

LONDON BOROUGH OF HAMMERSMITH & FULHAM

Report to: The Economy, Arts, Sports & Public Realm Policy and Accountability Committee

Date: 29/04/2025

Subject: Active Wellbeing Strategy

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SUMMARY

This report provides an update on the development of an Active Wellbeing Strategy for the Borough, which supersedes the Sport & Physical Activity Strategy, reflecting up-to-date policy at national level in this sector.

The Borough has high average levels of participation in sport and physical activity. However, some population groups face additional barriers to participation with consequent impact on health inequalities. In order to improve public health in priority groups, in accordance with the Council's values, activities will need to be tailored to meet the needs of these residents, co-produced with them, and delivered in partnership with trusted groups in the community.

The report sets out the work carried out to date with partners and stakeholders, acknowledging that the vision stretches across Council services and across sectors, requiring a systems-based approach. It identifies the next steps towards finalising the strategy, which will include appropriate partnership governance that includes a strong voice for resident users and non-users of services, a detailed action plan and an agreed indicator set for measuring progress.

RECOMMENDATIONS

1. The Committee is recommended to review the report and provide comments.

Wards Affected: ALL

Our Values	Summary of how this report aligns to the H&F Corporate Plan and the H&F Values
Building shared prosperity	The strategy will play a crucial role in fostering economic and social benefit for all residents by reducing the strain on public health services; our residents will become more healthy and more likely to be economically active and able to

	benefit from the opportunities set out in the Upstream London industrial strategy. Initiatives will tackle inequalities in access to active lifestyles.
Creating a compassionate and inclusive council	The Active Communities theme of the strategy will focus on how the grassroots sport sector and the wider voluntary sector can support residents to become more active and at the same time build community resilience and capacity and reducing social isolation.
Doing things with local residents, not to them	The strategy is being developed in conjunction with a range of partners including sports and community third sector operators. Residents have been consulted on the themes at the previous stage, and will be represented on the Active Wellbeing partnership steering the work. Delivery will include community programmes / wellbeing activities at a local level which will be planned together with residents to ensure they are relevant and effective.
Being ruthlessly financially efficient	By taking a systems-based approach with all partners involved in supporting active wellbeing, the strategy will aim to reduce long term costs for public health and social care services. At the same time, partners' activities will be better co-ordinated and aligned (resulting in less duplication and greater degree of targeting), within a more cost-effective model.
Taking pride in H&F	Working together with the community and across Council services and stakeholders will create a shared sense of purpose and pride in the resulting outcomes.
Rising to the challenge of the climate and ecological emergency	The proposals support Active Travel (Walking & Cycling) which aims to reduce carbon consumption. They include a focus on locally delivered activities which reduce the distances travelled to access opportunities. The Active Environment theme seeks to ensure accessible outdoor activities, fostering appreciation for nature and local ecosystems.

Background Papers Used in Preparing This Report

None

DETAILED ANALYSIS

Background

1. In July 2024 the Committee considered the principles of a draft Sport and Physical Activity strategy, following an initial stage of development and consultation with residents. This report updates the Committee on recent progress towards finalising the strategy and action plan.
2. The continuing reduction in public finances and well-publicised pressures on the health service have recently stimulated fresh thinking in this sector, with Active Wellbeing replacing traditional sports development approaches. The Active Wellbeing agenda is supported by Sport England, the national development agency for sport, which is the principal partner funder of sports development. Active Wellbeing is a pivot towards a systems-based approach that reflects the importance of community sports as part of a wider agenda to improve public health.
3. Traditional leisure services have tended to serve healthier, more active populations, leaving those with a greater need for support to live active lives under-served.
4. Physical inactivity is a major contributor to preventable disease and has consequences for individuals' ability to live well in the Borough. The strategy will emphasise the importance of physical activity as a crucial factor in preventing conditions such as heart disease, stroke, arthritis, diabetes and dementia. Participation in sport and physical activity (and volunteering in these areas) can also support people's self-confidence, develop transferable skills and help to increase mental resilience, contributing to reducing anxiety and stress.
5. Work has already been commissioned to develop a Playing Pitch Strategy and an Indoor Leisure Facilities Strategy, which will identify how sports facilities can best be planned, developed and maintained in order to support the future needs, of the Borough and the findings will be fed into the new approach.

