estates, affecting adults, parents, and children. Even low-cost activities required organisers to keep fees minimal (e.g., £2 sessions), while **swimming (£6–£8 per session)** was seen as prohibitively expensive for families. Parents described only one parent attending with their children to reduce costs. Paying **upfront for blocks of sessions** added financial pressure and a barrier to participation.

Sustainability of Low-Cost Provision was simultaneously a challenge to community activity organisers. Voluntary organisations struggled to **cover the cost of hiring activity leaders**, despite keeping fees low to attract participants.

Community leaders strongly advocated for **public funding of grassroots organisations** to sustain existing activities. Residents suggested **small local grants** to help volunteers set up and run low- or no-cost clubs and activities: Residents felt that such grants could support local organisers to mobilise neighbours and build participation.

Community Activity Leadership Capacity

There was strong demand for more local activity leaders. Residents repeatedly highlighted the need for **local organisers** to run games, youth sessions, group walks, and family activities. Many expressed **willingness to volunteer themselves** but could be unsure how to mobilise others.

Requests for activity leader support organised kickabouts, games leaders for football and basketball courts, Youth clubs, and structured sessions for young people. Adults also wanted the support of activity leaders for instance to learn how to use outdoor gym equipment and to join walking groups.

Community volunteers were viewed as key to keeping activities **free or affordable**. Residents wanted **local people** leading activities, as they were trusted and seen to understand community needs. Some felt volunteering was the **only reliable way** to improve activity provision.

Examples of community-led success already existed. Resident-run walking groups, informal sports sessions and volunteer-led events demonstrated strong local capacity. Some groups operated completely independently, raising funds through events to sustain future activities.

Challenges were anticipated for recruiting and sustaining volunteers.

Residents recognised that people lived busy lives with work and caring pressures. Retired and unemployed residents who may have time and interest to contribute were felt to be potential sources of volunteers. **Trust and recognition matter.** Residents suggested volunteers should be **actively encouraged and formally recognised** (e.g., badges, council-backed roles) to build trust and particularly reassure parents, some of whom expressed **reduced trust** in others supervising their children.

Ideas for sourcing and supporting volunteers were supported by **strong experience of things that were already working**. It was important to build upon

existing successful volunteer initiatives (e.g., community fridges), the work of community hubs and resident associations. In addition, residents suggested the creation of “buddy clubs” and informal ways of connecting people through simple meeting points to get active e.g., on courts or for parks walks. Residents also recalled past success with other community services such as police-run youth activities.

Small, local grants were seen as essential to set up and sustain grassroots volunteer led activity. Simultaneously some paid activity organisers were seen as essential to encourage and support volunteers and assist in creating safe and safeguarded contexts in which volunteers could operate.

Lack of Awareness and Communication

Residents often did not know what activities existed locally or who to contact to join, organise or set up new activities. Community leaders and voluntary groups recognised that despite their best efforts many residents were unaware of what was already available in their own or neighbouring estates.

Word-of-mouth was the most common way people found out about activities, relying on family networks, friendship circles, social media groups. This meant those already socially connected within the community were more likely to hear about opportunities, while others remained unaware. This appeared to contribute to **some residents’ descriptions of their communities as ‘closed’ or ‘not communicating,’** leading to limited awareness of facilities in nearby estates, fragmented information sharing, reduced participation due to lack of visibility.. There is a sense that some residents felt outsiders in their communities and may not have been listening for information about activity opportunities.

Insight to mitigate barriers to physical activity

As was demonstrated from our initial review of research literature Inactivity/low activity levels are strongly associated with low socio-economic areas SES communities characterising the target estates for this project. We have no wish to simplistically characterise the target estates as socially deprived and defined by low socio-economic status nor to dwell upon these features. To do so would imply an inevitability about continued and potentially growing inactivity.

'Communities have greater needs than their physical activity.'

(comty fg 251112)

However, the Board will recognise well researched socioeconomic and cultural factors which repeatedly impact activity levels. These will underpin the task ahead to co-design investment and interventions to increase activity levels. For instance:

- Food and housing poverty are challenges in each of the estates
- Some residents' lives are impacted by pockets of antisocial behaviour
- Significant pockets of generational inactivity perpetuated by lack of cultural capital to support social connection which underpins much activity
- Historic as well as more recent memories of initiatives to encourage increased physical activity but which had stopped after short-term funding
- Loss of leadership
- Loss of facilities or need to replace equipment.

These led to some residents expressing a sense of being a forgotten population; second class in terms of their relevance for funding and support and/or being looked down upon.

"The community does want to be physically active; they have an interest in being healthy."

(comty fg 251118)

Notwithstanding, **individual residents are not defined by their environment or estate.** Residents' perceived barriers to being more active can be mitigated by other factors discoverable in the **unique experiences of the lives of residents in these estates.** That is where our insight project is focused. Contradictions in each of

the themes of barriers support this finding. Responses to perceived barriers need to be multi-level and resident-centred.

