

RESEARCH

AND

INSIGHT



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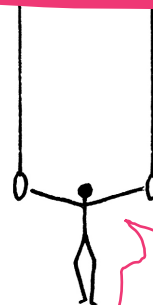
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**WELCOME TO
THE ACTIVE
LIVES SURVEY**

1 EXECUTIVE SUMMARY

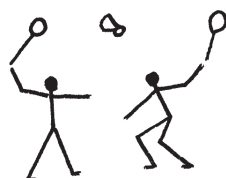
GREATERSPORT HAS WORKED IN PARTNERSHIP WITH SPORTING EQUALS TO UNDERSTAND BAME (BLACK, ASIAN AND MINORITY ETHNIC) GROUPS' ACTIVITY LEVELS, ATTITUDES, MOTIVATIONS AND BARRIERS TO SPORT AND PHYSICAL ACTIVITY IN GREATER MANCHESTER.

16.2%

OF GREATER MANCHESTER'S POPULATION IS FROM A BAME BACKGROUND

FOUR CLUSTERS OF WARDS WITH THE HIGHEST BAME POPULATIONS HAVE BEEN IDENTIFIED:

- NORTH MANCHESTER (CHEETHAM AND CRUMPSALL)
- CENTRAL MANCHESTER (ARDWICK, LONGSIGHT AND MOSS SIDE)
- BOLTON (RUMWORTH AND GREAT LEVER)
- OLDHAM (WERNETH, COLDHURST AND ST. MARY'S)



Activity levels of 1 x 30 minutes per week are higher for BAME populations at 41.1% compared to the GM average of 35.5%. Similarly with latent demand at 79.9% compared to the GM average of 58.6%.

1 X 30 MINS AND LATENT DEMAND IN GM BY ETHNICITY AND GENDER



■ White Male ■ Asian Male ■ White Female ■ Asian Female

However, as shown in the chart above by the inner circle, when broken down it appears this is due to a high participation rate from Asian males at 64.3%. Yet there is a significant gender gap in participation at less than half, for Asian females at only 31.4% participating, interestingly this is still higher than white female participation at 29.8%.

Inner Circle

ASIAN MALE
64.3%

ASIAN FEMALE
31.4%

WHITE FEMALE
29.8%

Furthermore, as shown by the outer circle of the graph above, latent demand is much higher generally for those from a BAME background at 79.9% compared to the GM average of 58.6%, but especially for Asian females at 89.9%.

Outer Circle

BAME
79.9%

GM AVERAGE
58.6%

ASIAN FEMALE
89.9%

Also worth considering is that Sports Coach UK suggest only 3% of coaches are from BAME backgrounds.



1 EXECUTIVE SUMMARY

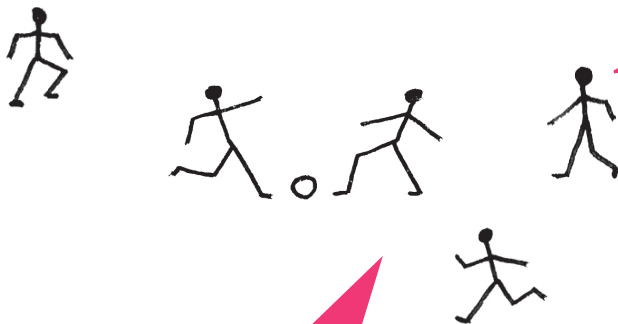
CONSULTATION WAS CONDUCTED WITHIN FAITH CENTRES VIA 8 FOCUS GROUPS AND OVER 160 SURVEY RESPONSES HAVE SUGGESTED THE FOLLOWING:

Motivations

- Staying healthy, as well as weight loss within female groups
- The social aspect, taking part with people you know and are comfortable with, having someone to go with, a coach that is able to socialise as well as motivate, more relaxed, sometimes the difficulty can be off-putting particularly for the older generation, community and a sense of togetherness
- Doing something different or learning a new skill
- Faith and health, important within religion, particularly within Hinduism who mentioned both spiritual and physical health as important

Barriers

- Marriage and family commitments are key reasons for the drop off within females, felt expected to be a wife and mother and this did not include sport or physical activity
- Older generation language barriers, parental attitudes, not being encouraged growing up, lack of education around benefits, expectations of women as wives and mothers
- Not feeling welcome in the non-BAME environment or find it daunting, marketing not targeted at BAME groups and lack of BAME role models
- Lack of awareness of organisations who could support and fund opportunities



“WE FEEL THE COMMUNITY ARE SOCIALLY VERY ACTIVE, BUT NOT PHYSICALLY.”

“WHEN OUR OLDER PEOPLE THINK OF SPORT AND PHYSICAL ACTIVITY THEY INSTANTLY GET PUT OFF THINKING IT'S JUMPING AROUND.”

Recommendations

- Use faith centres as a hub for sport and physical activity as well as faith
- Train faith centre volunteer workforce
- Important messaging should be around bringing family and community together
- Support to connect to funding with sport or physical activity organisations

2 ETHNICITY BY GREATER MANCHESTER BOROUGH

GREATER MANCHESTER'S
(GM) BAME POPULATION
ACCOUNTS FOR

62.9%

OF THE NORTH WEST (NW)
BAME POPULATION AND

16.2%

OF GMS OVERALL
POPULATION

10.1% (272,173)

ASIAN

2.8% (74,097)

BLACK

2.3% (60,710)

MIXED

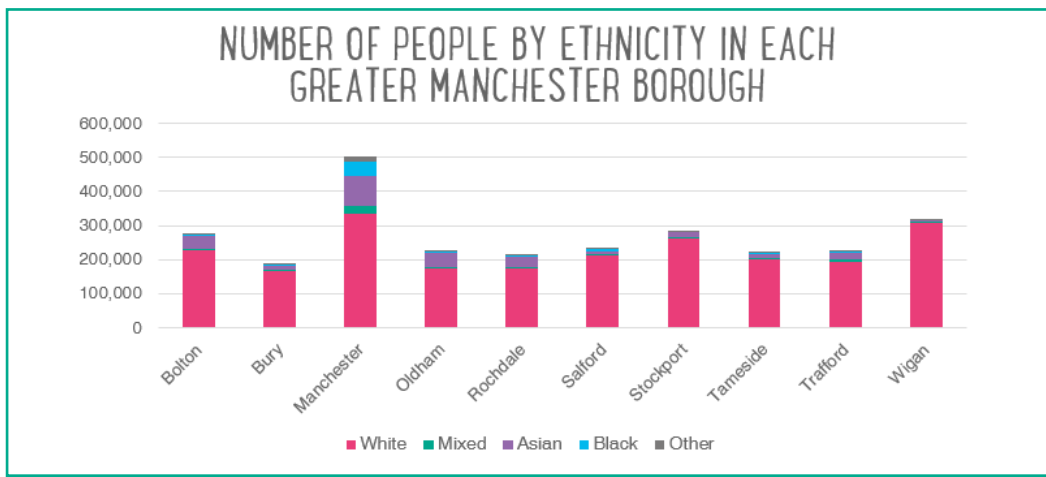
1% (27,425)

OTHER

2 ETHNICITY BY GREATER MANCHESTER BOROUGH

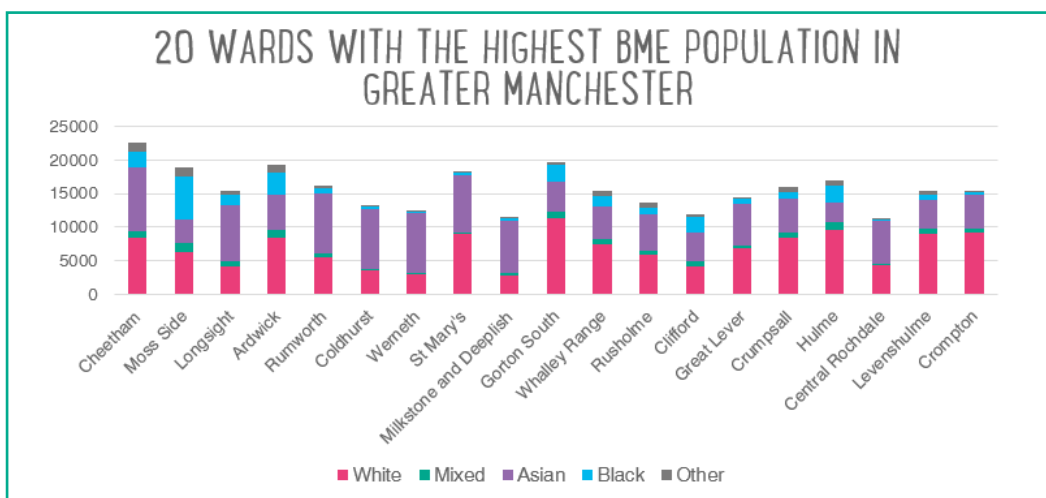
AS YOU CAN SEE FROM THE GRAPH BELOW THE HIGHEST BAME POPULATIONS ARE IN MANCHESTER (168,018), OLDHAM (50,571), BOLTON (50,141) AND THEN ROCHDALE (38,825), WITH THE LOWEST BEING CONSIDERABLY LESS IN WIGAN (8,656) (TABLE 1.1 IN APPENDIX 1).

THE HIGHEST BAME POPULATIONS ARE IN MANCHESTER
168,018
PEOPLE



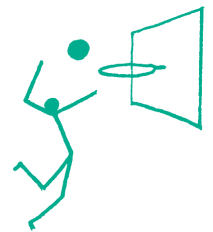
Greater Manchester Wards with the Highest BAME Populations

When broken down into wards, the 20 wards with the highest BAME population all fall within these four boroughs: Manchester, Oldham, Bolton and Rochdale. These are highlighted in the graph below, with the highest BAME populations from left to right (Table 1.2 Appendix 1).



THE 20 WARDS WITH THE HIGHEST BAME POPULATIONS ALL FALL WITHIN THESE FOUR BOROUGHS:

MANCHESTER, OLDHAM, BOLTON AND ROCHDALE



2 ETHNICITY BY GREATER MANCHESTER BOROUGH

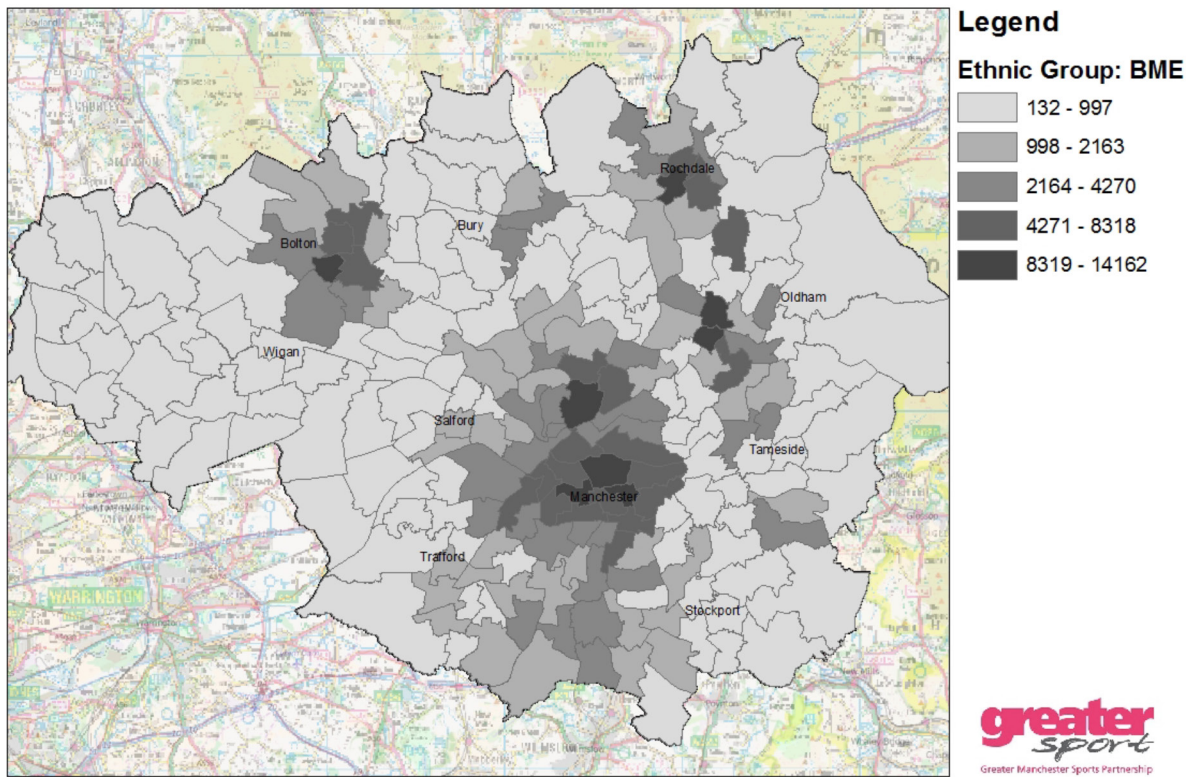
When mapped out geographically clusters of these wards become apparent in:

- Manchester – Ardwick, Moss Side and Longsight plus Cheetham and Crumpsall
- Bolton – Crompton, Great Leaver and Rumworth
- Oldham – Coldhurst, Werneth and St. Mary's
- Rochdale – Millstone and Deepish with Central Rochdale

In addition, two other clusters are apparent in Trafford and Bury, although with lower total BAME populations:

- Trafford – Longford and Clifford border each other
- Bury – Redvales and East border each other

