

A Blueprint for Creating a More Active Lincolnshire

Let's
move
LINCOLNSHIRE



Active
Lincolnshire

Social
Change UK
Research and
marketing that matters

Insight and scoping

Physical activity levels in older adults (55+)



Background and introduction



Inactivity in older adults in Lincolnshire



- Inactivity in older adults in Lincolnshire is worse than the national average
- 31% of adults aged 55 – 74 in Lincolnshire are inactive
- 59% of adults aged 75+ in Lincolnshire are inactive
- Ahead of an increase in demand for care and in-line with the Blueprint for a more active Lincolnshire, Active Lincolnshire want to increase rates of activity by promoting and supporting regular daily activity
- But how?



Brief



Undertake a scoping exercise to gain a greater understanding of the older adult community in Lincolnshire (aged 55+) and their attitudes and behaviours towards physical activity and being active, both within communities and care settings.



What did we do?

Desk-research

- Uncover insight about what is currently known
- Conduct a gap-analysis to highlight gaps in knowledge

Stakeholder research

- Stakeholder and partners survey
- L-PAT event
- Insight into Action workshop

Resident research

- Residents survey
- Boston focus group
- Lincoln City focus group

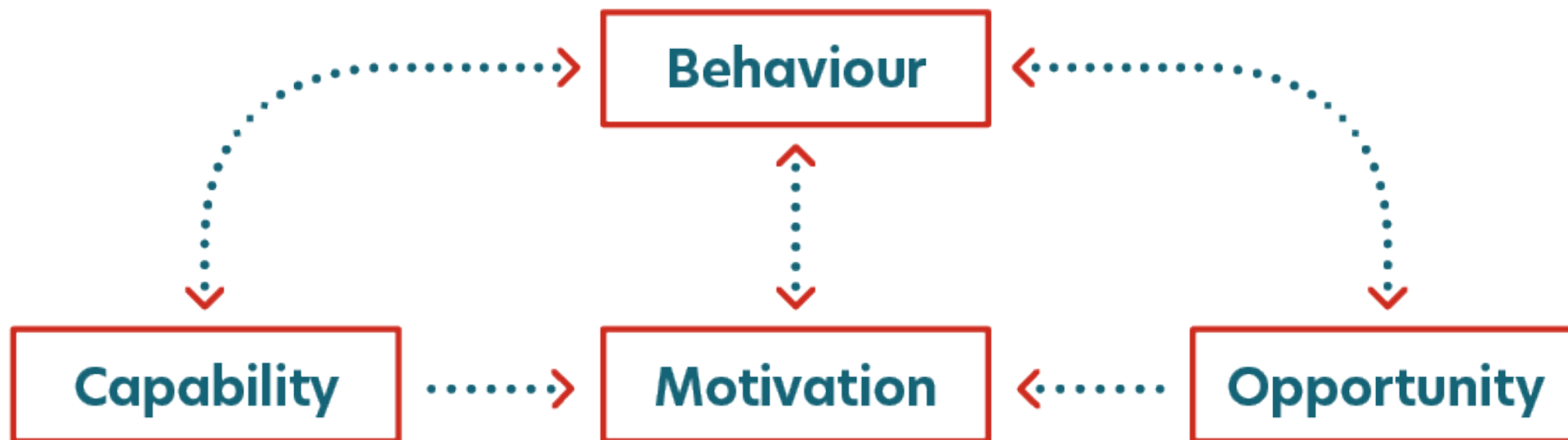


The COM-B Model

Using behavioural models to guide research



The COM-B model



Capability



- Psychological Capability: our knowledge / psychological strength, skills or stamina
- Physical Capability: our physical strength, skill or stamina



Opportunity



- Physical Opportunity: opportunities provided by the environment, such as time, location and resource
- Social Opportunity: opportunities as a result of social factors, such as cultural norms and social cues



Motivation

- Reflective Motivation: reflective processes, such as making plans and evaluating things that have already happened
- Automatic Motivation: automatic processes, such as our desires, impulses and inhibitions



Resident research



Capability Insights



I am not supported to do physical activity

- I have health conditions stopping me from being active and I need help to work beyond the limitations [that I set myself]
- I believe I cannot do this because of my health conditions
- I want my instructors to be experienced and qualified. I do not believe that the people setting up activities have the knowledge/ experience to support me [trust]