In this concluding section we have cross referenced resident insights which might initiate, support and shape community actions to mitigate the barriers that residents have also described. These draw upon those aspects of estate life which residents enjoyed, the physical activity they choose and the aspirations they expressed for themselves and their families. By doing this ways of addressing the roots of barriers are gathered in potential actions foregrounding residents' lived experiences of their estates and their relationship with physical activity.

1. Personal barriers –safety lacking confidence / motivation

Potential actions to mitigate barriers	Resident insight to support actions	Percieved barriers addressed
<p>1.1 Extend existing regular socialising activities to create formal and informal opportunities for physical activity. Regular socialising activities could mitigate residents’ lack of confidence to enter new social gatherings and spaces and sense of safety when new to getting active.</p>	<p>Adults were keen to extend social activities and spaces in their estates whilst expressing few aspirations for increased opportunities for their own physical activity. They stated that socialising helped to build confidence and positive perceptions of their estates as safe spaces.</p>	<p>Safety concerns whilst real to many based on their lived experiences, could also mask lack of confidence about getting active and could contribute to lack of motivation.</p>
<p>1.2 Engagement of men through recent initiatives which have harnessed potential interest amongst men to socialise. Where men have engaged with ‘Men in Sheds’ and similar groups there may be an audience for entry level activity associated with, crafting and socialising opportunities.</p>	<p>Men were less likely to join social activities and had few opportunities to meet in men only groups to socialise and create safe spaces for others. Regrets were expressed about the loss of at least one ‘Men in Sheds’ group.</p>	<p>There is a real danger that this issue has not fully surfaced. The literature review supports the relatively low resident response that we have been able to collect to date and should be a focus of the ongoing survey.</p>
<p>1.3 Creating ‘micro-activity groups’ and promoting new activities/spaces for activities based upon existing friendship groups could shorten the time for some in finding a safe place and space for activity. This model has worked for voluntary groups within estates establishing regular social activities.</p>	<p>Residents said that they feel safer and more confident where they are in touch with their neighbours and feel socially connected to others.</p>	<p>Physical safety to travel to activities can form barriers, particularly during dark evenings for those who feel vulnerable, or have experienced antisocial behaviour in their estates.</p>

Potential actions to mitigate barriers	Resident insight to support actions	Perceived barriers addressed
<p>1.4 Consideration of potential participant safety concerns about travel to activity spaces and programmes could build confidence and assist in helping residents identify self-help solutions to mitigate this barrier such as travelling with someone else.</p>	<p>Residents, particularly the most vulnerable, highlighted poor street lighting and the condition of red routes, underpasses and paving. For some these masked low motivations to participate in physical activity because many negotiated the same barriers to regularly participate in social activities.</p>	<p>An all services approach is needed to address structural/ environmental factors impacting perceptions of safety within the built environment including community policing, highways repairs and street lighting.</p>
<p>1.5 There is an opportunity to build on residents' interest in physical activity for wellbeing to recognise, celebrate and build activity levels alongside day-to-day activities and travel about the estates.</p>	<p>Residents broadly recognised and believed in the benefits of being active e.g., enjoying the outdoors and some said they were interested in being more active.</p> <p>Others found ways of integrating activity into busy day to day lives.</p>	<p>Limited time for physical activity</p> <p>Working adults with childcare responsibilities frequently felt they had no time to be active. Simultaneously others who were equally busy, found ways of enjoying the benefits of being active regularly by integrating walks, cycling and family activities into their daily commitments.</p>
<p>1.5 Increasing awareness of the role of active travel in fulfilling active lifestyles could support and motivate some residents who do not recognise their existing contribution to an active lifestyle and engage others' interest. .</p>	<p>Residents generally did not recognise active travel as part of an active lifestyle despite considerable walking and cycling to work, completing caring and domestic duties and attending local social activities.</p>	

Potential actions to mitigate barriers	Resident insight to support actions	Perceived barrier addressed
<p>1.6 Active family spaces and pursuits would meet parents' aspirations to spend time with their children whilst nurturing their own and their children's activity levels.</p> <p>Community events attracting family groups from across estates offer strong recruiting and promotional opportunities for new physical activity introduced as fun participation and beginner entry activities.</p>	<p>Parents said one of their first priorities and sources of leisure time enjoyment was to spend time with their children.</p> <p>Parents placed great emphasis upon the need for more active spaces and programmes for their children/grandchildren.</p> <p>Community festivals were popular family events.</p>	

2. Long-Term Health Factors Affecting Activity Levels

Potential actions to mitigate barriers	Resident insight to support actions	Perceived barriers addressed
<p>2.1 An inter agency long term plan for promoting the social, emotional, mental and physical benefits of small changes in physical activity could support some who feel activity is beyond their capability.</p> <p>There is potential to increase individual understanding, belief and motivation for physical activity as a way of mitigating LTH conditions and a contributor to wellbeing.</p>	<p>Importantly some residents with LTH conditions were open to the positive impact of being outdoors, being with others and to participate in fun entry level low impact/ intensity activity.</p> <p>Test and trial activities have provided glimpses of a positive first-time engagement with physical activity to build upon.</p>	<p>Residents with LTH challenges could see a more active lifestyle as both beyond their capability and as an essential way of helping them feel better.</p> <p>This revealed a range of (mis)understandings about what comprised 'being more active' often erring toward a perception of much greater vigour and intensity than needed.</p>

