

brightsparks

Physical Activity and Movement in North Kirklees

**An independent research report commissioned by Kirklees
Council**

September 2025

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Acknowledgement

Brightsparks are deeply grateful to all our partners, and particularly all residents of Kirklees who took part in the survey, and those who joined focus groups and community engagement sessions. Your involvement is a testament to the commitment and care people across Kirklees have for their communities, and it has helped shape this report. What people have shared truly matters, and we are thankful for the time and thoughtful consideration given to this research.

Executive Summary

Purpose and scope

This independent report investigates patterns of physical activity and movement across Kirklees, with a focus on Batley and Dewsbury. The research tested the hypothesis that socio-economic status, cultural background, and accessibility to inclusive, safe spaces are significant predictors of participation. Commissioned by Kirklees Council and delivered by Brightsparks Agency (BSA), the project supports ongoing priorities around health equity and informs the work of the Sport England Place Partnership.

The study ran between May-August 2025, using a mixed-methods approach, including a community survey, structured focus groups, and interactive workshops. This design ensured both statistical breadth and qualitative depth, capturing lived experience alongside population-level trends.

What the findings tell us overall

- **The environment matters:** Where facilities close, whole communities feel the loss of reliable, trusted spaces. People consistently expressed a desire for a dedicated leisure centre where they can swim, be active, and come together. Swimming was highlighted as a particularly valued activity, offering both physical and social benefits, with such a centre viewed not just as a place for exercise but as a welcoming hub that strengthens community ties and supports health and wellbeing across all ages. Integrating activity spaces within co-located facilities, alongside shops, cafés, childcare, health provision, libraries, or job centres would further embed participation into daily life, making it more convenient and inclusive. At the same time, when pavements are broken, lighting is poor, or parks feel unsafe, people choose not to use them, underlining the importance of accessible, well-maintained environments.
- **People want to be active:** Many survey responses and feedback from qualitative sessions indicated people are regularly including walking and informal movement in their routines, showing there is existing motivation amongst residents to move, especially for health and wellbeing. However, current choices are limited by affordability, access to facilities, and safety concerns.
- **Inclusion is decisive:** If opportunities are not affordable, accessible to people with disabilities, or sensitive to cultural and gender needs, then opportunities for participation are reduced. Choices are heavily shaped by whether provision feels welcoming and usable.

- **Social connection sustains activity:** Responses from residents indicate they are more likely to remain active when it is fun, social, and part of community life. Without that, motivation drops.
- **Wellbeing and confidence are intertwined:** Activity boosts mental health and self-esteem, but when opportunities are disrupted, wellbeing suffers, making it even harder for people to re-engage.
- **Information gaps reduce choice:** Many people miss out simply because they don't know what's available. Without clear, accessible communication channels, especially offline, opportunities are invisible to those who could benefit most.

Key themes and findings

Thematic analysis produced nine cross-cutting themes, overlapping but distinct. These are ordered below broadly based on how frequently they were cited in both survey responses and qualitative face-to-face sessions. The strongest recurring thematic barrier related to environmental and infrastructure factors. However, it is clear that there are also a range of other broader influences of physical activity which impact people's ability and opportunity to be active

1. **Current movement habits:** The majority of respondents reported regular physical activity, with 68% walking several times weekly. Only 12% reported no physical activity in the previous seven days. Preferences for activity skewed toward low-cost, everyday movement.

"I try to walk every day - it's the only thing that fits around my work and kids."

2. **Environmental and infrastructure factors:** Poor maintenance, safety concerns, and facility closures limit access and erode community pride. Residents - particularly in North Kirklees - consistently called for a leisure centre with swimming, valued both for health and social benefits, and as a welcoming hub that strengthens community ties. Broken pavements, poor lighting, and unsafe parks further deter use of local spaces, an issue that overlaps strongly with themes of safety and trust.

"That pool was right round the corner, now I have to take two buses just to swim."

3. **Accessibility and inclusion:** Barriers to participation include cost, transport, disability, digital exclusion, and limited women-only provision.

"I need somewhere accessible with proper facilities, otherwise I just can't take part."

4. **Safety and trust:** Antisocial behaviour, poor lighting, and neglected environments deter participation, especially among women, older adults, and carers.
“If it’s dirty or overgrown, it doesn’t feel safe, even if it is.”
5. **Motivation and social connection:** Social activities, community hubs, and peer support strongly motivate participation.
“It’s not just about the exercise. It’s about having someone to go with, someone to talk to.”
6. **Cultural relevance and representation:** Faith, gender, and intergenerational needs shape engagement and trust.
“Women-only sessions let me take part without worrying.”
7. **Wellbeing and confidence:** Mental health, self-esteem, and intergenerational connectedness are deeply tied to activity levels.
“Simple things like walking with friends really help my mood.”
8. **Affordability and value:** Cost barriers remain the strongest constraint; residents called for inclusive, low-cost provision.
“It used to be affordable, but now I have to travel and pay more.”
9. **Communication and awareness:** Gaps in knowledge exist, particularly among certain groups including older residents. Multi-channel approaches are most useful to reach all audiences, with recommended channels including WhatsApp, Facebook, GP referrals, and newsletters.
“Things are happening but you don’t hear about them until they’ve gone.”

Limitations of the research

The survey was open to Kirklees residents aged 18 and over, while wider community engagement included families. However, much of the engagement was concentrated in Batley and Dewsbury, so findings may not fully represent the wider Kirklees population. Surveys without incentives can have lower response rates and may provide less detailed responses. Focus groups also carry limitations, such as the influence of dominant voices and limited scalability.

The study was geographically limited to Kirklees and conducted between May–August 2025, meaning results may reflect seasonal behaviours. These risks were mitigated by offering surveys in both digital and paper formats, using accessible language, facilitating inclusive focus groups, and providing multiple participation routes. Collaboration with

trusted community partners further supported broad and representative engagement within the agreed scope and timeframe.

Considerations and recommendations based on findings

Future action in Kirklees should adopt a whole systems approach, recognising that no single service or intervention can address inactivity and inequalities in isolation. Impact should depend on co-ordinated, long-term action across partners, with shared accountability for results.

Future action should be framed by the COM-B behavioural model (Capability, Opportunity, Motivation - Behaviour) and aligned with the WHO Global Action Plan on Physical Activity (GAPPA) ([link](#)) in order to ensure collective ownership of outcomes, not fragmented activities.

Principles of a whole systems approach

- **Shared ownership:** All stakeholders - council, NHS, schools, voluntary groups, and communities - should co-own delivery.
- **Cross-sector integration:** Policies including, but not limited to, planning, health, environmental, economic, leisure, transport, communities, and education should align to reinforce one another.
- **Equity at the core:** Interventions should be designed to reduce inequalities, with priority given to the most disadvantaged communities.
- **Evidence-driven action:** Longitudinal monitoring should be used to track change and evaluate results.

Key actions for consideration

Local assets required to meet community need and enhance civic pride – A leisure centre in Dewsbury as a community anchor

A dedicated centre with swimming provision in Dewsbury would meet a clear community need, offering valued opportunities for activity, wellbeing, and connection. Beyond exercise, it would act as a civic asset that fosters pride in place and strengthens community life. While Batley residents also expressed a need, though in smaller numbers, this highlights the importance of mapping provision and demand across both towns to ensure fair and effective investment.

Further actions for consideration

- System partners should consider ways in which safety and accessibility in parks, paths, town centres and greenways could be improved. This supports addressing issues relating to safety concerns and a local environment conducive to physical activity.
- System partners should establish / expand low-cost or free activities / activity groups that support more easily accessible activity opportunities and social connection. This should include women-only groups that support culturally sensitive participation.
- Improved targeting and tailoring of multi-channel communications to engage all audience groups.
- Consider the introduction of affordable access schemes including reduced-price memberships, pay-as-you-go models and transport subsidies for low-income households - helping to address the cost barrier to participation.
- Improve accessibility of booking systems (such as for KAL and related providers) by simplifying user interfaces and offering multilingual support in Gujarati, Urdu and Punjab, amongst other languages. This addresses digital exclusion and language barriers.
- Consider how community and school facility access can be expanded outside school hours for affordable adult and youth activities. Community sports halls and school gyms are underutilised assets with high potential for local provision.
- Partners should work together to progress the development of a new, multi-purpose leisure facility in Dewsbury. A formal feasibility process will be required to assess local data and evidence, site options, scope, capital and revenue models, and opportunities for co-location with other services. This would respond to the strongest and most consistent feedback from North Kirklees residents, while ensuring that programming reflects diverse needs across the district.
- Where new provision is proposed explore the potential for co-location of activity or leisure facilities alongside Council and external services and amenities in line with local needs and demand.

- Adopt and apply active design principles to all new developments, to ensure that travel infrastructure investment and planning considers connected, safe active travel infrastructure; (including segregated cycle lanes, widened pavements and safe crossings); high quality, safe, well-presented and maintained local access to play areas and public open space. This helps remove safety, civic pride and affordability barriers to walking, cycling and informal play and activity opportunities.

Conclusion

The strongest theme from this independent research is the community's desire for a new leisure centre serving the Dewsbury and Batley area. Whilst this should be a clear priority for Kirklees Council, it is equally important to recognise that improving physical activity is not just about facilities, but about creating equitable, safe, and culturally relevant opportunities that are rooted in community voice and supported by a coordinated system.

Existing data shows that physical activity levels in Dewsbury were relatively low even when the sports centre was open. This highlights that facilities alone will not be sufficient and that multiple factors must be addressed to create meaningful change. The engagement has identified key barriers to participation, including concerns around safety, affordability, accessibility, civic pride, awareness, and the need for social connection.

Residents in both Batley and Dewsbury also offered clear solutions: affordable provision, safer environments, trusted communication, and more opportunities for people to connect with each other. These insights point to the need for action that is both practical and grounded in local experience.

By committing to a whole-systems approach with shared accountability, Kirklees can move from fragmented delivery to measurable, long-term impact. This shift will help reduce inequalities that residents experience when trying to access and participate in physical activity. The research therefore provides a robust evidence base to guide policy, service design, and investment, ensuring that physical activity becomes easier, safer, and more valued in everyday life.

Introduction and rationale for the research

Background context

Kirklees Council, serving a diverse population of approximately 433,200 residents ([ONS, 2023](#)) across a wide West Yorkshire geography, is committed to improving the health and wellbeing of its communities through increased engagement in physical activity. The borough encompasses a range of urban and semi-rural communities, including the towns of Batley and Dewsbury, where physical inactivity levels are high.

Existing data from local population surveys in 2021 and 2016 shows persistent inequalities in activity levels, especially among certain population cohorts and wards - particularly Batley East, Batley West, Dewsbury East, Dewsbury South and Dewsbury West. In these areas, residents from Asian / Asian British backgrounds, individuals with disabilities, women, and those on low incomes face disproportionately low levels of activity ([Kirklees Council 2021b](#)).

