



# Encouraging higher levels of physical activity amongst people with LTCs

Research conducted on behalf of the  
Richmond Group

October 2016

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# Methodology

# Overview of methodology



Literature review

8 x depth interviews

- 6 with people with multiple LTCs who never / rarely exercise
- 2 with people who are close to someone with multiple LTCs

Message development workshop

- Incorporating emerging findings from the depths

5 x focus groups

- 4 x groups with people with LTCs who never / rarely exercise
- 1 x group with people close to someone with an LTC

Interim findings

Online poll

- Poll with 323 respondents
- Average survey length: 14 minutes

Analysis and reporting

## Definition of “physical activity”:

*Any activity that gets you up and moving. This might include things like walking to the shops, gardening or doing the housework, as well as things like riding a bike, going for a swim, or playing football*

# Who we spoke to

## Qualitative sample:

- The primary audience for this research was extremely inactive people with multiple LTCs, i.e. those who engage in physical activity once a week or less
- The qualitative sample was recruited to reflect this and participants were extremely inactive

## Quantitative sample:

- Those with multiple LTCs who are more active were a secondary audience
- Our quantitative sample was therefore structured to include some more active respondents
  - 38% do 10 minutes or more of physical activity every day

*“I would say if I can do half an hour of vacuuming or putting the bins out then that would be a maximum for me per day.”*

Multiple LTCs, Male,  
Depth interview

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

Multiple LTCs, Female,  
Depth Interview



# Background attitudes

# A desire amongst those with LTCs to be more active indicates a messaging opportunity

I am happy with the amount of physical activity I do, and do not want to do more

32%

I am unhappy with the amount of physical activity I do, and want to do more

61%

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

Multiple LTCs, Male, Depth interview



Both “exercise” and “physical activity” have negative connotations, and are seen as “not for me”

What are the first 3 words or phrases that come into your head when you think of...