MAP OF CLUSTERS OF HIGH BAME POPULATIONS IN GREATER MANCHESTER WARDS



THE HIGHEST BAME POPULATIONS

BOLTON
OLDHAM
ROCHDALE

↑

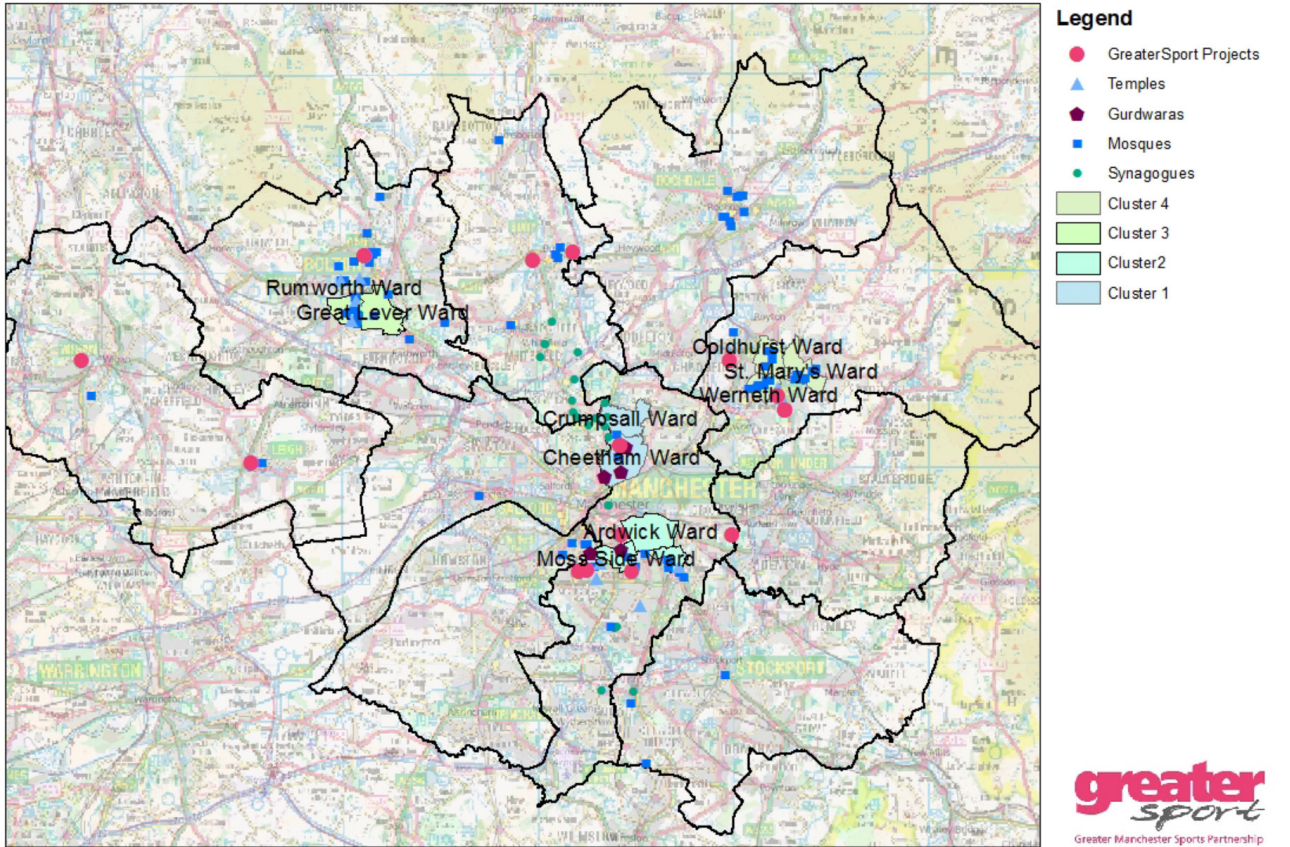
THE LOWEST BAME POPULATIONS

TRAFFORD
BURY

↓

2 ETHNICITY BY GREATER MANCHESTER BOROUGH

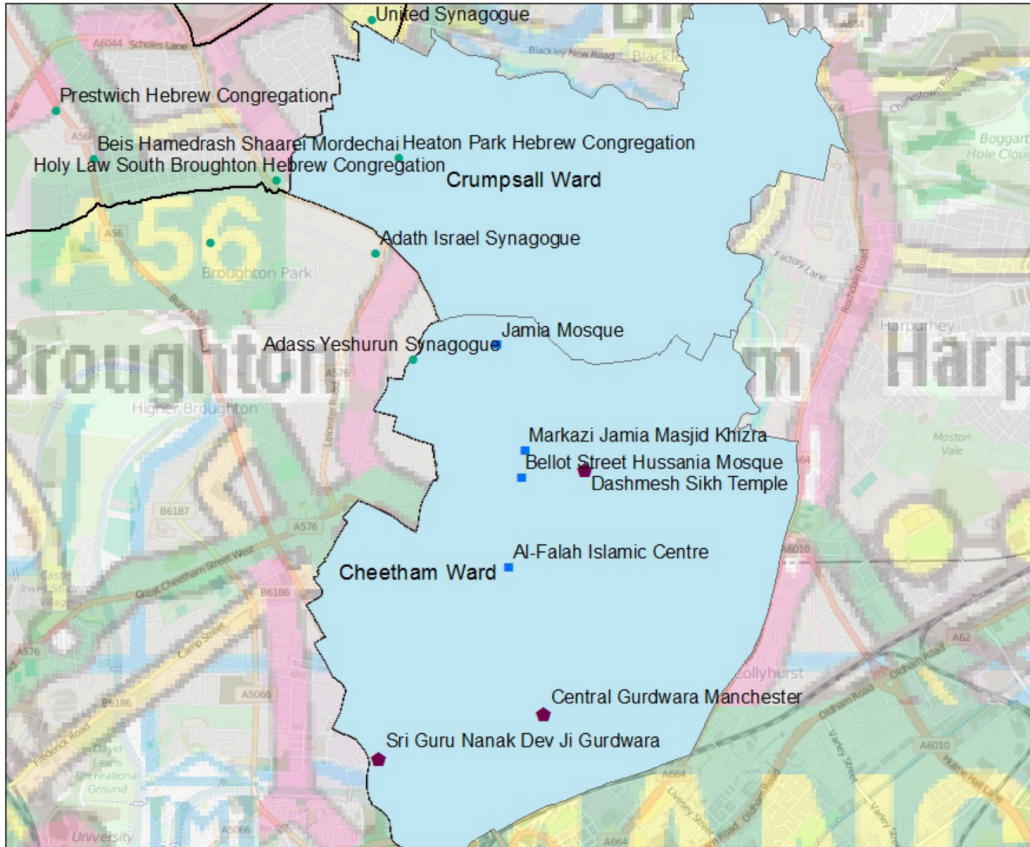
MAP OF CLUSTERS WITH FAITH CENTRES AND GREATERSPORT EXISTING ACTIVITY



Four clusters with a high BAME population have been identified as highlighted in the map above.

2 ETHNICITY BY GREATER MANCHESTER BOROUGH

MAP OF FAITH CENTRES - CLUSTER 1



Legend

- ▲ Temples
- ◆ Gurdwaras
- Mosques
- Synagogues
- cluster 4
- Cluster 3
- Cluster 2
- Cluster 1

WITHIN BAME COMMUNITIES THERE IS A LARGER NUMBER OF PEOPLE WHO DEFINE THEMSELVES BY FAITH RATHER THAN ETHNICITY. THEREFORE THE BREAKDOWN BY FAITH WITHIN EACH OF THESE CLUSTERS IS SHOWN WITH A MAP OF FAITH CENTRES ABOVE.

North Manchester (Cheetham and Crumpsall):

Islam is the largest faith in both wards (43.3% & 32.8%).

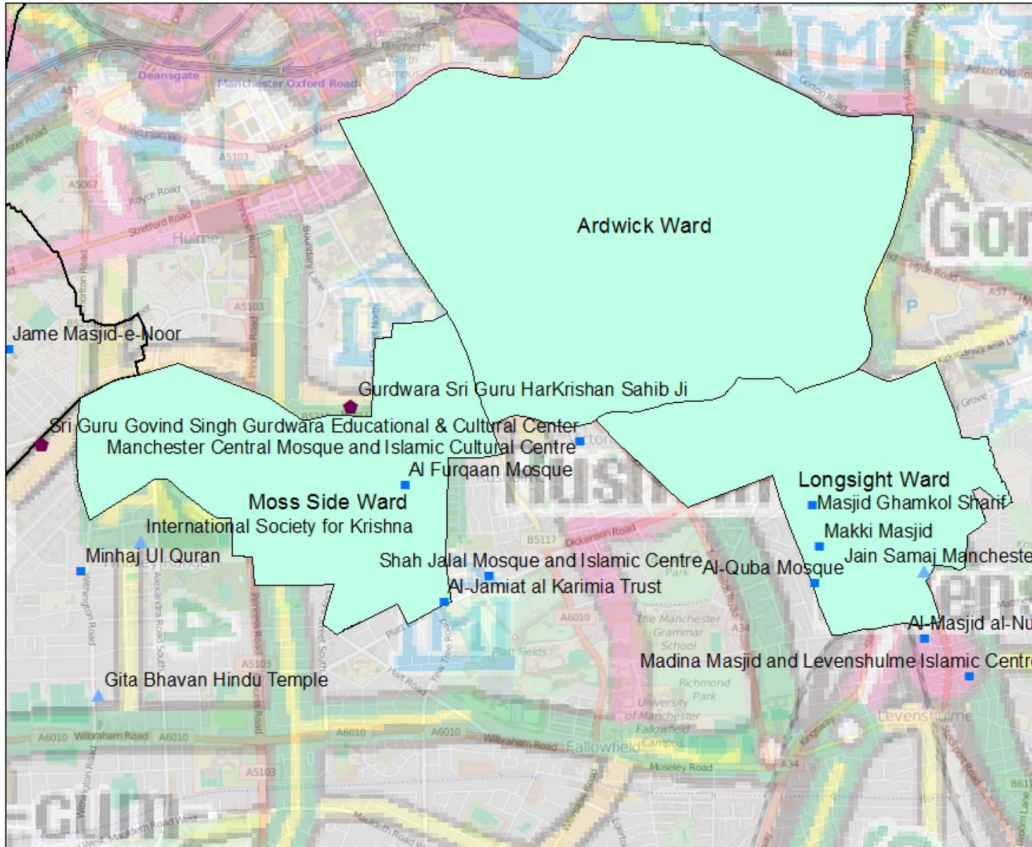
4
MOSQUES

3
GURDWARAS

2
SYNAGOGUES. WITH ANOTHER THREE ON THE BORDERS

2 ETHNICITY BY GREATER MANCHESTER BOROUGH

MAP OF FAITH CENTRES - CLUSTER 2



Legend

- ▲ Temples
- ◆ Gurdwaras
- Mosques
- Synagogues
- cluster 4
- Cluster 3
- Cluster 2
- Cluster 1

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Central Manchester (Ardwick, Longsight and Moss Side):

Islam is the largest faith across all three wards (22%, 53.8% & 34%), However relatively there is a higher proportion of the population from a Black/African/Caribbean background rather than a Pakistani background (17.6%, 9.8% & 34.5%).

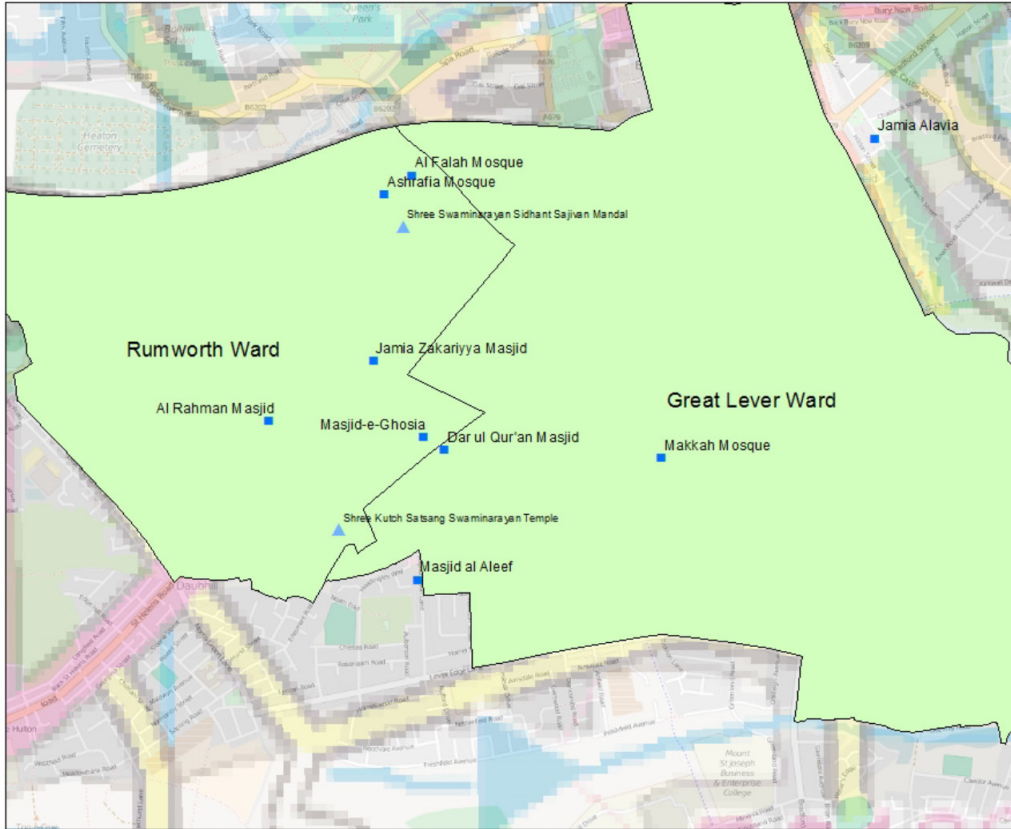
5
MOSQUES, WITH FIVE ON THE BORDER

1
TEMPLE WITH ONE ON THE BORDER

2
GURDWARAS ON THE BORDER

2 ETHNICITY BY GREATER MANCHESTER BOROUGH

MAP OF FAITH CENTRES - CLUSTER 3

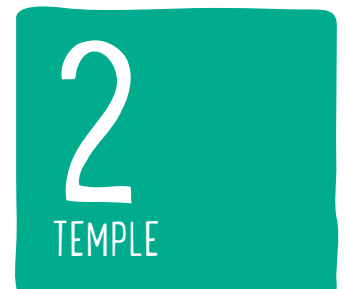
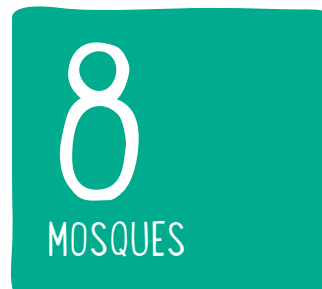


Legend

- ▲ Temples
- ◆ Gurdwaras
- Mosques
- Synagogues
- Cluster 3

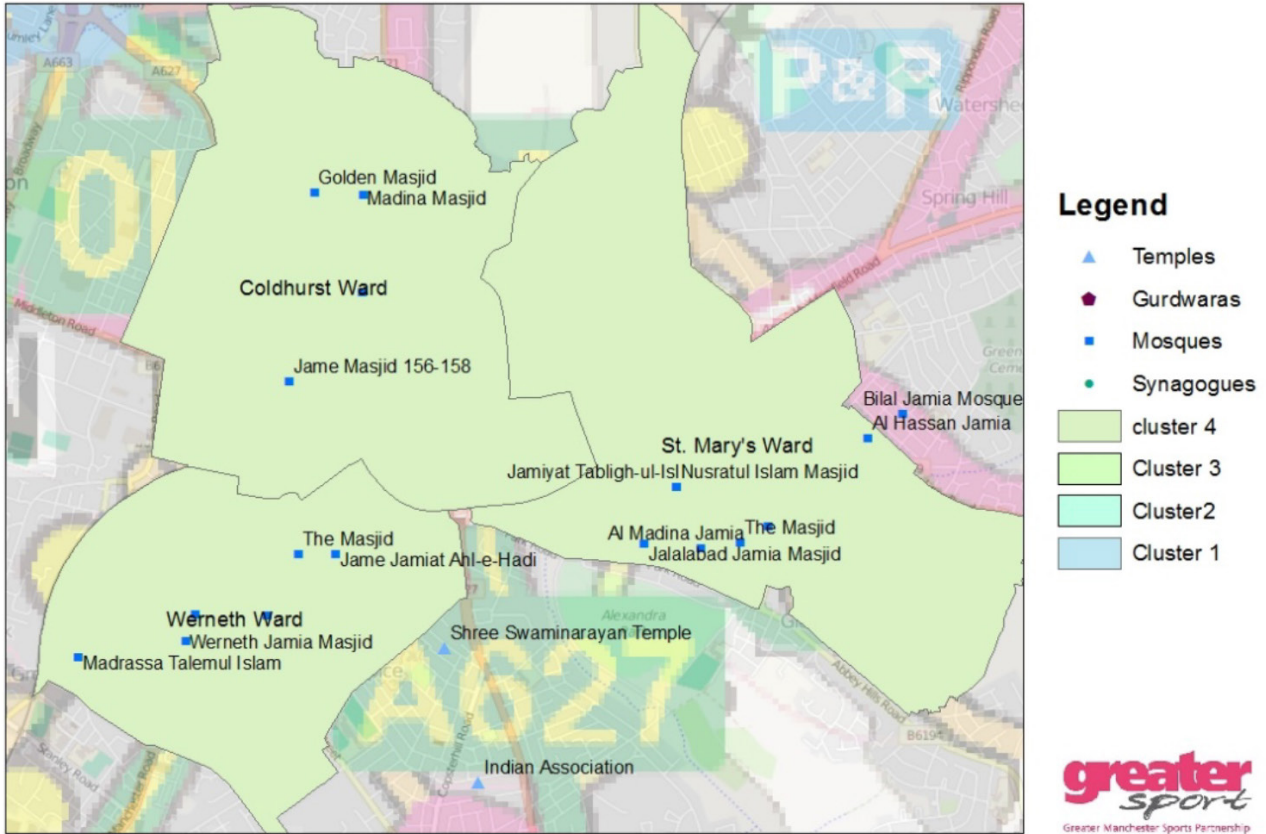
Bolton (Rumworth and Great Lever):

Although the largest faith is islam in both wards (51.8% and 36.6% Respectively), there is also a large Hindu community relative to other wards (6.2% & 7.1% Respectively).



2 ETHNICITY BY GREATER MANCHESTER BOROUGH

MAP OF FAITH CENTRES - CLUSTER 4



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Oldham (Werneth, Coldhurst and St. Mary's):

Again the largest faith is Islam in all three wards (68.2%, 64.2% and 58.7%), However there is a higher proportion of the population from a Bangladeshi background rather than a Pakistani background, in particular in Werneth and Coldhurst (17.6%, 60.3% & 8.9%)

16
MOSQUES WITH
ONE ON THE
BORDER

2
TEMPLES ON
THE BORDER

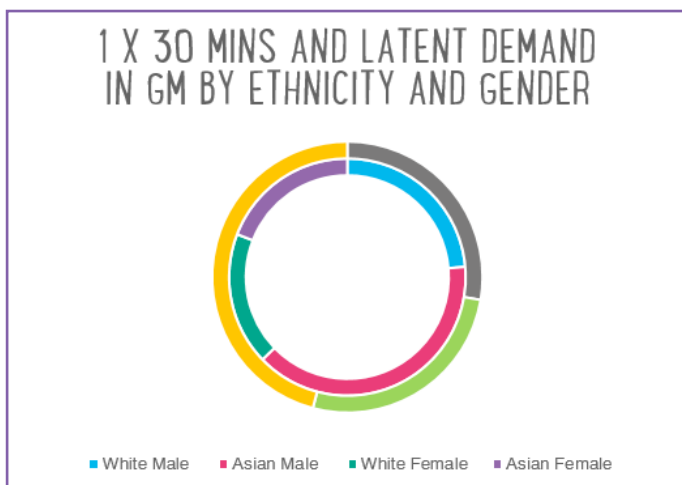
3 ETHNICITY BY SPORTS PARTICIPATION AND ACTIVITY LEVELS

ALTHOUGH NOT SIGNIFICANTLY RELIABLE, AT BOROUGH OR WARD LEVEL WE CAN COMPARE SPORT AND ACTIVITY LEVELS AT A GM LEVEL ACROSS BAME POPULATIONS.