Research objectives

Kirklees Council appointed [Brightsparks Agency \(BSA\)](#) to deliver a robust independent research exercise between May and August 2025. The aim was to generate actionable insight into public attitudes, motivations, and barriers related to physical activity and movement in Kirklees, particularly within Dewsbury, Batley, and surrounding communities. The investigation was designed to:

- Explore the specific needs, challenges, and aspirations of local residents in relation to being physically active.
- Examine perceived and actual barriers to participation in physical activity and movement, especially within under-represented and deprived groups.
- Inform the development of a long-term approach to increasing participation in physical activity and moving around more, with a focus on inclusion, accessibility, and reducing health inequalities.
- Feed into the work of the [Sport England Place Partnership](#) by providing locally grounded intelligence and co-produced recommendations.

Using lived experience as a catalyst for change

Brightsparks Agency (BSA) recognised that for any public health initiative aimed at improving movement and participation in physical activity to be both effective and

equitable, it had to be rooted in the lived experiences of local residents, particularly those facing the greatest barriers to being active.

This approach is directly aligned with national strategies such as Sport England's Place Partnerships, of which Kirklees is a designated Place Partner, which are designed to reduce physical inactivity through targeted, community-led initiatives in areas of high deprivation. It also supported Kirklees Council's goals around strengthening community wellbeing and reducing inequalities in opportunities and outcomes.

A core objective of the consultation was to complement and reinforce this wider programme. BSA fully endorsed this ambition and committed to delivering research that was community-informed and contributed to a local vision that is inclusive, impactful, and sustainable.

By capturing a deep and inclusive understanding of what physical activity means to people in Batley and Dewsbury and what may have prevented them from participating, this consultation can make a valuable contribution to ensuring an equity-led approach to physical activity and movement in Kirklees, helping to shape a healthier, more connected borough where every resident has the opportunity to move more, live well, and thrive.

Key objectives

BSA understood the project's objectives, key deliverables and the critical importance of adhering to a strict timeline. The research approach was designed to be rigorous, inclusive, and community-informed, with the overarching aim of achieving three core goals.

Firstly, BSA drew on insights from the previous [Kirklees Active Leisure \(KAL\) 2024](#) consultation and built upon this foundation in a way that meaningfully reflected and responded to the needs of local communities, particularly in the north of the borough. This helped to establish baseline behaviours and attitudes towards physical activity and community participation across Kirklees.

Secondly, BSA sought to identify motivations and barriers to participation, with a specific focus on under-represented and marginalised groups, using a range of research methods.

Thirdly, the project aimed to guide and support a strategic, evidence-based approach that promoted health equity and enabled sustainable behaviour change around physical activity within the Kirklees population.

BSA brought extensive experience to this work, having delivered numerous similar projects across Yorkshire and the UK. The approach consistently combined high-quality, ethical research with meaningful, partnership-led engagement with local communities.

Structure of the report

This report is structured to take the reader from the purpose and context of the research through to its findings, analysis and considerations. The introduction and rationale outlines the background and need for the study, followed by a review of desk-based research, which summarises existing evidence and its role in shaping the research design.

The research methodology section details the approach, survey and focus group design, community engagement, data analysis methods, and ethical considerations. The thematic findings are presented for Batley and Dewsbury followed by wider Kirklees, although it should be noted that the whole data set was skewed to responses from these areas/North Kirklees.

The report then sets out potential actions for consideration tailored to each location and broader actions for the future, before ending with a conclusion that draws together the main messages.

A separate technical report provides more detail on the research methodology, as well as the supporting evidence gathered during this project, including demographic profiles, activity patterns, motivators, environmental factors, cultural and social influences, communication preferences and integration of physical activity spaces with other services, supported by qualitative feedback and community insights. This report also includes appendices of research materials.

Scope

Existing data shows significant inequalities in physical activity levels across Kirklees, with Batley East, Batley West, Dewsbury East, Dewsbury South and Dewsbury West among the least active wards in terms of meeting the UK Chief Medical Officer's (CMO) physical activity guidelines ([Department of Health and Social Care, 2019](#)). These guidelines recommend that adults, including older adults, engage in at least 150 minutes of moderate-intensity activity or 75 minutes of vigorous-intensity activity per week, or an equivalent combination, spread evenly across the week. They also advise incorporating muscle-strengthening activities on at least two days each week, balance and flexibility training for older adults, and minimising prolonged sedentary behaviour.

In light of these inequalities and the importance of meeting recommended activity levels, Kirklees Council prioritised research in the areas most affected, Dewsbury, Batley and North Kirklees, particularly given local activity rates and recent changes to leisure provision. Although all Kirklees residents were eligible to participate, the research intentionally targeted a geographically diverse cross-section of residents in these areas. Building on priorities identified in previous research and reflected in existing literature,

particular emphasis was placed on priority groups: women and girls, people with disabilities or long-term health conditions, Black, Asian and minority ethnic (BAME) communities, low-income households and adults aged 65 and over (Sport England, 2020).

The research was delivered using a mixed-methods approach, combining surveys with community engagement activities such as focus groups and workshops. This methodology ensured the research was inclusive, in-depth and capable of generating meaningful insights.

Approach and limitations of the research

It is important to acknowledge the limitations of the research scope for transparency. While surveys, focus groups and community workshops are valuable tools for generating both broad and in-depth insights, each method has inherent limitations. Surveys, for example, often face challenges such as low response rates when incentives are not offered.

It should be noted that the provision of incentives fell outside the scope of this research. Instead, the methodology was designed to prioritise respectful and meaningful involvement, fostering authentic participation within the identified constraints.

However, survey responses may lack depth, and surveys can unintentionally exclude digitally marginalised groups or individuals with lower literacy levels, thereby reducing representativeness. Focus groups are similarly affected by certain limitations, such as the influence of dominant voices, social desirability bias, and limited scalability, all of which can constrain the diversity and authenticity of feedback.

To mitigate the above risks, BSA adopted a mixed-methods approach to triangulate findings and enhance both robustness and representativeness. Surveys were offered in digital and paper formats, designed with clear, accessible language, and monitored to maintain demographic balance. Focus groups were facilitated by trained, trauma-informed researchers who created inclusive and supportive environments. Strategies were employed to promote equitable participation, with sessions adapted to meet the varied needs of participants from diverse backgrounds.

Engagement was further supported by collaboration with trusted community partners and by offering multiple participation formats, including in-person, online, and translated materials, to ensure broad and equitable access. Clear communication around the project's purpose, process, and use of findings helped manage expectations and build trust.

The survey was open to all Kirklees residents aged 18+, recognising that people may travel between different parts of Kirklees (for example, to access green space or leisure

facilities) and to gain a broader population view of the barriers and enablers to being physically active, which may support a system-wide approach beyond place-specific factors. The study was limited to the geographical boundaries of the Kirklees area and strictly adhered to the agreed project timeframe (May to August 2025). Any activities or data collection outside these parameters were beyond the remit of this commission and therefore not included in the report. Because the research was conducted in the summer months, the results may reflect seasonal patterns and may not fully represent behaviour at other times of the year. Further research at different time points should be considered.

All research activities were carefully planned and delivered within the agreed budget, ensuring the responsible and transparent use of resources. The relatively short three-month timescale inevitably limited the data collection window, however, this was mitigated through focused planning, strong partnership working, and effective engagement strategies. As a result, the research team was able to collect rich qualitative and quantitative data within the available timeframe.

Key lines of enquiry

The key lines of enquiry for this project centred on understanding how, why, and to what extent residents in the target areas engage in physical activity and movement and what factors influence their behaviour (socio-cultural, economic, psychological, and environmental). Central to this was the aim to explore not only current participation patterns but also the barriers and motivations that either hinder or encourage movement among different demographic groups.

The research sought to identify where and how residents are active, their preferred modes of activity, what gets in the way, and what support or changes would help them to be more active. These lines of enquiry were framed within the COM-B behaviour model (Capability, Opportunity, Motivation - Behaviour), which supports the development of evidence-based behaviour change interventions that are both targeted and scalable. COM-B identifies the following key factors that we must understand in order for behaviour change to occur:

- **Capability** - Does the individual have the skills, knowledge and ability to engage in a behaviour?
- **Opportunity** - What are the external factors that make the behaviour possible or impossible for the individual?

- **Motivation** - Are there any personal experiences that may impact the individual's motivation? This section looks at the personal motivations and aspirations of the individual and considers both reflective motivations (such as making plans for the future) and automatic motivations such as impulses and desires.
- **Behaviour change** - will only take place when these three factors are met.

Potential hypothesis

A potential hypothesis that emerged from the research framework was:

“Socio-economic status, cultural background, and accessibility to inclusive and safe spaces are significant predictors of physical activity participation among residents in Dewsbury, Batley and North Kirklees.”

This hypothesis was grounded in the desk based research, which incorporated existing data from Kirklees. The data highlighted that individuals living in deprived areas, from minority ethnic communities, or with health conditions were significantly less likely to meet physical activity guidelines due to structural, psychological or financial barriers.

The COM-B framework further supported the notion that inactivity was not solely a matter of willpower but often the result of limited opportunity (such as poor access to facilities), capability (such as health status or lack of knowledge), or motivation (including past negative experiences or low confidence). Testing this hypothesis through qualitative methods (focus groups and community engagement) and quantitative methods (surveys) was essential in establishing the validity and significance of the issues under consideration. The findings demonstrated the need for targeted, equity-focused interventions and provided a robust evidence base for the co-creation of solutions with local communities, thereby supporting the potential for long-term and sustainable impact.

Desk-based research

Desk-based research serves as a critical foundation for any research project by systematically exploring, evaluating, and synthesising existing knowledge on a given topic. The primary purpose of the research is to establish what is already known, identify gaps or inconsistencies in the current evidence base and highlight areas where further investigation is needed. By doing so, it not only provides context and justification for the study but also helps to refine and shape the research questions. It ensures that the research is grounded in existing theory and evidence, avoids duplication, and focuses on generating new insights.

In essence, the desk based research acted as a roadmap, guiding the direction, scope and relevance of the study. Given the timelines of this project, to expedite the launch of the study, a brief review was undertaken to inform the design of the research framework.

Literature and policy review

This section reviews literature relevant to the context of research on physical activity and movement, drawing on a range of credible local, national and international sources. By examining evidence from multiple geographic contexts, it considers how socio-economic factors, health promotion policies, infrastructure design and cultural influences shape participation in physical activity. The review also highlights strategies implemented in comparable settings to address changing patterns of engagement, thereby providing a foundation for interpreting the consultation findings and informing future service planning.

Within this context, and in response to financial pressures and evolving patterns of leisure centre use, Kirklees Active Leisure (KAL) and Kirklees Council undertook a public consultation ([Kirklees Council Leisure Centre Consultation, 2024](#)) to examine how residents use facilities and to identify the types of physical activity in which they currently participate.