Exercise

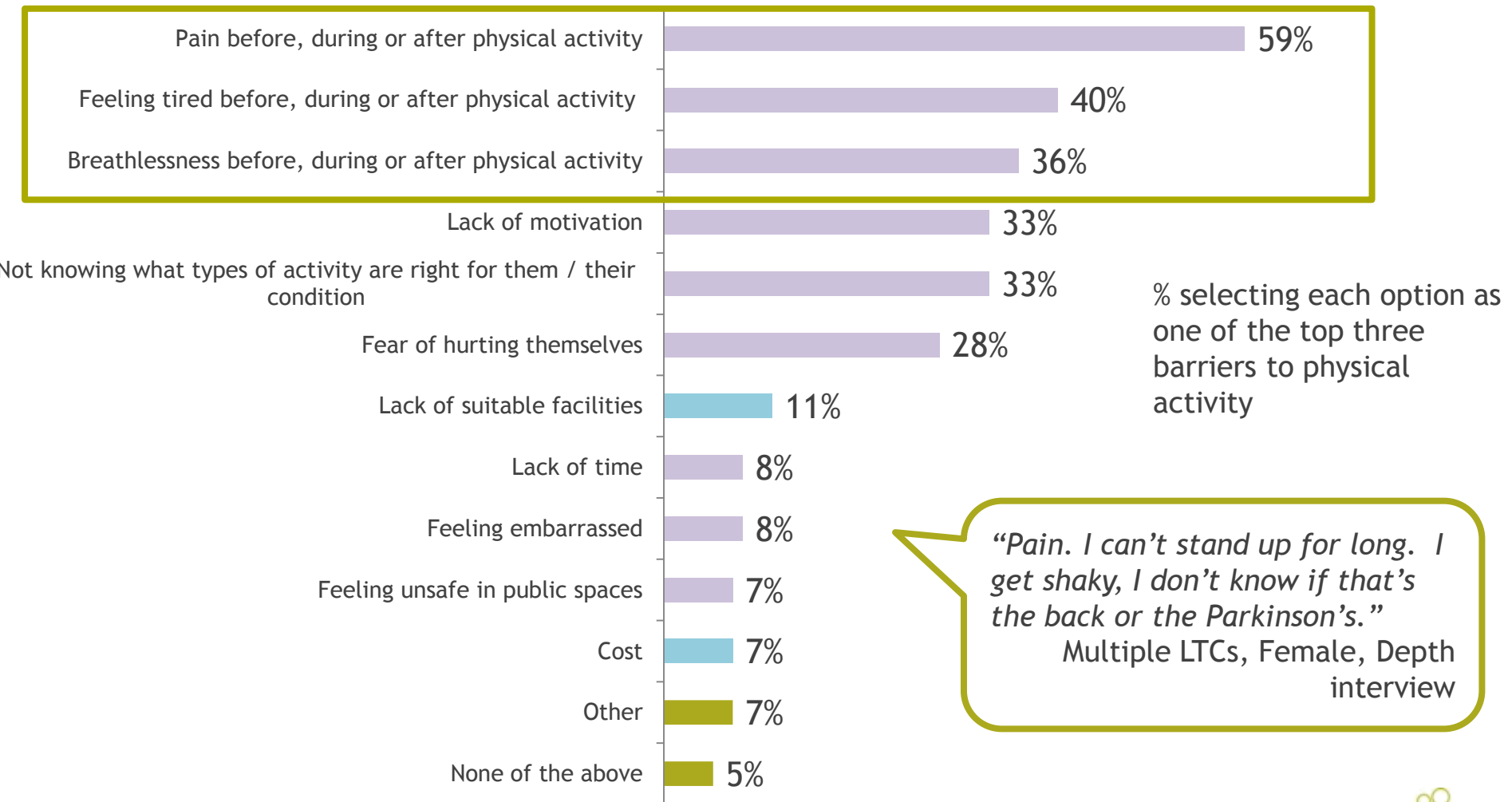


Physical activity



# The strongest barriers to physical activity relate to the symptoms associated with respondents' LTCs

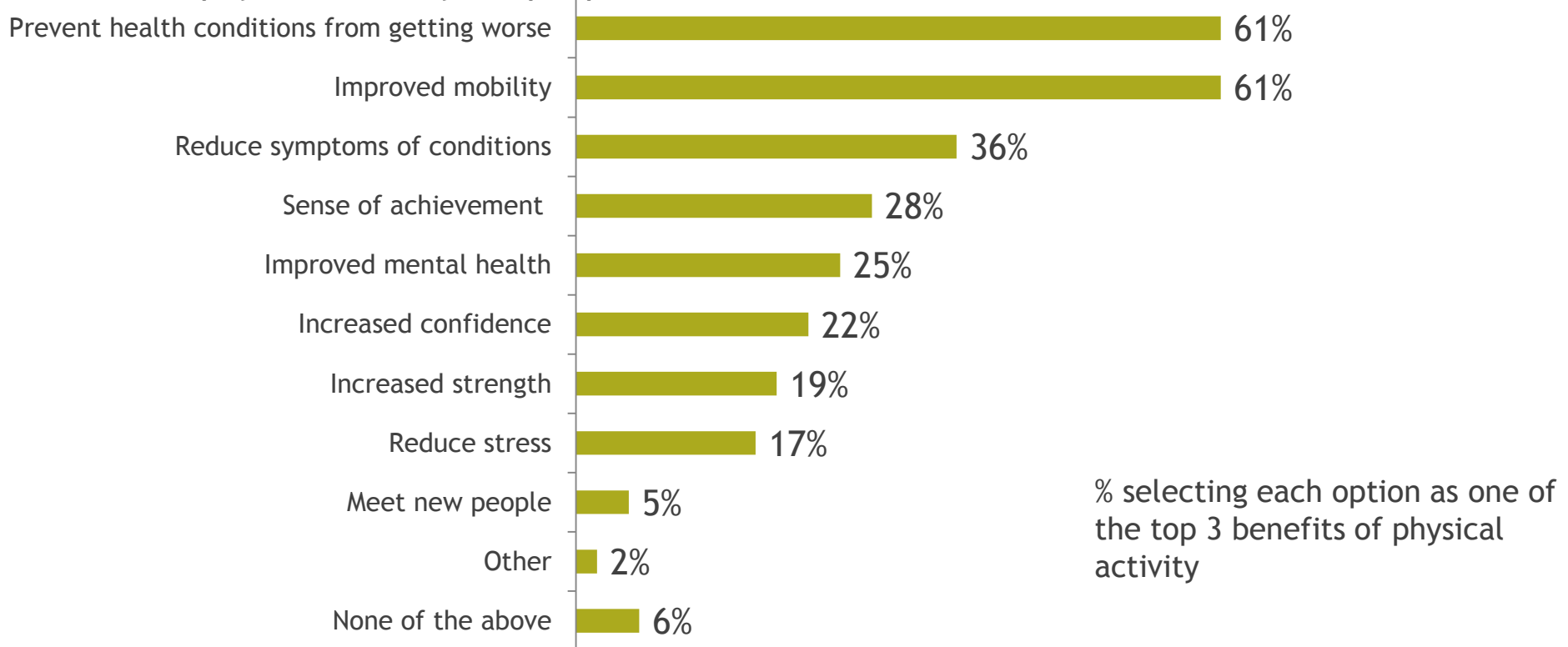
## Barriers preventing people with LTCs from doing physical activity



Q. The following are some barriers that might stop people with long-term conditions from doing physical activity. Please select the biggest barrier you think would be most likely to stop people with long-term conditions from doing physical activity. Base: All (n=323)