Based on Sport England’s APS 9 (Active People Survey) BAME populations in GM have higher participation levels (1 x 30 minutes per week) at 41.1% compared to the GM average of 35.5%. This is similar at NW (39.9%) and national (37.7%) level (Table 2.1 Appendix 2). When looking at the percentage of those that play no sport this follows a similar pattern of 48.6% for the BAME population compared to the GM average of 54.5% (Table 2.2 Appendix 2).

Furthermore, the latent demand to play more sport is much higher for the BAME population in GM at 79.9% compared to the average of 58.6%, which is again higher than the NW (75.3%) and nationally (71.4%) (Table 2.3 Appendix 2).

However as shown in the chart below by the inner circle, when broken down it appears this is due to a high participation rate from Asian males at 64.3%. Yet there is a significant gender gap in participation at less than half, for Asian females at only 31.4% participating, interestingly this is still higher than white female participation at 29.8%

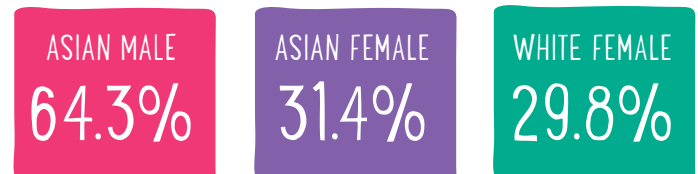


Furthermore, as shown by the outer circle of the graph above, latent demand is much higher generally for those from a BAME background at 79.9% compared to the GM average of 58.6%, but especially for Asian females at 89.9%.

Alternative measuring of physical activity levels based on the Chief Medical Officer’s (CMO) guidelines of over 150 minutes of activity per week suggest the BAME population is slightly less active at 45.9% compared to the average of 53.3% across GM (Table 2.4 Appendix 2). Similarly 20% of the BAME population show insufficient activity levels of between 30 – 149 minutes per week, compared to the GM average of 16.2%, with 34% having inactivity levels of 0 – 29 minutes, compared to the GM average of 30.5% (Table 2.5 Appendix 2).

However, as shown in the chart above by the inner circle, when broken down it appears this is due to a high participation rate from Asian males at 64.3%. Yet there is a significant gender gap in participation at less than half, for Asian females at only 31.4% participating, interestingly this is still higher than white female participation at 29.8%.

Inner Circle



Furthermore, as shown by the outer circle of the graph above, latent demand is much higher generally for those from a BAME background at 79.9% compared to the GM average of 58.6%, but especially for Asian females at 89.9%.

Outer Circle



Also worth considering is that Sports Coach UK suggest only 3% of coaches are from BAME backgrounds.

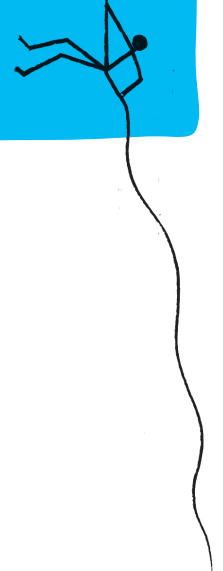
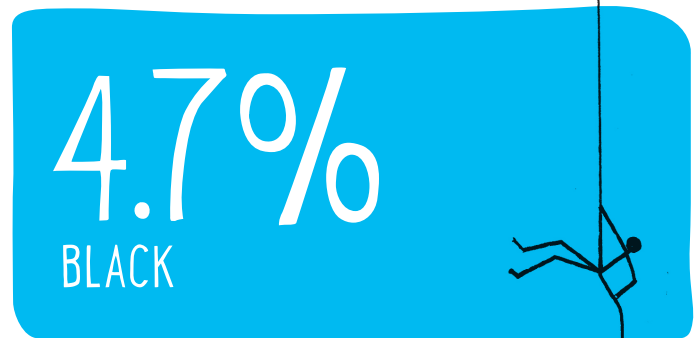
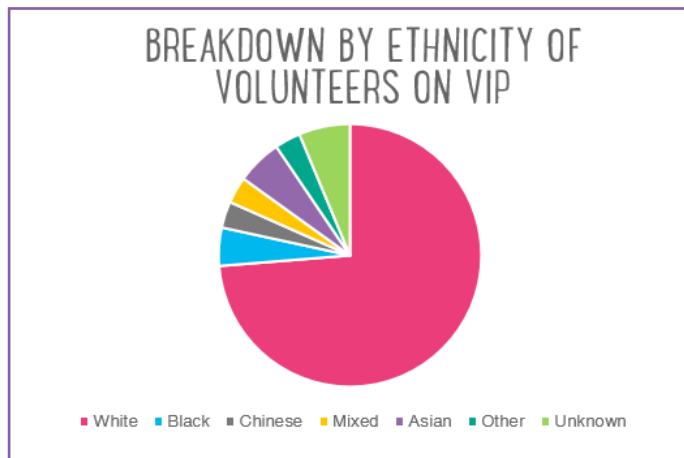


3 ETHNICITY BY SPORTS PARTICIPATION AND ACTIVITY LEVELS

Ethnicity by Coaches on VIP

Sports Coach UK suggest only 3% of coaches are from BAME backgrounds.

Based on the demographics of volunteers and coaches registered on VIP (Volunteer Inspire Programme, a Greater Manchester database for volunteers and volunteering opportunities) locally the graph below shows 73.7% of coaches and volunteers registered are from White ethnicities, with 5.6% from Asian ethnicities and 4.7% from black ethnicities (see Table 3.1 in Appendix 3).



4 CONSULTATION WITHIN FAITH CENTRES

BASED ON THESE 4 CLUSTERS, CONSULTATION WAS CONDUCTED ACROSS BOLTON, MANCHESTER AND OLDHAM VIA 8 FOCUS GROUPS WITH 61 PARTICIPANTS AND OVER 160 SURVEY RESPONSES (SEE APPENDIX 5 FOR FOCUS GROUP OUTLINE AND SURVEY).

Overall 24 participants considered themselves active, in general these were more likely to be male, which supports the activity levels data above. Using faith centres for activity was highlighted, as a familiar local environment, where people feel comfortable and could easily travel to, as well as bringing the community together and being an important part of faith. Some felt focussing on the younger age to begin with and using opportunities around madrasa in Mosques would be most effective.

The key motivations were:

- Staying healthy, as well as weight loss within female groups
- Enjoyment and fun
- The social aspect, taking part with people you know and are comfortable with, having someone to go with, a coach that is able to socialise as well as motivate, more relaxed as sometimes the difficulty can be off-putting particularly for the older generation
- Doing something different or learning a new skill
- Faith, important within religion, particularly within Hinduism as both spiritual and physical health were mentioned as important
- Community and a sense of togetherness
- Family sessions and in particular mother and daughter sessions were discussed

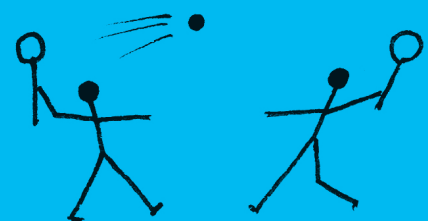
The key barriers were:

- Men felt fewer barriers than women, although many are the main wage earner of the household so family and work come before sport, quite often after this there is no time left to fit it in
- Marriage and family commitments are key reasons for the drop off within females, felt expected to be a wife and mother and this did not include sport or physical activity
- Transport issue for women, few able to drive or have access to a car, but also important to be in a safe, familiar environment
- Older generation language barriers, parental attitudes, not encouraged growing up, lack of education around benefits, expectations of women as wives and mothers
- Not feeling welcome in a non-BAME environment or find it daunting, for example, clothing can make you feel out of place or uncomfortable in a sport or physical activity environment, feel uncomfortable in traditional gym or sports centre
- Marketing not targeted at BAME groups and lack of BAME role models
- Lack of awareness of organisations who could support and fund opportunities
- Rare examples of racism, lack of coach understanding or poor experience at school put people off
- Diet and poor health mentioned

Whether the workforce needed to be gender specific was mixed, but more often it was important there were female only sessions available, it appears this is more flexible within Hinduism. Most agreed the coach does not need to be from the same background but it helps if they have an understanding, it was felt it was more important they were able to motivate and enthuse. It was apparent that there is significant opportunity to upskill the volunteer workforce within faith centres, which would provide role models and activity within them.

A detailed write-up of each focus group can be found in Appendix 4.

USING FAITH CENTRES FOR ACTIVITY WAS HIGHLIGHTED, AS A FAMILIAR LOCAL ENVIRONMENT.



4 CONSULTATION WITHIN FAITH CENTRES

“FAITH IS IMPORTANT, PARENTS DON'T LIKE CHOOSING BETWEEN FAITH AND SPORT.”

“WE FOCUS A LOT ON SPIRITUAL HEALTH AND WELLBEING BUT PHYSICAL HEALTH IS JUST AS IMPORTANT.”

“A COACH THAT UNDERSTANDS THE LANGUAGE AND UNDERSTANDS THE COMMUNITY IS KEY.”

“I'VE PLAYED FOOTBALL ALL MY LIFE, I'VE NEVER SEEN AN INDIAN FOOTBALL REFEREE.”



4 CONSULTATION WITHIN FAITH CENTRES

Survey Analysis

Demographics and participation levels of survey respondents

Socio-demographic characteristics of respondents

SOCIODEMOGRAPHIC INFORMATION

		%	n
Age (years), mean (SD), (n)		31.62 (11.28)	(176)
Gender	Male	52.3	(92)
	Female	47.7	(84)
Borough	Bolton	29	(51)
	Manchester	32.4	(57)
	Oldham	38.6	(68)
Ethnicity	Indian	51.1	(90)
	Pakistani	28.4	(50)
	Bangladeshi	18.2	(32)
	Arab	1.1	(2)
	Somalian	1.1	(2)
Religion	Hindu	44.3	(78)
	Muslim	48.9	(86)
	Sikh	6.8	(12)
Employment	Housewife	23.2	(41)
	Retired	3.4	(6)
	Part-time	18.2	(32)
	Full-time	35.2	(62)
	Student	15.3	(27)
	Unemployed	4.5	(8)
Disability	Yes	4.8	(7)
	No	95.2	(138)



4 CONSULTATION WITHIN FAITH CENTRES

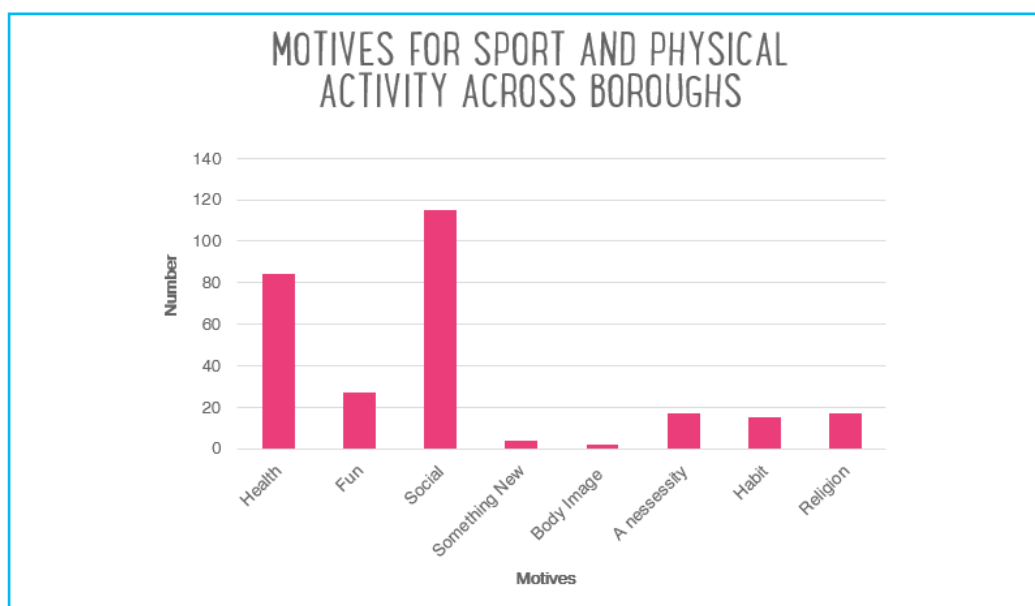
PARTICIPATION LEVELS BY ACTIVITY TYPE

Demographic		Physical Activity Cycling and walking to Work (mins/week)	Physical Activity not Cycling and walking to work (mins/week)	Fitness (mins/ week)	Total (mins/week)
Gender	Male	39	31	53	124
	Female	21	42	26	90
Ethnicity	Indian	45.5	41.3	48	134.8
	Pakistani	9.6	32.4	31.2	73.2
	Arab	0	0	0	0
	Somalian	30	60	180	270
	Bangladeshi	26.25	31.88	26.25	84.37
All respondents		31.1	36.8	40.23	108.15

Results (All boroughs aggregated)

Motives

As depicted below, the opportunity that sport and physical activity provides for socialising was the primary motive for participation (n = 114). This was followed by the health benefits (n = 84), and enjoyment (n = 27) derived from sport and physical activity. Other motives included trying something new, body image and the necessity, habit and religion were cited to a lesser extent.



4 CONSULTATION WITHIN FAITH CENTRES

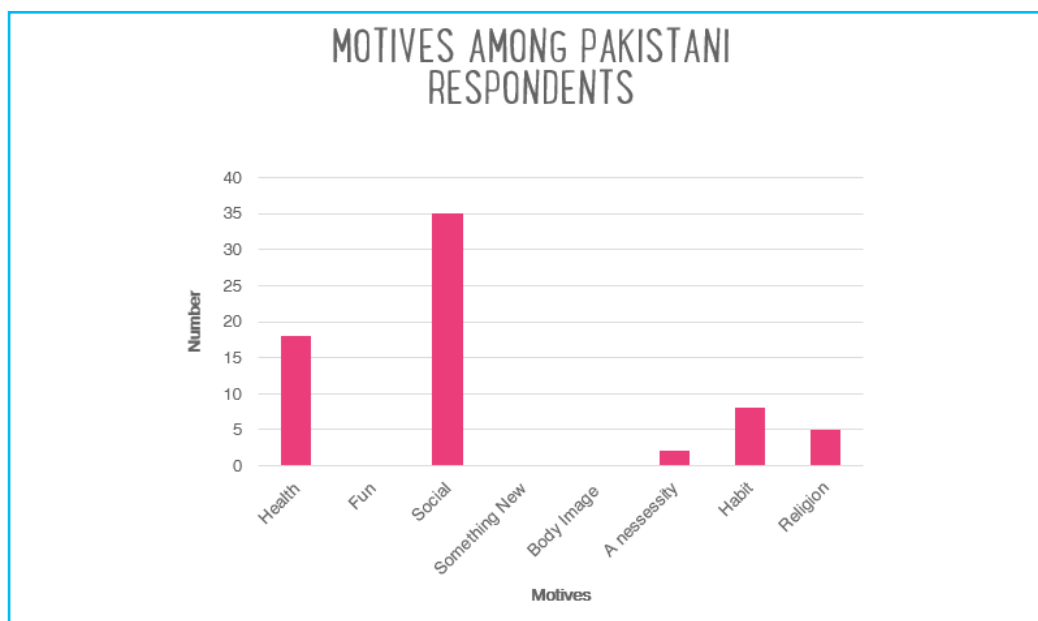
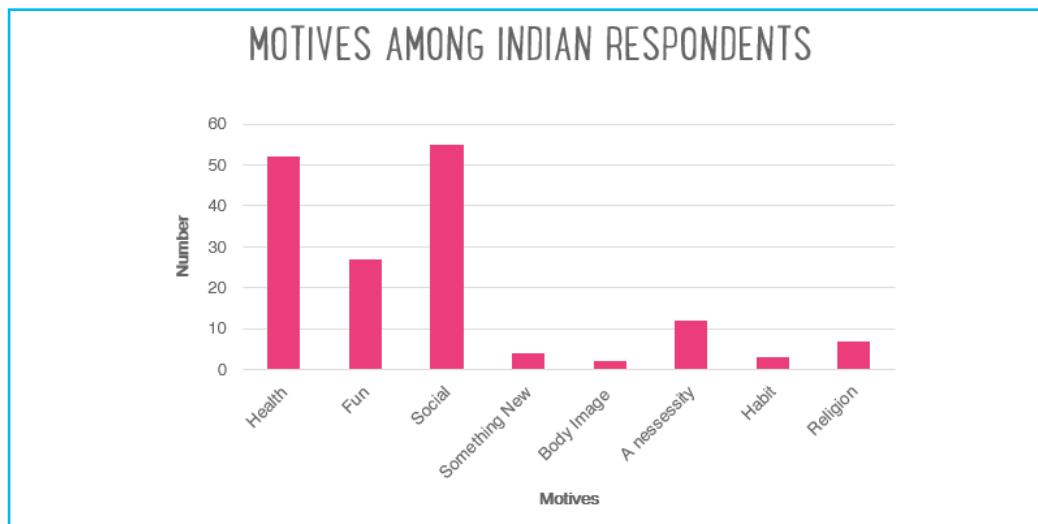
Motives by Ethnicity

Motives for Indian respondents varied. As shown, this included primary motives such as the social (n = 55), health (n= 52) and enjoyment (n = 27) benefits derived. Moreover, a number of other motives were cited to a lesser extent including trying something new, body image, necessity, habit and religion.