3. Lack of motivation and confidence about taking part

Potential actions to mitigate barriers	Resident insight to support actions	Percieved barriers addressed
<p>3.1 Young people need role models and facilitators to support and encourage participation in organised sport and games as well as informal active play.</p> <p>School PE classes are the only connection with physical activity for some families and has potential to develop family based activities.</p>	<p>Parents and grandparents universally highlighted the need for increased provision for children and young people to be more active although they were ill-equipped to actively contribute to facilitating young people to get active.</p>	<p>Adults expressed little motivation for physical activity for themselves citing, lack of time due to work and domestic/ caring commitments, tiredness.</p> <p>Many reminisced about active childhoods in the outdoor and street play no longer considered safe.</p>
<p>3.2 Engaging young people to co-create informal play/sport might provide a powerful resident-centred starting point to develop activity building on their interests. With training, the need for new community leaders could be partially fulfilled by young people.</p>	<p>Some young people self-organised informal sport and games play on estates open spaces.</p> <p>Nearly all young people enjoyed gaming and computing. There was a request for blu tooth enabled for outdoor meeting spaces.</p>	<p>Young people frequently agreed with parents that there was nothing for them to do on their estates.</p>
<p>3.3 A wider network of formal and informal outdoor facilities to encourage spontaneous active play e.g. grass, all-weather surfaces and football goals; further well-and maintained hard-court areas and routes for wheels</p>	<p>Young people indicated enthusiasm for informal 'wheel-based' fun, socialising and 'hanging out'.</p>	<p>Young people expressed boredom and preferences to stay indoors at home often spending a lot of time on screens and gaming.</p>

4. Cultural and faith related barriers to physical activity

Potential actions to mitigate barriers	Resident insight to support actions	Percieved barriers addressed
<p>4.1 Support and development of existing Initiatives by the minority ethnic community leaders would support valuable activity opportunities.</p> <p>Measures to engage children and young people in multi-cultural sport and physical activity clubs/activities would educate whole community participation increasing everyone's confidence to participation in new activities in which they have no background knowledge and help to address reported occasional discrimination and negative stereotyping reported.</p>	<p>Community leaders of cultural and faith groups acknowledged the importance of physical activity for some minority ethnic communities and were already making provision often linked to social activities at their community meeting places.</p>	<p>Community leaders highlighted a lack of appropriate culturally diverse sports and dance activity provision for their residents.</p>

Amenity related barriers

5. Lack of clubs, programmes and facilities for activity

Potential actions to mitigate barriers	Resident insight to support actions	Perceived barriers addressed
<p>5.1 Building on the success of existing community and volunteer led physical activities would provide further insights into ways of successfully working within individual estates.</p>	<p>Existing local community facilities were valued because they offered low or no cost places and opportunities to meet others get out from home into the community.</p> <p>Local community leaders and residents strongly advocated for financial support to be found for existing local community initiatives to build the physical activity offer across estates.</p>	<p>Shared widespread perception that there is nothing to do within estates supported by impressions of a recent history of reduced maintenance and closure of existing facilities. This was most strongly felt in relation to spaces and programmes for activity for mothers and babies/early years children, young people and it was noted that there was little activity for men who were not as interested in engaging in social activities as women.</p>
<p>5.2 New activity programmes need to be designed with residents to address shared barriers such as childcare arrangements, cost, accessibility.</p>	<p>There was evidence that many residents could access activities in different estates within the target areas to assist with the planning and rolling out of new activities.</p>	<p>Support was expressed for the following specific facilities /activities across estates:</p> <ul style="list-style-type: none"> • Football facilities and organised teams – young people and men • Fitness gymnasium access – young people and men • Newborn/early years and parent activities • Affordable opportunities for family swimming. • Entry level exercise classes for residents with long term health conditions / mobility challenges

6. Parks & Open Spaces – provision, design /maintenance

Potential actions to mitigate barriers	Resident insight to support actions	Percieved barriers addressed
<p>6.1 Improved maintenance, and a sense of a long-term security of facilities would support residents' confidence in ongoing opportunities to be active in the community.</p> <p>Coordinated provision of outdoor organised games spaces/pitches with new activity programmes would encourage a more positive perception of the outdoor spaces and help to build community support.</p>	<p>Parents valued playgrounds and open spaces as local cost-free activity space to enjoy the outdoors with children.</p> <p>Parents valued the opportunity for children to be outdoors.</p>	<p>Maintenance of many local parks, playgrounds and access routes left negative perceptions of play value, particularly by comparison with newer larger investment in playgrounds in more central locations.</p> <p>Antisocial behaviour could leave areas unsafe.</p> <p>Vandalism and the consequent removal of play equipment and the loss of pitches and goals in recent history has left a perception of loss of amenities.</p>
<p>6.2 Continuing to engage with the community in planning and designing the network of local parks and playgrounds could build support to value and reduce vandalism locally.</p>		<p>Design of playgrounds frequently did not cater for all age groups which was particularly difficult for parents with a wide age-range of children. Parents and young people needed seating – preferably sheltered – for gathering socially.</p>