How I feel

- I want to do gentle exercises at my own pace
- I'm not emotionally ready to do activities



Opportunity Insights



I need social engagement

- I want to engage with others when doing activities
- I prefer to do activities with a group
- I won't attend an activity if it is not welcoming

There are no local activities

- The cost and transport required is too much
- I don't feel safe travelling to my activities

There are no activities for me [or people like me]

- I may be over 50, but I am still able
- I don't want to feel overwhelmed; I want to feel comfortable
- As a man, I would prefer to be with other men

Advertisement of activities

- Don't assume I use the internet
- Don't assume I'm actively looking for activities



Motivation Insights



How to motivate me

- I need my activities to be fun and enjoyable – present me with activities that keep me active, but are not marketed as active [health by stealth]
- I want my activities to motivate me – an end goal, commitment, working in a team [don't want to let the team down]

How I feel

- I know the importance of being active, but I don't want to be more active
- I'd find it easier to start off small and build on that
- I am active because I get out of the house frequently – and because I do this, I consider myself to be active [but the activity is more social]
- I want to know what physical activity will do for me specifically.



Audience segments





I'm already at my limits!

The most difficult to change. Highest capabilities, opportunities and motivation, but think they are already doing enough.



I'm not bothered.

Difficult to change. Have some capability but lack opportunity and motivation. They do not think regular activity is important.



I can't do this.

Likely to change. Have the lowest levels of capability, opportunity and motivation, but recognise the importance of regular activity.



Push me!

Most likely to change. Have some capability, opportunity and motivation, and consider regular activity to be important. Easily influenced and motivated by others.

Stakeholder and partner research



Key survey findings



Stakeholders and partners thought that:

- Poor health, mobility, disability and a lack of confidence were residents' biggest capability barriers
- Poor transport links, a lack of local facilities and a lack of activities for older adults were their biggest opportunity barriers
- The biggest motivation barrier facing residents is that they are not motivated or willing to be more active (motivation barriers)
- Residents, social care organisations, charities, public health and employers are responsible for increasing older adults' activity levels
- A whole-health approach and collaboration across organisations is needed to support older adults to be physically active



Stakeholder recommendations



Engage residents through social groups

Use community champions and 'activators'. Utilise schools and youth groups to enable intergenerational activities. Take a 'health by stealth' approach by integrating physical activity into already existing or newly developed social activities.

Advertise and market activities

Work with local authorities, stakeholders and partners across communities to develop a central 'hub' documenting what activities are available and where. Work to promote these activities using marketing and language which is appropriate and relevant to older adults, e.g. through case studies.

Change perceptions

Re-frame physical activity as a social activity that can be done with 'people like me' as opposed to a chore. Support stakeholders and partners to reconsider how change can be achieved and go beyond the top-level and take a 'person-centred' rather than 'one size fits all' approach.



Our recommendations



1. Continue to support and promote group and family 'together' activities or set them up where they do not exist.
2. Stakeholders and partners need to go beyond merely providing the means and encouragement to do activities. They need to support residents with low or low perceptions of capability.
3. Residents are influenced by 'people like them'. Encourage word of mouth and community activation.
4. Change perceptions from "I can't" [because of my health] to "I must" [because of my health]

5. Reframe the conversation around physical activity to tackle deep seated views that it is an 'add on' and cannot be built into a busy schedule, or because they feel too tired or have other more important priorities, e.g. family.
6. Offer more outdoor spaces to utilise our wonderful green spaces in Lincolnshire. These events need to be consistent to allow word of mouth to grow and encourage participation.
7. Encourage use of community facilities or increase participation at established events by incentivising older people to do more physical activity, e.g. through a loyalty card or voucher.

8. Invest in the promotion of existing walking groups and create new groups in areas underrepresented.
9. Use both online advertising and local free magazines to raise awareness of what is available to residents.
10. Many younger 'older people' want activities which are less traditional than those often marketed at their age group. Activities need to be redesigned to appeal to this audience.
11. Encourage stakeholders and partners across Lincolnshire to work together and meet more regularly, using these recommendations to work collaboratively to make changes across the wider systems in which they work and have influence.

Thank you!

