



Active women, healthy lives: Understanding barriers to women's participation in physical activity

November 2024



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Foreword

At Vitality, we have long championed physical activity as the bedrock of health and longevity. It is one of the founding principles that Vitality is based on, pioneering a new approach to insurance that incentivises behaviour change, helping our members live healthier and longer lives.

The existence of an exercise gap between men and women in the UK is well-known and widely reported, and affects us all. Sport England reports that the annual social value of community sport and physical activity could be more than £100bn.¹ If women, who account for half of the population, are not actively engaging in exercise as much as men, this has significant consequences for both the individual and society.

The benefits of activity and exercise are well-known. Earlier this year, we conducted a landmark piece of research with the London School of Economics, showing that by sustaining a healthy habit, doing exercise at least three times a week, brings about a 27% reduction in mortality risk. The benefits to society are also staggering: the NHS could save £15bn annually if half of the UK's inactive population and all of the insufficiently active population started consistently walking at least 5,000 steps once a week and three times a week, respectively.²

This offers significant opportunity and why we recognise we must act now to help ensure that physical activity and sports opportunities are accessible and inclusive to all.

We have always been champions of women's sport and I am proud of our accomplishments here, supporting both professional and community-led sport and activity programmes. This research has been a natural evolution of this, further examining women's exercise habits and starting to uncover the complex and intertwined reasons why women's activity levels lag behind their male counterparts.

¹Social value of sport and physical activity | Sport England. ²The Vitality Habit Index, 2024.



“Through this report we examine women's attitudes to physical activity, the barriers preventing women from being more active, and how we can better support women to do more.”

The findings are sobering. One in four women report not feeling physically healthy. Only 23% of women engage in 30 minutes of exercise or achieve 7,000 steps a day, five or more times a week – though 41% say they would like to reach this goal. 65% of women report not enjoying exercise.

There is also reason for optimism. Through this report, we examine women's attitudes to physical activity, the barriers preventing women from being more active, and how we can better support women to do more. While the challenges that lie ahead are significant, they are not insurmountable. Through meaningful collective effort, we can create an impactful shift in society that empowers women to prioritise their health.

I would like to thank the 6,000 women who participated in our survey and those who generously gave their time as part of our focus group discussions to help us create this report. The numerous stakeholders who spared us time to share their insights and expertise, and our incredible report partners – The Well HQ and Women in Sport – who have already done so much for this cause and continue to champion the changes that need to happen.

Sport and activity bring immense enjoyment and social benefits to many, and the opportunity for more people to experience this, is not lost on me. Fundamentally though, exercise supports us to live healthier for longer, and we all have a responsibility to make it open, inclusive and an option for all.

Neville Koopowitz, Vitality Group CEO.



THE WELL HQ



THIS WOMAN RUNS



Methodology

Vitality commissioned a programme of research to understand the physical activity habits of women; the perceptions and barriers to engaging more in exercise; and how we can lift these barriers to help women be more active.

We would like to thank everyone who contributed to this research and made this report possible. This includes Vitality Ambassadors and partners such as:

- > Gabby Logan MBE
- > Dame Jessica Ennis-Hill
- > The Well HQ
- > Women in Sport
- > England Netball
- > parkrun
- > Stockport County Community Trust
- > This Woman Runs
- > England and Wales Cricket Board
- > London Marathon Events
- > AFC Bournemouth Community Sports Trust
- > The Space Between





Focus groups

Two focus groups were conducted. The first was with a general population sample, the second with Vitality partners who through their professional role are involved with the promotion of women's physical activity.

Public polling

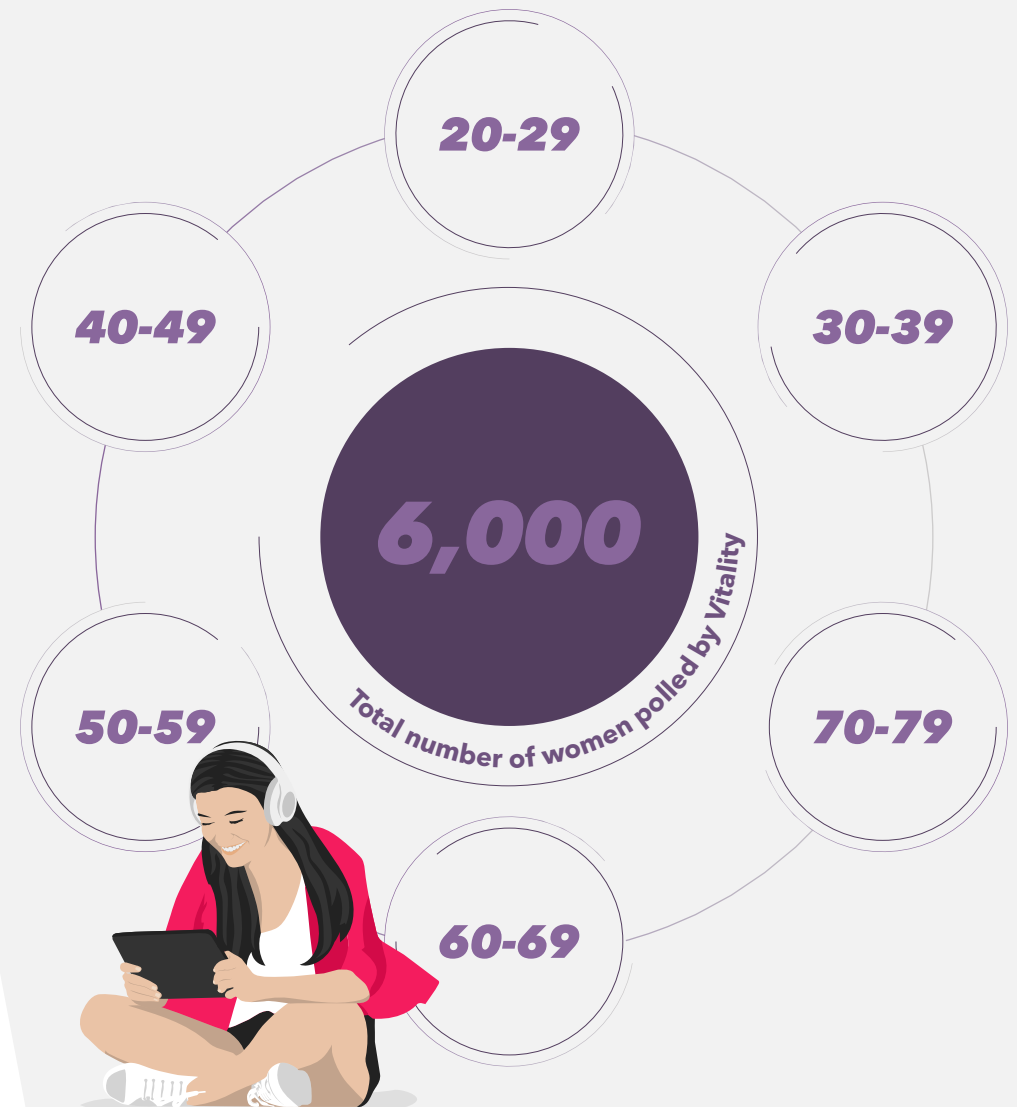
Vitality commissioned FGS Global to carry out a survey with 6,101 women across the UK, including at least 1,000 women from each decade of life from the ages of 20 to 79. This data was weighted to be nationally representative on the basis of key demographics including region, ethnicity, and socioeconomic grade. Fieldwork took place from 24th-28th June 2024.

Stakeholder depth interviews

We conducted 26 stakeholder depth interviews with experts, including a spread of academics, politicians, policymakers, athletes and influencers.

Some of the experts we spoke to include: Agata Sromecka, Activity Alliance; Councillor Ann Marie Finn; Councillor Becky Chambers; Councillor Alan Juriansz; Deborah Griffin, World Rugby Council; Kim Leadbeater MBE MP; Lisa Wainwright, Sport and Recreation Alliance; Lord James Bethell of Romford; Zuleika Sassa, Health and Wellness Coach; Rae Williams; Sheona Forbes, Northern Ireland Warriors Head Coach, and representatives from the University of Portsmouth and the University of Glasgow.

This report includes verbatim quotes from these interviews throughout.



Executive summary

This report explores the critical barriers preventing women in the UK from achieving recommended levels of physical activity and lays bare the implications of this both on the individual and wider society. By investigating the root causes of these challenges, the report aims to shed light on these obstacles and propose actionable solutions to make physical activity more accessible, empowering, and enjoyable for women at every life stage.

Key findings:

- Less than one in four women hit the recommended weekly exercise target but 41% of women express a desire to reach these targets.
- Women are walkers and independent exercisers: only 4% of women engage in group sports.
- Two thirds of women report that their weight, lack of strength and low fitness levels negatively impact their ability to exercise.
- 41% of women said that weight management was their main motivator for being active.
- There are three major barriers that keep women from being physically active: a lack of motivation (82%), a lack of enjoyment (65%), and a fear of judgment around physical ability or body image (62%).
- There are strong generational trends that negatively impact women's activity levels: younger women struggle with mental health challenges or demanding work schedules, whereas older women struggle with their changing bodies and physical fitness.
- Only 9% of women strongly agree that they feel informed about what exercise is beneficial for them at different life stages.