Context

6. Local public health data and physical activity data show that in many cases, while the Borough averages relating to ill-health are similar to London or national averages, and levels of physical activity are relatively good, the average figure obscures the very different situations of residents in particular population groups.
7. Since 2015 Hammersmith & Fulham Council has been one of the most physically active boroughs in the country. Active Lives data from the Department of Culture

Media & Sport demonstrates Hammersmith & Fulham consistently achieved levels of physical activity higher than those of other Inner London boroughs and the regional average.

8. Every year since 2020, 73% of the Borough population has achieved the recommended minimum of 150 mins per week of physical activity (4-6% higher than the physical activity levels across Inner London and 9-11% higher than those for Greater London).

	Nov 15-16	Nov 16-17	Nov 17-18	Nov 18-19	Nov 19-20	Nov 20-21	Nov 21-22	Nov 22-23
London Region	64%	62%	65%	65%	62%	62%	64%	64%
London AP	64%	62%	65%	65%	62%	62%	64%	64%
Hammersmith and Fulham	73%	70%	67%	73%	75%	73%	73%	73%
Inner London	67%	67%	68%	69%	67%	67%	68%	69%

9. Health statistics for obesity and being overweight in H&F are better than the London and England average for adults (53% compared with London at 57% per cent and England at 64%). Figures for hypertension are significantly better than the national average (7% compared with 14%). Obesity amongst primary school age children is similar to the London and national average.
10. However, there is a marked variation in life expectancy, health and wellbeing across the Borough, linked to deprivation factors.
11. Hammersmith & Fulham is the sixth most densely populated London Borough. Housing pressures and poor air quality contribute to health risks. 26% of all those aged 60 or over in the Borough experience income deprivation, compared to the England average of 14% (2019 figures).
12. The difference in life expectancy in the Borough is 6.5 years for men (from 77 years in Hammersmith Broadway to 83.5 years in Palace Riverside). For women the difference in life expectancy is 9.5 years (from 81.3 in Fulham Broadway to 90.8 years in Addison). Average life expectancy is 79 years for men and 83 years for women in London and England.
13. Inequalities between population groups result in significant variations in outcomes and clustering of poor health and certain health conditions. This context suggests that while there is a need to sustain the current strong level of participation by the wider public in sport and physical activity, our improvement focus should be on those less likely to participate, including people experiencing common barriers to maintaining and developing active lifestyles, in order to “move the dial” and improve overall health of the population.
14. Further work is needed with residents to develop a better understanding of the barriers they experience and to co-produce solutions that suit their needs and this will form an important part of developing the action plan.

Sports Facilities

15. Our facilities will remain important in delivering activities and form the backbone of public leisure provision for our user-base. The location, operating hours, condition and equipment at our sports facilities should be fit for purpose in meeting demand and achieving our strategic objectives.
16. Work on a Playing Pitch Strategy and Indoor Leisure Facilities Strategy was awarded in March 2025 and will provide a detailed assessment of provision. It is expected to take up to 12 months for the assessment to be completed (to enable both the summer and winter seasons to be incorporated). As the data from this work becomes available, it will feed into the Active Wellbeing strategy.
17. Extensive works to improve the Linford Christie Outdoor Sports Centre have already started with Phase One being completed in January 2025. The works comprised of the demolition of the main building which has been replaced with semi-permanent cabins for changing and toilet facilities.
18. Phase Two of the scheme started in January 2025. The works will replace the all-weather pitches and replace them with a 3G state of the art 11-a-side football pitch, 1 x 3G 7-a-side football pitch, 1 x sand based 7-a-side football pitch and 3x hardcourts that will be used for tennis and netball.
19. Phase three will see the refurbishment of the athletics track and new stadium lighting, the works will be completed later within the year.
20. Greenwich Leisure Limited and Virgin Active, the operators of public leisure facilities in the Borough, also have ongoing programmes to update their sites and have recently replaced old gym equipment.

Developing a Partnership Strategy for Active Wellbeing

21. Given the complex lifestyle factors involved it is imperative to ensure the range of stakeholders represented in discussion about Active Wellbeing is wider than sports development and sports facilities (though these continue to be important in delivering the objectives and remain involved).
22. A stakeholder workshop was held in March 2025 involving Council teams from Public Health, Social Care, Children's Services, Sport and Active Travel as well as external organisations ranging from London Sports Trust, Dementia Action and Sands End Arts & Community Centre to London Sport, Chelsea FC Foundation, Greenwich Leisure Limited, Dance West, Hurlingham Club and Virgin Active.
23. The relationship between sport, physical activity and wellbeing was explored through the lens of the public health data and data relating to sports and

physical activity participation and identified the key issues set out below.