# Survey respondents say preventing conditions from deteriorating & improved mobility are the top benefits of physical activity

## Benefits of physical activity for people with LTCs



Our less active qualitative participants struggled to articulate the benefits of physical activity, beyond a general sense that it is “good for your health”

Q. The following are some benefits that people with long-term conditions might get from doing physical activity. Please select the biggest benefit that you think people with long-term conditions might get.  
Base: All (n=323)



# Message testing

# Approach to message testing

- The message development workshop produced a suite of messages to take forward for testing
- These were tested with participants in the focus groups to understand which messages work well, which work less well, and the reasons for this
- The messages identified as the most or least effective were then carried through to the poll for a further round of testing



What makes a successful message?

# Successful messages speak to everyone, regardless of ability or demographic

- ✓ Provide reassurance that anyone can do physical activity
  - ✓ Without specifically singling out the very incapacitated
- ✓ Encourage those who may have given up
- ✓ Use inclusive, unintimidating language e.g. “everyone”, “active” or “mobile”

*Everyone benefits from moving about more, regardless of how old they are, or what their health is like*

*It's never too late to start getting active*

# Successful messages combine positivity with realism to sound credible

- ✓ Communicate the health benefits of physical activity
- ✓ But also recognise that some people's ability to engage may be limited
- ✓ And provide reassurance that even a small amount of physical activity will bring benefits
  - ✓ Setting the bar low (e.g. "just 10 minutes a day") ensures that the very inactive are not "frightened off"
- ✓ And concrete suggestions for actions they could take e.g. walking to the bus stop

*Even small amounts of physical activity can bring long-term benefits for your health and wellbeing*

*Every step counts*

*Small increases in activity, like walking to the bus stop, can have a big impact on your health*



# Successful messages speak to people's aspirations for their own lives

- ✓ Recognise that, in addition to health, people with LTCs might have a range of reasons for wanting to be more active
  - ✓ Being able to remain independent
  - ✓ Being able to spend time with their families
- ✓ And tap into these aspirations to motivate people

*Physical activity... can keep you mobile*

*Physical activity can help you stay strong and remain independent*

*Physical activity can help you stay strong so you can... play with the grandkids*



Why do weaker messages not work so well?

# Weaker messages challenge people's lived experiences

X Suggest benefits of physical activity that people do not experience or expect

X That it will reduce or help manage pain

X That it will be fun

X It is not for most - and they do not expect it to be

X That they will get “fit”

X Feels unrealistic for most

X These messages therefore lack credibility

*Be a natural painkiller*

*Regular physical activity can help manage your pain*

*Have fun, feel free*

*Get fit, make friends*

# Weaker messages are patronising

X Make assumptions about individuals' conditions or symptoms

x By referring to “your symptoms” or “your condition”

X Assume individuals lack knowledge or understanding of their own condition

x By using phrases such as “Did you know...?”

X Imply that people with LTCs' lives are currently unhappy or unsatisfactory

x Or that they are in some way the “prisoners” of their conditions

X Use excessively colloquial or “matey” language

x E.g. “grandkids”

*Physical activity is a natural painkiller*

*Being more active can help manage your pain*

*Starting a new physical activity can help you meet new people*

*Have fun, feel free*

# Weaker messages are bossy

- X Tone and language instructs, rather than suggesting or encouraging
  - X E.g. “Be a....” or “See what...”
- X Appears to threaten negative consequences of not engaging in physical activity, rather than focusing on the benefits

*Starting a new physical activity can help you meet new people. See what is available in your area*