We need a collective approach to tackle this critical issue:

government, business, the sports and exercise industry, and individuals all have a part to play. This report provides detailed recommendations, but we believe there are three critical factors underpinning any action:

- **Physical activity and exercise need a rebrand:** we need to shift the focus from weight management to the broader health benefits that an active lifestyle offers, while also promoting a diverse range of activities that resonate with women's varied interests and lifestyles.
- **Women need to be considered as a non-homogenous group:** by better accounting for women at different ages and life stages, and their respective needs, challenges and opportunities at each point in their life, we can better meet their needs and tailor activity options to them. Introducing health checks for women at key life stages or providing more inclusive facilities to better accommodate women's lives and needs will help.
- **This is not for women to fix:** it is clear that we all have a role to play in helping women be more active. Government and healthcare professionals can play a critical role through social prescribing, employers have a duty to foster a workplace culture that prioritises women's wellbeing, and the sport and exercise industry needs to evaluate how it can improve the quality of information provided and collaborate to create more opportunities that work for women.



The state of play

How healthy are women in the UK?

Our research reveals a complex landscape of women's health and physical activity in the UK and highlights worrying trends that, while women may feel healthy in the present day, they are not physically active enough to prevent potential long-term health implications.

This optimism bias extends to UK adults more broadly too: many individuals perceive themselves to be healthier than they actually are, unaware of underlying health conditions that could pose serious risks to their well-being. According to the Vitality Health Claims & Insight Report,³ approximately four times as many adults were found to have high blood pressure or high cholesterol compared with self-reported data.

Notably, according to our research, over 60% of women strongly agree or somewhat agree that they feel healthy overall. A similar number of women also report that they are physically active, but when asked about their actual physical activity levels, it is clear that this is not the case. Concerningly, one in four women state that they neither feel healthy nor are they physically active.

Our research shows a clear discrepancy between how women perceive their activity levels and their actual health outcomes. There is a 'say-do' gap that needs to be addressed to ensure that women are participating in physical activities that support their physical and mental health.

The majority of women in the UK are not physically active enough

While many women express a desire to be more active, the majority are not meeting recommended activity levels. Only 23% of women engage in 30 minutes of exercise or achieve 7,000 steps a day, five or more times a week - though 41% of women say they would like to reach this goal.

The UK Chief Medical Officer recommends:

150

minutes of moderate intensity activity

75

minutes of vigorous activity

How active is 'active enough'?

The UK Chief Medical Officer recommends that each week adults do at least 150 minutes of moderate intensity activity or 75 minutes of vigorous activity - or a mixture of both. It is also recommended that adults do strengthening activities on two days and reduce extended periods of sitting.⁴

The Vitality Programme rewards members for being physically active: it incentivises Vitality members to build healthy habits to help them live longer, healthier lives.

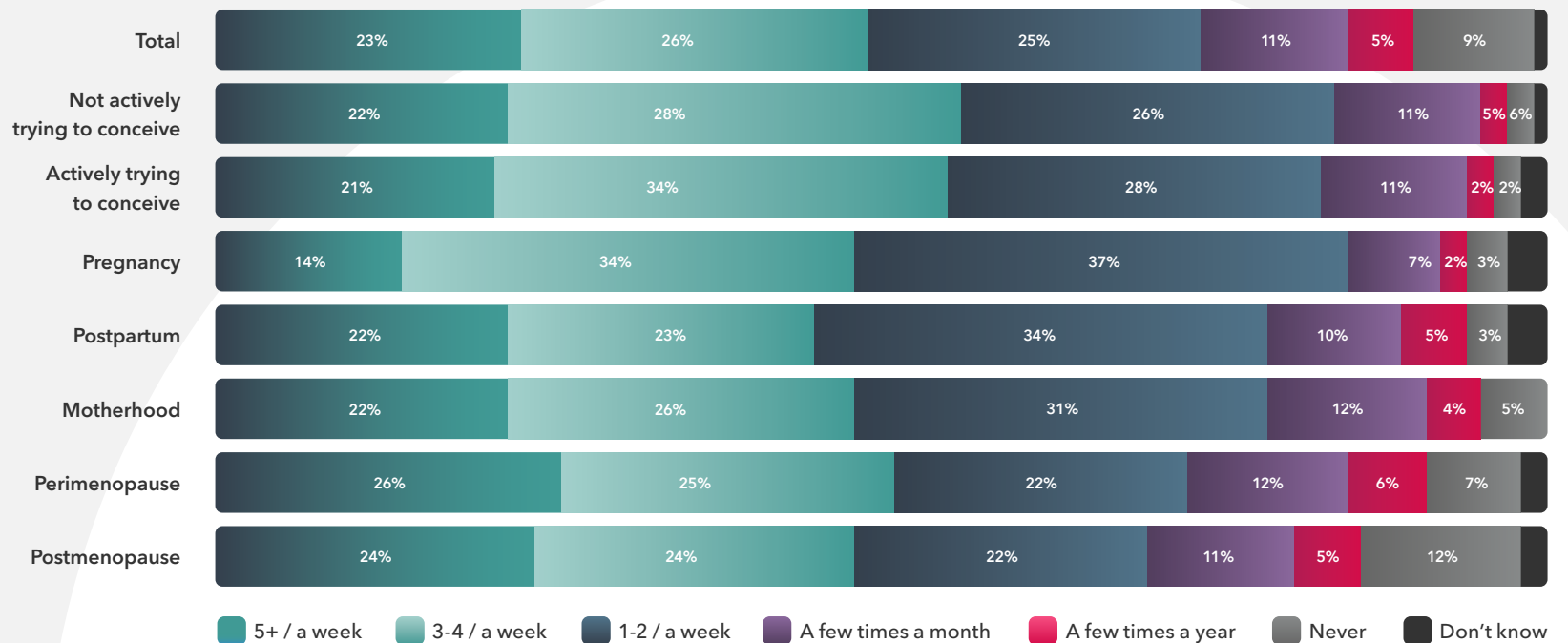
For the purposes of this research, we asked women how active they are in a typical week. We state that at least 30 minutes of sustained movement, with an elevated heartrate, or walking 7,000 steps or more throughout the course of a day could be measured as 'engaging in physical activity'.

³Vitality Health Claims Insights Report. ⁴<https://www.gov.uk/government/publications/physical-activity-applying-all-our-health/physical-activity-applying-all-our-health>.

Across every age and life stage, there is a consistent lack of physical activity or exercise habits. This indicates that at every point in a woman's life there are constant variables – often dependent on their life stage – that impede women's activity levels and their ability or motivation to be active.

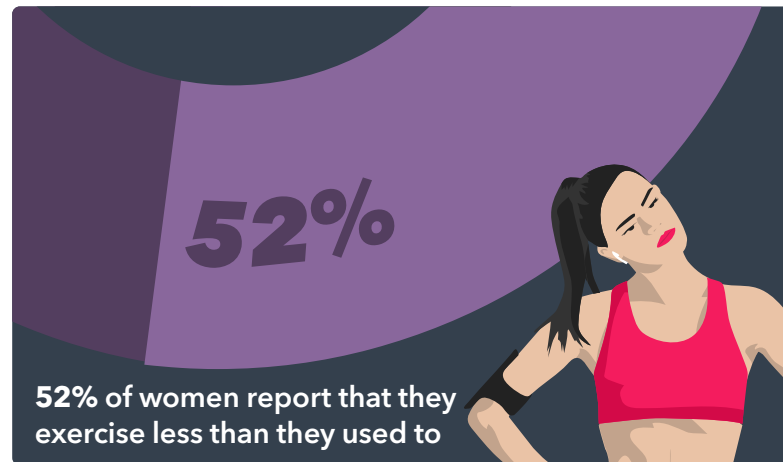
A quarter of women exercise less than once a week, and 74% of this group express a desire to be more active. Within this cohort, we see postmenopausal women account for 40% of those exercising less than once a week. Stakeholders remark that the continual barriers to women being more active, along with broader health and physiological changes that a women experiences, compounds over time and result in women being inactive.

Women's frequency of physical activity by life stage



This is evidenced in the data as over half of women (52%) report that they exercise less than they used to, whereas only 28% of women report exercising more than they used to. Of these women that have experienced a decrease in their physical activity levels, there are clear interlinks with life stages: women in pregnancy (61%), motherhood (59%) and postpartum (56%) are more likely to say they exercise less than they used to than women in other life stages (45%).

Women in Sport⁵ has found that more than one million teenage girls (43%) who once considered themselves 'sporty', disengage from sport following primary school. A fear of feeling judged by others (68%), lack of confidence (61%), pressures of schoolwork (47%) and not feeling safe outside (43%) were some of the reasons given for not wanting to participate for this group of girls.



FOR GIRLS, IT'S ALWAYS THE TEEN YEARS. THERE ARE SO MANY BARRIERS AROUND THERE, WHETHER IT'S NOT THE RIGHT FACILITIES, LACK OF EDUCATION OF UNDERSTANDING THEIR BODIES AT THAT AGE... SO MANY DROP OUT OF DOING SPORTS AT AGE 13-14. **ATHLETE**

The long-term health implications of inactivity

Exercise plays a crucial role in maintaining your health and wellbeing, with a large body of evidence backing this up.

The power of physical activity to improve health, wellbeing and longevity is significant. In March 2024, Vitality published a report⁶ with the London School of Economics that illustrated the power of healthy exercise habits for the individual and society.

The results speak for themselves:

- Both men and women who sustain a habit of walking 10,000 steps three times per week reduce their risk of type 2 diabetes by 41% and their risk of stage four cancer by up to 36%.
- Sustaining a healthy exercise habit three times a week for three years, reduced mortality risk by 27%.

⁵Women in Sport. ⁶Vitality Habit Index, 2024.