7. Accessibility challenges

Potential actions to mitigate barriers	Resident insight to support actions	Percieved barriers addressed
<p>7.1 A model of sustainable provision will rely upon consistent relatively high participant group numbers and at least elements of voluntary/ reduced fee leadership support and facility hire fees where relevant.</p> <p>Building a strong core of consistent participation in new activities will require sustained financial support.</p>	<p>Community providers of local activities set fees at low affordable levels, used pay as you go systems rather than up front block payments and offered participation with voluntary contribution.</p>	<p>Cost of participating in activity programmes outside estates was prohibitive to most families.</p>

8. Community Activity Leadership Capacity

Potential actions to mitigate barriers	Resident insight to support actions	Percieved barriers addressed
<p>8.1 A long-term sustained plan to encourage and support community physical activity facilitators as administrators, coaches or teachers would empower communities to build their own trusted volunteer-force.</p>	<p>There is evidence of willing volunteer community capacity across estates.</p> <p>Community Leaders and residents wanted to see volunteers encouraged and formally recognised for their work.</p>	<p>Residents needed physical activity facilitators, coaches and teachers to start activities in their estates.</p>

9. Lack of Awareness and communication

Potential actions to mitigate barriers	Resident insight to support actions	Percieved barriers addressed
9.1 Identifying informal community leaders within each estate could be an effective way of communicating with residents.	Family and friendship groups and word of mouth were an effective and most often quoted method of communication.	Despite the extensive efforts of community leaders, residents frequently suggested they did not know what was available in their estates and some perceived their estates to be closed to them.

Limitations of the study

This report is based upon a sample of 462 resident engagements as outlined in Annex D. We set out to reach as broad a range of inactive/low active residents as possible by estate, gender, age, and ethnicity. Our approach to the study was to elicit rich data to reveal residents' experiences and beliefs about physical activity experiences and aspirations. In the time available using this approach we did not expect to achieve a sample of participants representative of the demographic breakdown of the estates. However, we are continuing in the final stage of our survey collection to strengthen engagement of ethnic minority residents and some low response estates to ensure a full range of residents' voices is heard.

Annex A: Local Delivery Project definitions of activity and activity levels

Definitions

1. These estimates include the activities of walking, cycling, dance, fitness and sporting activities

2. Activity is counted in moderate intensity equivalent minutes whereby each 'moderate' minute counts as one minute and each 'vigorous' minute counts as two moderate minutes.

3. Depending on the number of minutes of moderate intensity equivalent (MIE) physical activity, people are described as being:

- Inactive – Doing less than 30 minutes a week
- Fairly Active – Doing 30–149 minutes a week
- Active – Doing at least 150 minutes a week

4. Moderate activity is defined as activity where you raise your breathing rate.

5. Vigorous activity is where you're out of breath or are sweating (you may not be able to say more than a few words without pausing for breath).

6. Local Delivery Pilot areas refer to the 12 pilot places across England that have received investment to test innovative approaches to increase physical activity and tackle inactivity, particularly in disadvantaged communities. For more details, please see our website:

[LDP website link](#)

Annex B Literature review: Barriers to physical activity in inactive UK communities

Socio-economic barriers:

Systemic poor and inequitable investment in environmental infrastructure

Environmental conditions play a central role in determining physical activity patterns. A 2025 systematic review identified multiple environmental barriers for low-socioeconomic status (SES) older adults, including poor pedestrian infrastructure, reduced access to recreational facilities, neighbourhood safety concerns, and unattractive environmental aesthetics (Malkowski et al., 2025). Public Health England (2021) similarly found that deprived neighbourhoods face reduced investment in the local outdoor environment. Poor environmental quality limited the appeal and capacity of an area to support physical activity. For instance, poor lighting, and traffic hazards were amongst the most significant environmental barriers reported by low-SES older adults in the Malowski et al's., systematic review (2025). These in turn raised personal safety concerns.

Poorer and inequitable investment in low-SES communities is multi-layered and systemic. Public Health England (2021) emphasises the need for multi-level, community-driven approaches to address these systemic barriers. An evaluation of the *Together an Active Future* programme demonstrated that partnership-based community interventions can reduce inactivity levels even in deprived areas, mitigating negative impacts of pandemic restrictions (Owen, Fahy and Barr, 2017).

Personal economic constraints and financial barriers

People living in poorer areas experience significant financial constraints that hinder participation in both structured and unstructured physical activity. According to Sport England 2026 lower socioeconomic groups are more likely to be inactive, with cost, time limitations, transport issues, and insufficient accessible opportunities acting as major barriers.

