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Research and analysis

# Everybody active, every day: 5 years on

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## Introduction

In October 2014, Public Health England (PHE) published Everybody active, every day (EAED) (<https://www.gov.uk/government/publications/everybody-active-every-day-a-framework-to-embed-physical-activity-into-daily-life>), an evidence-based, national physical activity framework for England. The framework was designed to support all sectors to embed physical activity into everyday life, thereby making it a cost effective, 'normal' choice. PHE co-produced the framework with over 1,000 national and local leaders in physical activity, with a rallying cry to providers and commissioners across the nation that now was the time to act.

The framework called for action across 4 specific domains:

- active society – change the social 'norm' to make physical activity the expectation
- moving professionals – develop expertise and leadership within professionals and volunteers
- active environments – create environments to support active lives
- moving at scale – identify and up-scale successful programmes nationwide

Five years on, PHE commissioned global consultancy provider ICF to undertake an independent review of the framework. The review had 3 key objectives:

- to assess progress towards the implementation of EAED through research with professionals at national and local level
- to review progress of implementation of EAED through evidence-based practice
- to co-produce strategic actions to accelerate the scale and impact of EAED over the next 5 years (collaboratively with national and local stakeholders)

## The physical activity agenda – 5 years on

Since the release of EAED in 2014, the physical activity message (defined by ICF as 'the importance of increasing physical activity') has maintained a national profile, with policy and strategy increasingly including mention and reference of the need to incorporate physical activity. Steps have been taken to progress the agenda at population level, with examples including, but not limited to:

A revised release of the Physical activity guidelines: UK Chief Medical Officers' report (<https://www.gov.uk/government/publications/physical-activity-guidelines-uk-chief-medical-officers-report>) in late 2019. These include physical activity recommendations for children under 5 years, children and young people aged 5 to 18, adults aged 19 to 64, older adults aged 65 plus and disabled adults.

Monitoring, surveillance, and funding of physical activity across several sectors, including health, education, sport, transport, environment, and urban planning.

Key target groups emphasised within national policies including those from lower socioeconomic groups, pregnant women, breastfeeding women, minority ethnic groups, older people, people with disabilities and people with chronic diseases.

Prominent media marketing of several national physical activity campaigns, including 'This Girl Can', 'Active 10' and, more recently, 'We are Undefeatable'.

The recognition of national physical activity programmes as good practice within both strategic and policy publications, such as PHE and Sport England's Moving Healthcare Professionals programme (<https://www.sportengland.org/campaigns-and-our-work/moving-healthcare-professionals>), within the

Department of Health and Social Care Advancing our health: prevention in the 2020s Green Paper (<https://www.gov.uk/government/consultations/advancing-our-health-prevention-in-the-2020s/advancing-our-health-prevention-in-the-2020s-consultation-document>).

The percentage of adults classified as physically active, in England, has ranged from 66.1% (2015/16) to 66.4% (2019/20) and for children and young people from 43.3% (2017/18) to 44.9% (2019/20). For definitions and more information please access [Fingertips](https://fingertips.phe.org.uk/profile/physical-activity) (<https://fingertips.phe.org.uk/profile/physical-activity>). Inequalities relating to physical activity (<https://www.gov.uk/government/publications/health-matters-physical-activity/health-matters-physical-activity-prevention-and-management-of-long-term-conditions>) do exist across socioeconomic status and the protected characteristics, including: age; gender; disability; race; sexual orientation and gender identity.

## Summary of the 5 year review findings

The 5 year review demonstrates that stakeholders received the [EAED](#) framework positively. Stakeholders referenced it setting 'a clear agenda for action', being 'based on a strong evidence base', and reported how valuable it is for organisations 'wanting to know how to focus on physical activity'. There was agreement that cross-sector and cross-departmental collaboration is crucial for continuing to embed the messaging on the importance of physical activity at a population level.

An illustrative example of this is the multidisciplinary partnership working increasingly found at local authority level across planning, sport and leisure, education, and the third sector. However, stakeholders noted that an overall area for improvement is the necessity of more prominent physical activity integration into health policy.