RIGHT FROM THE START, PARTICIPATION DROPS OFF WHEN THE HORMONES ARE KICKING IN. LATER, WOMEN'S CAREERS START TO PICK UP. ANOTHER LIFE STAGE. PREGNANCY AND FAMILIES. THE RESPONSIBILITIES OF BEING A MUM, OR PRESSURES OF CARING FOR PARENTS. LIFE GETS IN THE WAY. **NGO & POLICY INFLUENCER**

What exercise are women doing?

Women are walkers and independent exercisers: only 4% of women engage in group sports

When we asked women what type of physical activity they do to keep active, 64% of women stated that they rely on walking. We know that walking has significant health and mortality benefits, and it can be a powerful way to help inactive people build healthier habits. Data from the Vitality Habit Index shows that for inactive people, walking just 2,500 steps four times per week can reduce the risk of death for inactive people by up to 15%.⁷

It is important to acknowledge that while this should be the foundation for an active and healthy life it is not the end goal. As we will explore throughout this report, there are numerous benefits for women to pursue a range of activities, whether due to overall health benefits throughout their life or the significant social and wellbeing benefits to be had. Moreover, finding joy in physical activity is crucial, as it fosters long-term engagement and motivation while also providing opportunities for social interaction and connection.

Gym-based⁸ classes are the second most popular form of exercise, although significantly lower, with 27% of women reporting that this is how they stay active. Jogging and running is also popular amongst younger women.

Across all age groups, our report shows women tend to favour individual activities over team sports, with only 4% of women engaging in team sports. Stakeholders feel this is potentially down to women feeling intimidated to start a team sport - and thus feeling it is easier to start exercising individually - noting this is even the case for women who otherwise enjoy sports.

Percentage of women regularly participating in these type of exercises

Activity	By age: 20-39	40-59	60+
Walking	60%	66%	70%
Gym-based and fitness classes	32.5%	25.5%	21%
Swimming	13.5%	15%	14%
Jogging/running	20.5%	12%	3%

% of women who rely on walking for exercise

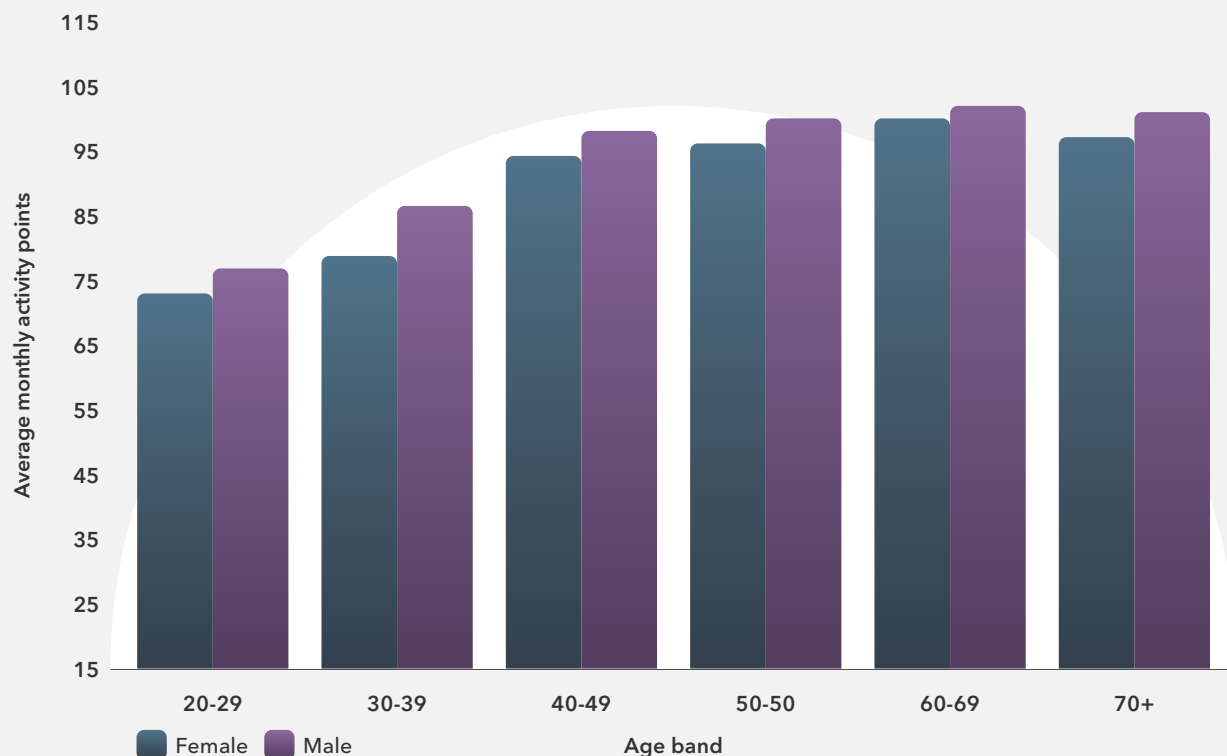
64%

% of women who take part in gym classes

27%

⁷Vitality Habit Index, 2024. ⁸Weightlifting, yoga, pilates etc.

Average monthly points earned by Vitality members



Vitality health and life insurance members are incentivised to live active lives, through the use of a behaviour change programme that offers rewards and benefits when they get healthy. Activity points are awarded for exercise activity, tracked through an activity tracker. Members can earn a maximum of 8 Vitality activity points per day and up to 40 Vitality activity points per week.



How do men and women's activity levels differ?

Reviewing data from the Vitality Programme over a two-year period reaffirms that men are more active than women (more detail shown in table to left).

Men record more activity points than women with the largest gap found in the age 30-39 group, when it could be expected they would likely be at a life stage where they would likely be having or caring for younger children.



There is a perception amongst stakeholders that there is now greater diversity of exercise options available to women in gyms and sports venues. Although as evidenced here, this is having little impact in enabling women to expand what types of exercise they do to remain active.

However, experts still noted that unfortunately, a stark contrast exists in the availability of structured team sports for men and women. Historically, team sports have been dominated by men and it has been less socially acceptable for women to take part. While men have easier access to sports like 5-a-side football, with regular leagues and informal play opportunities in the evening and across the weekend, similar options for women are much less common – or, as we will see later, the options that actually accommodate women’s busy schedules or fit around their obligations and restricted schedules are limited. This lack of accessible and social sports limits women’s participation in team sports, contributing to the gender gap in physical activity.

Many stakeholders argue that women would greatly benefit from group activities, which are seen as vital for social skills, building networks, and enhancing confidence and leadership abilities. Recent data published by Women’s Super League sponsor Barclays⁹ found that 80% of young girls feel more confident because of playing team sports and almost half of them feel more confident than other girls their age. Evidence also suggests this has longer term impacts on other areas of life, including at work. EY report¹⁰ that 94% of women in the C-suite had played sport and three-quarters (74%) said that a background in sports can help to accelerate a woman’s career.



⁹https://home.barclays/content/dam/home-barclays/documents/who-we-are/our-strategy/Barclays_Here_For_Every_Goal_Report_Final.pdf. ¹⁰https://assets.ey.com/content/dam/ey-sites/ey-com/en_gl/topics/entrepreneurship/ey-why-female-athletes-make-winning-entrepreneurs.pdf.



LIFE SKILLS, THE CAMARADERIE,
THE LEADERSHIP SKILLS, ALL OF
THOSE THINGS... ALMOST TRACK
DIRECTLY INTO THE WORKPLACE
AND INTO BUSINESS. ALL OF THOSE
SKILLS THAT YOU DEVELOP THROUGH
TEAMWORK ARE THE ONES THAT PUT
YOU AT THE TOP OF BUSINESS, AND
WE STILL DON'T SEE EQUALITY THERE
EITHER. **POLICY ADVISOR**



Why are women exercising?

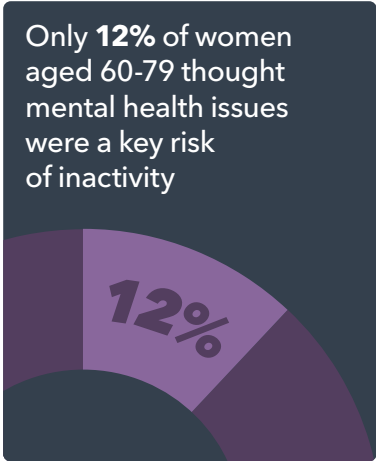
Weight management is the primary motivator for women to be physically active and the biggest perceived risk of not being physically active.

Despite knowing the broader health benefits of exercise and physical activity, our research shows that, for many women, weight management overshadows all other reasons to stay active. This is true across all ages and life stages with weight management being a motivator for 44% of women aged 20-39, 46% of women aged 40-59 and 31% of women aged 60-79.

When asked about the top risks of not doing physical activity, excluding weight management, age-associated trends are more visible.

Factors that motivate women to be physically active by age

Motivator	20-39	40-59	60-79
Manage my weight	44%	46%	31%
Feel good about myself	37%	31%	25%
Improve my mental health	32%	28%	17%
Provide stress relief	18%	17%	10%
Increase energy levels and productivity	18%	15%	13%
Get out of the house	16%	16%	23%



THERE IS A STEREOTYPE OF WOMEN WORKING OUT TO LOOK GOOD FOR OTHER PEOPLE RATHER THAN JUST FOR HEALTH'S SAKE. **PARLIAMENTARIAN**

Decreased muscle mass and strength and the increased risk of cardiovascular disease were identified as a higher priority for older women (60+ years of age) and peri- and postmenopausal women. 36% of older women (60-79) consider the increased risk of cardiovascular disease to be a significant risk of physical inactivity, compared to only 18% of younger women (20-39). Additionally, 50% of older women (60+ years of age) and 22% of younger women saw decreased muscle mass as a significant risk of physical inactivity.