Through surveys, community events, and stakeholder input, the consultation identified that residents take part in a wide range of physical activities both via KAL leisure centres (swimming, gym, fitness classes), and outside of KAL leisure centres, including:

- Recreational walking
- Running/athletics
- Traditional sports (football, netball, tennis, dancing, gymnastics etc)

- Cycling/biking
- Yoga, pilates, meditation
- Fitness activities (climbing, bouldering, parkour etc)
- Fitness classes (aerobics, Zumba, outdoor bootcamps)
- Non-traditional sports (archery, bowls, ice hockey etc)
- Martial arts
- Water-based activities (open water swimming, diving, underwater hockey/polo, canoeing, paddleboarding etc).
- Other activities (horse riding, caving, geocaching/orienteering etc)

The consultation also revealed key concerns around affordability, accessibility, and the impact of recent closures like Batley Baths and Dewsbury Sports Centre. Respondents called for community-based services, better transport, and more inclusive, flexible activity options. These findings are now shaping decisions on leisure investment and informing a wider approach to reduce health inequalities across Kirklees.

It is well known that poverty has a profound impact on health outcomes, this is especially evident in the domain of physical activity and movement. According to Why Poverty Matters: A Report by the Director of Public Health (2023), individuals living in economically deprived areas are significantly less likely to engage in regular physical activity due to a range of structural and environmental barriers.

These include limited access to safe and affordable recreational facilities, fewer green spaces, higher crime rates, and lower availability of active transport infrastructure such as walking and cycling paths. As a result, people in low-income communities often experience higher rates of sedentary behavior, contributing to increased risk of chronic diseases such as obesity, diabetes, and cardiovascular conditions. This disparity underscores the need for a targeted, whole system approach that not only promotes physical activity but also addresses the broader social determinants that limit equitable access to movement opportunities.

Recent research highlights the significant role of social determinants in shaping health behaviours and outcomes in the North of England, with direct relevance to the context of physical activity in Kirklees. Newton et al. (2024) used structural equation modelling to examine how factors such as income, education, and environmental deprivation influence key health behaviours, including physical activity, as well as broader physical and mental health outcomes. Drawing on large-scale survey data, the study found that both income and education had a strong influence on behavioural patterns, which in turn were highly predictive of self-reported physical and mental health.

The findings reinforce the need to consider socio-economic context when addressing physical inactivity, particularly in regions like Kirklees that include areas of high deprivation. The study challenges linear approaches to health intervention, calling instead for integrated strategies that address the wider social conditions influencing behaviour. This supports the inclusion of a deprivation lens in any local research or intervention targeting physical activity.

Director of Public Health Annual Report 2024-2025: *Physical Activity Matters* (Kirklees Council, 2025) stresses the wide health benefits of regular movement across all life stages while noting inequalities in participation, with one in four residents active less than 30 minutes a week. The report calls for a whole-systems, community-led approach to reduce inactivity and create fairer, more supportive environments. National policy drivers in England strongly align with and support the work Kirklees Council is undertaking to promote movement and physical activity as part of a broader public health agenda. The UK Government's Physical Activity Guidelines (Chief Medical Officers, 2019) emphasise the importance of integrating movement into daily life for all age groups, highlighting its role in preventing long-term conditions and improving mental wellbeing. Public Health England's *Everybody Active, Every Day* (2014) framework provides a strategic approach to embed physical activity across systems, particularly at local authority level, advocating for whole-system collaboration that includes planning, transport, education, and the voluntary sector.

Furthermore, Sport England's *Uniting the Movement strategy* (2021) calls for tackling inequalities and enabling inclusive, place-based approaches - key principles that reflect the ambitions of Kirklees to co-produce solutions with communities and reduce disparities in health. These national drivers not only legitimize, but also guide local authorities like Kirklees in building active environments, engaging underserved groups, and embedding movement into everyday life as a means to improve public health and community wellbeing.

On an international level, the World Health Organization's *Global Action Plan on Physical Activity 2018-2030 (GAPPA)* offers a global framework for reducing inactivity through active societies, environments, people, and systems. The Kirklees Physical Activity and Movement research drew on GAPPA's principles, ensuring that international best practice informed local analysis of barriers, opportunities, and strategies for increasing movement across the district.

As outlined earlier, physical activity is vital for public health and well-being, yet participation levels in Kirklees remain below national averages. Socio-economic disparities significantly influence physical activity participation. For instance, 13% of individuals in the most deprived quintile reported never undertaking recommended levels of moderate physical activity, compared to 7% in the least deprived quintile (Kirklees Council, 2018). Ethnic disparities are also evident: only 29% of Black and

Minority Ethnic (BAME) individuals met the recommended activity levels, with Asian British individuals reporting the lowest participation rates.

Health conditions further exacerbate inactivity. Adults with heart disease, diabetes, or chronic pain are more likely to be inactive, highlighting the need for tailored interventions. Additionally, women of childbearing age and older adults exhibit lower activity levels, underscoring the importance of age and gender-sensitive approaches ([Sport England, 2023](#)).

The 2021 Current Living in Kirklees (CLiK) survey identified key health and wellbeing trends among residents aged 16 and over ([Kirklees Council, 2021b](#)). Just over half rated their physical (57%) and mental health (56%) as good, though outcomes varied significantly by age and deprivation. Poorer physical health was more common among older adults (75+), while younger adults (18-24) were more likely to report poor mental health. Residents in the most deprived areas reported the worst outcomes across both measures.

Only 51% of adults met recommended physical activity levels, rising to 65% in the least deprived areas. Despite 91% feeling confident in managing their health, this dropped among those with poor wellbeing or long-term conditions. The survey sample included over 6,000 adults, with demographic analysis helping to highlight health inequalities across the district.

Environmental factors, such as limited access to safe and affordable recreational spaces, and cultural barriers, particularly among South Asian communities, also hinder physical activity engagement ([University of Huddersfield, 2022](#)). Addressing these multifaceted challenges requires comprehensive, inclusive strategies that consider the diverse needs of residents.

National and regional data consistently show lower levels of physical activity among South Asian communities and people living in areas of higher deprivation ([Sport England, 2022](#); [Public Health England, 2016](#)). Given that the areas of Kirklees selected for this study include relatively high proportions of both these population groups, it is vital that the research design acknowledges and reflects this context. This understanding will shape not only the desk-based analysis but also the wider methodological framework, ensuring that the insights gathered are grounded in the lived realities of those most affected by physical inactivity. By recognising these demographic patterns from the outset, the study will be better positioned to explore structural barriers and develop more equitable and targeted recommendations for future interventions.

The Everybody Active strategy ([Kirklees Council, 2021-25](#)) acknowledged inequalities in physical activity, local provision still reflects historic patterns of exclusion. Integrating inclusive design principles and amplifying girls' voices in the planning of active spaces is

critical to redressing these gaps and creating environments where all young people can move and thrive.

Nationally, the Sport England Active Lives Adult Survey indicates that 63.7% of adults meet the Chief Medical Officers' guidelines of 150 minutes of moderate-intensity physical activity per week ([Sport England, 2025](#)). However, disparities persist, with lower activity levels among women, those from lower socioeconomic groups, and Black and Asian communities. These findings highlight the need for targeted interventions to promote physical activity across diverse populations.

The [Sport England Active Lives Children and Young People Survey 2024](#) (age 5-16) provides valuable insights into physical activity levels among young people in Kirklees. Based on a sample of 503 respondents from the area, the survey found 51.7% of respondents met the Chief Medical Officers' guidelines of engaging in an average of 60 minutes or more of sport and physical activity daily, compared to 47.8% of children and young people nationally. Incorporating the children and young people (CYP) data alongside adult figures from the Active Lives survey supports a more consistent and comprehensive understanding of physical activity across different age groups, providing useful information for comparison.

This data is in contrast to the Kirklees Young People's Survey 2023 (though this is only based on responses from year 9-aged pupils) which found 15.1% of young people are meeting the guidelines of 60 minutes or more of daily physical activity (although 43.7% were active for 1-3 days, and 35.1% for 4-6 days). Despite the lower daily figure, many reported positive attitudes toward physical activity. Key findings show that 67% feel exercise is easy, 81% understand how to improve their skills, and 94% understand why exercise and sport is good for them ([Kirklees Council, 2023](#)).

Additionally, the data show that many young people actively travel to school and engage in a range of leisure activities. Leisure participation is highest for sports teams (38%), gym (24%), and sports teams or clubs (19%), reflecting the value of both structured and informal movement contexts. However, disparities exist. Young people with long-term health conditions or from more deprived areas report poorer physical health and reduced engagement. This aligns with broader research indicating that socioeconomic and health inequalities influence participation in physical activity ([Public Health England, 2020](#)). There remains a potential gap in knowledge, which underscores the need for Kirklees to develop a more locally grounded evidence base (through projects such as this) to regularly accurately assess and address the physical activity levels of all its children and young people.

Access may also be an issue for some. Batley Baths closed in 2022 due to the significant costs of running the centre, whilst Dewsbury Sports Centre closed in 2023, following the discovery of Reinforced Autoclaved Aerated Concrete (RAAC), a material known for its structural weaknesses.

Many people experience personal and psychological barriers to engaging in physical activity, regardless of weight status. These can include low self-confidence, fear of failure, embarrassment about appearance, and anxiety about being judged in public exercise spaces (Public Health England, 2020). Mental health challenges such as depression, stress, and trauma can further reduce motivation and energy levels, creating a cycle where inactivity exacerbates emotional distress (NICE, 2009). The Sport England (2022) Active Lives report also highlights that people often cite feeling too tired, not sporty enough, or lacking in confidence as key reasons for inactivity. Such barriers are particularly pronounced in those who have had negative past experiences with physical education or exercise, making re-engagement with movement a complex and emotionally loaded task.

How desk-based research informed the research design

The desk-based review identified a number of critical themes that shaped the direction of this research (and any future research), into physical activity and movement in Kirklees. These themes include:

1. Socio-economic inequality: Poverty and deprivation significantly reduce opportunities for physical activity due to structural barriers such as lack of facilities, unsafe environments and limited active transport options.
2. Health inequalities and demographic disparities: Activity levels vary widely by income, ethnicity, age, gender and health status, with South Asian communities, women, older adults and people with long-term conditions most at risk of inactivity.
3. Environmental and cultural barriers: Local access to affordable, safe, and culturally relevant spaces remains limited, particularly in deprived areas. Facility closures further restrict options for those already underserved.
4. Youth engagement and gender inclusion: While many young people show motivation to be active, young women and girls particularly face exclusion due to unwelcoming environments and limited youth-led design of active spaces.
5. Psychological and emotional barriers: Confidence, past negative experiences, mental health and fear of judgement all influence individual willingness and ability to engage in physical activity.

Based on these themes, a context-sensitive, equity-focused, and community-driven research project was designed that combined surveys, focus groups and active community engagement. The aim was to explore the lived experiences of

under-represented groups in key areas and ensure their voices directly shape the development of practical, inclusive solutions.