## Progress to date

The ICF review identified positive progress over the last 5 years across each framework domain. Pertinent improvements are outlined below.

### Active society

There has been increased prominence of physical activity in national strategies and plans, with stakeholders recognising the importance of embedding the message into agendas across several sectors. Feedback to national campaigns, such as [This Girl Can](#) and '10-minute Shake Up', and local initiatives, such as the 'Daily Mile', demonstrates these have positively influenced attitudes towards physical activity. Furthermore, there has been a transition away from promoting sport and intensive exercise, with greater focus on small behavioural changes and tailored messaging to address inequalities.

### Active environments

Professionals within transport and planning have greater awareness of physical activity benefits, with increased investment in campaigns advocating for environments conducive to active living. Local level activation of national initiatives is evidenced, with general initiatives encouraging active travel also gaining prominence. This domain was regarded as the most important area for changing physical activity uptake at population level, with long term planning and investment required.

### Moving professionals

National and local policy documents have begun identifying the need to create physical activity advocates across sectors as a catalyst for improved promotion. An example of this is the progress made in the healthcare sector by [PHE](#) and Sport England's [Moving Healthcare Professionals](#)

programme, with aspects of this approach developing across education, sport and leisure.

Specific reference is made to increased upskilling of the non-medical workforce, in a responsive attempt to improve engagement and confidence with people who are inactive or have long term conditions. Continued development of professional physical activity networks is identified as a crucial outlet for information sharing and mutual exchange among sector advocates.

## **Moving at scale**

Stakeholders agreed that this domain sits as a cross cutting theme across other **EAED** domains. Positive examples were provided of improved physical activity monitoring and data collection across sectors, with Sport England's physical activity evaluation framework identified as a useful tool.

Additionally, Sport England's local delivery pilots programme (<https://www.sportengland.org/campaigns-and-our-work/local-delivery>) was identified by stakeholders as providing valuable insight into what works to increase physical activity levels. To better understand what interventions work, an approach which identifies the systems which are essential before interventions can be effectively replicated should be developed as a priority.

## **Challenges**

The review also highlighted a number of challenges including:

- the limited and uneven resource dedicated to increasing physical activity, both human and financial; this can result in challenges to the feasibility of delivering local plans and ambitions
- the lack of time required to develop strong partnerships, that are pivotal to joint commissioning

## **Opportunities identified by the review**

The ICF review concluded with the categorisation of 22 points of opportunity across the next 5 years. These opportunities feature all 4 domain areas in **EAED**.

Summarised into key themes these are:

## **Integration of physical activity in strategies and policies**

The review recommended the following:

- progressing the physical activity agenda and addressing inequalities in relation to physical activity by advocating for greater prominence of physical activity within government policies and strategies
- supporting local policy makers by developing guidance on national policy requirements and the implications for local level policy and strategies
- supporting new health structures, such as integrated care systems, so they can effectively ensure that updated plans and strategies give prominence to physical activity and underrepresented groups within the prevention agenda

## **Guidance on collaboration and partnership working**

The review recommended the following should occur:

- conducting mapping of all national and local partners who should be engaged to get physical activity on the agenda, followed by the creation of guidance material on how to develop effective physical activity focused partnerships
- developing physical activity professional networks at local level to work towards a shared vision for increasing physical activity across sectors, with community representation to assist with understanding inactivity and enablers and barriers to physical activity

## **Understanding available resources for the scale of the challenge**

The review recommended the following:

- consider local physical activity needs assessments in collaboration with local sector physical activity leaders to identify key target groups, pockets of deprivation and local area needs

## **Achieving an active society**

To do this the review suggested the following steps:

- build on the work undertaken by active partnerships in collaboration with large corporations and employers to develop targeted interventions and schemes, such as 'active workplaces'
- capitalise on the benefits of technology and use it to connect people with opportunities to be physically active, including by targeting inactive groups
- taking a targeted approach to future campaigns to focus on those who are most inactive, with cross-cutting action across domain areas to understand the needs of inactive groups and barriers and enablers to physical activity

## **Developing active environments**

The report also recommended the following should occur:

- continue promoting active design principles to professional bodies, ensuring it remains on the radar of planners, designers and developers
- work with planners and developers to collate and share case studies regarding the practical application of active design principles
- produce active spaces guidance designed to improve physical activity rates and address health inequalities

This guidance could include how to make green space more accessible, how to provide adequate lighting and how to develop facilities to support physical activity.