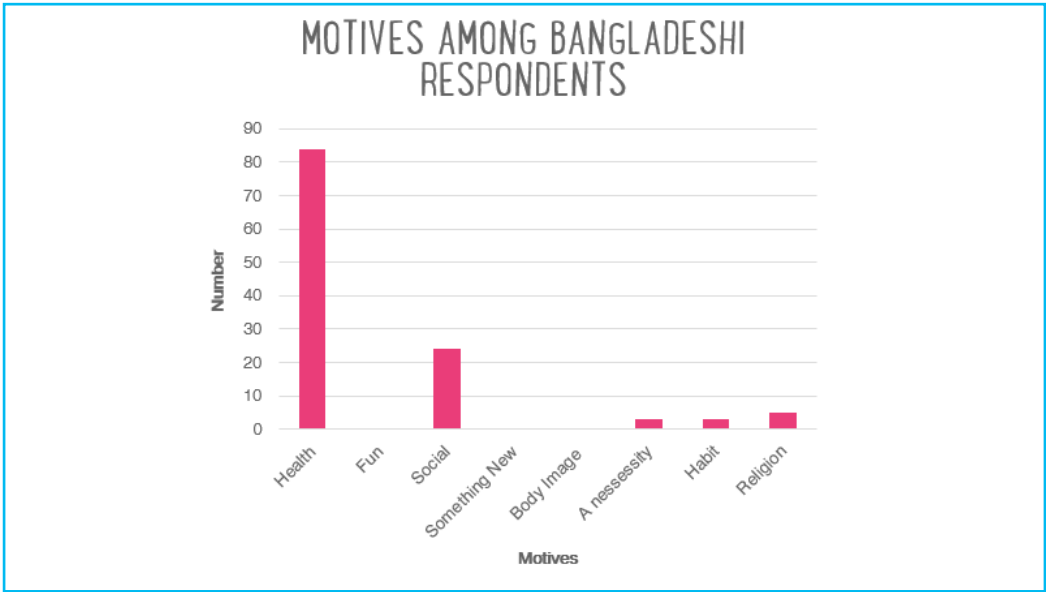
In contrast, respondents from a Pakistani and Bangladeshi ethnicity reported a narrower range of motives. Among Pakistani respondents, the opportunity to socialise was most frequently cited (n = 35), followed by health benefits derived from sport and physical activity (n = 17). Other motives including the perceived necessity of sport and physical activity, habit and religion were cited to a lesser extent.

In contrast, among Bangladeshi participants, the health benefits derived from sport and physical activity were the primary motive (n = 83), followed by the opportunity to socialise (n = 24). Congruent with Pakistani participants, Bangladeshis reported the perceived necessity of sport and physical activity, habit and religion to a lesser extent.

Interestingly, neither Pakistani nor Bangladeshi respondents reported enjoyment, trying something new or body image as motives.

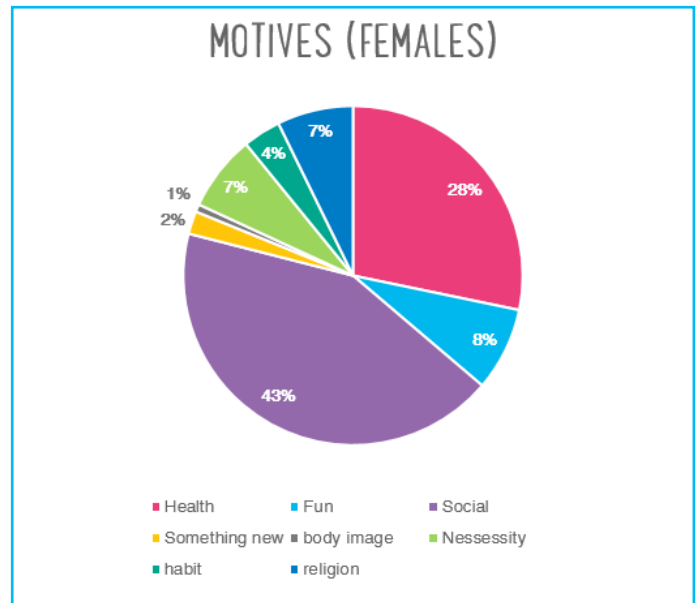
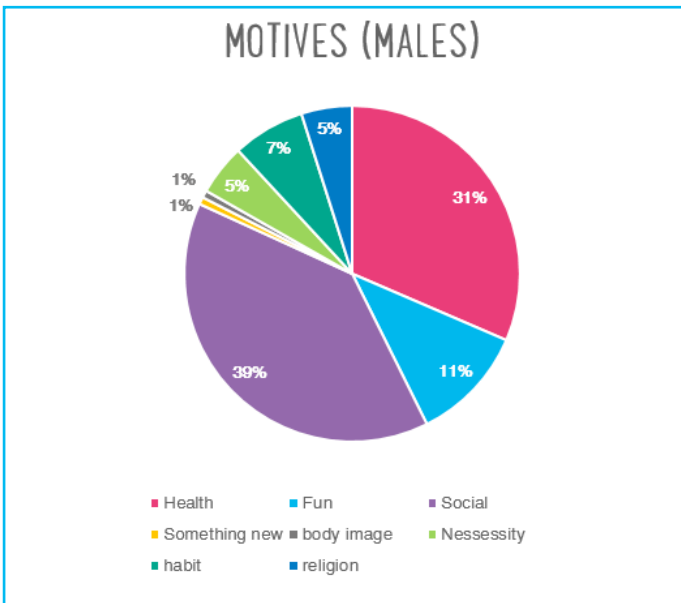


4 CONSULTATION WITHIN FAITH CENTRES



Motives by Gender

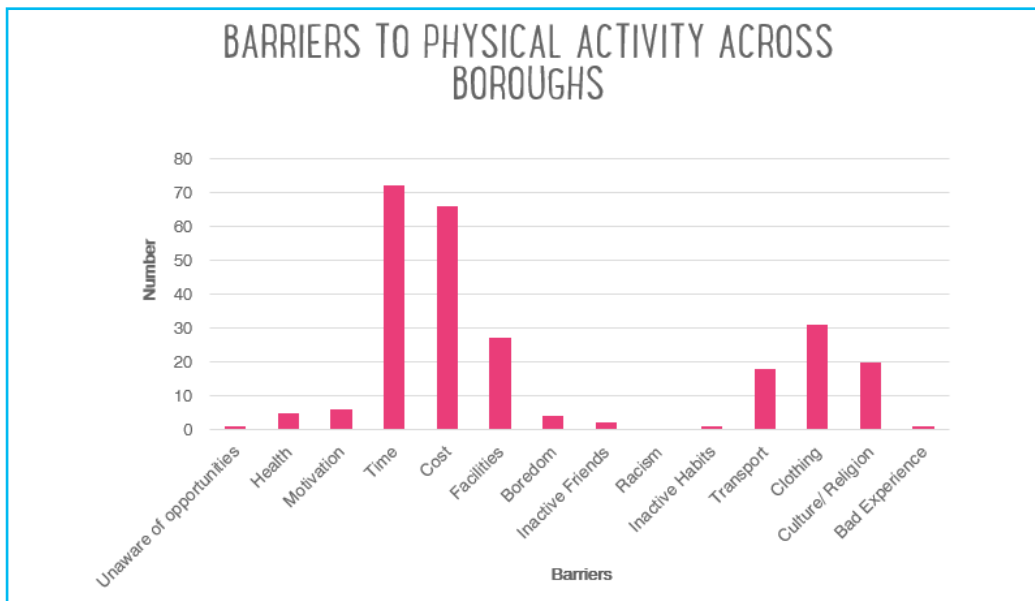
As displayed below, health, social and enjoyment benefits of physical activity were primary motives among males and females. However, a greater proportion of females cited the opportunity to socialise (43 v 39%), necessity (7 v 5%) and religion (7 v 5%) than males. In contrast, a greater proportion of males cited health (31 v 28%), enjoyment (11 v 8%), and habit (7 v 4%) than females



4 CONSULTATION WITHIN FAITH CENTRES

Barriers to Physical Activity

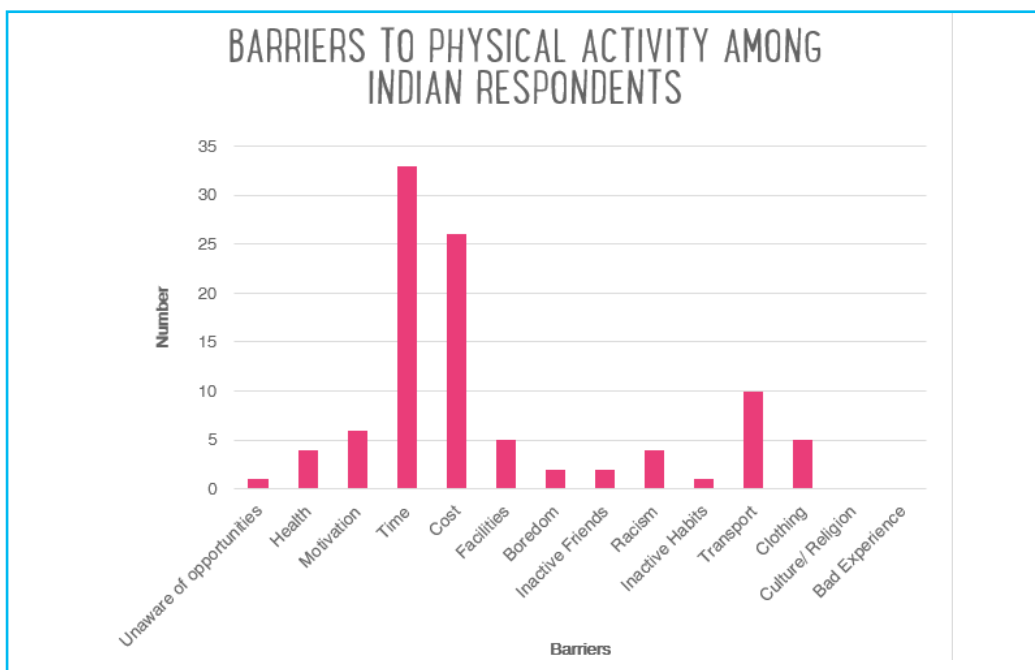
As depicted below, primary barriers across ethnicities include time (n = 72) and cost (n = 66) constraints. The availability of facilities (n = 27) and transport (n = 18), coupled with issues involving clothing (n = 31) and religion (n = 20) were cited to a lesser extent.



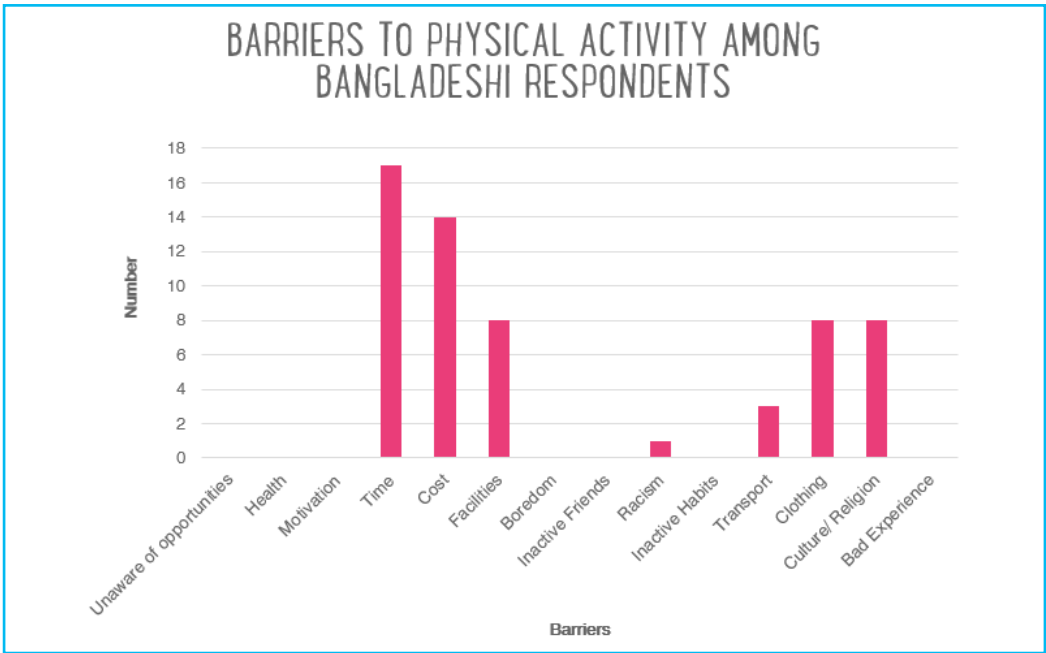
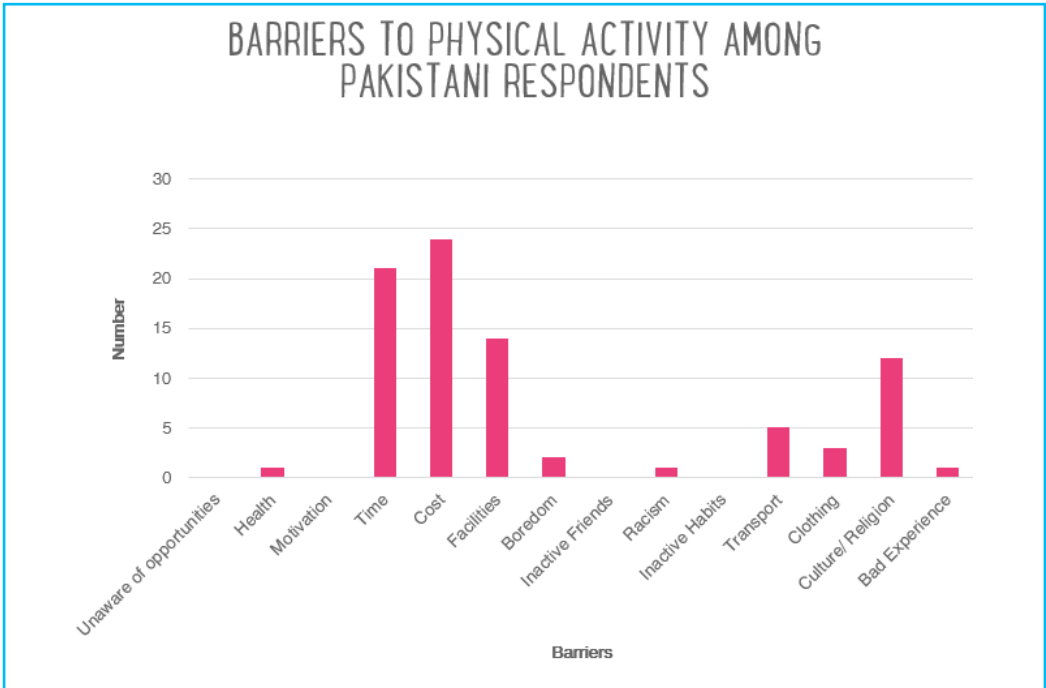
Barriers by Ethnicity

As shown in Figure x among Indian respondents two primary barriers of time (n = 33) and cost (n = 26) emerged, whereas a range of other barriers were cited to a lesser extent. Among Pakistani respondents, four main barriers emerged including cost (n = 24), time constraints (n = 21), lack of facilities (n = 14) and religion (n = 12). Five primary barriers including time (n = 17),

cost (n = 14), lack of facilities (n = 8), issues with clothing (n = 8) and religion (n = 8) emerged. Thus by comparing ethnicities, it is evident that time and cost constraints were barriers irrespective of background, whereas availability of facilities, clothing and religion were more salient to individuals of Bangladeshi and Pakistani origin and availability of transport to Indian respondents.