On the other hand, the risks of mental health issues are of greater concern for younger women. 35% of younger women (20-39) recognise mental health issues as a key risk of inactivity, compared to just 12% of older women (60-79). Vitality's Britain Healthiest Workplace¹¹ data supports this trend. There is a generational divide with younger people reporting significantly higher levels of mental health concerns.

The perception that women's relationship with physical activity is intrinsically linked with body image was reflected in stakeholder views, as was the complexity of that relationship.

Weight management: the primary motivator. Although is it really a motivator?

While women recognise physical activity for improving mental health, boosting energy and enhancing quality of life, it's clear that weight management remains the most dominant motivator - often resulting in other, significant benefits, like the impact on mental health, being overlooked.

This particularly impacts women in their 30s and 40s, with nearly 50% of this group highlighting 'managing my weight' as their main reason to exercise. However, we know that women are not exercising

¹¹Vitality's Britain's Healthiest Workplace, 2023.



PERCEPTIONS OF WOMEN'S PHYSICAL FITNESS ARE TIED UP IN ISSUES OF BODY IMAGE. BUT THE IDEALISED BODY IMAGE AND PHYSICAL FITNESS ARE VERY DIFFERENT THINGS. . . SOCIETY HAS TOLD US IT IS THE BEST WAY FOR A WOMAN TO LOOK, BUT THAT GETS IN THE WAY OF PHYSICAL EXERCISE. **GOVERNMENT OFFICIALS**

enough to support and protect their long-term health. This begs the question as to whether weight management is an effective motivator. While weight management leads the way, possibly driven by pressures and beauty standards, women across all age groups are also driven by the desire to 'feel good' (32%) and support their mental health (26%) – although these are much lower. Across all age groups, 42% of women agree that body image impacts their relationship with physical activity. While many women who exercise to manage their weight do so to "feel good about themselves," it is concerning how much this dictates how they feel about themselves, often valuing it more than other benefits, such as social connection.

Yet, surprisingly, fewer women are motivated by the wider benefits of exercise: just 4% value it for social interaction, 9% for better sleep, 15% for stress relief, and 13% for increased energy and productivity. This highlights a critical issue: societal expectations regarding women's physical appearance significantly influence their motivations. Many women feel pressured to conform to narrow beauty standards, often prioritising weight management over the holistic benefits of exercise.

Campaigns like *This Girl Can* have made strides in this direction, aiming to empower women by celebrating diverse body types and promoting the idea that exercise is for everyone, regardless of appearance. By shifting the focus from weight to wellness, we can encourage more women to embrace the full spectrum of benefits that physical activity offers.

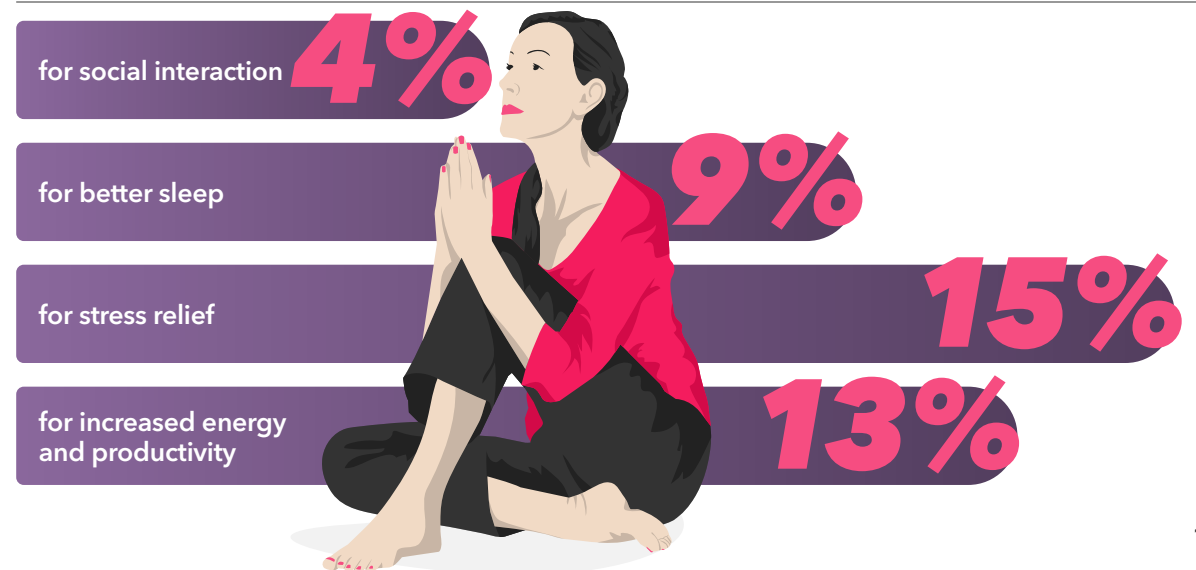
Experts noted that these wider benefits, such as sleep and stress relief, are also interlinked and the potential to reframe or rebrand exercise could change the reason why women are active and increase activity levels.

¹²Vitality Habit Index, 2024.

The Vitality Habit Index¹² data supports this too: individuals who maintain three or more days of physical activity per week gain an extra month of sleep per year. Moreover, this level of regular physical activity is associated with a 10% improvement in eating habits.

This shift in how we think and talk about exercise for women could lead to women taking part in more physical activity, resulting in more sleep, more effective stress management, increased energy levels and weight stabilisation.

Percentage of women that are motivated by some of the wider benefits of being physically active



32% of women report doing exercise to feel good

32%

26% exercise to support their mental health

26%





**BEING ACTIVE CAN [POSITIVELY] IMPACT
YOUR SELF-ESTEEM AND SENSE OF
SELF-WORTH. THESE ARE AREAS
WHERE WOMEN TRADITIONALLY TEND
TO SUFFER MORE ACUTELY THAN MEN.**

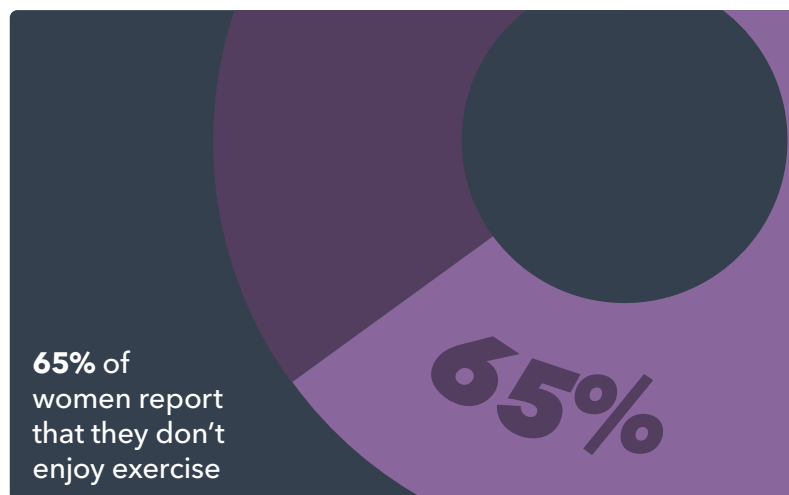
POLICY INFLUENCER

The shift of motivations with age

As women age, our research shows that the reasons for exercising shifts towards maintaining health and independence.

For women aged 60-79, while weight management is still a major motivator for engaging in physical activity, we do see a rise in consideration for factors such as increasing longevity and life (22%), improving balance and coordination (16%), and posture (18%). For nearly a quarter of older women, simply getting out of the house is a motivator, while 20% exercise to stay healthy for their families.

Experts note that the shift in motivations, and how women engage in activity, is often not supported by a strong understanding of the physiological changes that women experience as they age. For example, an active woman may see changes to their body composition and weight despite not changing any habits due to other factors such as worsening sleep affecting stress hormones.



The misnomer of free time

Over half of women say that they have over 90 minutes of free time on an average day. This shrinks and expands based on a woman's life stage: only 12% of postpartum women and 25% of women in motherhood report this, whereas 72% of postmenopausal women do.

When asked how they spend this free time, just over a quarter of women said they spend this time on physical activity (28%), behind only enjoying arts and entertainment (39%) and browsing social media (34%).

Many stakeholders contend that women's free time is likely to be in the evening once work and their wider responsibilities are complete, significantly constraining the options for exercise. Compounding the limited free time that women have, is the fact that many women see exercise as another obligation to incorporate into already demanding or full schedules.

They liken the need to educate and talk about the changes that women experience during their 'mid-life' to the transition to puberty which people are typically more aware of.

What is stopping women being more physically active?

Despite the numerous benefits of physical activity, many women face significant barriers that hinder their engagement in exercise.

We found three main factors that negatively impact women's physical activity levels: a lack of motivation (82%), a lack of enjoyment (65%), and a fear of being judged over physical ability (62%) or body image concerns (62%).

Women report a lack of motivation and enjoyment for exercise

The pursuit of weight loss as the primary motivator is likely a factor in women not feeling motivated or enjoying exercise - with 41% of all women citing this as their primary motivator.

It is clear that for the most part, women are disregarding the wider health and wellbeing impacts and benefits of exercise, which may account for the lack of enjoyment they experience when exercising also. Weight loss is a largely extrinsic motivator - largely driven by societal expectations and pressure - and given the lower levels of physical activity that women are reporting, this motivator is clearly not working, which is detrimental to women's short- and long-term health.

We need to change the narrative around women's physical activity and reignite the enjoyment and empowerment that women can feel from exercise.

