



The
Richmond
Group
of Charities

The Richmond Group Movement for All Physical Activity Programme

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Who are the Richmond Group

A collaboration of 14 of the leading health and social care organisations in the voluntary sector



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WE ARE
MACMILLAN.
CANCER SUPPORT



The Richmond Group's Mission

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We work together as a collective voice to better influence health and social care policy and practice, with the aim of improving the care and support for the 15 million people living with long term conditions we represent



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DIABETES UK
KNOW DIABETES. FIGHT DIABETES.

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CANCER SUPPORT



Stroke
ASSOCIATION

Movement for All

More people,
more active at a
level that is right
for them,
regardless of
condition(s)



Scale of the problem

- 15m people with LTC – 2.9m with 3+
- 37.8% inactive compared with 22.3% with no LTC
- Costs the UK an estimated £7.4bn a year
- People with LTCs account for 50% of all GP appointments
- Physical inactivity directly contributes to 1 in 6 deaths in the UK
- Physical activity can prevent or help manage over 20 common conditions



Insight into barriers

1. Survey of people with (multiple) LTCs
2. A health crisis was the most common trigger for stopping physical activity
3. 5% did 10 minutes of physical activity a week or less
4. 33% cited uncertainty about types of activity as a barrier



Insight into barriers

5. 28% cited fear or worsening their condition
6. For many a sense of nostalgia of previous activity level & ability
7. 61% asked wanted to be more active
8. But 59% asked cited pain as their main barrier to activity



Insight: Soundbites

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“When I see cyclists, I think I used to be part of that and I’m not anymore... I really feel I ought to do more exercise.”

Multiple LTCs, Male, Depth interview

“I’ve not been out of the house for 4 months. I can’t walk very far... Mainly, any exercise to me is pottering about, emptying the waste bins, tidying up in general. That’s all I can do.”

Multiple LTCs, Female, Depth Interview

“When you are restricted by pain and physical activity causes pain, it is very difficult.”

Multiple LTCs, Female, Focus group



Insight into motivators

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1. Proving people 'still can' and having confidence to be active again
2. Returning to 'normal' and gaining back some control and routine
3. Encouragement from friends and family to be active again
4. 'Permission' from a trusted healthcare professional



Interventions & learning: Macmillan

- Move More programme across UK
- Behaviour change physical activity intervention
- 13 phase-one services engaging 3925 people
- 12% reduction in inactivity from baseline to 3m follow up and increase to 6% at 12m
- Range of settings and methods for behaviour change



Interventions & learning: Mind

- Get Set to Go physical activity intervention in the community
- 3585 participants took part
- Episodes of poor physical & mental health impacted on activity
- Peer support was a feature & was crucial in counteracting dips in activity
- Increase of two days a week moderate intensity activity after 6 months follow up



Interventions & learning: BLF

- Keep Active Keep Well
- Behaviour change physical activity intervention currently underway
- Participants have choice in what activity is delivered
- Participants supported with motivational interviewing



Interventions & learning

- ESCAPE-pain: Arthritis Research UK endorsed physical activity and pain management project
- Stroke Association Moving Forwards After Stroke
- MS Active Together – digital physical activity support



Key summary: what works

- Interventions based on behaviour change
- Group and peer support options
- Participants engaged in decisions = choice
- Understanding of their situation
- Plan exit routes/succession plan
- Support for partners/deliverers



Suffolk: Most Active County

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How can this learning
and insight apply to
Suffolk and keep
people active during a
health crisis...



Contact...

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ROYAL VOLUNTARY SERVICE

Stroke
association

Thank you!