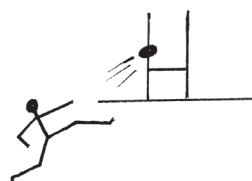
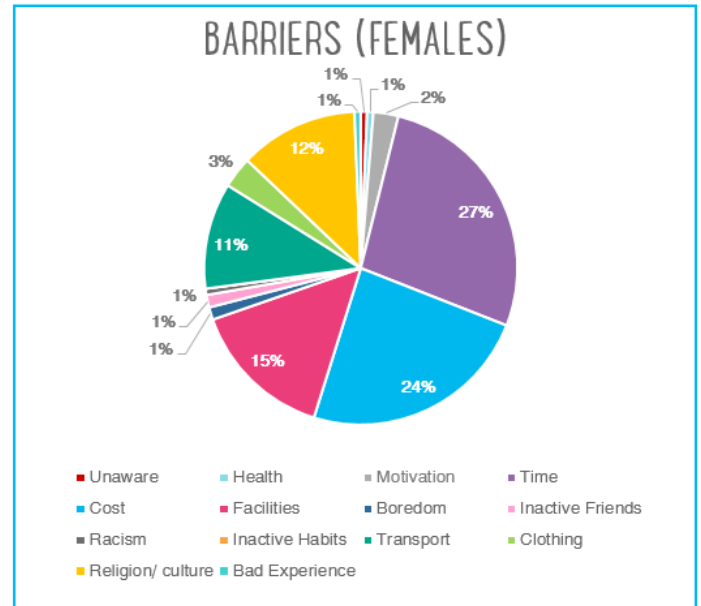
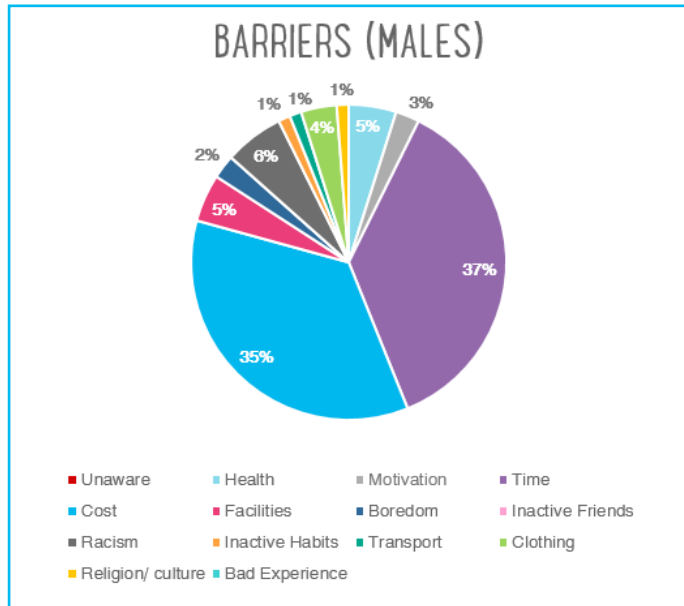
4 CONSULTATION WITHIN FAITH CENTRES



4 CONSULTATION WITHIN FAITH CENTRES

Barriers by Gender

As depicted in Figure x, the primary barriers amongst both males and females included cost and time constraints. However, barriers salient for females included availability of facilities (15 v 5%), religion (12 v 1%) and transport (11 v 1%). For males, health conditions (5 v 1%) and racism (6 v 1%) were notably higher than females.

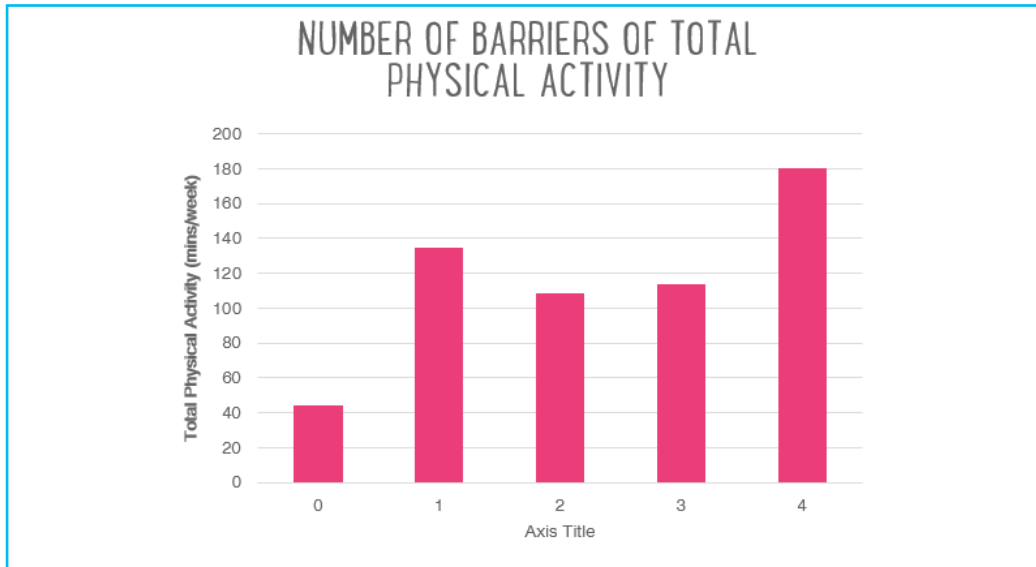


4 CONSULTATION WITHIN FAITH CENTRES

Motives and Physical Activity Levels

Shown below is the relationship between reported number of barriers and physical activity for respondents. As one would hypothesise, there is a tendency for levels of physical activity to increase as the number of motives increase. This was confirmed by a Pearson's R correlation that showed a significant ($p = 0.29$), albeit weak ($r = .16$) relationship between the two variables.

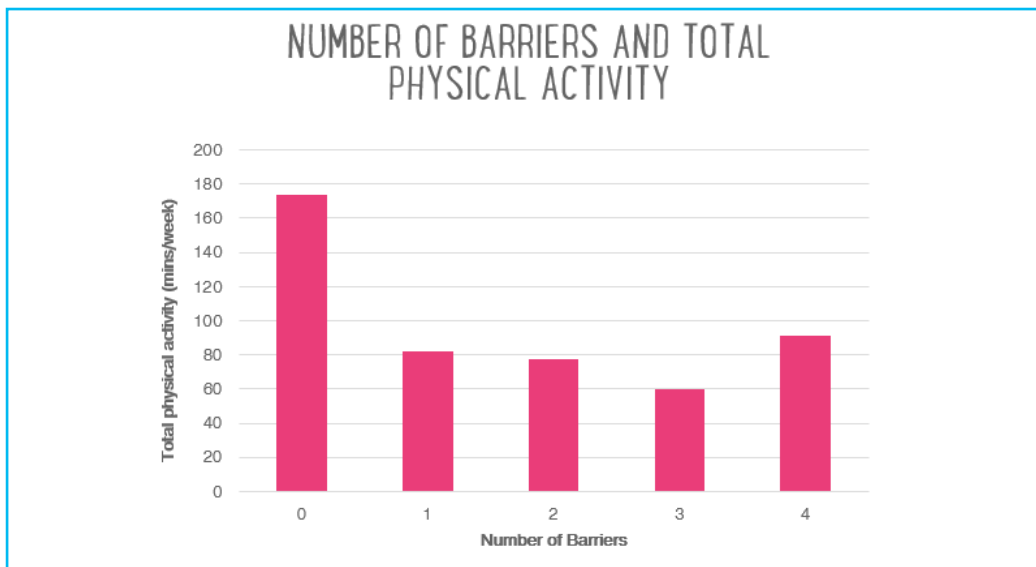
Interestingly, on average, to achieve the CMO's guideline of 150 minutes of physical activity per week, four motives need to be held, whereas possessing three motives or less constitutes being insufficiently active.



Barriers and Physical Activity Levels

Shown below is the relationship between the number of barriers and physical activity reported. As the number of reported barriers increase, the levels of activity decrease, a finding consistent with past qualitative (Gray et al., 2016) and quantitative research (ref).

This was confirmed by a Pearson's correlation analysis, which shows a significant ($p < .001$) weak negative relationship ($r = .26$) between total physical activity and reported barriers. Interestingly as depicted, on average, only those reporting no barriers, achieved the CMO's guidelines of 150 minutes of physical activity per week.



4 CONSULTATION WITHIN FAITH CENTRES

Predictors of Physical Activity

Multiple linear regression with simultaneous entry of predictor variables were employed to assess the relationship between various modes of physical activity and motives, after controlling for demographic variables. Separate regression models were run for barriers to physical activity. All assumptions including the absence of multicollinearity and the presence of normal distribution, linearity and homoscedasticity were met for all continuous variables. Alpha levels were set at $p < .05$.

Total physical activity

For total physical activity socio-demographic variables of age and employment status and one motive, habit, emerged as significant predictors. This suggests amongst the survey sample, the likelihood of being physically active declined as one aged or were unemployed, independent of other socio-demographic and motive variables. Thus these groups should be targeted in future sport and fitness interventions among the BAME population. The motive, habit, also significantly predicted total sport and fitness physical activity. No barrier independently predicted total physical activity.

Walking and cycling to work

Only one variable, employment status predicted active travel to and from work. Other motives did not significantly predict this form of physical activity therefore it is likely that individuals undertook this form of physical activity as a necessity, rather than motive for other reasons. No barriers significantly predicted this mode of physical activity.

Recreational walking and cycling

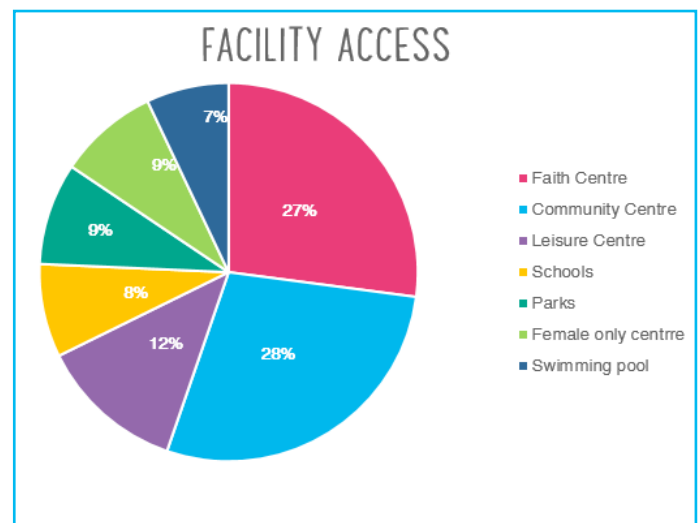
For recreational walking and cycling, demographic variables of gender and employment proved significant predictors, suggesting women and unemployed respondents engaged in less of this mode of physical activity and should be targeted in future interventions. Motives of socialising and fun significantly predicted this form of physical activity and emphasis should be placed on the benefits when promoting this form of physical activity. Regarding barriers predicting this form of physical activity, the regression model did not provide a good fit for the data, therefore no inferences can be made.

Sport and fitness

For sport and fitness physical activity, socio-demographic variables of age and employment status and one motive, habit, emerged as significant predictors. Thus as with total physical activity this suggests that amongst the survey sample, physical activity, particularly amongst sport and fitness modes, declined as one aged or were unemployed, independent of other disability stats and other socio-demographic and motive variables. Thus these groups should be targeted in future sport and fitness interventions among the BAME population. The motive and habit also significantly predicted sport and fitness physical activity, therefore assisting individuals of BAME in habit formation may be an effective mode to increase physical activity (see Lally et al., 2010 for information). The separate regression model showed that only one barrier, time constraints, prevented this form of physical activity, suggesting that future interventions promoting this mode of physical activity amongst the BAME population should promote strategies to overcome this barrier (time management strategies, emphasis that physical activity can be accumulated in bouts, etc.)

Accessible facilities

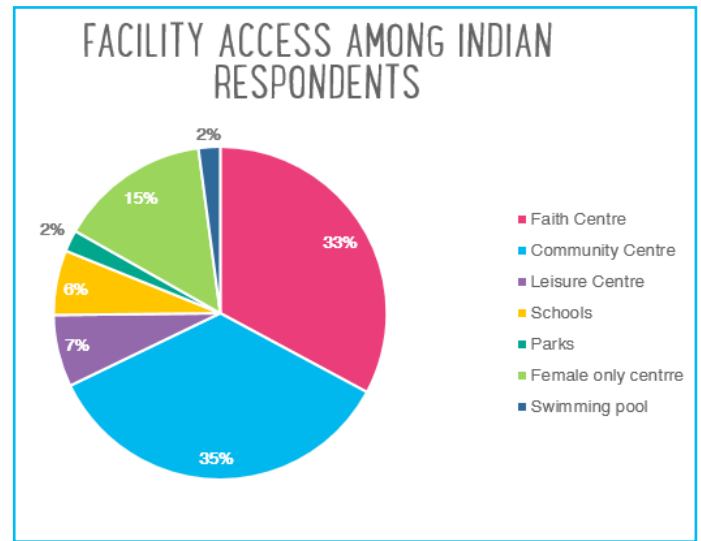
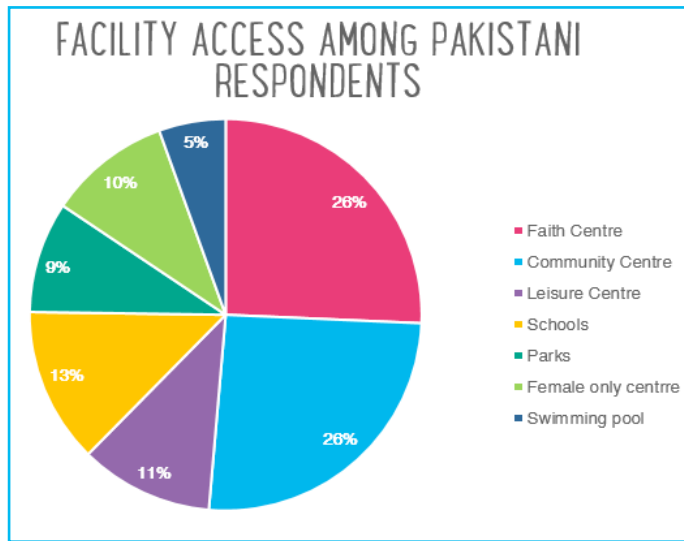
As shown in below, when comparing facility access a greater proportion indicated that the most accessible facilities were community centres (28%), followed by faith centres (27%). Leisure centres (12%), schools (8%), parks (9%), female centres (9%), and swimming pools (7%) were cited to a lesser extent.