24. Better co-ordination of delivery would enable a more cost-effective model. Sharing of plans and collaboration between parties is needed to reduce duplication and reach more people with a wider range of provision that is appropriate to their needs and accessible in their locality.
25. Physical activity peaks at the end of primary school. As children enter secondary school their attention moves towards academic pressures, and they tend to prioritise personal friendships over social interaction. At the same time, this age group sees changes in leisure time use, including moving towards the use of smartphones and online gaming.
26. Girls and young women are only half as likely to be physically active as boys and young men. Biological differences between girls and boys contribute their participation in physical activity. Girls go through puberty earlier than boys, triggering self-consciousness and uncertainty about their bodies along with monthly cycles which can make participation less comfortable.
27. People living with deprivation are less likely to be active. People on low incomes are facing cost-of-living pressures which mean that gym and club memberships, travel costs, equipment and basic athletic wear can be out of reach. Combined with having fewer facilities (parks, leisure centre and safe walking / cycle routes) in less well-off areas, this makes it harder to participate in physical activity.
28. People from non-white backgrounds are less likely to be active. They are disproportionately affected by low pay and unemployment and more likely to live in insecure housing or in areas with higher crime. Some cultures may place less emphasis on physical activity and certain sports may not be as popular or accessible. In addition, language difficulties can make it harder for some individuals to access information about sports and activities, or to participate in sports clubs and teams. Racism and discrimination in sport and leisure settings can discourage joining in.
29. The Borough has a high level of male suicide in comparison with other places. People at risk of suicide can experience social isolation and an absence of sense of purpose or value. Societal norms suggest men must be strong, stoic, and emotionally reserved and men often lack access to spaces where they feel safe to express their emotions. Sports and physical activity can create opportunities for healthy conversations and sharing of experiences with a peer group.
30. The “manosphere” and misogyny. Levels of violence against women and girls are a public health concern. An absence of positive role models for young men and active encouragement and normalisation of misogyny in some online spaces increases this risk. Sport and physical activity can provide role models for healthier masculinity and help to break down those harmful stereotypes.

31. These issues will now be further explored with residents and community groups to better understand them in more detail. This will enable co-production of programmes specific to the needs of people who are currently physically inactive and who have most to gain in health improvement from taking part.

Vision

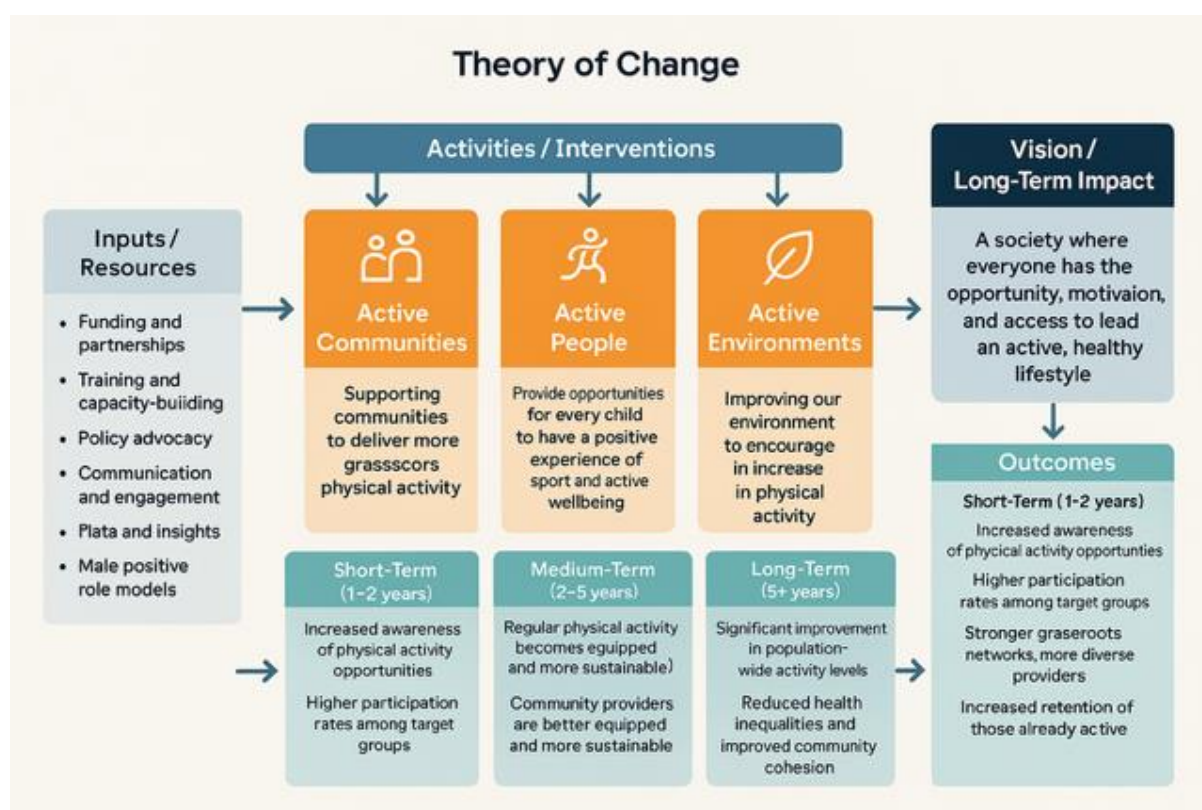
32. The Borough has relatively high levels of participation amongst the general population but there are pronounced differences between the wellbeing of groups within our population and can be done by targeting activities to address these disparities. The draft vision for the new strategy is:

“A place where everyone has the opportunity and motivation to lead an active, healthy lifestyle, contributing to improved physical, mental, and social wellbeing for all.”

33. The consultation undertaken in 2024 confirmed public support for a focus on the three themes of:

- Active People
- Active Communities
- Active Environments

34. A logic model set out below shows how the Council, residents, local providers, community sector and sports bodies will work through a new Active Wellbeing Partnership to design and deliver a series of activities and outcomes.



35. The goal is for regular physical activity to become the norm for more individuals. Data and insight can help to support this approach and inform interventions tailored to the priority cohorts described above.
36. The focus of commissioned and directly delivered activities is therefore expected to be on boosting participation rates for these groups. The strategy will also aim to strengthen grassroots networks and diversify the providers delivering activity programs.
37. Working with a wider range of community partners, while ensuring appropriate quality and safeguarding standards, will help to generate trust in communities where participation is low. For example, partnerships with residents' associations and voluntary organisations, or activities linked to community programmes such as those supporting people with dementia, can help to create an entry point for people who do not currently participate.
38. Support for existing groups will strengthen their capacity through training, funding, and partnership opportunities, ensuring they have the resources to grow and sustain their impact.
39. The resources available include funding and partnerships with schools, voluntary and professional sports sectors and health providers, training and capacity-building, policy advocacy for supportive urban planning, and communication and engagement strategies targeting less active population groups.

Next Steps

40. Further work is needed to work with residents and stakeholders to build an action plan for delivery of the Active Wellbeing model in the Borough.
41. Since the Active Wellbeing model needs to be system-wide, the governance through the Active Wellbeing partnership should reflect include partners from the sports, health, education and voluntary sectors, all of whom play an important role as well as related Council services. It should encompass grass roots and professional sports, sports events, community and informal youth provision and it must also include the voice of residents, including people from the target cohorts, to ensure that activities are resident-led and relevant.

Outline Timetable for Completion

	Description	Date	Progress			Lead
1	Hold Active Wellbeing meeting	Mar-25				LBHF Sports and Active Wellbeing
2	Award contract of Playing pitch strategy to Strategic Leisure	Mar-25				LBHF Planning / LBHF Sports and Active Wellbeing
3	Award contract of Indoor Leisure Strategy to The Leisure Consultants	Mar-25				LBHF Planning / LBHF Sports and Active Wellbeing
4	Launch Playing pitch strategy	Apr-25				LBHF Planning / LBHF Sports and Active Wellbeing
5	Launch Indoor Leisure Strategy	Apr-25				LBHF Planning / LBHF Sports and Active Wellbeing
6	Establish Governance for the new Active Wellbeing Partnership	Apr-25				LBHF Sports and Active Wellbeing
7	Development of Key Actions with partners	May-25				Active Wellbeing Partnership
8	Produce 1st draft action plan	Jul-25				Active Wellbeing Partnership
9	Establish baseline and measurements framework	Aug-25				Active Wellbeing Partnership
10	Finalise Action plan for approval	Sep-25				Active Wellbeing Partnership
11	Produce a final draft of the strategy	Oct-25				Active Wellbeing Partnership
12	Cabinet Member approval	Nov-25				LBHF Sports and Active Wellbeing
13	Produce a final strategy and action plan in web, hard copy and accessible formats	Dec-25				Active Wellbeing Partnership
14	Review data from PPS and ILS	May-26				LBHF Sports and Active Wellbeing