Surveys were used to gather broad insights into local behaviours, barriers, and motivations related to physical activity, while focus groups allowed for deeper exploration of personal and cultural experiences. Creative and engaging community workshops offered opportunities for residents to share their lived experiences and the realities of their everyday life.

The approach utilised recognised that meaningful change depends not only on addressing structural issues, like access to facilities and safe spaces, but also on understanding and responding to emotional and psychological barriers. Working closely with communities, the research helped to identify what support is truly needed to build confidence, increase motivation, and promote lasting, inclusive participation in physical activity and movement across Kirklees.

Research Methodology

Approach

BSA adopted a mixed-methods design to explore physical activity behaviours in Batley and Dewsbury, framed by the COM-B behavioural model (Capability, Opportunity, Motivation-Behaviour). The methodology combined:

- Surveys - paper (27 responses) and online (971 responses), capturing large-scale quantitative data on behaviours, barriers, and motivators
- Focus groups - nine groups with 59 participants, providing deeper insights into lived experiences and sensitive issues in Batley and Dewsbury
- Community workshops - with 69 residents, designed in collaboration with Kirklees Council and partners to amplify underrepresented voices through accessible, co-created activities

This triangulated approach provided both statistical breadth and qualitative depth, ensuring findings were robust, inclusive, and grounded in community realities.

Limitations

For transparency, several limitations are noted:

- Surveys: While accessible in paper and digital formats, response depth was limited. Of 8,985 visits to the online survey, only a fraction were fully or partially completed, reflecting common barriers such as consultation fatigue (exacerbated by the Dewsbury Sports Centre closure debate), participant fatigue, and the absence of incentives. Digital exclusion and literacy barriers may also have reduced representativeness.
- Focus groups: At risk of dominant voices, social desirability bias, and limited scalability. Four planned groups (two in-person, two online) were cancelled due to low or no engagement, highlighting challenges of availability and competing commitments.
- Community workshops: Engagement levels varied, and scalability remained limited compared to surveys.

- Scope and timing: Research was limited to Kirklees (May-August 2025), meaning seasonal patterns may affect findings. Broader or repeated studies would strengthen understanding across time. The three-month timescale and fixed budget constrained scope but were mitigated through careful planning, partnerships, and multiple participation formats (in-person, online, translated materials).

Mitigation measures

- Surveys designed with clear, accessible language and monitored for demographic balance
- Focus groups facilitated by trauma-informed researchers, using strategies to foster equitable participation
- Collaboration with trusted community partners supported engagement and trust-building
- Multiple formats (digital, paper, online, translated materials) ensured broad accessibility

Conclusion

While each method carried limitations, the mixed-methods design strengthened validity by cross-checking insights across sources. The project achieved a balance of inclusivity, rigour, and practicality within the defined timeframe and budget, creating a robust evidence base to inform local policy and service design. A detailed methodology can be found in the Technical report.

Thematic key findings across all data sets

The key findings are presented in thematic sections that draw on both quantitative survey data and qualitative insights from focus groups and community engagement. These strands of research are integrated so that each theme combines statistical evidence with accounts of lived experience. This approach offers a richer understanding of the issues, adding further intelligence and understanding to existing data and highlighting not only the scale and patterns of behaviour but also the perspectives and realities behind them. Given the geographic focus of the research, Batley and Dewsbury are highlighted throughout.

Important caveat: The overarching key findings outlined here are intended as an overview. They should be read in the context of the wider report, alongside sections such as the limitations, supporting evidence, and methodology. They provide an accessible way to digest the thematic findings, but are not exhaustive and should be treated as a high-level summary.

Analysis of the 'Kirklees Overall' sections should be read with the caveat that research responses were weighted more heavily towards North Kirklees, particularly Dewsbury and Batley, so overall findings may be impacted by this oversampling, although 52% of all survey responses were still from areas outside Batley and Dewsbury.

Each theme includes:

- **Headline findings:** a concise overview of the main insights.
- **Supporting evidence:** survey results, focus group and community engagement insights, and illustrative participant quotes.
- **Analysis and considerations:** reflections on what the findings suggest and factors to take into account in future planning or decision-making.
- **What the findings tell us:** a short reflection on how this impacts people's choices in physical activity.

The themes are presented in order of prominence and described separately for clarity. In practice, however, they overlap and interact. For example, affordability is closely tied to accessibility, while perceptions of safety are often linked to the quality of local infrastructure. The separation of themes is therefore a matter of organisation, not an indication that these issues stand alone. The considerations section later in the report brings these interconnections together.

1. **Current movement habits:** how people are currently active, their preferences, motivations, and everyday barriers.
2. **Environmental and infrastructure factors:** the role of parks, green spaces, travel routes, and the impact of facility closures.

3. **Accessibility and inclusion:** challenges linked to cost, disability, transport, digital exclusion, and gendered / culturally sensitive provision.
4. **Safety and trust:** perceptions of safety in public and community spaces, and the effect of closures on confidence.
5. **Motivations and social connection:** drivers such as health benefits, enjoyment, family and peer support, and community hubs.
6. **Cultural relevance and representation:** the importance of faith, gender needs, and intergenerational activity in shaping participation.
7. **Wellbeing and confidence:** the connection between physical activity, mental health, self-esteem, and engagement across age groups.
8. **Affordability and value:** the influence of cost, awareness of free or low-cost opportunities, and perceptions of inclusivity.
9. **Communication and awareness:** how people find out about opportunities, preferred channels, and gaps in local knowledge.

1. Current movement habits

Introduction

This theme explores how people across Batley, Dewsbury and wider Kirklees are currently engaging in physical activity, including the types of activities they prefer, the motivations that encourage participation, and the barriers that limit it. The findings provide a baseline picture of everyday movement patterns in the area and highlight differences across groups. By examining both the drivers and obstacles to participation, this section sets the context for understanding the wider environmental, social, and cultural factors that shape physical activity locally.

1.1 Batley

In Batley, motivations mirror Kirklees overall. Barriers include cost (46%), lack of local facilities (43%), and information gaps (31%).

“I’d love to join classes, but I don’t even know where they are advertised.”

“The parks are good, but sometimes I don’t feel safe if it’s later in the day.”

“Women-only sessions make such a difference - I feel comfortable and can actually enjoy being active.”

1.2 Dewsbury

In Dewsbury, 52% of survey respondents reported being active outdoors in local streets, and 48% use parks or public spaces. Active travel is higher here than in Batley, with 37% walking or cycling to get places. However, the closure of Dewsbury Sports Centre has had a major impact, with 41% of survey respondents saying they are less active since it closed. Cost and safety concerns remain strong barriers.

“Since the sports centre shut, I just don’t have anywhere reliable to go.”

“I walk to town most days, but it would be good to have somewhere indoors when the weather’s bad.”

“I miss the social side of going to classes - it’s not just about exercise, it’s about seeing people.”

1.3 Kirklees overall

In this data, the majority of residents engage in some form of physical activity, with only around 12% of survey respondents reporting no active days in the past week. Walking is the most frequently cited activity, with 68% of respondents saying they walk at least several times a week.

Informal settings dominate, with 72% of respondents being active at home and 61% in local streets or neighbourhoods. Parks and green spaces are also important, used by 49% of respondents. Enablers include access to parks, free or low-cost activities, and feeling safe. Barriers include lack of local facilities (45%), cost (41%), and unsuitable or unsafe spaces (36%). Focus group data also highlighted these preferences, enablers and barriers.

“I try to walk every day - it’s the only thing that fits around my work and kids.”

“I’d go to the gym if it was cheaper, but I just can’t afford the membership.”

“When the evenings get darker, I don’t feel comfortable walking outside, so I stop.”

Analysis and considerations

Informal activity is common among the majority of residents of Kirklees, with walking and everyday movement key, but long periods of sedentary time can also be common. Closures of local facilities, safety concerns, and affordability are identified as barriers to participation. Responses from Batley exhibit a pronounced

emphasis on affordability and information gaps; Dewsbury shows particularly acute impacts from the sports centre closure and stronger reliance on active travel.

What the findings tell us

People are motivated to be active, but qualitative responses indicate their choices are constrained by affordability, access to facilities, and seasonal safety concerns. Walking remains a default because it is free and flexible, but this over-reliance signals the lack of diverse, reliable, and affordable opportunities.

2. Environmental and infrastructure factors (parks, green space, travel routes, impact of facility closures)

Introduction

This theme explores how the physical environment, public spaces, transport routes, and availability of local facilities influence opportunities for people to be active in their daily lives. It considers the role of well-designed parks, accessible green spaces, and safe active travel routes in encouraging movement, alongside the challenges created by the closure of local sports centres and other community facilities. Together, these factors determine not only how easy it is for individuals to integrate physical activity into their routines, but also how equitable those opportunities are across different communities.

2.1 Batley

In Batley, 47% of survey respondents use parks weekly, but complaints about lighting and overgrown pavements are common. The closure of Batley Baths is repeatedly mentioned as a loss, with older residents particularly affected. Cycling infrastructure is minimal and residents call for safer routes.

“I stopped going out for walks at night because the lighting is so poor.”

“I used to go to Batley Baths for aqua classes - now I just don’t go anywhere.”

“The pavements are narrow and dangerous, especially if you’re pushing a buggy.”

2.2 Dewsbury

In Dewsbury, 48% of respondents use parks or public green spaces. Active travel is relatively higher, with more people walking to local destinations. The closure of Dewsbury Sports Centre is the single most cited issue, with 41% of survey respondents directly linking it to reduced activity.

“Since the sports centre closed, I’ve lost my routine and don’t exercise as much.”

“It was affordable and inclusive - now the alternatives are too far and too expensive.”

“I don’t feel the same sense of community without the sports centre.”

2.3 Kirklees overall

Parks and green spaces are used by nearly half of respondents, but 34% report they avoid them due to poor maintenance, antisocial behaviour, or inadequate lighting. Walking infrastructure is valued but 29% say pavements are in poor condition. Cycling is less common, with only 12% using it regularly. Lack of local facilities is cited by 45% as the biggest barrier.

“If the parks were better maintained, I’d take my kids there more often.”

“It’s hard to walk when the pavements are broken or blocked by cars.”

“More green ways and paths for running and cycling need to be properly made throughout the town. There’s a lot of runners and cyclists but no safe paths in many places to keep separate from cars and pedestrians.”

Analysis and considerations

Improving the quality, safety, and maintenance of public spaces would increase informal activity. Replacing or restoring leisure facilities could support participation when the local environment does not. Safer, connected walking and cycling routes would support active travel.

What the findings tell us

The quality and availability of the local environment directly shape participation. Poor lighting, broken pavements, and neglected parks push people away from outdoor activity. Facility closures have removed trusted, structured spaces,

meaning choices are restricted to informal and sometimes unsafe options. Where safe, well-maintained infrastructure exists, people are more active.