4 CONSULTATION WITHIN FAITH CENTRES

Facility access by ethnicity

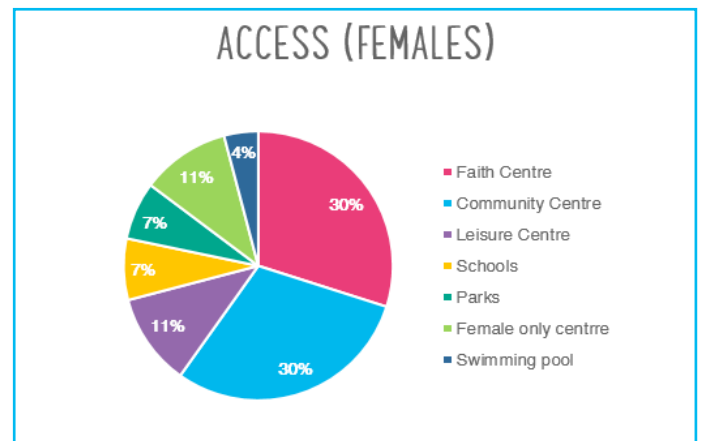
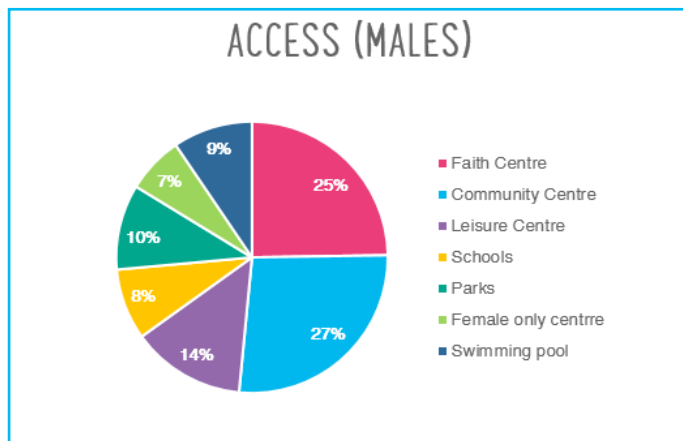
As shown in below, faith centres and community centres were the most accessible facility, regardless of ethnicity. Among Indian respondents there was lower access to female only centres than Pakistani or Bangladeshi respondents. Among Pakistani respondents, there were lower access to parks, swimming pools, and leisure centres than other ethnicities. The Bangladeshi ethnicity generally enjoyed access to a broader range of facilities than other ethnicities.



4 CONSULTATION WITHIN FAITH CENTRES

Facility access and gender

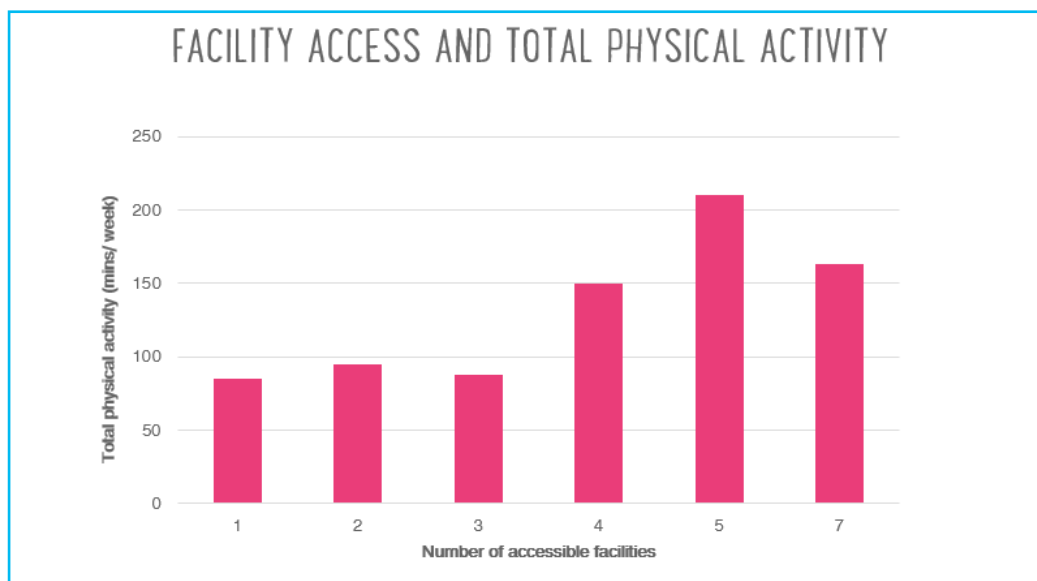
As depicted below, faith centres and community centres were reported as the most accessible facilities for males and females. Males reported higher access to swimming facilities (9 v 4%), whereas females cited higher access to female only centres (11 v 7%).



Facility access and physical activity

As one would hypothesise and congruent with past research (Ding et al., 2011) the number of accessible facilities were related to total physical activity. This was confirmed by a Pearson's correlation that showed a weak ($r = .20$) but significant ($p < .01$) positive association between facility access and total physical activity, after assumptions for the analysis were met.

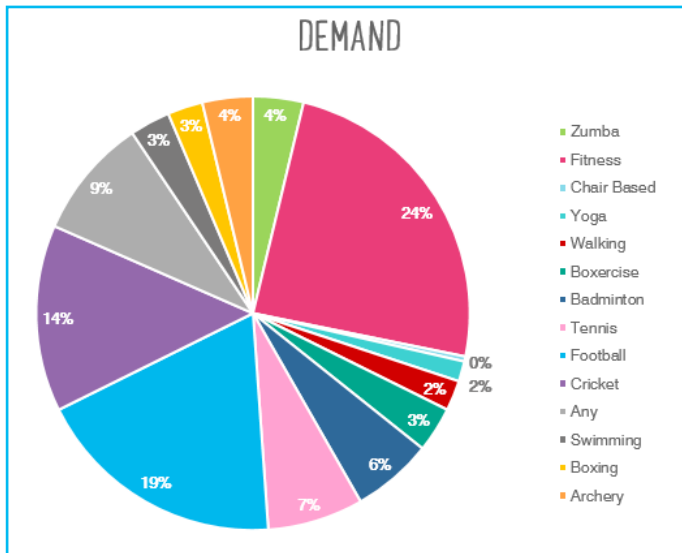
Interestingly, this suggests that on average to achieve the CMO's guidelines of 150 minutes physical activity per week, an individual may need to have access to four facilities or more.



4 CONSULTATION WITHIN FAITH CENTRES

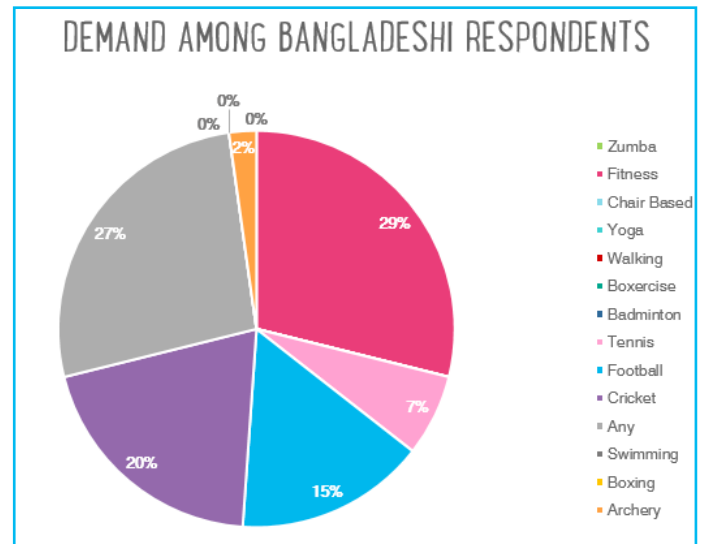
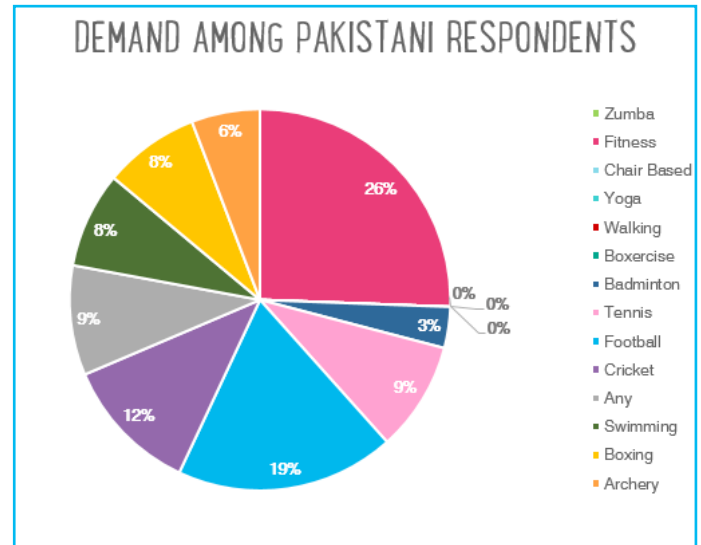
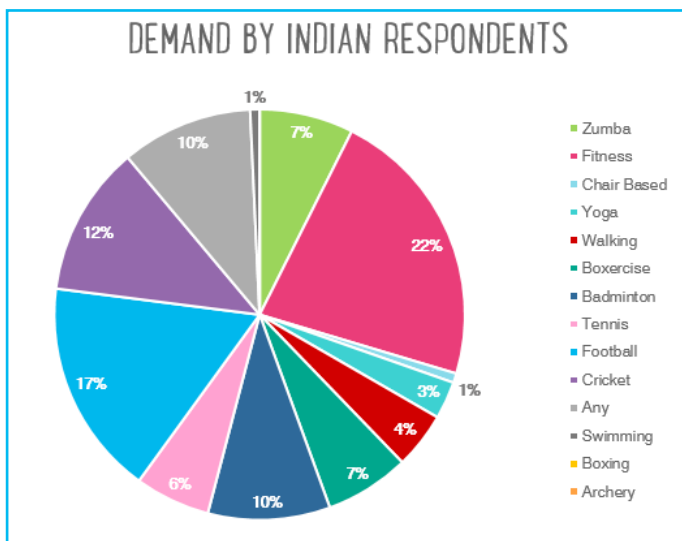
Demand

As shown below, fitness (24%), cricket (19%) and football (14%) were the most in demand activities other activities including zumba, chair based activity, yoga, walking, boxercise, badminton, tennis, swimming, boxing and archery were cited to a lesser extent.



Demand by ethnicity

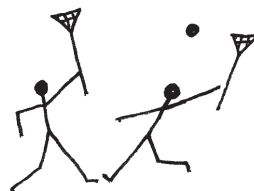
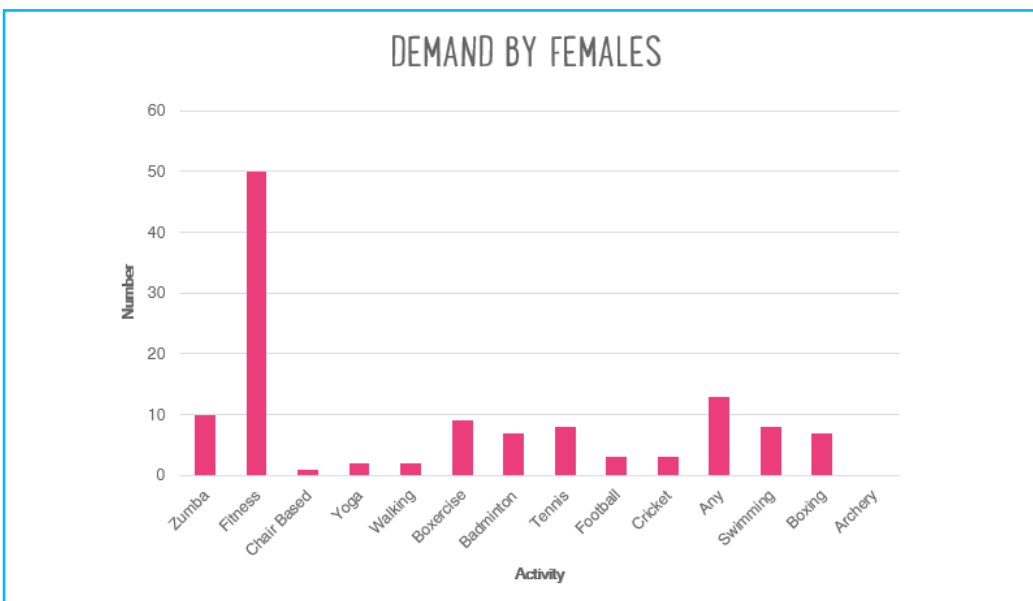
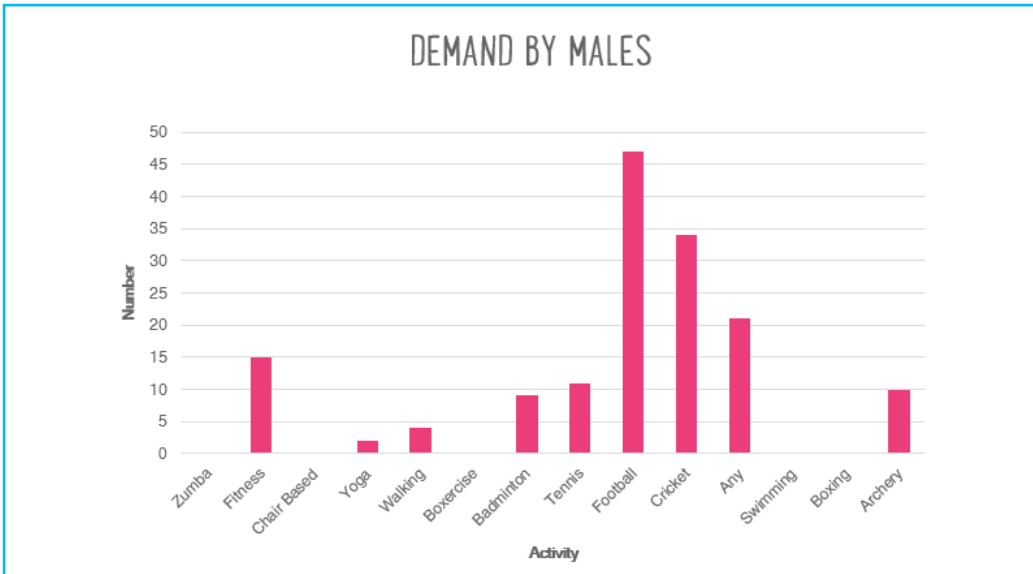
The pie charts below depict demand by ethnicity. The demand was highest for fitness activities across all ethnicities. Among Indian respondents there was a higher demand for boxercise, yoga, badminton and walking. Among Pakistani respondents demand was higher for swimming, football and tennis. Among Bangladeshi respondents demand was higher for cricket.



4 CONSULTATION WITHIN FAITH CENTRES

Demand by gender

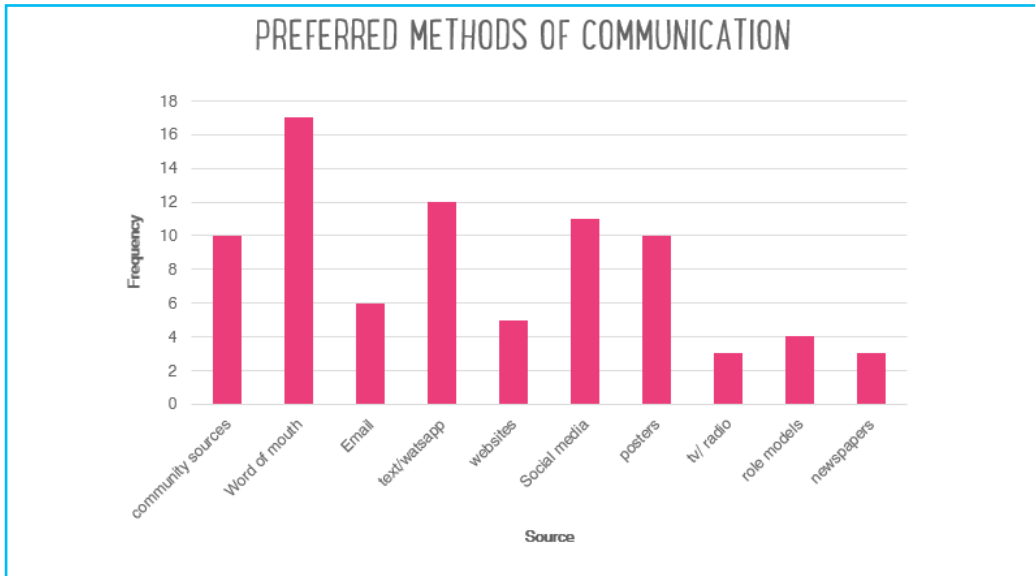
The pie charts below show demand for males and females. Demand was highest among males for cricket and football, whereas demand was highest among females for fitness activities.




4 CONSULTATION WITHIN FAITH CENTRES

Communication

As shown below, the most desired means of communication was via word of mouth. Other prominent methods of communication included text, WhatsApp, social media, posters and community sources. Insufficient data was available to provide a breakdown by ethnicity and gender.



A photograph of three young women in school uniforms. The woman on the left has dark hair in a bun and is looking towards the camera with a serious expression. The woman in the center has long, dark, wavy hair and is looking down. The woman on the right has dark hair in a headband and is looking towards the center. They are all wearing light blue shirts and green vests. The background is a blurred green field.

THE MOST
DESIRED MEANS OF
COMMUNICATION WAS
VIA WORD OF MOUTH.