It is also important to unpick other factors that contribute to this barrier for women. As has been established, women often exercise in isolation - so do not gain the social benefits associated with exercising with others - and do it while juggling busy schedules

and psychological barriers including a lack of confidence or fear of being judged.

There are age-related trends to the barriers that prevent women from being more physically active, which create a much richer picture to explain why the vast majority of women do not feel motivated to exercise more. For younger women, this is linked to time constraints and work schedules, whereas for older women their lack of physical fitness and weight becomes a bigger barrier to being more active.

Asics¹³ research earlier this year found that for 80% of women, this was a significant barrier. By comparison, less than 35% of men cited time constraints as a potential barrier.

Time constraints and demanding work schedules are consistent barriers for women under the age of 50. This is accentuated for women with childcare responsibilities (83%) and remains stubbornly high for women who report to receiving workplace support and family support to be active (78% and 65% respectively).

36% of women also feel guilty taking time for themselves and only 22% of women strongly agree that they don't have as much time for exercise as they'd like. Exercise falls lower on the list of priorities for women, behind family, friendships, rest and mental health: the separation of exercise as a way to connect and spend time with loved ones and the benefit to health is a missed opportunity.

In fact, only 19% of women aged 18-29, 16% of women aged 30-49, and 15% of women aged 50+ prioritise exercise in their top three goals, compared to over 40% who prioritise family and 30% who emphasise mental health.

¹³Asics, <https://www.asics.com/us/en-us/mk/move-her-mind/report>.



THERE ARE OBVIOUSLY NUMEROUS HEALTH BENEFITS, PHYSICAL AND MENTAL, WITH REGULAR EXERCISE, BUT I DON'T THINK THE CONDITIONS ARE ALWAYS THERE TO ALLOW WOMEN TO BE ABLE TO DO THAT. THEY PUT CHILDREN FIRST. WOMEN ARE OFTEN PUTTING OTHER PEOPLE BEFORE THEMSELVES. GOVERNMENT OFFICIALS

A spotlight on motherhood

While there is no one moment or life event that accounts for the physical activity gap reported by women, the data shows that motherhood is a significant period for women.

74% of postpartum women report that having a baby changed their relationship with exercise. 40% of women with children say having a baby stopped them from being active, rising to 53% for those with children aged 0-4.

37% of women report pelvic floor issues impacting their ability to do physical activity, with prevalence increasing steadily with age and after they have had children. Pelvic floor issues affect 46% of women who have given birth - with damage to the group of muscles often directly attributable to childbirth - compared to 21% of women who have never been pregnant. Yet, gradual strengthening post-partum can ensure this is not a barrier to getting back to exercise.

Stakeholders remark that we need to normalise our changing relationship with exercise, whether after childbirth or with age, so that exercise

habits and offerings from sports groups and organisations adapt and evolve to suit a woman's changing body composition and their lifestyle.

The psychological and physical changes that women experience during pregnancy certainly account for some of this change. During pregnancy clinicians note that symptoms such as fatigue, nausea, gradual laxity of joints and increased pelvic pressure can act as barriers to women doing the activity.

Stakeholders also noted that mothers often face significant mental barriers to exercise, such as feelings of guilt for taking time away from their newborn, fear of injury or exacerbating existing conditions, and decreased motivation due to fatigue. Body image concerns can also diminish confidence and hinder their willingness to engage in physical activity.





ONE OF THE THINGS THAT WE TALK ABOUT A LOT IS THE SENSE OF ENJOYMENT. WHILST ACTIVITY LEVELS AREN'T THERE... THE ENJOYMENT GAP IS MUCH BIGGER. THE REASONS THAT WOMEN EXERCISE ARE NOT NECESSARILY THE SAME REASONS THAT MEN EXERCISE. WE KNOW THAT MEN GET [JOY] FROM SPORT AND EXERCISE BECAUSE IT'S THAT FREEDOM THAT THEY'VE BEEN ALLOWED IS NOT THE SAME [FOR WOMEN].

NGO & POLICY INFLUENCER

Interestingly, despite these time barriers, 96% of women say they feel responsible for their fitness, including 80% who say they feel highly responsible. This highlights a significant disconnect: while most women feel a strong sense of responsibility for their fitness, they are simultaneously hindered by a lack of motivation, time and other demanding commitments.

Stakeholders agree that difficulty finding time and guilt in taking time for oneself are interlinked as barriers to women being more active. The majority of stakeholders assert that while many women may have available time for physical exercise, they often prioritise caregiving and household responsibilities over engaging in physical activity. These responsibilities are seen as non-negotiables, while exercising and looking after their own health is often a 'nice to have'.

However, experts argue that this mindset overlooks a crucial contradiction: by engaging in regular physical activity, women have the potential to improve their health, increase their energy levels, and reduce stress. These benefits not only enhance their personal well-being but also for women who highlight their family role as a priority, it can positively impact their ability to fulfil these roles. Vitality data supports this and shows the potential benefit of physical activity on mental health: a 17% reduction in risk of the need for hospital treatment for mental health for members who exercise at least two days per week.



The psychological barriers to exercise

Psychological factors impact women across all ages and life stages, with 49% of all women reporting that mental health issues negatively impact physical activity levels. Data shows that the largest impact is on younger women: just under 70% of 20-29-year-olds report that mental health is negatively impacting their level of physical activity.

Despite stakeholders stating that there is now a greater diversity of women - and body composition - participating in sports, the fear of being judged for their body and / or ability is also preventing women being more active, with over 60% reporting this. This again is most acute in younger women, with 78% of those aged 20-29 and 73% of those aged 30-39 feeling this pressure. The impact diminishes with age, as only 62% of women aged 40-59 and less than half of those aged 60 and older report being similarly affected.

There is also a strong correlation between women who report these barriers and their current health, nutrition and activity levels. Interestingly, women who reported unhealthy eating habits were 23% more likely to identify body image issues as a significant barrier to exercise. This suggests that those with healthier lifestyles are less affected by these barriers. It highlights the idea that taking the first step toward a healthier lifestyle can be particularly challenging for women who are not yet adopting healthy habits. Despite the well-known benefits of physical activity, these initial barriers can make it difficult to start.



49%

of all women report that mental health issues negatively impact their physical activity levels





Creating safe and inclusive spaces

Safety of physical activity is identified as a clear barrier, with 42% of women citing safety as a concern, despite only 6% saying that concerns for their personal safety has a very significant impact on their level of physical activity. However, given 61% of women report a fear of being judged for their physical ability or how they look being an inhibiting factor that would negatively impact their exercise levels, suggesting where they have to exercise is no doubt an interlinked factor.

61%

Stakeholders noted the need for more inclusive, women-only spaces which offer a potential solution in helping women be more active - particularly for younger women who are more likely to be impacted by psychological factors.

Women also report not knowing what exercise is beneficial for them at different times in their lives, with less than half of women reporting that they know which types of physical activity are beneficial for them at different life stages. Only 9% of women strongly agree that they feel informed about this.

Linked to this, even fewer women, fewer than one in five, are confident that they know how to adapt their routines to fit their changing health needs over time.

Stakeholders acknowledge the significant information gap facing women that remains despite the surge in exercise-related content online and on social media. There is an argument to say that the volume and inconsistency of information is having a counter-intuitive effect with women feeling more uncertain about what physical activity is most beneficial for them.

When physical fitness becomes an impediment to being physically active

Finally, the third barrier. 66% of women report that their weight, lack of strength or low fitness, negatively impacts their ability to exercise.

There is a high correlation between the women who report this as a factor that impacts their ability to exercise to their broader health status. 56% of women who report generally feeling healthy identify this as a barrier, versus 87% of women who report feeling unhealthy. Looking at their current activity levels and nutrition habits this continues: 58% for active women vs 86% for sedentary women, and 61% of women who report eating healthy vs 83% of women who report eating unhealthily.

This is consistently reported across all ages, however, as women get older, there is a notable trend that their level of physical ability and weight becomes one of the major impediments to them being more physically active.

There are many reasons for this including time spent being less active due to competing priorities in life - as we have seen for women with childcare responsibilities in particular- but also the physical changes that women experience in mid-life that changes their body.