3. Accessibility and inclusion (cost, disability, transport, digital exclusion, gendered / culturally sensitive provision)

Introduction

This theme considers the social and structural factors that shape access to physical activity, highlighting how financial pressures, digital exclusion, disability, transport, and cultural or gender-related needs influence participation. The cost of memberships, equipment, or travel often prevents those on lower incomes from engaging, while increasing reliance on online booking and communication excludes individuals without internet access, digital skills, or confidence.

Disabled people face additional challenges, including inaccessible environments, limited adapted opportunities, and a lack of specialist support, and transport issues can further restrict the ability to reach parks, leisure facilities, or community classes.

At the same time, the availability of women-only spaces is vital in providing safe and welcoming environments for groups who may otherwise feel excluded.

Addressing these interconnected barriers is essential to ensuring that opportunities for movement are equitable, inclusive, and responsive to the diverse needs of the population.

3.1 Batley

In Batley, 46% of respondents identify cost as a barrier. Digital exclusion is reported more often here than in Dewsbury, especially among older residents. There is strong demand for women-only sessions and safe community spaces.

“I can’t book things online, so I just don’t go.”

“Women-only groups give me confidence - I wouldn’t go otherwise.”

“The buses don’t run when I need them, so I miss out.”

3.2 Dewsbury

In Dewsbury, issues with accessibility are reported more frequently by those with a disability or health condition, with 25% of respondents stating that facilities do not meet their needs. Transport costs and the closure of the sports centre exacerbate barriers. Women-only opportunities are valued but limited.

“I use a wheelchair and most places just aren’t suitable.”

“Without the sports centre, everything is further away and costs more to get to.”

“Women-only sessions are essential - they make me feel respected and safe.”

Focus group findings also support the theme of access and inclusion:

“My diabetes is getting worse but the options just aren’t there for me.” (Resident with long-term health condition)

3.3 Kirklees overall

Cost is cited by 41% of survey respondents as a barrier, with free/affordable options mentioned as an enabler by 56%. Digital exclusion remains a challenge: 28% struggle with online booking systems. 21% of respondents reported a disability or long-term condition, and many highlighted lack of suitable facilities. Women-only provision is valued, especially among South Asian women, but availability is limited.

“It’s not just about the money - the systems are hard to use if you’re not confident online.”

“I need somewhere accessible with proper facilities, otherwise I just can’t take part.”

“The women-only classes are brilliant, but there aren’t enough of them.”

Analysis and considerations

Affordability, disability access, transport, and culturally appropriate provision are regularly cited as barriers. Digital inclusion should be addressed alongside physical access. This points to the importance of co-design with representative contributions from the community as key to any future service development.

What the findings tell us

Opportunities exist, but they are not equally accessible. Cost, disability access, transport, and digital exclusion all shape who can take part. Women-only provision and culturally sensitive spaces make the difference between participation and exclusion for many. People's choices are narrowed when systems or environments are not designed inclusively.

4. Safety and trust (perceptions of safety in public and community spaces, and the effect of closures on confidence.)

Introduction

This theme explores how perceptions and experiences of safety influence people's willingness and ability to be active in public spaces and facilities. Feeling safe is a key determinant of whether individuals choose to walk, cycle, or use parks, leisure centres, and other community venues, and concerns about crime, antisocial behaviour, poor lighting, or traffic can all discourage participation.

For some groups, including women, older adults, and young people, safety concerns may be especially pronounced and limit access to otherwise available opportunities. Accessibility features such as secure transport links, well-maintained infrastructure, and the visible presence of staff or community wardens can help foster confidence and reassurance.

Understanding these perspectives is vital in addressing barriers and designing spaces and programmes that feel welcoming, inclusive, and protective for all members of the community.

4.1 Batley

In Batley, safety concerns are focused on poor lighting and antisocial behaviour. Women in focus groups stressed the importance of group-based or women-only provision.

"It's not safe to walk alone, especially in the dark."

"We need better lighting and security in the parks."

"I only feel comfortable if I go with other women."

4.2 Dewsbury

In Dewsbury, similar themes arise, with additional concerns about antisocial behaviour in parks. The absence of the sports centre means residents have fewer safe indoor options.

"I don't take my kids to the park after school because of what goes on there."

"The sports centre was safe and supervised - now we've lost that."

"I wish there were more family-friendly, safe spaces."

Focus group participants also stated:

"There was a stabbing in Crow Nest Park... people don't feel safe."

"Antisocial behaviour puts me off going out. The town's [Dewsbury] not what it used to be."

"If it's dirty or overgrown, it doesn't feel safe, even if it is."

4.3 Kirklees overall

Feeling safe is identified as an enabler by 54% of survey respondents. 32% said safety concerns prevent them from being more active. Residents called for better lighting, visible staff or patrols, and clean, well-maintained spaces in their responses. Facility closures are linked to a reduction in safe, supervised options.

"I don't go out in the evenings because I don't feel safe."

"If there were more staff around, I'd use the facilities more."

"Reduce speeding traffic, kids on motorised scooters, ensure dog owners clean up after their dogs."

Analysis and considerations

Safety improvements in public spaces, staffed hubs, and targeted women-only/group activities are key. Facility closures have removed safe spaces and need to be addressed.

What the findings tell us

Safety concerns are a key deciding factor. Where people don't feel safe, they don't take part, especially women, families, and older residents. The closure of facilities has led to some people feeling that a safe, supervised option has been removed,

leaving gaps in trusted spaces. Choices about activity are not just about opportunity, but about whether people feel confident and secure in taking part.

5. Motivations and social connection (health benefits, enjoyment, family and peer support, community hubs)

Introduction

This theme explores the reasons why people choose to be active and the social contexts that help sustain their participation. While many are motivated by the physical and mental health benefits of regular movement, enjoyment and fun are equally important in encouraging people to keep active over time.

Family and friendship networks often play a key role, with shared activities creating accountability, encouragement, and a sense of belonging. Together, these factors highlight that motivation is not only individual but also strongly shaped by social support and community environments that make activity a valued and enjoyable part of daily life.

5.1 Batley

In Batley, 82% of survey respondents cited physical health as a motivator and 62% mentioned enjoyment - a higher proportion than Kirklees overall. Group-based opportunities like walking clubs are valued.

"I only started walking because my neighbour asked me to join her."

"The local group keeps me going - it's about friendship as much as exercise."

"It's nice to feel part of something."

5.2 Dewsbury

In Dewsbury, 84% of respondents cited physical health, 76% mental health, and 52% social connection. The closure of the sports centre was linked to the loss of social routines in free-text responses.

"The centre was where I met people - now I feel isolated."

"I used to go swimming with friends, but now it's not possible."

"Exercise helps my confidence - I feel better when I do it."

Focus group participants also emphasised the importance of social connections:

“It’s not just about the exercise. It’s about having someone to go with, someone to talk to.”

“Getting on the bus and having a chat, it’s really important for the older generation.”

5.3 Kirklees overall

Health benefits are the strongest motivator, with 81% of survey respondents citing physical health and 74% mental health as key benefits. 48% said they gain confidence/self-esteem from activity, and 46% said they would be more active if they had someone to go with.

“Being active keeps me sane - it’s good for my mental health.”

“I go because my friend goes - it keeps me motivated.”

“I wish there were more community groups - it’s hard on your own.”

Analysis and considerations

Promoting health and enjoyment that can be gained from physical activity, alongside building social networks, is key to building residents’ motivation alongside ‘classic’ messaging relating to physical and mental health. Community hubs and group-based programmes support sustained participation in alignment with social connection.

What the findings tell us

Motivation is sustained by health benefits, enjoyment, and social ties. People are more likely to stay active when they do it with friends, family, or in community groups. Where social connection is missing, activity often drops away. Choices are influenced by whether opportunities provide not only exercise, but also friendship, routine, and belonging.

6. Cultural relevance and representation (respecting faith, gendered needs, intergenerational activity)

Introduction

This theme explores the influence of cultural norms, faith practices, and gendered needs on how people engage with physical activity, and the role of representation in shaping participation. Cultural expectations and traditions can determine which activities are considered appropriate, how much time is available, and whether certain spaces feel welcoming. Faith practices may affect clothing, timings, and access to facilities, while gendered needs such as women-only provision can remove barriers and create more inclusive environments.

6.1 Batley

In Batley, South Asian heritage strongly shapes demand for culturally sensitive provision. Trusted community venues and women-only spaces are emphasised.

“I feel more comfortable in places I know and trust.”

“Women-only sessions let me take part without worrying.”

“Our community wants things that fit with our culture.”

6.2 Dewsbury

In Dewsbury, similar needs to those in Batley are reported (reflecting the population), with strong emphasis on faith-aligned opportunities.

“Faith-friendly spaces make all the difference.”

“We used to go as a family – it was good for all of us.”

“It’s important to feel represented in what’s on offer.”

6.3 Kirklees overall

Perceptions of cultural value is strong, with 63% agreeing that being active is important in their culture. Women-only sessions and faith-sensitive provision are particularly valued. Family bonding and intergenerational activity are also important.

“In my culture, health is important – we just need the right spaces to do it.”

“I would never attend mixed classes, but I love women-only ones.”

“We enjoy activities we can do as a family.”

Analysis and considerations

Designing culturally sensitive, gender-appropriate programmes and using venues that are trusted and seen as inclusive by a wide range of audiences will build confidence across potentially under-represented groups.

What the findings tell us

Cultural and faith-based needs strongly shape engagement. Where provision respects faith practices, gendered needs, and family participation, people are far more likely to get involved. Without culturally relevant opportunities, many simply opt out. Choices depend on whether activities feel welcoming, appropriate, and representative of people’s identities and values.

7. Wellbeing and confidence (connections between physical activity and mental health, self-esteem, and intergenerational activity)

Introduction

This theme examines the link between movement and wellbeing, recognising that confidence, age, and life stage all play important roles in shaping how people engage in physical activity. Younger people may be motivated by social connection or enjoyment, and older adults by maintaining independence and health.

At every stage, confidence influences participation, with those who feel less capable or supported often facing greater barriers to becoming or staying active.

7.1 Batley

In Batley, older residents value routine activities, while mid-life groups are split between very active and inactive. Barriers include health, confidence, childcare, and cost.

“It’s hard with kids - I don’t have time for myself.”

“I used to do classes but lost confidence after being ill.”

“Simple things like walking with friends really help my mood.”

7.2 Dewsbury

In Dewsbury, responses from residents indicated that wellbeing is strongly linked to routine, and the sports centre closure disrupted this for many, based on survey and qualitative feedback.

“I used to go three times a week - it kept me going.”

“I feel worse since it shut, I’ve lost my confidence.”

“It helped me with my recovery - now I’m back to square one.”

Focus group conversations also recognised the value of exercise for wellbeing:

“Exercise is addictive and really important for me, it’s about my physical and mental wellbeing.”

7.3 Kirklees overall

74% of survey respondents said activity improves their mental health, and 48% said it boosts confidence. Older adults report high activity levels, but also a high amount of time spent sedentary. Younger groups show more variability.

“When I exercise, my mood lifts instantly.”