5 CONCLUSIONS AND RECOMMENDATIONS

CONSIDERATION SHOULD BE GIVEN TO THE USE OF FAITH CENTRES AS A HUB FOR SPORT AND PHYSICAL ACTIVITY AS WELL AS FAITH.

As reported in the quantitative analysis, faith centres were the most accessible facilities regardless of ethnicity or gender. However they are often an under-utilised resource for physical activity. As shown in the quantitative analysis there was a significant positive correlation between availability of facilities and physical activity, supporting prior research (Ding et al., 2011). Making faith centres available may increase physical activity levels among those who reported not feeling comfortable in non-BAME environments and may overcome transport barriers, particularly among women.

The training of faith centre volunteer workforce in physical activity/coaching should be considered, this may also provide role models within the centre, which may promote physical activity (Bandura, 1997).

As shown in the quantitative analysis the number of motives was positively correlated with physical activity levels. Thus the health, enjoyment and social benefits of physical activity, including the opportunity for physical activity to bring the family and community together (key findings from qualitative and quantitative analysis) should be communicated more widely. This may improve people's attitudes towards physical activity, a key determinant of intention to be physically active and actual physical activity (Biddle & Mutrie, 2015), including among the BAME population (Alselaimi, 2010). Indeed these motives were shown to significantly predict physical activity in the quantitative regression analysis, thus increasing perceptions of these benefits may lead to increased activity. Moreover, the benefits of wide-reaching communication is that it may increase the importance and acceptance of physical activity within one's social network or community (normative beliefs), thus decreasing the cultural barriers noted among men in the focus groups.

THE TRAINING OF FAITH CENTRE VOLUNTEER WORKFORCE IN PHYSICAL ACTIVITY/COACHING SHOULD BE CONSIDERED

Increasing these normative beliefs has been shown to increase physical activity in a range of populations including BAME (Alselaimi, 2010). These benefits could be communicated in the range of data identified in the qualitative and quantitative analysis including social media, posters, training community leaders to disseminate information, text/WhatsApp.

Regarding barriers, the quantitative analysis showed that the number of reported barriers were inversely associated with physical activity levels. Thus employing strategies to overcome barriers identified within the qualitative analysis may promote physical activity levels (Biddle & Mutrie, 2015). For example, prominent barriers salient to females included the availability of facilities, transport and religion/cultural issues. Thus the mapping female only opportunities in the local area to understand current provision, signpost women to these opportunities may increase physical activity participation among this group. Where provision is deficient, consideration should be given to increasing female only centres, physical activity particularly among Pakistani and Bangladeshi respondents who cited lack of segregated classes as a barrier. Barriers pertinent to males and females included time and cost. To overcome time barriers, an emphasis could be placed on communicating that physical activity can be accumulated in bouts (Murphy et al), or comparable benefits achieved via higher intensity, shorter duration sessions. To overcome perceived cost barriers, an emphasis could be placed on that not all physical activities necessitate a cost. Integrating physical activity into one's lifestyle (e.g. stairclimbing, active transportation, etc.) necessitates no cost, and evokes comparable health benefits to more structured forms of physical activity (Opdenacker et al), therefore this message could be emphasised to promote physical activity among the BAME population.

The benefits of physical activity, methods to overcome barriers and promotion of physical activity opportunities should be communicated by the range of means identified in the qualitative and quantitative analysis including social media, posters, training community leaders to disseminate information, text/WhatsApp.

An emphasis should also be placed on increasing physical activity among the younger BAME population, given the health benefits associated with physical activity among this age group, coupled with low participation rate compared to white children (Health Survey for England, 2015; Owen et al., 2009). Madrassa may provide an opportunity to promote physical activity among this age group, the inclusion of sport and activity subsequent to/following, or within Madrassa should be considered.

There appears to be a lack of knowledge regarding funding opportunities to support physical activity projects. Provision of support to connect to sport or physical activity funding organisations should be considered.



6 APPENDICES

APPENDIX 1

Table 1.1 Breakdown in Ethnicity of Greater Manchester population to borough level

Geography	White	Mixed	Asian	Black	Other	Total BAME	Total
England and Wales	48209395	1224400	4213531	1864890	563696	7866517	56075912
North West	6361716	110891	437485	97869	44216	690461	7052177
GM	2248123	60710	272173	74097	27425	434405	2682528
Bolton	226645	4892	38749	4652	1848	50141	276786
Bury	165032	3365	13407	1893	1363	20028	185060
Manchester	335109	23161	85986	43484	15387	168018	503127
Oldham	174326	4057	43165	2797	552	50571	224897
Rochdale	172874	3569	31630	2770	856	38825	211699
Salford	210862	4616	9429	6541	2485	23071	233933
Stockport	260819	5104	13762	1958	1632	22456	283275
Tameside	199429	3159	14553	1784	399	19895	219324
Trafford	193834	6031	17973	6540	2200	32744	226578
Wigan	309193	2756	3519	1678	703	8656	317849

THE HIGHEST BAME IS
IN GREATER MANCHESTER

690,461
PEOPLE



6 APPENDICES

APPENDIX 1

Table 1.2 20 Greater Manchester wards with highest BAME populations

Ward	White	Mixed	Asian	Black	Other	Total BAME	Total
Cheetham	8400	1086	9426	2395	1255	14162	22562
Moss Side	6199	1380	3497	6520	1306	12703	18902
Longsight	4189	642	8527	1506	565	11240	15429
Ardwick	8359	1155	5287	3388	1061	10891	19250
Rumworth	5580	426	8956	891	397	10670	16250
Coldhurst	3569	271	8801	473	87	9632	13201
Werneth	2970	222	8867	218	71	9378	12348
St. Mary's	9045	241	8513	326	62	9142	10158
Milkstone and Deepdish	2808	318	7896	360	133	8707	11515
Gorton South	11297	1035	4479	2404	400	8318	19615
Whalley Range	7442	830	4745	1559	854	7988	15430
Rusholme	5870	515	5449	1111	698	7773	13643
Clifford	4208	715	4275	2261	433	684	11892
Great Lever	6916	345	6296	662	248	7551	14467
Crumpsall	8513	666	5113	891	776	7446	15959
Hulme	9605	1139	2855	2504	804	7302	16907
Central Rochdale	4394	228	6238	292	152	6910	11304
Levenshulme	9085	750	4297	782	516	6345	15430
Crompton	9283	426	5185	357	150	6118	15401



6 APPENDICES

APPENDIX 2

Table 2.1 Percentage of population participating in 30 minutes of sport or physical activity per week by ethnicities

	White	Mixed	Asian	Black	Other	Total BAME	Total
England	35.50%	44.00%	35.50%	34.50%	38.70%	37.70%	35.80%
NW	34.70%	41.40%	44.60%	42.00%	*	39.90%	35.30%
GM	34.30%	*	47.90%	38.70%	*	41.10%	35.50%

Table 2.2 Percentage of population taking part in no sport or physical activity by ethnicities

	White	Mixed	Asian	Black	Other	Total BAME	Total
England	54.20%	43.60%	54.40%	55.90%	49.70%	51.50%	53.80%
NW	55.30%	39.70%	46.80%	54.50%	76.00%	49.00%	54.70%
GM	55.60%	40.40%	44.70%	57.20%	*	48.60%	54.50%

Table 2.3 Percentage of population with latent demand to take part in sport or physical activity by ethnicities

	White	Mixed	Asian	Black	Other	Total BAME	Total
England	55.30%	69.30%	72.40%	75.30%	76.80%	71.40%	58.00%
NW	55.30%	*	83.40%	*	*	75.30%	57.40%
GM	53.00%	*	88.50%	*	*	79.70%	57.40%

Table 2.4 Percentage of population reaching N18 recommendations by ethnicities

	White	Mixed	Asian	Black	Other	Total BAME	Total
England	23.80%	27.60%	18.70%	17.40%	21.60%	21.40%	23.30%
NW	22.90%	22.90%	22.00%	*	*	21.60%	22.80%
GM	22.30%	*	26.50%	*	*	21.80%	22.30%

6 APPENDICES

APPENDIX 2

Table 2.5 Percentage of population inactive/insufficiently active based on MVPA (minutes per week of moderate intensity or double vigorous intensity physical activity) by ethnicities

Inactive	White	Mixed	Asian	Black	Other	Total BAME	Total
England	27.50%	19.70%	33.30%	28.60%	26.60%	28.00%	27.70%
NW	29.90%	*	37.90%	29.80%	38.50%	31.40%	30.30%
GM	29.40%	*	42.40%	*	*	34.00%	30.5

Insufficiently Active	White	Mixed	Asian	Black	Other	Total BAME	Total
England	14.80%	13.90%	19.30%	17.50%	18.90%	17.30%	15.20%
NW	15.30%	*	18.80%	*	*	18.40%	15.60%
GM	15.50%	*	19.50%	*	*	20.00%	16.20%

Active	White	Mixed	Asian	Black	Other	Total BAME	Total
England	57.70%	66.30%	47.40%	53.90%	54.50%	54.70%	57.00%
NW	54.80%	66.50%	43.30%	46.60%	*	50.20%	54.20%
GM	55.10%	62.30%	38.10%	45.00%	*	45.90%	53.30%

*Not sig. equally at borough level

THE ASIAN COMMUNITY ARE THE HIGHEST INACTIVE SECTOR IN GREATER MANCHESTER

42.02%



6 APPENDICES

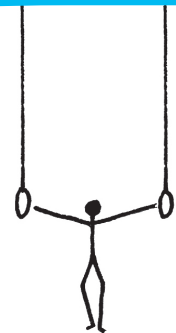
APPENDIX 3

Table 3.1 Breakdown in ethnicity of volunteers registered on VIP

Ethnicity	White	Asian
White	4050	73.70%
Black	258	4.70%
Chinese	178	3.20%
Mixed	180	3.30%
Asian	307	5.60%
Other	175	3.20%
Unknown	346	6.30%
Total	5494	

TOTAL NUMEBR OF VOLUNTEERS FROM ALL ETHNIC GROUPS REGISTERED ON VIP

5494



6 APPENDICES

APPENDIX 4

Khizra Mosque Focus Group (Male)

Below is a breakdown of the participant's demographic information:

- There were seven males, with an age range from 19 – 61 years
- All were from a Pakistani background
- As expected at a community for Mosques all were Muslim
- Four considered themselves active
- The group was a mix of students, full-time workers and there was one faith leader

Motivations

The biggest motivation was staying healthy, enjoyment, faith and service to the community. The group's main ideas centred on making the faith centre a space that is used for religion but also sport and physical activity.

Faith was a key driver for this group with the Imam highlighting the importance of sport within religion.

Barriers

The men felt that there were no specific gender issues that affected them, however, one who was very strict with his faith felt that more single sex sessions should be available for men who do not want to be around women during sports such as swimming. However on the whole they did feel that gender didn't pose a barrier.

Wives and daughters were discussed and the group felt there were significant barriers for women. The main issue for the men was that they wanted their wives/daughters/sisters to take part in sport in a safe, female only environment but there were not enough provisions for this. Using the mosque to develop a project was decided the best way to engage with females, sessions didn't all have to be at the mosque but using the mosque as a base for activity will help.

Culture seemed to be a big barrier for these men, who although wanting to get more active, they felt that cultural constraints decreased their participation. These men were the breadwinners of the family and therefore family and work came first and then sport. As they were growing up they were not encouraged by their parents to take part in sport.

The importance of sport did not seem to be understood by some of the community e.g. older people. They felt that if the health benefits were expressed more it may highlight the value.

Some of these men participated in 11 a side football during their youth and felt that negative experiences of racism affected their sports participation. They were unsure if their racism would still exist today.

The oldest members of the group felt that language was a barrier for older people as many did not have the language skills to be comfortable in going to a local leisure centre.

Workforce

With regards to workforce, the group felt that coaches need to be gender specific, e.g. male coaches for male sessions and female coaches for female sessions.

The group did not specify the coach has to be from a BAME background but if a coach understands the community it helps.

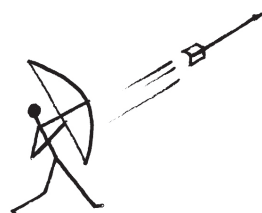
Communications

The main form of communication was through the mosque. The centre issues a monthly timetable and newsletter that has prayer times on it, this is also used to get the word out. Announcements were also made regularly during the mosque prayers.

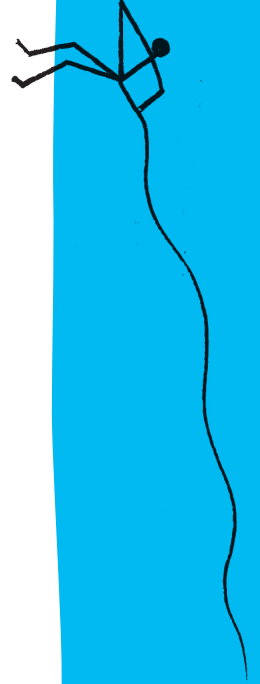
Summary

- More sport and physical activity opportunities at the faith centre
- Sports that are linked to religion – Archery was identified as popular given its significance to Islam
- Training key mosque volunteers to become coaches.
One participant put himself forward to take an archery course

TRAINING KEY MOSQUE VOLUNTEERS TO BECOME COACHES. ONE PARTICIPANT PUT HIMSELF FORWARD TO TAKE AN ARCHERY COURSE



“A COACH THAT
UNDERSTANDS
THE LANGUAGE
AND UNDERSTANDS
THE COMMUNITY
IS KEY.”



6 APPENDICES

APPENDIX 4

Khizra Mosque Focus Group (Female)

Below is a breakdown of the participant's demographic information:

- There were six females, with an age range from 19 – 45 years
- All were from a Pakistani background
- All were Muslim
- One considered herself as active
- Two were students, two were housewives with children and two were married and working part time

Motivations

The main motivations were keeping fit and doing something new and fun. An ideal session would be linked to the mosque utilising the mosque as a venue. The session would have to have a social feel targeted at mothers and daughters.

Family was another motivation, the three mothers stated that they would like to do more with their daughters and if the mosque were able to arrange such sessions it will be well received by local females.

Health was identified as another key motivator, the females felt that improving their health was really important to them and any sport they are involved in should be centred on improving health.

Barriers

Religion was initially discussed and the group found dress code had to be respected and they did not want to be taking part in sessions around men. However, it was discussed that if the approach was right, religion would not be a barrier. One of the group members worked part time as a mosque teacher and encouraged females to be healthy and physically active.

The biggest issue identified by the group was 'culture'. When they were growing up their parents had old fashioned views and didn't encourage girls to take part in sport, however, the group felt that this is changing with the next generation and they would encourage their children to take part in sport.

Transport was another barrier for the group and only one of the females drove. Opportunities had to be local and at a space that was safe for females in the community. Many felt that the mosque was a good space for them. Two of the married women said their husbands would not be comfortable with them going to the local sports centre.

Workforce

Similarly to the male focus group, any sessions led by a coach had to be of the same gender. The idea that more BAME females, particularly south Asian Muslims, should be encouraged to work in sport or become coaches. They would act as role models for local women and would also understand local females better.

Communication

The group felt that information was not getting to them. A good place would be Asian clothes shops for flyers, ethnic food shops and the mosque.

Summary

- Religious barriers can be overcome through a faith-based approach
- Cultural issues are more a barrier
- Health benefits need to be promoted more which will encourage more Muslim females
- More investment in Muslim female coaches/leaders
- Boxcercise/Circuits would be ideal sessions

THE MAIN
MOTIVATIONS WERE
KEEPING FIT AND
DOING SOMETHING
NEW AND FUN.



6 APPENDICES

APPENDIX 4

BCOM Focus Group (Female)

Below is a breakdown of the participant's demographic information:

- There were 15 females, with an age range of 19 – 72 years and an average age of 42
- Seven were from Pakistani backgrounds and seven from Indian backgrounds
- As expected at a community for Mosques all were Muslim
- Six people had a disability
- Only five considered themselves active
- The majority were housewives (nine), two were self-employed, one was in full time employment, one was unemployed and one was in full time education

When asked if they considered themselves active only two people raised their hands. However when they discussed it further, most considered themselves active in terms of cleaning and cooking in the house for over four hours a day, but this was rarely vigorous or raised their heart rates.

Motivations

The biggest motivation was weight loss, followed by improving health. Whilst an incentive might also be good food after the session. Other motivations included the coach with a personality to enthuse people to get involved and to get on with the group, as well as getting outside in the fresh air and walking.

A few people mentioned having someone to go with others as an important factor in starting and motivating each other to continue the activity.