THERE'S DEFINITELY A CULTURAL SHIFT IN WOMEN'S PHYSICAL ACTIVITY. IN THE 90S OR IN THE 2000S, THERE WAS A VERY BIG EMPHASIS ON THE DIET CULTURE AND YOU WORKED OUT TO MAINTAIN A SPECIFIC BODY IMAGE, WHEREAS NOW, THERE'S A LOT MORE ACCEPTANCE OF BODY IMAGE AND BODY AWARENESS.
CORPORATE CEO



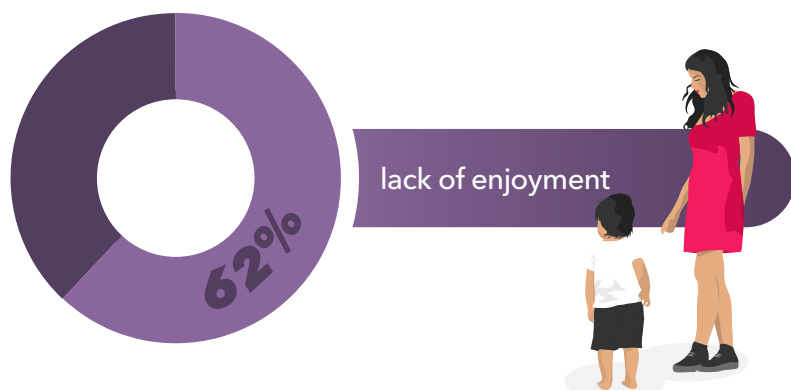
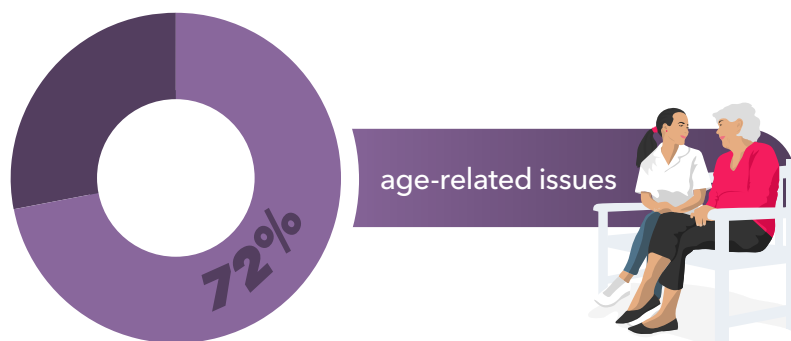
Fewer than **1 in 5** women are confident that they know how to adapt their routines to fit their changing health needs over time



**THE PE TEACHERS, THE PERSONAL
TRAINERS, THE FITNESS INSTRUCTORS
HAVE TO BE EDUCATED ABOUT FEMALE
HEALTH IN A WAY THAT IT'S NOT SEEN AS
THE WOMEN SORTING THEMSELVES OUT.**

CORPORATE CEO

Women in the postmenopausal life stage report persistent barriers that negatively affect their physical activity levels



The impact of menopause

53% of women who are peri- or postmenopausal report that they exercise less than they used to. When asked about wider factors that have impacted their relationship with exercise, nearly half of women who are perimenopausal (43%) and postmenopausal (55%) report having less energy than they used to. Across a broader range of other factors, including caring responsibilities, time available and the importance of physical activity, there are no significant contributors that equate to the reduction in exercise.

However, we do know that women in the postmenopausal life stage report persistent barriers that negatively affect their physical activity including a lack of motivation (79%), age-related and personal health issues (72% and 58% respectively), a lack of enjoyment (62%), and feeling embarrassed about their lack of ability (55%). This is in addition to the reported levels of women who struggle to exercise due to their weight, fitness or strength levels.

Stakeholders point to the prolonged change in relationship that women experience during their life, that reaches a pinnacle in these later years – decades of being motivated solely by weight loss, struggling to find time within a hectic schedule, and decreasing confidence in their ability to exercise all leave women excluded from the system.

Validity's clinical experts point to the significant changes that a woman's body goes through during the menopause, where there is a dramatic fluctuation in the hormonal balance (mainly oestrogen). These can include hot flushes and sweats that disturb sleep, contributing to the lack of energy reported, joint aches and weight gain that can decrease women's confidence when exercising, mood changes and anxiety can further reduce motivation. In addition, the reduction in oestrogen during menopause can lead to weakened pelvic floor muscles, vaginal dryness and constipation, all of which may cause discomfort or pain during exercise.



Changing the rules of the game

Our research shows that women need targeted interventions at different ages and life stages: there is no one-size-fits-all approach that will create the adoption in physical activity that women need to benefit their long-term physical and mental health. As outlined in our report, women face significant barriers at all stages of their life. Notably, time constraints due to conflicting commitments and psychological barriers, are impacting women's relationship with physical activity.

In order to address these challenges and foster a more supportive environment for women's physical activity, it is essential to develop tailored strategies that consider the unique needs and circumstances of women at various stages of their lives. The tables set out on this page show the primary factors that women noted would positively impact their physical activity by age (below) and life stage (right).



Not actively trying to conceive

- Affordable physical activity / free personalised fitness plans
- Decreased work schedule
- Coaches who understand how to train women

Actively trying to conceive

- Flexible working hours
- Affordable physical activity / free personalised fitness plans
- Safer outdoor spaces

Pregnancy

- Affordable physical activity / free personalised fitness plans
- Decreased workload
- Coaches who understand how to train women

Post-partum

- Affordable childcare on site
- Support from partner
- Decreased work schedule

Motherhood

- Free personalised fitness plans
- Safer outdoor spaces
- Decreased workload
- Coaches who understand how to train women

Perimenopause

- Free personalised fitness plans
- Safer outdoor spaces
- Inclusive equipment
- Coaches who understand how to train women

Postmenopause

- Inclusive equipment
- Affordable physical activity / free personalised fitness plans
- Safer outdoor spaces

20-29

- Affordable physical activity / free personalised fitness plans
- Safer outdoor spaces
- Coaches who understand how to train women
- Decreased workload / flexible hours (gym and work)

30-39

- Free personalised fitness plans
- Decreased workload
- Flexible working hours

40-49

- Free personalised fitness plans
- Safer outdoor spaces
- Decreased workload

50-59

- Free personalised fitness plans
- Safer outdoor spaces
- Inclusive equipment
- Coaches who understand how to train women

60-69

- Free personalised fitness plans
- Safer outdoor spaces
- Inclusive equipment
- Coaches who understand how to train women

70-79

- Free personalised fitness plans
- Safer outdoor spaces
- Inclusive equipment
- Coaches who understand how to train women



Closing the information gap

A major area of concern inhibiting women's participation and enjoyment of physical activity is the existence of an information gap: a lack of credible information that women feel confident in using to inform them about what types of physical activity are best for their body and how to safely do the activity. As explored previously, this is compounding the reported barriers that prevent women engaging in physical activity and comprehension of the holistic benefits to be gained from regular exercise.

In fact, 59% of women report not feeling well informed about the types of physical activity that are beneficial to them and, as a result, they are not adequately empowered to engage with activities that benefit their overall wellbeing.

Even when women recognise this information gap, they face the challenge of having to find accurate, credible and reliable sources of information, that are also relevant to differing life stages.

Currently, women look to medical and / or authoritative figures for advice on physical activity – experts note that this echoes the sentiment that physical activity is a chore and not an enjoyable leisure pursuit. The NHS (25%), GPs (25%) and fitness instructors (20%) are the top three organisations and avenues that women get advice from. Social media is also a common source with 18% of women using this for advice, where there is no regulation or control around the qualifications of people who post content advising women how they can be healthy.

43% of younger people rely on friends and family for advice on physical activity



IT WOULD BE GREAT TO HAVE MORE INFORMATION OUT THERE ABOUT HOW THIS [EXERCISE] CAN HELP THEIR PHYSICAL [AND] MENTAL HEALTH... EVEN A DESIGNATED FEMALE PLACE TO GO, THAT THEY CAN LOG ON AND SEARCH ANYTHING AND IT'S THERE IN SIMPLE FORM. **INFLUENCERS/ATHLETES**

Interestingly, the most popular source of advice on physical activity for younger respondents (20-39) is friends and family, with 43% relying on them. Older respondents (60-79) also predominantly seek advice from friends and family, but at a lower rate of 30%.

Stakeholders note the importance of accessible information to enable women to make informed decisions. Despite the NHS being the top source through which women seek advice, experts note that it is not set up to

18% of women turn to social media for advice on getting active



support long-term behavioural change. GPs are already managing a demanding workload, making it difficult to offer suitably specialised advice, particularly regarding how physiological changes and life stage can impact the type of advice women need throughout their life. This includes the importance of different types of exercise, such as strength training for aging women. GPs often lack the tools to effect behavioural change, which is crucial for overcoming barriers to exercise.

The pressure facing the NHS is well-documented and currently it is not set up as a preventative health model, meaning that trying to expand GPs' remit feels like a long term aspiration. As of August 2024, the referral to treatment waiting lists stood at 7.64 million cases,¹⁴ so adding further demand for better information about the preventative benefits of exercise feels like an unattainable fix in the near-term.

Crucially, there needs to be a greater effort to empower women with both resources and access to professional, well-informed advice. Currently, women have access to an abundance of often contradictory and inaccurate online resources that are hard to regulate.

We also must not forget the role of men within this discussion: several stakeholders also believe that educating men and addressing their significant lack of understanding of women's health will enable them to better support women with childcare and household responsibilities, which is essential to increasing women's participation in sports, for women with these responsibilities.

The power of a habit

Vitality research illustrates that there are stubborn factors that mean that women are not exercising across every age and life stage. Notably, time constraints, mental health and a lack of confidence or fear of being judged, and the physical and psychological impacts of different life stages - including motherhood and the menopause-all restrict women's access and ability to exercise. Unfortunately, women's lack of confidence is further exacerbated by a lack of knowledge about the specific types of exercise that are most beneficial for their health at various life stages.

Vitality's work on habits, as published in a paper in March 2024 with the London School of Economics, outlines how resilient habits can be. We see this in this research too: women's physical activity habits pre-motherhood stick during 'motherhood'.

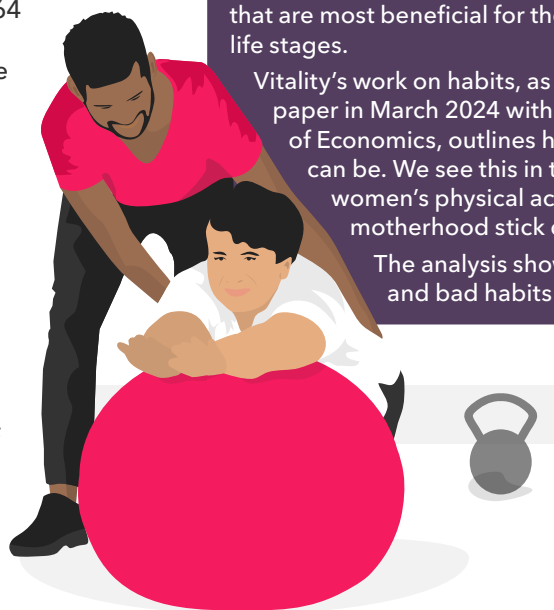
The analysis showed that both good and bad habits are more likely to

stick. Women who are highly active are more likely to see their habit stick - as do sedentary women. It is the women who report moderate levels of activity who are most likely to report that having a baby changed their relationship with exercise and stopped them from exercising.