*Be a natural painkiller*

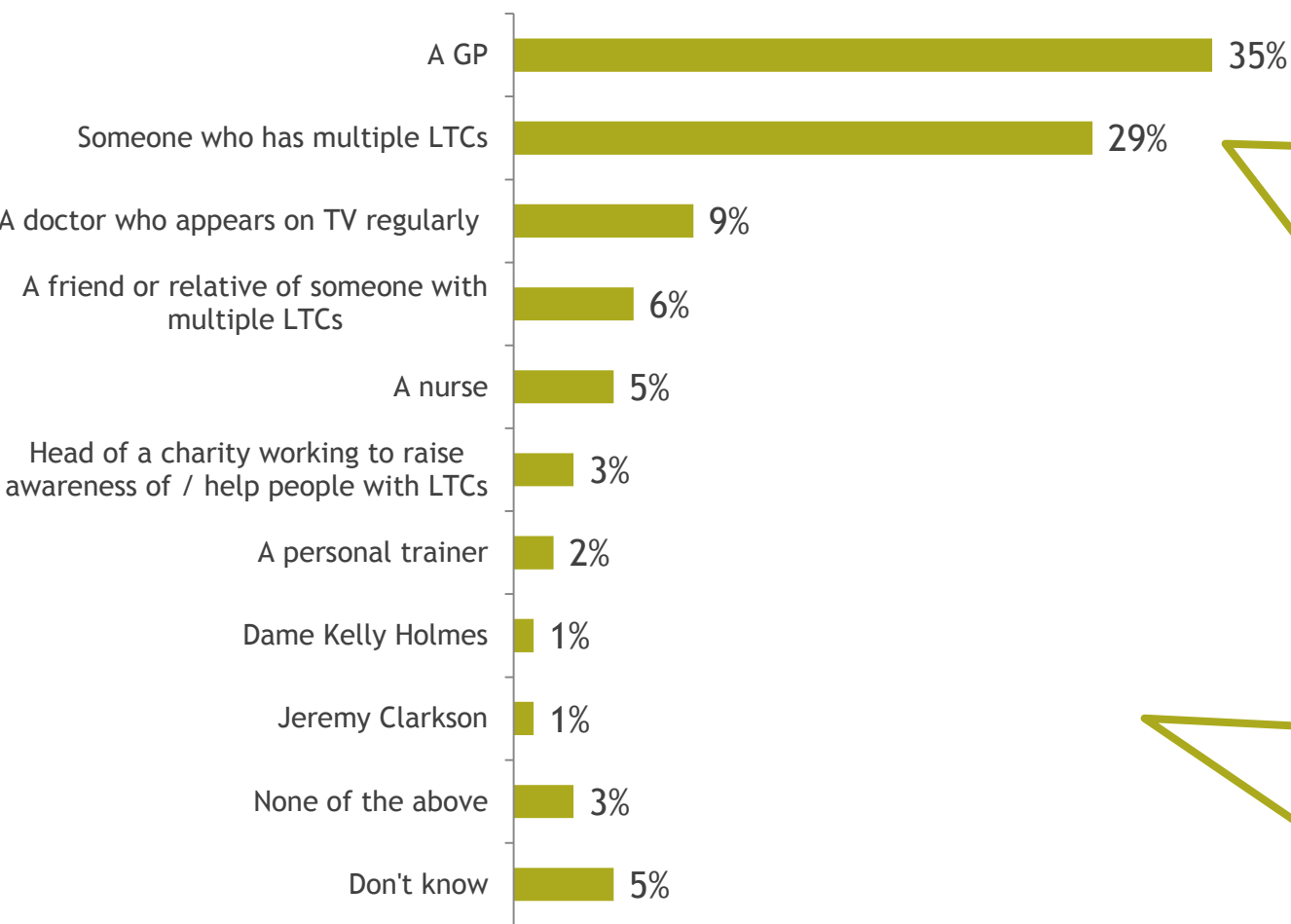
*Physical activity can prevent your health from getting worse*



Who is best-placed to deliver these messages?

# The best spokespeople are credible and relatable

Best-placed people to talk about why people with LTCs should do physical activity



*"[Someone with LTCs would be good] because it is someone who is suffering as well you can relate to them."*  
Multiple LTCs, Female, Focus Group

*"[Jeremy Clarkson] No! He's a fat slob. He's arrogant. He would be saying the message and another thing under his breath."*  
Multiple LTCs, Male, Focus Group

Q. Which of the following people, if any, do you think would be best to talk about why people with long-term conditions should engage in physical activity? Base: All with a long-term condition (n=216)



# Key insights



# Key insights

1

Even the most incapacitated people we spoke to say that they want to be more physically active - indicating a valuable messaging opportunity for the Richmond Group

2

Both exercise and physical activity are seen as “not for people like me” amongst inactive participants with multiple long-term conditions

However, whilst the broad understanding of both are similar, the negative connotations (e.g. pain) of “exercise” are more top-of-mind, whilst “physical activity” has associations with tasks such as housework and gardening

3

The strongest barriers to physical activity are internal and relate to the symptoms experienced by those with LTCs (e.g. pain, breathlessness)

However, the most commonly identified benefits (e.g. preventing conditions from deteriorating) do not address these barriers. Consequently, messages claiming to improve symptoms are dismissed

# Key insights

4

Successful messages have 3 key attributes:

- They speak to everybody, regardless of their demographic or current levels of activity
- They combine positivity about the benefits of physical activity with realism about what is achievable, giving them credibility
- They speak to people's aspirations for their own lives, for example spending time with their grandchildren, or being independent

5

Weaker messages also have 3 key attributes:

- They challenge the lived experiences of those with LTCs
- They are interpreted as patronising (e.g. by making assumptions about individuals' conditions or assuming that their life is in some way circumscribed)
- Their tone is bossy, with language that instructs rather than encourages

Thank you!

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