Health inequalities and reduced physical capability

Chronic health conditions, reduced fitness, and mobility limitations disproportionately affect lower socioeconomic groups. Malkowski et al. (2025) found that low-SES older adults often experience health-related physical limitations that restrict their ability to be active.

Public Health England (2021) similarly reports that long-term illnesses and poorer baseline fitness levels, are more prevalent among deprived groups, significantly restrict physical activity opportunities.

Psychological Capability and Motivation

Psychological factors—including confidence, self-efficacy, behavioural regulation, and perceived accessibility—are key determinants of physical activity behaviour. Low-SES adults report lower confidence and reduced awareness of opportunities, alongside greater difficulty planning or sustaining active routines (Malkowski et al., 2025). Sport England (2026) also highlights limited confidence and uncertainty about where to be active as major psychological barriers among disadvantaged groups.

Time Constraints and Complex Life Circumstances

Irregular working hours, caregiving responsibilities, and unstable employment patterns disproportionately affect individuals in lower socioeconomic groups, reducing available time for physical activity. Lack of time emerged as a key automatic barrier in qualitative evidence from low-SES older adults (Malkowski et al., 2025).

Lack of time and the scheduling of activities into time available was prevalent for adults with childcare responsibilities within resident experience. Some suggested the prevalence of blended and extended families added to domestic duties for parents and grandparents; furthermore, grandparents were frequently committed to childcare to enable working parents. Nonetheless there appeared to be a significant population of early retired and residents not in employment for whom time might otherwise be available for active pursuits.

Low social capital for engagement with physical activity

Where social norms, support networks and a minimal role for physical activity was apparent in the community context, physical activity capital was low and most present in low-SES communities.

The 2025 systematic review found social engagement and social norms to be significantly weaker in low-SES groups, affecting both uptake and maintenance of physical activity (Malkowski et al., 2025).

Evidence suggests that socioeconomic inequalities and lack of physical activity capital begin early in life. A scoping review found inconsistent but generally negative associations between lower SES and physical activity among children and adolescents, with higher family affluence consistently linked to higher activity levels in adolescence (Pearson et al., 2022).

Sociocultural factors play a critical role in shaping physical activity behaviours across UK communities, particularly among groups facing intersecting disadvantages. These barriers—spanning cultural expectations, racism, language challenges, family responsibilities, provision gaps, social norms and socioeconomic pressures—operate through norms, values, identity, and community-level experiences that collectively restrict participation in physical activity. Evidence suggests these barriers are especially pronounced in ethnically diverse, low-income, and marginalised groups.

Sociocultural barriers

Sociocultural barriers refer to norms, values, cultural expectations, social relationships, identity factors, and community-level experiences that limit participation. The evidence shows these barriers are especially pronounced in ethnically diverse, low-income, and inter-sectionally disadvantaged communities. Intersectionality is highly relevant to this study as it applies to those who experience multiple frames of disadvantage for instance those who are part of a minority ethnic community living with low social economic advantage. Multiple layers of disadvantage impact these residents increasing the complexity of barriers to being more active.

Cultural Expectations, appropriateness and Lack of tailored provision

Cultural expectations are widely documented as a major influence on physical activity engagement within minority ethnic communities. Among South Asian groups, gendered norms shape expectations around women's household roles and acceptable behaviours, creating tension between physical activity and cultural identity. Women may experience physical activity as conflicting with expectations to prioritise caregiving or homemaking, while concerns about modesty lead some to view structured exercise as culturally inappropriate. These cultural norms extend to broader perceptions of organised activity, with some communities viewing gyms or mixed-gender classes as incompatible with cultural or faith values. Additionally, community priorities such as family cohesion and cultural practices are key influences on participation patterns, contributing to particularly low engagement among women and older adults.

Many communities face a lack of culturally appropriate physical activity provision which are mindful of the cultural appropriateness for targeted members of those communities. Barriers include insufficient women-only sessions. Children from minority backgrounds similarly encounter limited variety of sports, gender-balanced opportunities, and supportive environments. Negative peer feedback children from minority backgrounds participating in UK traditional games with which they have no family or personal experience can further reduce confidence and engagement. Such limitations contribute to lower early participation and reduced likelihood of developing long-term active habits.

Spaces and places hosting activity can deter participation, and thought must be given to providing culturally familiar or faith-sensitive spaces, and programmes which align to cultural values or traditions.

Racism, Discrimination and Social Exclusion

Racism—both structural and interpersonal—has been shown to create significant barriers to physical activity through exclusion from programmes, inequitable access, and mistrust of institutions. Qualitative research reports that ethnic minority participants frequently link discrimination with reduced opportunities and constrained health behaviours, including physical activity. Systemic exclusion is further evidenced in national datasets, where inequalities persist not due to individual motivation but because of the inequitable

environments that ethnically diverse adults navigate. These groups are also underrepresented in leadership and volunteering roles across community sport, reinforcing exclusion and weakening confidence, belonging and willingness to engage.

