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Ready! Steady! Don't go...

Enthusied by a new year full of possibilities, including the move of public health back into the local authority realm, Carl Bennett asks whether sport and leisure will get out of the blocks.

Well, that was a year to remember, or forget, depending on your viewpoint. There was many a positive highlight for me in terms of my seated position watching a number of TV spectaculars, and some significant challenges for those of us working in the statutory sectors, especially the NHS, to embrace or overcome. I'm of the view that now 2012 is behind us we should look to the future and take it on with as much enthusiasm as a Games Maker who still wears their uniform to go shopping.

At this time of year there will be many "actioning" their 2012 legacy promises, a legacy not of the Olympics but of too much to eat and not enough exercise. I look around and read the much-hyped reports in various media which state that we are "too fat" and I continue to receive shed-loads of research suggesting we are getting bigger. Very recently there has been a debate brewing, led by the royal colleges, about just whose responsibility the looming "obesity cliff" is and all I see and hear are the same old responses to an age-old problem. How do we get people active?

I am not going to discuss the "causes of obesity" here (I think most people share a view that matches the Shift'n obesity mind map) but I do think we all have a responsibility to join up the available capacity and resources to address the issue of helping people manage weight effectively. It is our job to help people make informed choices and point them to where they can get the best help, not add to the misinformation or encourage them to access quick-fix solutions that only serve to satisfy and offset the problem in a kind of obesity-income deficit agreement.

As the new year beds in, the typical, knee-jerk responses to the weight challenge we all see on our streets, on television and in online and print media begin to rear their annual head. The leisure sector, as always, will introduce all those fat-burning, high-intensity, pack-'em-in-and-charge-'em-high workout sessions that many will attend but fail to continue. I hear the stories from people I know who say, "That was great that session but I don't think I can do it every week" or "I'm aching after that class; it must be doing me some good" and then don't go again. We all know these people. We know them as customers, work colleagues, as friends, distant relations and immediate family members. Yet, with all this knowledge (but precious little accompanying insight), we still develop and market these sessions and rota them into an already packed programme that is weighted towards those that are already active and that competes directly with the other providers who share the same market space and customer potential.

But what about those that fail to continue? What about those that these offers fail to entice and enthuse? What about that 80% of the population that are not active enough to benefit their health? What about all those people that, because they are not active, cost us all resource? The list of questions goes on and on.

The chief medical officer (CMO) recommends an adult to be moderately active for at least 150 minutes a week. May I point out the keys to the CMO statement on physical activity is "moderately" and "150 minutes". No mention of once a week. No mention of high intensity; it only says "activity". Yet many programmed sessions take place weekly and include high-intensity workouts verging on the impossible (and, therefore, unsustainable for the majority of us) which are slotted into those peak times that compete with other high-demand activities.

It always interests me when I walk around the many facilities I visit to see the same faces (socio-demographic groupings) whether they be community (local

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authority) or privately operated. It interests me to see the same activities and similar programming available regardless of target population and it interests me to look back to when I was a leisure centre manager (some 15 years ago) doing the exact same thing. The times may be a-changing but the offers don't. Zumba is simply exercise to music. Cave Man training is simply circuits. Military Camp is simply fartlek-based activities. Are they not?

Our population needs are far more diverse than a generic programme however it is disguised. What really surprises me is that the same thing is offered in every facility regardless of their reach or potential. Some of these sessions are even delivered by the same instructors, regardless of setting. The health of our population has changed rapidly in the 10 years in which I have worked as a public health commissioner. There are now different needs that I fail to see "joined-up" answers addressing. There are real needs that many providers fail, or choose not, to recognise and tackle.

At this time I cannot comment on the various Whole Sport Plans that were recently awarded with cash by Sport England but what I can confidently say is there won't be much room to grow and develop those from the harder-to-reach end of the participation spectrum. From what I have seen and read those sports with the best performance at the podium are still being rewarded. This method of reward simply continues the divide I used to see when I was involved as a Level 2 sports coach. Sport generally supports those who are already engaged and those on the performance and excellence route.

Austerity is here for the foreseeable future. We need to pool our resources and capacity and shape it to the needs of the majority of our population. Most of those that we fail to engage don't want quick-hit, poor-outcome interventions. They need high-quality interventions that achieve measurable and sustainable outcomes. They need activities they can easily pick up in their everyday lives. We need programming that prioritises peak provision towards the needs of the larger population groups. We need to tune into local public health issues and provide offers that engage and enthuse the hard to reach – the difficult to motivate and sustain – of our local populations and adjust offers to match these. And all this needs to happen at scale. If we believe the hype, over 30% of our populations are overweight. If I interpret the evidence and trend analysis correctly (with the help of an epidemiologist) I see the Foresight Report coming true.

Now that you have taken the time to read this piece it would be remiss of me not to ask what you are doing to address the family issue? If we are to understand the complexities of physical activity and build programmes that reach all, why is it that if I want to be active in the gym or the pool, I can't take my seven-year-old with me? How many activities do you offer that provides the whole family an opportunity to be active together? You might want to take a look at this report if you are unsure of the potential for building this into your physical activity continuum offer: www.designedtomove.org

I look forward to 2013. A year that will re-prioritise the priorities. A year that will act as a catalyst to encourage and make people and organisations work together to achieve common objectives. A year that will see market differentiation as the must-do. A year in which we start to address the real weighty issues. A year that might begin to break the inactivity issue.

Ready... Steady... Go!

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The Shiftn obesity mind map is online at www.shiftn.com

The Foresight Report is online at www.bis.gov.uk

Find Designed to Move online at www.designedtomove.org

The Leisure Review, January 2013

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