Furthermore, our data found that women who exercise, have good nutritional habits, and report feeling healthy are less likely to observe barriers to their physical activity levels.

Around 40% of our daily lives are controlled by habits.¹⁵ Therefore, if we know how to turn small, positive behaviours into lasting habits, we can have a significant impact on the health of individuals and society. We know that healthy habits can improve lives, prevent disease, and make societies more resilient, so we need to ensure that we are enabling women to be active throughout their lives but particularly capturing younger women and the next generation for a preventative approach.

It is also evident that workplaces have a vital role to play in addressing the information gap and providing reliable resources for women's health and wellbeing. This highlights the need for employers to not only offer information but also ensure it is accessible, relevant, considered credible and effectively communicated to encourage greater engagement amongst all employees - and consider how to ensure avenues for uptake cater to the differing needs of men and women.



¹⁴<https://www.bma.org.uk/advice-and-support/nhs-delivery-and-workforce/pressures/nhs-backlog-data-analysis>. ¹⁵Society for Personality and Social Psychology, 2014.

A personalised approach for women

Our research from women themselves and key stakeholders highlights that in order to effectively encourage more women to engage in physical activity, it is essential to adopt a personalised approach that considers the diverse needs, motivations, and barriers faced by women across different age groups and life stages.

96% of women say they feel responsible for their fitness, including 80% who say they feel highly responsible. Without tailored approaches, guidance or the right social support, they struggle to stay active. In fostering an approach that understands individual needs and encourages accountability through supportive networks, exercise will become more accessible, enjoyable and sustainable for women across all life stages.

65% of women say that free fitness plans or personalised workout programs would encourage them to exercise more. The demand for personalisation spans across all socioeconomic groups, with women in higher-income brackets reporting this need just as frequently as those in lower-income ones. However, despite the availability of some free fitness plans online and through social media, the issue persists. The complex psychological factors revealed in this report as driving women's physical activity habits are unlikely to be addressed simply through personalised exercise advice alone.

Stakeholders highlight that it is important to think about personalisation beyond just 'personal training' or fitness plans. While this direct support is hugely valuable to those who can afford it or who have access to it, it is not a viable option for many.



THE MAIN THING WE'RE FOCUSING ON AT THE MOMENT IS FACILITIES, BUT I THINK THE QUICKEST THING WE COULD PROBABLY DO IS LOOKING AT CHILDCARE, WE COULD SET UP SOME CRÈCHES. FACILITIES OBVIOUSLY ALWAYS TAKE QUITE A WHILE TO DEVELOP, BUT CHILDCARE FACILITIES ARE PROBABLY THE MAIN THING, CRÈCHE IN THE GYM OR AT THE LEISURE CENTRE. **LOCAL COUNCILLORS & GOVERNMENT OFFICIALS**

Understanding how to support women and better measure exercise

Currently, the breadth of change that a woman goes through her life is not adequately understood and reflected in physical activity provisions and opportunities for women's interactions with sports.

The needs of someone who is just starting to exercise again after having a child compared to an older woman who is exercising for the first time in a decade cannot and should not be treated as a homogenous group.

This is supported by our research: a recurrent theme is the need for more inclusive fitness equipment and coaches who understand how to train women. 59% of women say that inclusive fitness equipment would have a positive impact

on their ability to be more physically active. This is particularly impactful for older women (50+) and women who are in motherhood or menopausal years, with 65% of women in motherhood saying that this has an impact.

To help women engage in exercise in a holistic manner and properly reap the health benefits, information is key. However, we also need to fundamentally change how women measure their activity. We need to look beyond the calorie count and to use other metrics available: time, power output, distance, or even weight moved, pushed, lifted or pulled. Until we empower women with this holistic view of how to exercise for their body, and how to measure the benefits of that exercise, it will be hard to shift women's motivator from weight management to the plethora of other benefits that are to be had - and enjoyed - from exercise.

But there is a value in thinking about personalised support throughout a woman's life and centring this on a person's health, rather than fitness plan.

Having friends, family or fitness coaches that understand an individual's unique needs, and crucially care about their health and therefore provides support and holds them accountable in taking the time to prioritise their health, can help to address the specific barriers women face.

The workplace has the potential to play a powerful and impactful role, in terms of responding to the health and wellbeing needs of their workforce, considering the age and life stage of female employees and their needs, providing support and signposting credible information and putting in place interventions.

Closely linked to the need for personalisation is the need for flexibility, with nearly half of women saying that they would be more active if they have greater flexibility in their daily exercise. This includes flexible gym hours and

While **34%** of women report that their partners exercise more than them, we see over **40%** of women in pregnancy, postpartum or motherhood report the same. Meanwhile, **48%** of women disagree that their partner exercises more than them.



programmes that fit around caregiving responsibilities. For example, many women, particularly those with childcare needs, who before often found it hard to fit structured exercise into their day.

Stakeholders remarked on the need for women to be able to find a steady state of healthy – rather than swinging between the extremes of health and inactivity. For women, and particularly those with childcare responsibilities, capitalising on the time when their children are cared for in some capacity, such as at school, is key. This is where significant opportunity for the employer exists.



IT DEPENDS ON THE FAMILY THAT YOU'RE IN. HOWEVER MUCH WE LIKE TO DRESS IT UP, THE CAREGIVING RESPONSIBILITIES TEND TO FALL ON WOMEN AS OPPOSED TO MEN... IT DEPENDS. BUT FEMALE ONLY INITIATIVES, GRASS ROOTS LEISURE COMMUNITY LEVEL IN TERMS OF FEMALE ONLY GYMS. THINGS SUPPORTING WOMEN AND ENCOURAGING THEM TO BE ACTIVE [HAVE THE POTENTIAL TO CHANGE ACTIVITY LEVELS IN WOMEN]. **NGO & POLICY INFLUENCERS**

The case for change in the workplace

This report shows that 96% of women feel responsible for their own levels of physical activity. However, when analysing the perceived barriers, we see a variety of psychological and social factors having a significant negative impact on activity levels.

On that basis, this feeling of responsibility that almost all women feel, could be misplaced. Employers have a huge opportunity to support their female employees by stepping in to help improve their health and tackle some of the barriers they face when it comes to engaging with physical activity and sport.

The productivity benefits that healthier employees bring to a business, is a clear incentive for employers to encourage and even incentivise better take-up of physical activity and sport across the women in their workforce. If half of a workforce is potentially less productive due to health issues, or inactivity, then that should be a major concern. Employers also have a unique opportunity to

help tackle one of the themes most commonly highlighted across stakeholder interviews and polling. As we know, time constraints and demanding work schedules are a consistent barrier for women under the age of 50, with 79% reporting that these factors had an impact on their physical activity levels. This is even more pronounced for women with childcare responsibilities (83%).

During the working day, some of the challenges that women face in managing their other responsibilities can be addressed, for example it is likely childcare arrangements may have already been made. The existing workplace support programmes are seemingly not benefitting women, with 78% of women who report receiving workplace support to be active still pointing to time constraints as a driver of their inactivity. If businesses were to ensure women have opportunities to be physically active during the workday, and add more flexibility to their hours, this could offer significant opportunity for change.

We know that health is key to being productive at work

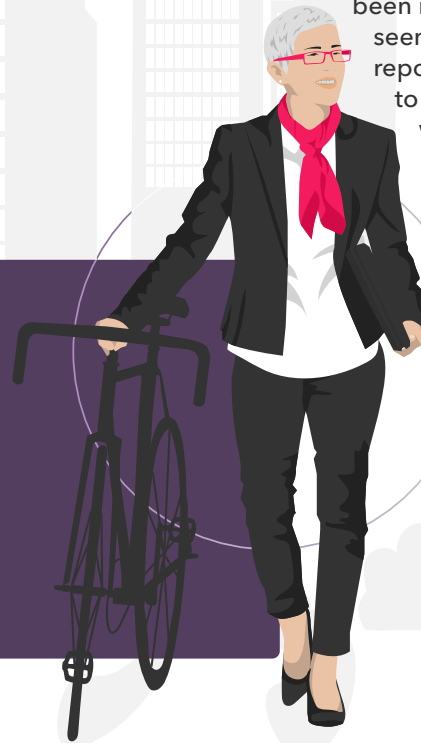
Vitality's Britain's Healthiest Workplace survey¹⁶ has consistently shown that employees in better health consistently lose fewer productive days each year.

Employees who are at risk of depression, and burnout lose 153% and 121% more productive days compared to those who do not report these health issues.

Physical health issues also affect productivity in the workplace. Health risk factors such as a poor diet and lack of physical activity increase lost time by 14% and 29% respectively.

All of these issues have been shown to be improved by relatively small lifestyle changes, that can be facilitated through an individual's employer.