Language Barriers and Communication Challenges

Limited English proficiency among newer migrants and older adults within minority ethnic communities contributes to reduced confidence in participating in public physical activity settings and hampers understanding of available services. Research emphasises that communication which is not culturally responsive further restricts engagement; culturally aligned and sensitively adapted messaging is essential to make opportunities visible and accessible across diverse communities. Without such approaches, interventions often fail to achieve reach or inclusion.

Family Responsibilities and Community Obligations

Family roles and responsibilities intersect strongly with cultural norms to shape physical activity behaviours. Caregiving expectations, particularly among women, frequently take precedence over leisure or self-care activities, leaving limited time for physical activity. Similarly, long working hours—common among South Asian men—reduce opportunities for exercise. Family and community identity also play a role in shaping behaviour, sometimes limiting individual autonomy; activity may be deprioritised unless it aligns with collective family or community functions.

Social Networks, Peer Influence and Community Norms

Social networks exert strong influence across the life course. When peers or social circles are inactive or uninterested in physical activity, individuals are significantly less likely to participate. In communities where inactivity is widely perceived as the norm, physical activity may be regarded as unnecessary, culturally atypical or low priority, reinforcing established patterns of low engagement.

Socioeconomic Pressures with Cultural Dimensions

Although economic barriers are structural, their impact is shaped by cultural expectations and obligations. The financial costs associated with physical activity are amplified in communities where individuals provide support to

extended family networks, reducing disposable income available for leisure activities. Cultural expectations of hard work and family support can also contribute to long working hours, further limiting time for physical activity. These intersecting pressures disproportionately affect South Asian, Black and lower-income households, contributing to entrenched inequalities in participation.

References

- Alecu, S., Onea, G. A., & Badau, D. (2025). The Relationship Between Motivation for Physical Activity, Physical Activity Level, and Body Mass Index for University Students. *Sports*, 13(4). <https://doi.org/10.3390/sports13040096>
- Bajamal, E., Aly Abou Hashish, E., & Robbins, L. B. (2022). Enjoyment of Physical Activity among Children and Adolescents: A Concept Analysis. *The Journal of School Nursing*. <https://doi-org.libezproxy.open.ac.uk/10.1177/10598405221137718>
- Cote, J., Turnnidge, J., & Evans, M. B. (2014). *Jean Côté The dynamic process of development through sport*. 26, 14–26.
- Işıkğöz, M. E. (2025). Intrinsic vs. extrinsic motivation in high school physical education: Which fuels adolescent achievement emotions better? *PLOS ONE*, 20(6 June). <https://doi.org/10.1371/journal.pone.0327393>
- Let's make 2026 the year every child is active | Sport England*. (n.d.). Retrieved April 12, 2026, from <https://www.sportengland.org/blogs/lets-make-2026-year-every-child-active>
- Malkowski, O. S., Harvey, J., Townsend, N. P., Kelson, M. J., Foster, C. E. M., & Western, M. J. (2025). Enablers and barriers to physical activity among older adults of low socio-economic status: a systematic review of qualitative literature. In *International Journal of Behavioral Nutrition and Physical Activity* (Vol. 22, Number 1). BioMed Central Ltd. <https://doi.org/10.1186/s12966-025-01753-4>
- Pearson, N., Griffiths, P., Van Sluijs, E., Atkin, A. J., Khunti, K., & Sherar, L. B. (2022). Associations between socioeconomic position and young people's physical activity and sedentary behaviour in the UK: A scoping review. In *BMJ Open*

(Vol. 12, Number 5). BMJ Publishing Group. <https://doi.org/10.1136/bmjopen-2021-051736>

Perlman, D., & Karp, G. G. (2010). A self-determined perspective of the Sport Education Model. *Physical Education and Sport Pedagogy*, 15(4), 401–418.

Public Health England. (2021). *Physical Activity*. Public Health England Website. https://fingertips.phe.org.uk/profile/physical-activity/data#page/3/gid/1938132899/pat/15/par/E92000001/ati/6/are/E12000004/iid/93570/age/246/sex/4/cid/4/tbm/1/page-options/car-do-0_car-ao-0

Tolitol, M. B. (2026). Learners' Interests and Motivation in Physical Activities. *GEO ACADEMIC JOURNAL*, 7(2). <https://doi.org/10.56738/issn29603986.geo2026.7.164>

Wellard, I. (2014). Introduction: sport and embodied pleasures. In *Sport, Fun and Enjoyment: An Embodied Approach* (1). Routledge. <https://books.google.co.uk/books?hl=en&lr=&id=SSCwAAAAQBAJ&oi=fnd&pg=PP1&dq=Sport+fun+and+enjoyment+an+embodied+approach+Wellard&ots=BpmaIytxoW&sig=SWqJaBcQBM7sQlZdyy7ttxuiky4#v=onepage&q=Sport+fun+and+enjoyment+an+embodied+approach+Wellard&f=false>