“It makes me feel better about myself - more confident.”

“It helps me cope with stress.”

Analysis and considerations

Activities that are low-barrier and confidence-building support both wellbeing and participation. Perceptions of physical activity opportunities as safe, social and compatible with routines are especially important for residents.

What the findings tell us

Activity is deeply tied to mental health, confidence, and self-esteem. When opportunities are disrupted, as in Dewsbury with the sports centre closure, people voiced that their wellbeing suffers. Confidence barriers, especially after illness or inactivity, reduce choices further. People are most likely to take part when opportunities are low-barrier, routine, and supportive of mental as well as physical health.

8. Affordability and value (cost barriers, awareness of free/low-cost options, perceptions of inclusive provision)

Introduction

This theme explores how financial factors shape participation in physical activity, focusing on the barriers created by cost, the availability and visibility of free or low-cost options, and people's perceptions of value. Rising living costs can make paid facilities, memberships, and classes unaffordable for many households, while a lack of awareness about existing community or low-cost opportunities means that some residents miss out on accessible provision.

At the same time, perceptions of value, whether activities are seen as worthwhile, good quality, and inclusive, play an important role in decisions about participation. Understanding these dynamics is essential to reducing inequalities and ensuring that opportunities for movement are affordable, appealing, and open to all.

8.1 Batley

In Batley, cost is mentioned as a potential barrier by 46% of survey respondents. Residents expressed a preference for low-cost community options.

"The sessions are too expensive - I just can't go."

"When things are subsidised, I join, but otherwise it's not possible."

"Even small costs add up when you're on a budget."

8.2 Dewsbury

In Dewsbury, concerns relating to cost are felt by respondents to be compounded by the sports centre closure, forcing residents to travel further and pay more.

"It used to be affordable, but now I have to travel and pay more."

"The alternatives are too expensive."

"I stopped going because of the costs."

Cost was also a factor that came up among focus group participants, with one stating:

"Even when the sessions are free, getting there isn't. If the bus doesn't turn up, I'm stuck."

8.3 Kirklees overall

Cost is cited by 41% of survey respondents as a barrier, and 56% said free / affordable options enabled them to be more active. Transport and parking costs also add to barriers.

“I can’t justify paying for classes when money is tight.”

“Free activities are the only way I can join in.”

“Even parking charges stop me from going.”

Analysis and considerations

Expanding free/low-cost provision, transparent pricing, and concessions would directly address the concerns and issues raised by residents. More widely, travel costs should also be considered as a barrier to participation in some activities, and mitigation strategies developed.

What the findings tell us

Cost can be a decisive barrier. People want to be active, but if activities are expensive, they are simply not an option for many. Even small costs like parking or transport can tip the balance. Free or low-cost provision expands choice dramatically, while closures that force people to travel further reduce affordable options. Affordability is central to whether people can choose to participate.

9. Communication and awareness (finding out about local opportunities, preferred channels, gaps in knowledge)

Introduction

This theme considers where residents hear about opportunities to be active and the communication gaps that persist across different groups. It highlights the dominant channels people rely on, such as word of mouth, social media, and local networks, while recognising that not everyone has equal access to these sources. By examining both the strengths and areas for development of current communication approaches, this theme highlights the importance of accessible, inclusive, and varied messaging to ensure that all residents are aware of and able to take part in available opportunities.

9.1 Batley

In Batley, patterns mirror the Kirklees-wide picture, but hyper-local channels play a bigger role. WhatsApp groups, libraries, and places of worship are especially important. Residents highlight that heavy reliance on digital promotion risks excluding older and digitally limited groups.

“We share information in our WhatsApp group - that’s how I hear.”

“I’d like more noticeboards in local shops.”

“The council website isn’t useful - it’s too hard to navigate.”

9.2 Dewsbury

In Dewsbury, communication challenges are compounded by the closure of the sports centre, which previously acted as a central information hub. Without it, residents report feeling disconnected from updates about activities.

“I used to find out at the sports centre - now I don’t hear anything.”

“If it’s not on social media, I don’t know about it.”

“We need one place to check what’s on.”

9.3 Kirklees overall

Social media (58%) and word of mouth (53%) are the main channels through which respondents stated they hear about opportunities. Friends and family play an important role in sharing information. Around 29% of respondents said they do not hear about opportunities at all, suggesting significant communication gaps. Older residents and those who are digitally excluded rely more on printed posters, flyers, and GP referrals.

“I only know about things if someone tells me.”

“I’m not online, so I miss out on information.”

“Posters in the community centre are how I find out.”

Analysis and considerations

A blended communication strategy is required to ensure all residents have the opportunity to find out about what’s going on locally. Social media and word of mouth should remain central, but non-digital routes should be strengthened to reach those excluded from online channels. Printed flyers, noticeboards, GP and community centre referrals, and places of worship can extend reach. Information should be multilingual,

accessible, and easy to navigate. Consideration should also be given to establishing a central, regularly updated hub (physical or digital) to reduce the proportion of residents who feel they are not hearing about opportunities.

What the findings tell us

People cannot choose what they don't know about. Gaps in communication, particularly for those offline, mean many miss opportunities. Word of mouth, trusted community venues, and printed materials remain critical, while social media plays a major role for others. People reported through the survey and focus groups feeling disconnected from up to date information. Choices depend on whether information is clear, accessible, and tailored to local communities.

Conclusion and synthesis

Taken together, the thematic key findings present a multi-layered picture of how people across Kirklees, Batley, and Dewsbury experience, access, and value opportunities for physical activity. The findings show not only the prevalence of particular behaviours and barriers, but also the deeper social, cultural, and environmental factors that shape them.

What the findings tell us overall

- **People value accessible community facilities:** Beyond supporting exercise, people valued having local facilities, relating them (or the absence of them) to pride in where they live and strengthening of social connections and community life. This was especially evident in the findings from Dewsbury, though it was also voiced by smaller numbers of residents in Batley. A dedicated centre with swimming provision in this area would meet a clear community need, offering valued opportunities for activity, wellbeing, and social connection.
- **People want to be active:** Responses from residents indicated many were regularly building walking and informal movement into their daily and weekly routines, demonstrating a motivation among many residents to be active, especially for health and wellbeing purposes. But current choices are limited for many by affordability, access to facilities, and safety concerns.
- **The environment matters:** When pavements are broken, lighting is poor, or parks feel unsafe, people choose not to use them. Where facilities close, whole communities feel the loss of reliable, trusted spaces.

- **Inclusion is decisive:** If opportunities are not affordable, accessible to people with disabilities, or sensitive to cultural and gender needs, then opportunities for participation are reduced. Choices are heavily shaped by whether provision feels welcoming and usable.
- **Social connection sustains activity:** People are more likely to remain active when it is fun, social, and part of community life. Without that, motivation drops.
- **Wellbeing and confidence are intertwined:** Activity boosts mental health and self-esteem, but when opportunities are disrupted, wellbeing suffers, making it even harder for people to re-engage.
- **Information gaps reduce choice:** Many people miss out simply because they don't know what's available. Without clear, accessible communication channels, especially offline, opportunities are invisible to those who could benefit most.

Actions for consideration, emerging from residents' responses

1. **Restore / replace closed facilities:** Particularly to support residents in Dewsbury and Batley, where the loss of leisure centres (particularly swimming facilities) significantly impacts on participation, wellbeing, and community connection.
2. **Invest in safe, high-quality environments:** Better lighting, maintained pavements, clean and secure parks, and safe cycling/walking routes are all critical to enable everyday movement.
3. **Make affordability central:** Expand free and low-cost provision, address transport and parking costs, and ensure transparent pricing so financial barriers do not exclude people.
4. **Design for inclusion and cultural relevance:** Co-design with communities to create accessible, culturally appropriate, women-only, and family-oriented opportunities that feel welcoming for all.
5. **Build social connection into provision:** Prioritise group-based and community hub models that combine exercise with friendship, belonging, and peer support.
6. **Strengthen communication channels:** Create a blended approach using digital, print, community venues, and word of mouth, with consideration of multilingual, clear, and accessible messaging. Establishing a central, trusted hub for information is a key need.

In practice, these priorities overlap and reinforce one another. For example, affordable provision must also be inclusive, safe, and well-communicated to be effective.

Addressing them together through a whole system approach, rather than in isolation, is essential to broaden choice, remove barriers, and enable more people in Kirklees, Batley, and Dewsbury to engage in physical activity that supports their health, wellbeing, and sense of community.

Considerations for Kirklees

A whole systems approach

The following considerations are informed by the survey findings, focus groups and community engagement and link to the established evidence base on physical activity and movement promotion. They require a whole systems approach mapped to the COM-B model (Capability, Opportunity, Motivation; [Michie et al., 2011](#)) as well as the [WHO Global Action Plan on Physical Activity \(GAPPA\) \(World Health Organization, 2018\)](#) to ensure targeted, evidence-based and globally aligned interventions. Achieving these outcomes will require coordinated action, with partners, agencies, and individuals each playing a vital role in driving sustained change.

Important caveat: The research underpinning these recommendations was primarily carried out in Batley and Dewsbury, focusing on a valid, though limited, subset of these communities. In these areas, survey response levels and community engagement through qualitative research were particularly strong. As a result, the findings offer robust insights into local barriers and opportunities. However, distinct challenges in other parts of Kirklees mean that the results may not fully capture the experiences of all residents. While some themes clearly align with existing research, further work would be needed to test how well these insights apply across other localities.

Key actions for consideration

Local assets required to meet community need and enhance civic pride – A leisure centre in Dewsbury as a community anchor

A dedicated leisure centre with swimming provision in Dewsbury would address a clear community need, offering valued opportunities for physical activity, wellbeing, and social connection. Beyond its role in exercise, such a centre would stand as a civic asset - fostering pride in place and strengthening the fabric of community life.

While residents in Batley also expressed need for replacement facilities for the former swimming pool, albeit to a lesser degree, this underlines the importance of mapping both provision and need across the two towns to ensure fair and effective investment. A new, multi-purpose facility in Dewsbury should therefore be prioritised, reflecting the strongest and most consistent feedback from North Kirklees residents.

To maximise impact, there is strong evidence in favour of co-located community hubs where activity facilities are integrated with shops, cafés, childcare, health services,

libraries, and job centres. More than 61% of survey respondents said they would be more likely to take part if venues were connected to everyday destinations ([Hunter et al., 2015](#)). Embedding leisure within the routines and requirements of daily life makes participation easier, more habitual, and more inclusive.

To progress, partners should collaborate on a formal feasibility process that considers site options, scope, capital and revenue models, and opportunities for integration with other services. Programming must also reflect diverse needs across the district to ensure inclusivity and sustainability.

By doing so, the facility would not only respond to community priorities but also align with evidence-based approaches to health and wellbeing ([Brownson et al., 2001](#)). Framing development through COM-B (Opportunity/Motivation) and GAPPA (Active Environments/Active Systems/Active Societies) reinforces the importance of designing places that embed activity in everyday life, build community pride, and strengthen social infrastructure.