Activities that were mentioned were a relaxing swim, low impact aerobics, both chair and standing for those less able, badminton, volleyball, yoga and walking. There was a clear divide on whether these had to be female-only activities or not, with younger females less worried about this in general.

Barriers

Transport was raised as an issue, because few people were able to drive or had access to a car, so rely on walking and public transport. Most said they would prefer it to be at the centre as they know how to get there and it is familiar to them. Another barrier was language, with English not being everyone's first language and a number of individual's attending ESOL classes.

This could potentially be used as an incentive to improve an individual's English through activity.

Other barriers included bad weather, no time, in particular due to looking after kids and housework, not enough ladies only activities and health conditions. Finally, there was a comment around head scarves in the gym making activity unconformable.

Journey

A typical day would be: drop off/children leave for school or college, 10am start housework, 12/1pm start cooking, 6pm go walking, 7pm family meal. So somewhere between 10:30/11am and 2pm would be ideal for activity, as they seem to be quite busy in the morning and again in the afternoon/evening.

A typical week would include: Thursdays women's groups and Saturdays food shopping.

Workforce

In terms of the ideal workforce, there was a divide as to whether they needed to be female, but all agreed they did not necessarily have to be from their community or background. What was important was that they were able to socialise, as well as just teach sports, and enthuse participants to take part.

Communications

The main form of communication was through a WhatsApp group, but they also use Facebook and email.

Summary

From the consultation the options the group have suggested are:

- Train a leader within the group to deliver sessions as and when convenient
- Leave pop up equipment, such as badminton or volleyball, that could be used when convenient
- Collate female only sessions within walking distance or easily accessible by public transport of the centre
- Organise an instructor for an aerobics/yoga session, with a low impact option, for one hour on a weekday, either late morning or early afternoon
- Organise a group swim through a member of the group to all attend a female only session at Bolton One

ORGANISE A GROUP SWIM THROUGH A MEMBER OF THE GROUP TO ALL ATTEND A FEMALE ONLY SESSION AT BOLTON ONE



6 APPENDICES

APPENDIX 4

Longsight Mosque

Below is a breakdown of the participant's demographic information:

- There were four males, with an age range of 24 – 55 years
- Two were from Bangladeshi backgrounds and 2 from Pakistani backgrounds
- As expected at a community for Mosques all were Muslim
- Only three considered themselves active

The group discussed the main motivations for getting involved in sport and physical activity were to bring togetherness to the community and having something fun and enjoyable to do. Health and fitness were not mentioned but when probed it was discussed that this was important and there were many health problems, such as diabetes particularly within men.

The group seemed to want to focus most of the attention on ensuring there were opportunities for young people who attend madrassa, as opposed to working with older people and the conversation centred more on providing opportunities for them. The Imam was keen to ensure that children who attend madrassa were able to access sport and physical activity opportunities within mosque times as he felt that many of the young people missed out on after school sport due to attending the mosque at 4.45pm.

Faith was a big driver in the discussion and sport that had a good significance to Islam was looked on more favourably within the community and will interest the leaders of the mosque. Sports such as archery and wrestling were identified.

The group identified claims that a variety of sports were not on offer, although opportunities for football existed, other sports such as tennis, archery and wrestling were not available and there was a lack of knowledge on how to access these.

The group felt that although there is a will to address sport and physical activity within the female community and older people, the group concluded that the best way to tackle this was to concentrate on the young people first and then focus on other sections of the community.

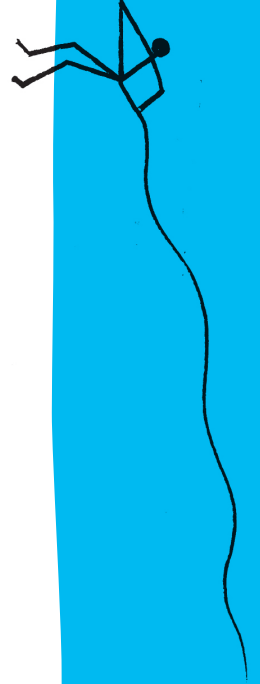
Summary

- Create opportunities to take part in 'new' sports
- Islamic sports such as archery and wrestling
- Mosque are very new to sport and physical activity so target young people who can then encourage parents to get involved
- Working with madrassa children who miss out on after school sports due to madrassa commitments

MOSQUE ARE
VERY NEW TO
SPORT AND
PHYSICAL ACTIVITY
SO TARGET YOUNG
PEOPLE WHO CAN
THEN ENCOURAGE
PARENTS TO
GET INVOLVED



“FAITH IS IMPORTANT,
PARENTS DON'T
LIKE CHOOSING
BETWEEN FAITH
AND SPORT.”



6 APPENDICES

APPENDIX 4

Oldham Indian Association

Below is a breakdown of the participant's demographic information:

- There were five males and four females all from an Indian background aged 22 – 68
- All participants were Hindu
- Only one considered themselves physically active
- Representation from youth, older people and female
- Three were retired, four were working full time, two worked part time

The group introduced themselves and all agreed that sport and physical activity was not a large part of their life and did not hold that much significance. The one young person who felt physically active did so by general walking and healthy eating, not by playing sport or going to the gym.

The older participants made reference to being physically active in their youth and taking part in sport 'back home' (reference to when they lived in India), however, this habit did not transfer to England as work was more of a priority. The main form of physical activity was walking to and from the temple.

Watching sport was discussed and cricket was a sport that was watched by all the community, watching India in big matches was an activity that all the family enjoyed.

Motivations

One of the main motivations was for something different to do and having a new hobby. The senior figures within the temple were also very keen to bring something new to the temple and offer something to the community to create a better sense of togetherness and community. The temple has significant indoor space that can be utilised for sport.

The social and fun aspect was also important for the group and was really important in ensuring people continue to take part and enjoy sport and physical activity. For the female participants, weight loss and fitness was a big motivation and also doing something fun with like-minded people who they know and are comfortable with.

It was also agreed throughout the group that within Hinduism physical health is as important as spiritual health.

Barriers

Transport was flagged as a major barrier for some people, as people were unwilling to travel far to take part in sport or physical activity and the group felt that a local offer, within the temple or close to the temple, would be a better way of targeting the community, specifically the inactive people. One of the females mentioned that they were aware of other opportunities such as zumba classes in other towns and some women who had access to transport were travelling significant distances to take part.

Segregations of sessions was also discussed and it was felt that the group would like to encourage more family sessions, but do not wish to segregate between male and female. For the young people it was important that sessions were open to all. Badminton was identified as a sport that would be good for families and would be welcomed. Some of the females said although they are happy to take part in mixed sessions, a female only approach to some sessions will create a social feel.

Funding was also identified as a barrier, it was felt that to begin with sessions had to be free but with time people would pay. The older members of the group felt that some sports can be quite difficult and put them off as they seem to require a high level of fitness and skill, but a more relaxed form of physical activity will be more appealing.

Workforce

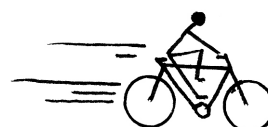
The group did not specify what a coach should be like, but many of the older people were not strong at speaking English therefore a multi-lingual coach would be a benefit. The group were happy with either a male or female coach, but females agreed that activities like zumba should be female led. The group also discussed the volunteering that is involved within the temple and there may be scope to upskill volunteers through coaching courses.

Communication

The group felt that due to them being a faith centre they were not receiving enough information about sport and physical activity opportunities, there are regular days of worship and events within the temple and it was felt promotion of opportunities within the temple would be an effective way of communicating.

Summary

- Badminton sessions utilising the main hall within the centre targeted at young people and families
- Zumba sessions for females
- Relaxed physical activity sessions targeted at older people



“WHEN OUR OLDER
PEOPLE THINK OF
SPORT AND
PHYSICAL ACTIVITY
THEY INSTANTLY
GET PUT OFF
THINKING ITS
JUMPING AROUND.”



6 APPENDICES

APPENDIX 4

Bolton Hindu Forum

Below is a breakdown of the participant's demographic information:

- There were six males and four females, all were from an Indian background aged 19 – 51
- All participants were Hindu
- Six considered themselves physically active
- Representation from youth, older people and female
- All participants worked either full time or part time

Six people identified themselves as physically active, four male/two female, however, three felt they went from being inactive to active from month to month. Ones that were regularly active were active through either the gym or social sports such as football with friends. The inactive group did very little in terms of sport or physical activity and life revolved around work, family and religion.

Sport and physical activity were initially discussed and most of the group felt that it was not seen as a priority within the community and there was a lack of understanding of the benefits and importance of physical health and it comes second to other commitments such as family, work and religion.

Motivations

The main motivation was health/fitness and fun for taking part in sport or physical activity. Sessions or activities encouraging people to be physically active needed to be fun and innovative, learning a new skill was also a motivator. The group also found that activities that bring people together are a big motivation as it increases togetherness and has more of a social feel to it. Religion was also a key motivation as spiritual and physical wellbeing is an important part of faith. The group felt that doing activities together as a community was important and would ideally like sessions that integrate both males and females.

“WE FOCUS A LOT ON SPIRITUAL HEALTH AND WELLBEING BUT PHYSICAL HEALTH IS JUST AS IMPORTANT.”



Barriers

The males felt that there were not many barriers for them but some cited poor past experiences such as racism or poor coaches as a barrier, however, these were cited as rare examples.

A non-BME sport environment was also cited as a barrier as it could be daunting to take up a new activity that is not deemed welcoming; taking up tennis was used as an example which may be difficult for BME people to access. Parental attitudes were another issue discussed and it was felt that there is a lack of education and information regarding the importance of sport and physical activity.

The females in the group felt that opportunities weren't targeted at South Asian women, as marketing is more focused to non-BME females. The females also said they were not encouraged by their mothers to be physically active.

Support from the right organisations and lack of knowledge was also identified as a barrier, the group felt that with the right help and funding they would be able to work to get more people active within the community.

Workforce

The lack of visible role models was discussed with the group feeling there was a lack of coaches from a Hindu background, although the ethnicity of a coach was not important in getting people active, provided they have the skills to motivate. The females stated that they were not aware of many South Asian female sports stars and if there were more it could inspire others to get involved. The group were keen to look to address the workforce issue and use local lead volunteers within temples to be upskilled in sport.

Communication

The group felt that mainstream forms of media were the best way of engaging with social media also being important. Each temple has their own social media page so this would be a good way to engage. Although they were aware of some local opportunities they were not aware of organisations that can support with sport and physical activity.

Summary

- Lack of education in the community
- Lack of awareness of sport organisations
- Training needed for volunteers
- Funding support needed

“I’VE PLAYED
FOOTBALL ALL
MY LIFE, I’VE
NEVER SEEN AN
INDIAN FOOTBALL
REFEREE.”



6 APPENDICES

APPENDIX 4

UKIM Oldham (Female)

- There were five females aged 22 – 36
- All participants were Muslim
- One considered themselves to be physically active
- One worked full time, two worked part time and two were housewives

Motivations

Going as a group was one of the key motivators for these women, they felt happier, more comfortable and safer with other likeminded women. The social aspect of this was also mentioned a lot as one of the reasons for going together.

GOING AS A GROUP WAS ONE OF THE KEY MOTIVATORS FOR THESE WOMEN. THEY FELT HAPPIER, MORE COMFORTABLE AND SAFER WITH OTHER LIKEMINDED WOMEN.

Barriers

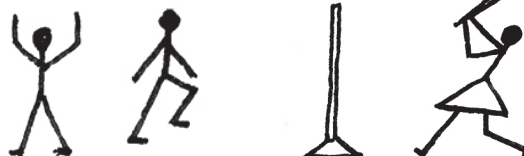
Some highlighted poor experiences of school sport as a reason why they did not continue to participate, this was due to poor coaches who did not understand Muslim females. One of the key reasons for drop off was marriage and family commitments. The women felt that once they were married they were expected to be a 'wife' which did not include playing sport or being physically active. Women also mentioned the expectation of in-laws who had a certain view of how a daughter-in-law should live and sport was not part of it.

Another reason was having children, this gave the women no time for sport as they were busy looking after their children. Facilities were also considered a barrier as the group felt they couldn't access traditional gyms or sport centres. Workforce (male and female)

The coaches need to be gender specific to sessions and there was no flexibility in this. Even though the males felt that ethnicity and religion were not important for a coach, some females would prefer a coach from the same ethnicity.

Summary

- Target madrasa young people to create an early habit around physical activity
- Females require Female Only Muslim environment to begin with
- Utilising space within the mosque and keeping opportunities on site



6 APPENDICES

APPENDIX 5

Draft Focus Group Outline (1 hour)

Demographics captured through consent forms

Thank you for coming, introductions, outline what and why (5mins)

Engagement Questions - Understanding of physical activity (10mins)

- Do you consider yourselves active? (Stand up yes)
- Discuss what being active means to you and your experiences?
- Awareness of levels activity required to stay healthy (Hands up: 10mins a day/30mins a week/150 mins a week)?

Explorative Questions

1. Motivations

- What was key trigger to start using/motivates you (necessity/feel-enjoyment/habit-always done it/social/health/weight/family/other)?

2. Barriers

- Lack of time, lack of facility, motivation, transport, cost, inability/health, cultural, personal
- Follow up questions to overcome barriers: what are more pressing matters on time? Could anything motivate you? What could be done to make life easier? What are costs? Health, time, family issue?

3. Journey

- What does a typical day look like (breakfast, school pick up/drop off, commute, work, commute, dinner, evening), identify opportunities for sport and physical activity

4. Workforce

- Volunteer/workforce preferences: facilitator or coach, within faith centre, within community or external, characteristics important- female or male?

5. Awareness of opportunities and facilities available in local community

- What and where? Easy to get to, feel safe/welcome/comfortable?
- What do you think of costs, cleanliness, available at right times, busy, improvements?

6. Promotional material

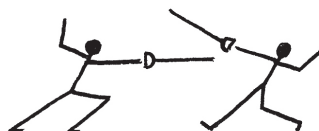
- How find out about?
- The best way to communicate/find out about opportunities?
- Feedback about examples This Girl Can, local

Exit question (5mins)

- Anything else you would like to say about why you do or not participate in sport and physical activity?

Thank you for taking part!

Ask to place on scale and challenge if contradicts what have previously discussed (how we have previously profiled people by behaviour)



6 APPENDICES

SURVEY

1. Are you an active person?

Yes No

2. How much time do you spend walking/cycling to and from work?

Daily hours minutes

Weekly hours minutes

3. How much time do you routinely spend walking/cycling? (Exclude travel to work)

Daily hours minutes

Weekly hours minutes

4. How much sport and fitness do you do, (excluding walking/cycling)?

Daily hours minutes

Weekly hours minutes

Please list all the activities you do and where these are carried out?

5. How much recreational activity do you do, (excluding walking/cycling)?

Daily hours minutes

Weekly hours minutes

Please list all the activities you do and where these are carried out?

6. What motivates you to be active?

Social Health

Weight Family

Necessity/Feel Enjoyment

Fun Habit - always done it

Other, please state

7. Which sporting facilities are most accessible for you?

Leisure Centres Park

Swimming Pool Youth/Community Centre

Gym/Fitness Class School Sports Hall

Sports Clubs Faith Centre

Other, please state

8. If you are not active, why not?

Lack of facilities Dress codes

Cost Lack of Transport

Lack of Time Health

My culture/religion Fear of racism/discrimination

Other, please state



6 APPENDICES

SURVEY

9. How much time you usually spend sitting or reclining in a typical day?

hours minutes

10. What kind of activities would get you more active?

11. Where would you like to find out about opportunities to become more active?

- Sports Websites
- Sporting Equals website
- Newspapers
- Mail outs
- Word of Mouth
- Facebook
- TV/Radio
- Friends/family
- Email
- WhatsApp/texts
- Magazines
- Ethnic Media
e.g. Star TV, Vox Africa
- Twitter
- Newspapers, magazines for your ethnicity
- Community sources
- Posters
- Role Models

Other, please state

Finally, we need some very basic information about you in order to analyse your replies

Postcode Age

Sex Male Female

Ethnicity e.g. Pakistani, Indian, Bangladeshi

Religion e.g. Muslim, Sikh, Hindu, Christian

Employment Status

- Working full time
- Self-employed
- Working part time
- FT Education
- Unemployed
- Housewife

Do you have a disability or long term health condition?

Please state

THANK YOU FOR COMPLETING THIS SURVEY. THE INFORMATION YOU PROVIDE WILL BE USED FOR RESEARCH PURPOSES ONLY AND ANY PERSONAL INFORMATION SUPPLIED WILL BE TREATED CONFIDENTIALLY.



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