Zhang, N., & Su, Z. (2026). Physical fitness and enjoyment of physical activity among university students: implications for sustainable physical activity participation. *Frontiers in Psychology*, 17. <https://doi.org/10.3389/fpsyg.2026.1772490>

Zhang, T., Lee, J., Barnett, L. M., & Gu, X. (2021). Does perceived competence mediate between ball skills and children's physical activity and enjoyment? *Children*, 8(7). <https://doi.org/10.3390/children8070575>

Annex C: Infographic to show a summary of initial insights

Hodge Lea
Kiln Farm
Fullers Slade
Greenleys
Stacey
Bushes

Milton Keynes Places Expansion Project (MKPEP)

Beanhill
Coffee Hall
Eaglestone
Fishermead
Netherfield
Springfield

Getting communities more active.

MKPEP Board is applying for funding from Sport England to help 11 MK estates get more active. Residents have been telling us what stops them getting active. This is what they have said so far

Personal challenges:



- No time to exercise
- Health challenges
- Not good enough
- Safety concerns

Need more local clubs and activities:



Don't know what is going on:



Need more local places to go:

- Parks and playgrounds
- Youth spaces



Going to activities difficult:

- Buses unreliable
- Activities cost too much



Need more people to lead activities

Please help MKPEP prepare the strongest possible bid for funding by completing our **SHORT ONLINE SURVEY**.

Adults and young people 11+ years:



7-11yrs children with parent/guardian permission:



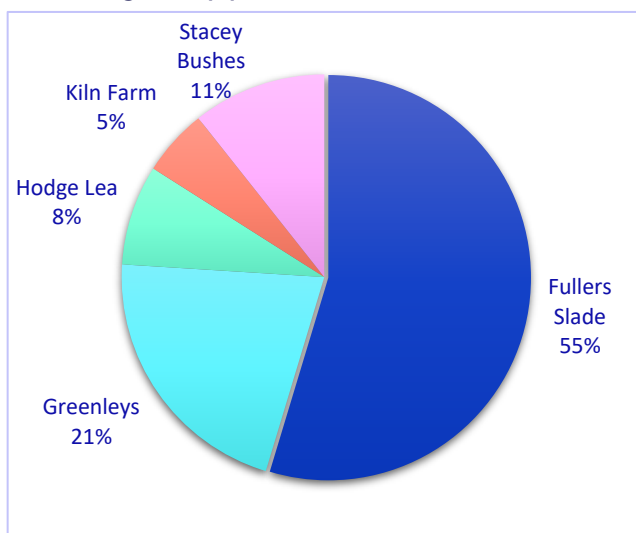
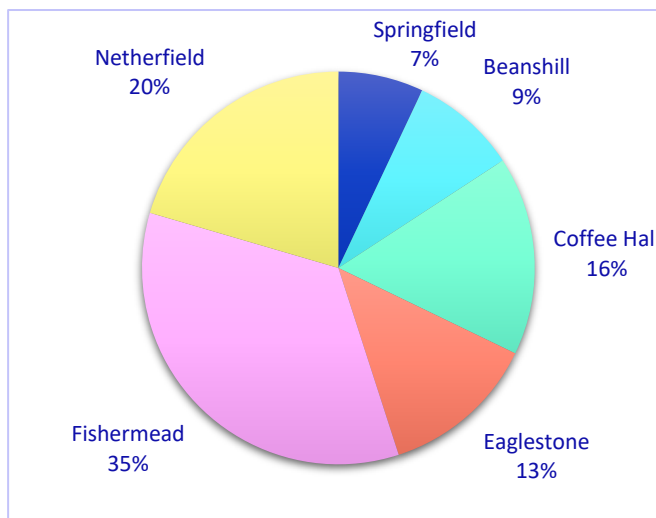
FOR MORE INFORMATION go to our project web page:



 The Open University for the MKPEP Board

Annex D: Research participants' profile

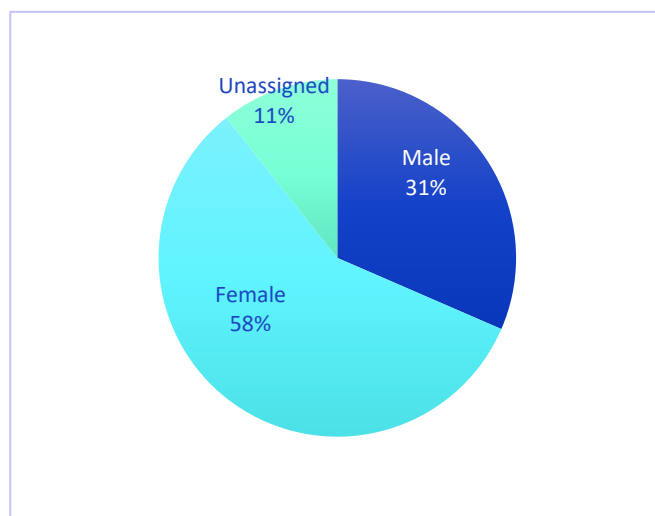
Data collection at key community spaces, special events and regular activities frequently attracted a substantial proportion of people who travelled between and from outside the target estates. Many were regular users of the community spaces/activities and those were included in the data collected resulting in approx. 77 'out of area'