Further actions for consideration

- **System partners should consider ways in which safety and accessibility in parks, paths, town centres and greenways could be improved** through enhanced lighting, regular maintenance and vegetation management; for example, in areas such as Wilton Park Woods and Crow Nest Park. Safety concerns and environmental neglect were repeatedly cited as barriers, particularly by women and older adults. Actions may include lighting, wayfinding, environmental maintenance, and community activation. Responsibility will lie across the whole system - Council services, police, transport providers and community organisations. Evidence shows that improved physical environments increase perceived safety and encourage active use ([Foster et al., 2014](#)). (*COM-B: Opportunity; GAPPA: Active Environments*)
- **System partners should establish / expand low-cost or free activities / activity groups that support more easily accessible activity opportunities and social connection.** Nearly half of survey respondents (48.76%) indicated they would be more active if accompanied by someone, highlighting the role of social support in sustaining activity ([Kirklees Physical Activity Survey, 2025; Smith et al., 2017](#)). Consideration should be given to creating opportunities that strengthen social ties around physical activity. Partners may support group-based activities, buddying schemes, community champions and micro-grants for resident-led groups. (*COM-B: Opportunity/Motivation; GAPPA: Active Societies/Active People*)

- **Improved targeting and tailoring of multi-channel communications to engage all audience groups**, such as WhatsApp and Facebook for 35-54-year-olds, printed newsletters and GP referrals for older adults, etc. Tailored messaging improves reach and engagement in diverse populations (Bauman et al., 2012). (COM-B: *Capability/Opportunity*; GAPP: *Active Systems/Active Societies*)
- **The system should co-design activities and programmes that meet the needs of different cohorts**. This includes provision of women-only and culturally sensitive sessions, such as female-only swimming and gym classes, particularly in communities where gender norms influence participation. This was identified as a key enabler for South Asian women in the qualitative data and aligns with prior findings on culturally responsive programming (Jepson et al., 2012). This will require coordination between the Council, facility operators and community groups. (COM-B: *Opportunity/Motivation*; GAPP: *Active People/Active Societies*)
- **Consider the introduction of affordable access schemes** including reduced-price memberships, pay-as-you-go models and transport subsidies for low-income households. Cost was the most frequently cited economic barrier to participation (38% of respondents) and is a critical determinant of engagement (Ding et al., 2011). (COM-B: *Opportunity*; GAPP: *Active Systems/Active Environments*)
- **Improve accessibility of booking systems** (such as for KAL and related providers) by simplifying user interfaces and offering multilingual support in Gujarati, Urdu and Punjabi, amongst other languages. This addresses digital exclusion and language barriers (Kaihlani et al., 2022). (COM-B: *Capability/Opportunity*; GAPP: *Active Systems*)
- **Consider expanding use of community and school facility access outside school hours for affordable adult and youth activities**. Community sports halls and school gyms are underutilised assets with high potential for local provision (Sport England, 2020). (COM-B: *Opportunity*; GAPP: *Active Environments/Active People*)
- **Adopt and apply active design principles to all new developments**, to ensure that travel infrastructure investment and planning considers connected, safe active travel infrastructure; (including segregated cycle lanes, widened pavements and safe crossings); high quality, safe, well-presented and maintained local access to play areas and public open space. This helps remove safety, civic pride and affordability barriers to walking, cycling and informal play and activity opportunities (Pucher & Buehler, 2012). (COM-B: *Opportunity*;

GAPPA: Active Environments/Active Systems)

Potential opportunities

These considerations should be phased strategically according to levels of complexity and capacity. As part of this, measures that can be identified as (relatively) low-cost and straightforward to implement should be prioritised in order to display visible progress to build trust and momentum, while more complex actions that support systemic change and infrastructure development are being planned and resourced.

Ongoing evaluation using the COM-B framework and benchmarking against [GAPPA](#) will ensure interventions remain responsive to evolving community needs and contribute to the global target of reducing inactivity by 15% by 2030 ([World Health Organization, 2018](#)). Using a whole system approach ([Kirklees Council, 2024](#)) is vital in ensuring communities can thrive.

Localised considerations for Batley and Dewsbury

While this research provides a broad perspective on physical activity and movement, the strongest engagement and most valuable insights came from communities in Batley and Dewsbury. Accordingly, the following considerations focus specifically on these two localities, reflecting their distinct challenges and opportunities, though some of which align closely with considerations for Kirklees as a whole. They draw on survey data, focus group discussions, and community workshops, and are grounded in the voices of residents to ensure that lived experience remains central.

The research shows that residents of Batley and Dewsbury share common priorities, particularly: affordable, inclusive facilities; culturally sensitive provision; safe and welcoming spaces; social connection; and better communication. The main differences are in emphasis: Batley residents placed more emphasis on safer parks / green spaces and group-based activities, while Dewsbury residents focused on active travel routes and youth-friendly provision. To fully reflect residents' views shared, we have summarised shared actions for considerations below, and specific considerations on the following pages.

Decision makers and system partners could reflect on and consider the following approaches:

Translating qualitative insights into action

- Communication and engagement should be multi-channel, making use of noticeboards, GP surgeries, libraries, schools, and face-to-face contact to reach those less digitally engaged, while maintaining online communication for digitally active groups.
- Tackling affordability requires more than low-cost provision; subsidies, travel support, and sensitivity to relative affordability are key. Even small costs can exclude those with limited disposable income or competing priorities ([Institute of Health Equity, 2020](#); [Sport England, 2022](#)).
- Programmes should be co-designed with full community representation, include women-only options, and be delivered in trusted venues such as mosques or day centres. Embedding inclusion and cultural sensitivity into planning and delivery will strengthen uptake.
- Social connection should be prioritised through buddy schemes, intergenerational activities, and group exercise opportunities. Raising the visibility of existing schemes could further increase participation.
- Low-cost, low-impact opportunities such as walking groups, gentle exercise classes, and community swimming should be expanded, aligning with residents' emphasis on physical and mental wellbeing.

- Addressing safety concerns requires investment in physical environments, better lighting, pavements, cleanliness, and visible community presence, alongside trust-building initiatives, rather than relying solely on policing.
- Reinvestment in local facilities, or affordable and accessible alternatives, is critical to restoring opportunities, reducing inequalities, and rebuilding community trust.

Considerations for Batley

These considerations are based on the findings of the research and reflect the priorities and lived experiences shared by residents in Batley. They outline clear areas where system partners can take the lead, along with local authorities, leisure providers, and community organisations.

Provision of accessible facilities

The closure of Batley Baths was repeatedly identified as a turning point in local activity levels, with many residents reporting that they had stopped attending altogether since its closure.

- “We’ve got nowhere central to go anymore. Batley Baths was the heart of the community.”
- “It’s too far and too expensive to travel elsewhere, people just stopped going when it closed.”

System partners could:

- Note requests for a multi-use facility in Batley and work alongside pre-existing assets in Batley to support access to physical activity. System partners should also advocate for investment in a multi-use facility that meets the needs of residents in both Batley and Dewsbury.
- Work with planners and leisure services to ensure affordability (low-cost membership and pay-as-you-go models) and inclusivity are built into the business case for new and existing facilities.
- Embed monitoring frameworks so the facility can evidence long-term health and wellbeing benefits.

(COM-B: Opportunity/Motivation; GAPP: Active Environments, Active Systems)

Enhance women-only and other culturally sensitive provision

Female-only swimming and gym sessions were consistently described as key enablers, particularly for South Asian women.

- “I’d go if it was just for women, we need spaces where we feel comfortable.”
- “For us, privacy matters. If there was swimming just for women, I’d be there every week.”

System partners could:

- Co-design women-only sessions with local women’s groups, mosques, and cultural organisations.
- Secure ongoing funding to subsidise these sessions, ensuring cost is not a barrier.
- Train staff in cultural competence and embed gender-sensitive policies across provision.

(COM-B: Opportunity/Motivation; GAPP: Active People, Active Societies)

Improve safety and usability of parks

Wilton Park Woods and other green spaces in Batley are underused due to safety concerns, particularly after dark.

- “I don’t walk there in the evenings, it feels unsafe and too overgrown.”
- “If the paths were lit and kept tidy, I’d take my kids there more often.”

System partners could :

- Collaborate with parks, planning, and community safety services to audit lighting, pathways, and maintenance.
- Fund community-led stewardship schemes (e.g., volunteer wardens, “friends of the park” groups) to build ownership and visibility.
- Promote parks as safe, welcoming spaces through campaigns that feature local families and diverse role models.

(COM-B: Opportunity; GAPP: Active Environments)

Promote group-based and social activities

Many residents highlighted the importance of social connection and peer support for motivation.

- “I’d go more if I had someone to go with - it’s hard on your own.”
- “We used to walk together as a group, and that made me feel safer and more motivated.”

System partners could:

- Grow and raise awareness of community walking groups, gardening clubs, and buddy schemes.
- Work with local voluntary and faith-based organisations to embed these activities where trust already exists.
- Develop “community connectors” roles to link isolated residents with groups, addressing loneliness alongside inactivity.

(COM-B: Opportunity/Motivation; GAPP: Active Societies, Active People)

Tailor communication to reach diverse groups

A number of residents expressed frustration that opportunities were poorly advertised or difficult to find out about.

- “You only hear about things if you already know someone. It’s not advertised well.”
- “If it came through my GP or a community centre, I’d be more likely to hear about it.”

System partners could:

- Map current communication channels and co-design new strategies with residents to identify the most trusted routes (e.g., GP surgeries, schools, community centres).
- Ensure information is translated and culturally tailored, particularly in Urdu, Punjabi, and Gujarati.
- Pilot digital approaches (e.g., WhatsApp broadcast groups) while maintaining offline methods for digitally excluded groups.
- Build evaluation into campaigns to understand reach and effectiveness by community group.

(COM-B: Capability/Opportunity; GAPP: Active Systems, Active Societies)

Considerations for Dewsbury

These considerations align to the findings of the research and reflect the priorities and lived experiences shared by residents in Dewsbury. They outline clear areas where system partners could work in partnership with local authorities, leisure providers, and community organisations to ensure a coordinated response.

Replace Dewsbury sports centre

The closure of Dewsbury Sports Centre has had a major impact on participation, with residents reporting that they have lost a central, accessible, and affordable venue.

- *“Since the Sports Centre closed, I’ve stopped going altogether. There’s just nothing nearby anymore.”*
- *“It was where everyone went, now we’ve got to travel or not go at all.”*

System partners could:

- Work together to progress the development of a new, multi-purpose leisure facility in Dewsbury. A formal feasibility process will be required to assess local data and evidence, site options, scope, capital and revenue models, and opportunities for co-location with other services. This would respond to the strongest and most consistent feedback from North Kirklees residents, while ensuring that programming reflects diverse needs across the community.
- Work with planning and leisure services to ensure affordability (reduced-price memberships and flexible payment options).
- Embed inclusive programmes from the outset, such as women-only sessions, youth provision, and accessible facilities for disabled residents.