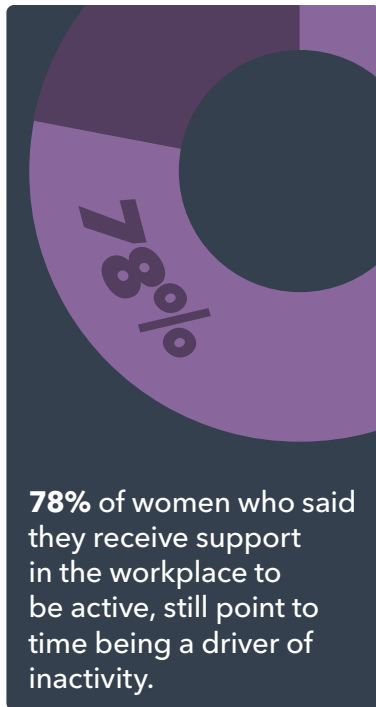
83% of women with childcare responsibilities say time constraints and their work schedules impact their levels of physical activity



¹⁶Vitality's Britain's Healthiest Workplace, 2023.

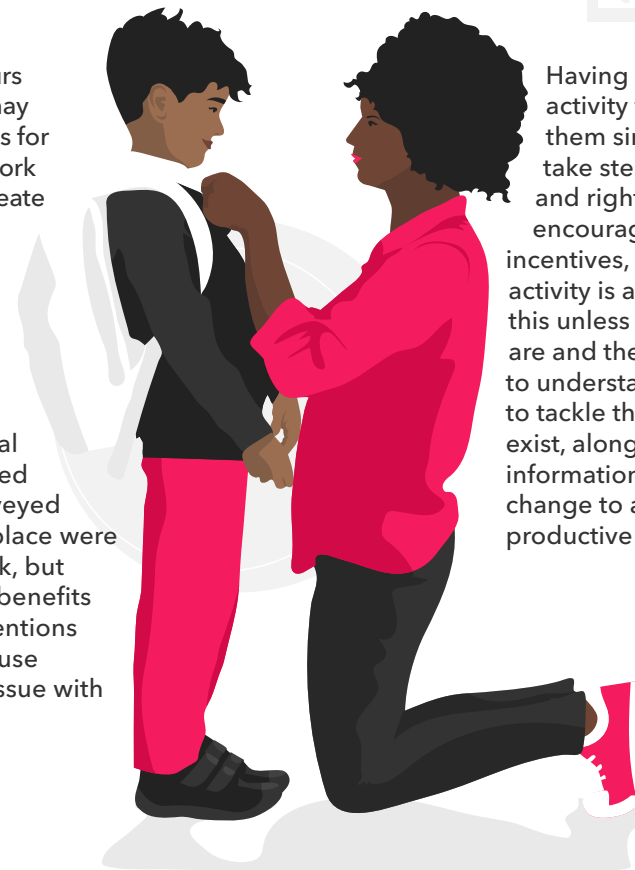


I THINK TIME IS DEFINITELY ONE OF THE BIGGEST THINGS. OF COURSE, YOU'RE WORKING. THEN YOU HAVE SMALL KIDS. IT'S VERY, VERY HARD. I HAD TWO SMALL CHILDREN AND KNOW WHAT IT TAKES TO JUGGLE ALL THE BALLS AT THE SAME TIME. IT'S VERY HARD WORK. **INFLUENCERS / ATHLETES**



Our stakeholders noted that while flexible hours and workplace support programs exist, they may not always translate into practical opportunities for women to be physically active. Compressed work schedules or unadjusted workloads can still create time constraints, even when formal support is in place. Therefore, employers need to ensure that these initiatives are not just available in theory but are realistically accessible and accompanied by appropriate workload adjustments.

Evidence tells us that behavioural and cultural changes at work require a concerted effort, led from the top. On average, organisations surveyed by Vitality through Britain's Healthiest Workplace were found to offer 47 health interventions at work, but only 25% of said they were using them. The benefits of engaging with the available health interventions are clear: on average 85% of those who did use them found them useful, demonstrating an issue with awareness and engagement, rather than with efficacy.¹⁷



Having a selection of opportunities for activity that are available to those who ask for them simply isn't enough. Businesses need to take steps to ensure interventions are relevant and right for their particular workforce, encourage adoption, for example using incentives, to shift their culture to one where activity is a higher priority. Workplaces can't do this unless they understand who their employees are and their health needs. By taking the time to understand this, putting a strategy in place to tackle the issues and barriers they identify exist, alongside considering wider reports and information on the topic, could deliver real change to activity levels, and give them more productive and healthier employees.

¹⁷Vitality's Britain's Healthiest Workplace, 2023.

Vitality recommendations

Based on the extensive research and findings of this report, Vitality, The Well HQ and Women in Sport have collectively produced the following recommendations. These measures are designed to address some of the barriers to women's engagement with and enjoyment of exercise that this report reveals, and that will ultimately help build a healthier society.

The range of issues highlighted in the findings demonstrate that a collective approach will be required to facilitate the cultural change needed to tackle this issue: government, business, the sports and exercise industry, and individuals all have a part to play.



We believe there are three critical factors that underpin these recommendations:

1

Physical activity and exercise needs a rebrand: weight management dominates the perceived health and wellbeing benefits for women and there is still a very narrow focus of what counts as exercise. By expanding the meaning of exercise and sport, and the broader benefits that can be reaped, we can start to change how people think about physical activity.

2

Women need to be considered as a non-homogenous group: by better accounting for women at different ages and life stages, and their respective needs, challenges and opportunities at each point in their life, we can better meet their needs and tailor activity options to them.

3

This is not for women to fix: women feel responsibility for their health, which while not necessarily a bad thing, it is clear that we all have a role to play in helping women be more active.





We have set out near-term and more ambitious longer term recommendations that we believe will benefit women and therefore society. Vitality looks forward to continuing its work with all its partners, network and other people they work with, to continue to play its part in helping women be more active.

We hope you will join us.

> Governments

- Continue to **encourage the social prescribing of exercise** as the foundation to a healthy lifestyle – starting with walking or alternate low-intensity movements for those that are inactive, right through to social benefit of physical activity, mobility, and forms of strength building exercise.
- Encourage all **NHS reforms to ensure physical activity and the preventative role of exercise is encouraged** throughout every touchpoint with our healthcare services.
- Embed **health checks for women at key life stages** including pregnancy, postpartum and during the menopause, that focus on changing body composition, the importance of exercise and how to benefit most from it. Considerable opportunities exist within existing touchpoints women already have with health professionals to discuss health and wellbeing, such as smear tests, maternity appointments during pregnancy, the six or eight-week postnatal check, or mammograms.
- **Review of existing literature available to health professionals** to ensure that outdated sources that discourage exercise during key stages of life i.e. pregnancy or compound unhelpful narratives about women's physical activity are not used within healthcare education or contexts, and are replaced with the latest evidence-based information of activity for each situation or life stage.
- **Expand funding for women and girl's grassroots sports and physical activity** and ensure that existing funding considers provisions to make sports facilities more inclusive for women. For example, consider the timing of classes or where there is opportunity to offer exercise, for example, alongside sporting activities their children may already participate in.

> Employers

- **Report at a Board level on the health and wellbeing** of employee base. Use this to ensure C-Suite, executives and senior management understand key issues such as where employees need or want more support, the uptake of health interventions, and opportunity for benefits to the business, namely better productivity, and understanding of support that might better support women.
- **Review health status of employee base and uptake of existing health policies**, health interventions and information, to understand what is currently working and where there are gaps in existing policies or implementation, and ensuring this explores the differences between age and gender of the employee base.
- **Embed health at work within performance criteria** for managers to ensure that the health and wellbeing of their direct reports is considered and consider the use of incentives to increase uptake of health and wellbeing policies and interventions.
- Create opportunities for **'exercise snacks' throughout the workday**, tailored to different workplace environments (office, home working, onsite). This might include walking meetings, lunchtime yoga, pilates or mobility session, nudges throughout the day to move more, stretch or for those in more physically intensive jobs building in time at the start or end of the day to support physical health.



> Sports and exercise industry

- Consider how a **certification for online content** could exist, that would ensure people have **access to and can trust the quality of information** they receive and find, and that authors are validated or have professional qualifications.
- Embed **women-specific training within existing personal training and sports qualifications as a mandatory requirement**, that includes detail on how women's needs change across life stages and the correlating changes to their body composition.
- Actively consider opportunities to better **accommodate women's needs in exercise facilities**, with a more **inclusive culture and also provision to accommodate women's lives** – specifically childcare provisions.
- Greater **collaboration and sharing between existing sporting bodies and organisations** to share best practice, and where they have succeeded in growing participation in sport and physical activity with women, or with particular cohorts / groups of women, or making it more inclusive in some way.
- **Showcase more forms of exercise**, including group sports and activities, within marketing content and on site to show the diversity of sports out there and broader benefits that activity offers.
- Create more **opportunities within physical activity** to enable people to **gain social benefits** from taking part. This might be during an exercise class, as a social coffee after the class, or expanding availability of team sports for women at accessible times.

> Individuals

- Recognise that getting started can sometimes be the hardest part – consider how to **integrate daily movement or an 'exercise snack'** into your day-to-day life, and do it regularly to create a positive habit that sticks.
- Have **conversations with family members, friends and support networks** to identify ways that they can help you prioritise exercise within your life or build activity into your family life regularly, or consider how you can help the women in your life exercise more.
- Choose a **goal that promotes wider wellbeing** or takes the focus of exercise away from weight loss or management, and actively pursue other benefits, for example better sleep.
- **Find what and who moves you.** Find a buddy (friend, parent, partner, child) who you can exercise with and commit to a time and activity each week – or try a new sport or activity each month.



Find out more

[www.vitality.co.uk/community/sponsorship/
find-what-moves-you](http://www.vitality.co.uk/community/sponsorship/find-what-moves-you)