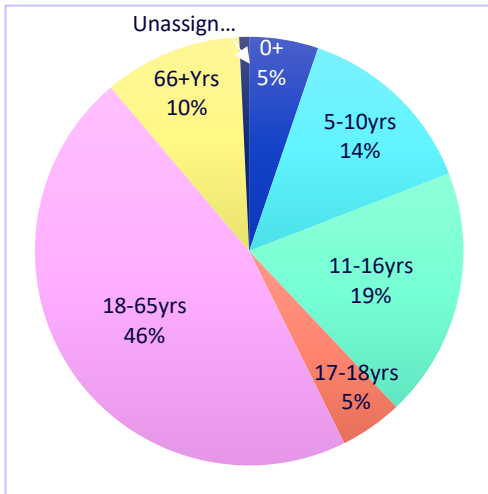


users of community facilities/activities. The spread of participants across estates reflected the prevalence of established community facilities and activities where residents gathered and could be engaged.

More female than male participants were engaged reflecting the higher availability of women to engage in community social activities and spaces within the estates.

A good spread of ages was engaged. A high proportion of adults were not working and shared many features of

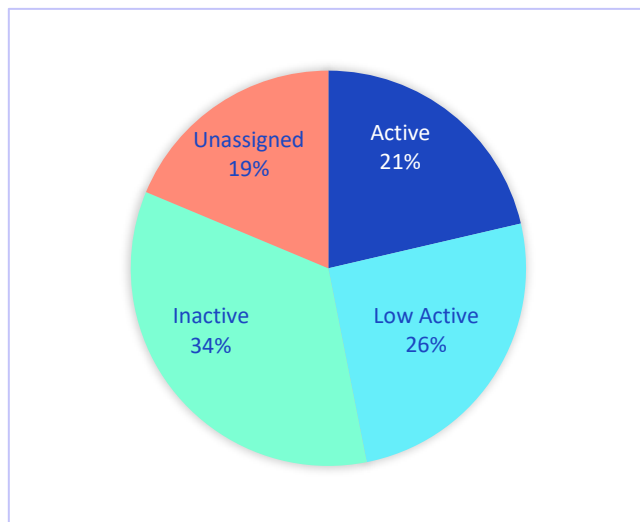




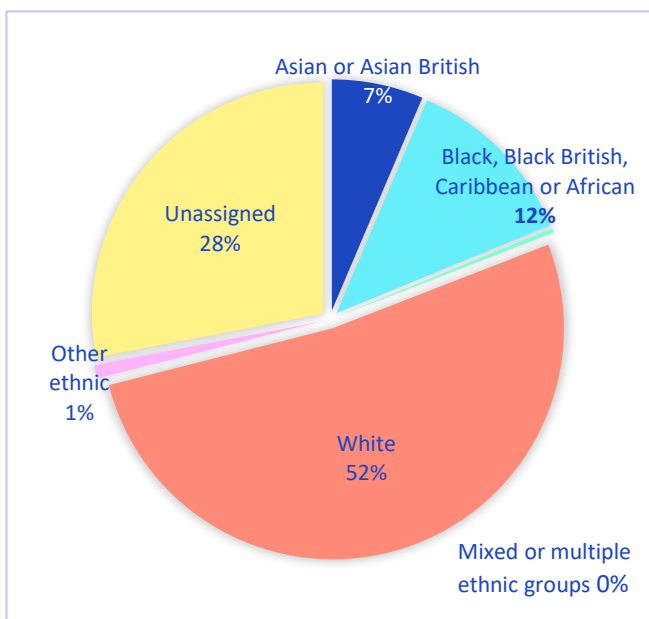
retired adults such as health and mobility challenges and generally lower and limited available income to pay for physical activity.

Simultaneously parents and grandparents spoke primarily about their children and grandchildren’s physical activity experiences and needs. Parents with newborns and early years children needs shared their own needs as well as their aspirations for their children.

The study focused upon inactive and low active residents. However, we have included active residents’ views where these contribute to insight development e.g. the experiences of a newly active resident. The concept of being active/inactive is poorly and differently understood. Annex A sets out the Local Delivery Project definitions of activity and activity levels which were used as a guide. However individual residents’ perceptions of their activity level are themselves factors in considering barriers to activity.



Two focus groups and meetings with minority ethnic group community leaders have contributed greatly to engagement with minority ethnic communities. However Increased representation from those residents is a key focus for the final survey stages of the study.



The research team is very grateful to the many residents, community leaders and others who generously supported them in this study. We are indebted to community leaders who connected us to their inspiring residents; and to those residents who shared their time, views and experiences with us, completed surveys, and took part in focus groups; particularly young people who expressed their views and aspirations in wonderful creative art works and performance.

Thank you.