(COM-B: Opportunity/Motivation; GAPP: Active Environments, Active Systems)

Create safe and connected active travel routes

Residents highlighted the need for safe walking and cycling infrastructure, linking neighbourhoods with the town centre, schools, and key destinations.

- *“I’d cycle if there were proper lanes, but the roads just aren’t safe.”*
- *“It should be easy to walk into town, but the crossings feel dangerous.”*

System partners could:

- Partner with transport and highways teams to design safe, connected active travel routes.

- Engage local schools and employers in promoting active commuting through workplace and school travel plans.
- Campaign for improvements such as segregated cycle lanes, widened pavements, and safe pedestrian crossings.
- Monitor use and health outcomes to demonstrate impact and build the case for wider investment.

(COM-B: Opportunity; GAPP: Active Environments, Active Systems)

Expand youth-friendly provision

Young people in Dewsbury reported a lack of affordable and accessible activities, leading to disengagement and inactivity.

- *“There’s nowhere for us to go that doesn’t cost too much, we just hang around.”*
- *“I’d do sports if there were cheap sessions for people my age, but it’s all too expensive.”*

System partners could:

- Collaborate with schools, youth services, and voluntary groups to expand access to sports halls, gyms, and pitches outside of school hours.
- Fund subsidised youth sessions that are affordable and culturally sensitive, designed in partnership with young people themselves.
- Train and employ local young people as peer leaders or activity champions to build trust and relevance.
- Connect provision to wider youth health and wellbeing programmes, tackling inactivity alongside mental health, diet, and social inclusion.

(COM-B: Opportunity/Motivation; GAPP: Active People, Active Societies)

Improve awareness of existing opportunities

Some residents reported not knowing about current opportunities in Dewsbury, even when provision was available. This suggests gaps in communication and engagement.

- *“Things are happening but you don’t hear about them until they’ve gone.”*
- *“If someone told me through the GP or the school, I’d probably go.”*

System partners could:

- Map communication pathways and co-design strategies with residents to understand how best to reach different groups.

- Integrate information about physical activity opportunities into existing health and care pathways, such as GP referrals and social prescribing.
- Use both digital platforms (WhatsApp, Facebook) and offline methods (community centres, places of worship, printed materials) to maximise reach.
- Track and evaluate campaign effectiveness by demographics and geography.

(COM-B: Capability/Opportunity; GAPPA: Active Systems, Active Societies)

Conclusion

The priorities identified in Batley and Dewsbury reflect the lived realities of local residents and provide clear direction for immediate, practical action. While the specific needs of each town differ, the common themes, affordable and inclusive facilities, safe and well-maintained public spaces, culturally sensitive provision, and the importance of social connection, highlight where co-ordinated action across Kirklees could have the greatest impact.

These findings demonstrate that having accessible local infrastructure, including leisure centres, are very important to our communities and provide ways to increase physical activity as well as provide opportunities for social connection. The findings also show that improving physical activity is not solely about infrastructure, but also about ensuring opportunities are accessible, inclusive, and meaningful for the people who need them most. By grounding interventions in the COM-B model, system partners can address the underlying drivers of behaviour change, while alignment with the WHO Global Action Plan on Physical Activity (GAPPA) ensures that local action is in line with a strong international evidence base, and contributes to global ambitions to reduce inactivity and health inequalities.

Ultimately, the insights from Batley and Dewsbury serve as a reminder that local voices must remain central to strategy. As Kirklees develops its borough-wide approach, these findings offer both a foundation and a call to action: to build environments, systems, and communities where movement becomes easier, safer, and more valued in everyday life.

Considerations for future research and limitations

Although this research provides a strong evidence base to inform future policy and practice in Kirklees, alongside other sources such as the Kirklees Active Leisure Consultation 2024 and the Current Living in Kirklees Survey, it has also highlighted important gaps. Specifically, there are limitations in the current local evidence base and evaluation processes for understanding patterns of activity and movement among Kirklees residents.

With this in mind, the following considerations are offered to help build stronger local understanding and more effective monitoring of activity and movement across Kirklees.

1. Long-term research planning

While the current research provides a valuable snapshot in time of attitudes, barriers, and enablers around physical activity, future work should adopt a longitudinal design. This will allow for:

- Tracking changes in behaviour, motivation, and physical activity levels over time.
- Understanding the long-term impact of interventions or policy changes.
- Identifying seasonal or situational variations in participation patterns. Studies spanning 12-24 months or longer will help to capture sustained behavioural shifts and allow for more robust conclusions about cause and effect.

2. Enhanced incentive structures

Engagement levels in physical activity and movement research can be improved by reasonable, tailored incentives that respect participants' time and input. This also supports greater equity in research approaches for participants on low incomes who may find it difficult to participate in qualitative research activities due to cost.

- Consider tiered rewards for continued participation in a long-term study (e.g., vouchers, fitness gear, community recognition).
- Consider offering incentives that align with healthy lifestyle goals, such as free class passes, local sports event tickets, or gym memberships.
- Where possible, provide feedback reports or personalised activity summaries to participants, giving them value beyond monetary rewards.

3. Mixed-methods follow-up studies

Future projects should continue combining quantitative measures (e.g., activity trackers, validated questionnaires) with qualitative insights (e.g., interviews, ongoing focus groups). This will:

- Provide a deeper understanding of the motivations, lived experiences, and cultural factors influencing activity.
- Enable cross-validation of self-reported behaviours with objective data.
- Allow ongoing dialogue with participants to adapt interventions in real time.

4. Targeted subgroup analysis

The current findings could be enriched by focusing follow-up research on specific demographics identified as underrepresented or having unique barriers, such as:

- Older adults
- Children and young people
- People with disabilities or chronic conditions
- Minority ethnic groups
- Low-income households

Long-term tracking within these subgroups can reveal targeted intervention strategies.

5. Community-embedded research models

Future projects should strengthen community ownership of the research process, ensuring findings lead to real-world action. This could involve:

- Partnering with local organisations, schools, and sports clubs for ongoing recruitment and retention.
- Establishing community advisory panels to guide research design and dissemination.
- Running pilot intervention programs within the research period to test and refine approaches.

6. Integration with policy and practice

A follow-up project should be designed with clear pathways for policy impact.

Recommendations include:

- Sharing longitudinal findings with local authorities, healthcare providers, and sport governing bodies.
- Embedding research outcomes into active travel plans, urban planning, or public health strategies.
- Measuring uptake and impact of policy changes informed by the study.

Conclusion

This research provides a robust, community-driven evidence base that captures how people in Batley, Dewsbury, and the wider Kirklees area engage with physical activity and movement. Rooted in the lived experiences of residents, it offers valuable insights that system partners can use to shape targeted interventions, inform strategic investment, and guide equitable policy decisions.

The findings of this research confirm the original hypothesis - socio-economic status, cultural background, and accessibility to inclusive and safe spaces are significant predictors of physical activity and movement participation in Dewsbury, Batley, and North Kirklees.

The data shows that residents on lower incomes and those with caring responsibilities consistently highlighted affordability and time pressures as barriers to participation, with many unable to access facilities or classes due to cost or competing priorities. Focus groups reinforced these concerns, describing how financial strain and limited local provision made it unrealistic for some residents to be active, even when motivation was present.

Cultural background also shaped experiences. Survey responses showed strong representation from communities with South Asian heritage and multilingual households, while focus groups and community conversations emphasised the importance of culturally sensitive provision. Residents valued women-only sessions, trusted community venues, and activities that acknowledged religious commitments, reflecting the diversity of Dewsbury and Batley.

Finally, accessibility and safe spaces emerged as decisive factors. Residents reported that the closure of leisure facilities had left significant gaps in opportunity, while poor transport links, neglected parks, and safety concerns further restricted activity. Community engagement events captured a strong appetite for inclusive, affordable, and local spaces where people could feel secure and welcome while being active.

Taken together with existing local and national evidence, these insights highlight that physical activity is not simply a matter of individual choice, but is shaped by wider structural inequalities. Tackling barriers linked to income, culture, and accessibility will be essential if equitable opportunities for movement are to be created across North Kirklees.

The COM-B model (Capability, Opportunity, Motivation → Behaviour; [Michie et al., 2011](#)), aligned with global frameworks such as the [WHO Global Action Plan on Physical Activity \(GAPPA\)](#) ([World Health Organization, 2018](#)), provides a clear and actionable foundation for creating environments and opportunities that enable more people to be active in their daily lives.

Capability

Residents' physical and psychological capability is shaped by health conditions, confidence levels, and knowledge about suitable activities. Yet our data shows that capability can be strengthened through inclusive programming, health condition-sensitive support, and accessible guidance delivered in multiple formats and languages.

Opportunity

Opportunity remains a dominant barrier. Facility closures, poorly maintained open spaces, safety concerns, and transport and cost issues restrict equitable access to activity. Aligning with GAPPA's *Active Environments* and *Active Systems* objectives, our findings reinforce that creating safe, affordable, and well-connected spaces across communities must be a key focus.

Motivation

Motivation is deeply influenced by cultural norms, social support, and previous experiences. While the health benefits of being active are widely recognised, low confidence, image concerns, and isolation limit engagement. Social connection, including buddy systems, visible role models, and culturally tailored programming like women-only or family-focused sessions is vital in boosting motivation, closely reflecting GAPPA's *Active Societies* and *Active People* ambitions.

Behaviour

The COM-B framework underscores that behaviour change occurs only when capability, opportunity, and motivation converge. Our findings suggest that layering inclusive programming (capability), equitable infrastructure and environments (opportunity), and socially embedded, empowering experiences (motivation) offers the clearest path to sustainable behaviour change.

Snapshot in time, but robust and clear evidence

This study provides a snapshot captured during the summer months of 2025, which may reflect seasonal patterns (e.g., heightened outdoor activity) and understate winter-related barriers such as poor lighting or weather-related avoidance. Despite this, the research is robust, utilising quantitative surveys and qualitative focus groups and community engagement workshops, all rooted in the voices of residents. Their lived

experiences enrich the data, anchoring the findings in everyday realities and lending depth to the evidence.

Alignment with GAPP and call to action

Our findings closely align with GAPP's systems-based approach, which sets out four strategic objectives and 20 policy actions to reduce physical inactivity by 15% by 2030 ([World Health Organization, 2018](#)). Like GAPP, our analysis emphasises the necessity of cross-sector leadership, multisectoral partnerships, and community-centred strategies to drive lasting change.

Next steps

This report should be treated as a starting point, not the end. Future monitoring, especially across seasons, will be vital to inform responsive policy and programming. Together, by bridging the COM-B framework with the WHO's [GAPP vision](#), Kirklees Council and its partners can move from insight to action, embedding physical activity and movement into daily life so that everyone, regardless of circumstance, has the capability, opportunity, and motivation to move more, live well, and thrive.

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