## **Mobilising professionals**

In this area the report recommended the following actions :

- build on the success of the Moving Healthcare Professionals programme by creating sector specific guidance on developing physical activity champions in the planning, design and transport sectors.

- produce sector-specific guidance on how physical activity is relevant to the agendas of professionals working in transport, planning, design, schools and workplaces
- collaboration between integrated care systems and new health structures to jointly deliver on local physical activity strategies and plans
- commission exploratory research to further understand the links between the physical activity workforce and interventions in primary and secondary care
- encourage further collaboration between social prescribing link workers, sport and leisure transport, public health, and communities
- explore the work of clinical senates to gain an understanding of how they operate and what opportunities are available for collaboration
- undertake research to map the professional workforce across the health, social care, sport, planning, design, transport, education and environment sectors, to identify how key stakeholders need to be engaged

## Moving at scale

The report recommended that sectors:

- continue to build a protocol with the involvement of local partners for understanding and sharing what works in a local context (such as Sport England's local delivery pilots) to get inactive people active
- promote and encourage more evaluation among professionals from sport and leisure, schools, health, transport and planning to ensure consistency and standardisation
- consider further research into the development of the 'right systems' to facilitate an increase in physical activity levels and narrow the inequalities gap

## PHE response

PHE recognises and welcomes input from respondents who contributed to both the development of this review and its findings and recommendations.

The partnerships PHE possesses at both a national and local level provides an opportunity to connect stakeholders and align approaches, which can deliver on shared interests relating to increasing activity levels; creating health promoting and active environments; and ensuring that promoting physical activity and its benefits to people's physical and mental health is everybody's business.

As an evidence based organisation, PHE is keen to support evaluation and better understand the impact and value of physical activity and how this benefits people, places and supports public health, the NHS and social care. PHE, as the leaders, with Sport England, of the Moving Healthcare Professionals programme, are committed to evaluate and share the learning from the programme with our partners.

Evidence from partners such as Sport England's Active Lives survey (<https://www.sportengland.org/know-your-audience/data/active-lives>) and the Health Foundation's Build Back Fairer (<https://www.health.org.uk/publications/build-back-fairer-the-covid-19-marmot-review>), demonstrates that the impact of COVID-19 has led to a widespread reduction in physical activity and an exacerbation of health inequalities. In response to this and the opportunities outlined through the EAED review, PHE will begin to engage in conversation across the sector, across government departments and its agencies (Department of Health and Social Care, Department for Culture, Media

and Sport, Department for Transport, Ministry for Housing, Communities and Local Government, National Health Service and Sport England); the Association for Directors of Public Health; the Local Government Association; and with Local Authorities and other stakeholders to inform priorities for enabling everyone to get more active in their everyday lives.

PHE believes that systems leadership, including at a national level, to support everybody to be active, everyday is essential and that this will enable and amplify action in places and with communities. In working towards this, PHE will work closely with Sport England as work develops on the implementation aspects of the 'Uniting the Movement' strategy (<https://www.sportengland.org/why-were-here/uniting-the-movement>).

## Next steps

PHE is keen to engage, listen and work with wider national and local stakeholders to begin to help shape and design a refresh of EAED. This will help frame the longer term national response to improving everyone's levels of physical activity and in particular addressing the health inequalities associated with physical activity.

This may take the form of a series of conversations and collaborative engagements across the system. This work will continue as the Office for Health Promotion launches later in 2021 and takes the national lead to improve and level up the health of the nation by continuing work to improve dietary health, prevent obesity, improve mental health and promote physical activity.

If you are interested in engaging with PHE on this work, then please take this as an invitation to email your responses and thoughts under the heading 'Responses to EAED 5 years on' to [physicalactivity@phe.gov.uk](mailto:physicalactivity@phe.gov.uk) where these will be shared with the PHE Physical Activity team.

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