**Health, Social Care and Sport Committee: Inquiry into female participation in sport and physical activity**

**SAMH Response**

**Introduction**

Around since 1923, SAMH is Scotland’s national mental health charity. Today, in over 60 communities we work with adults and young people providing mental health social care support, services in primary care, schools and further education, among others settings. These services, together with our national programme work in See Me, respectme, suicide prevention and active living, inform our policy and campaign work to influence positive social change.

SAMH is a leading organisation in relation to mental health, sport and physical activity, recognising the key role physical activity can play in increasing mental health and wellbeing. For over a decade, we have developed behavioural change programmes such as our Achieving Active Lives (AAL) programme which supports people living with mental health problems to increase their levels of physical activity and mental wellbeing.[[1]](#footnote-1) We also launched and lead Scotland's Mental Health Charter for Physical Activity & Sport.[[2]](#footnote-2) Since 2018, over 300 sporting governing bodies, clubs and community organisations have become signatories to the Charter with the aim of reducing barriers for people with mental health problems engaging, participating and achieving in sport and physical activity. To achieve our goals of reducing inequalities and barriers to participation in sport and physical activity we work in partnership with various national, local and community groups. This includes our strategic partnership with **sport**scotland which launched in 2019 and focuses on: capacity building around mental health and wellbeing; influence and policy development; and creating campaigns such as Fell Your Personal Best[[3]](#footnote-3) alongside Public Health Scotland. In partnership, we have also committed to training over 500 Active Schools and sport development staff across Scotland and developing in-depth mental health and wellbeing programmes.

We welcome the opportunity to respond to the Health, Social Care and Sport Committee’s inquiry into female participation in sport and psychical activity. SAMH believes action to mitigate the particular and intersectional barriers affecting female participation in sport and physical activity are key to tackling the disproportionate burden of poor mental health faced by women and girls in Scotland. As the 2021 Scottish Health Survey shows, women reported significantly higher GHQ-12 scores of four or more compared to men (24% and 20% respectively), indicating a higher likelihood of mental health problems.[[4]](#footnote-4) The health survey also found that 18% of women reported two or more symptoms of anxiety compared to 10% of men.[[5]](#footnote-5) As such, we have chosen to respond to the Committee’s questions on community sport and physical activity and the experience of marginalised groups. In regards to the committee’s question on elite sport, we endorse the submission of **sport**scotland.

**What issues, if any, affect women and girls taking part in community sport and physical activity? How might these challenges be overcome?**

The 2021 Scottish Health Survey shows women in Scotland are less likely than men to meet the recommended guidelines of physical activity. With 65% of woman compared to 73% of men undertaking at least 150 minutes of moderate physical activity or 75 minutes of vigorous physical activity a week.[[6]](#footnote-6) Access to and sustained involvement in community sport and physical activity is key to narrowing and eliminating this disparity of involvement.

Barriers to female participation in community sport and physical activity are multifaceted and intersectional, interconnected with the role of poverty, culture, availability of childcare and, importantly, influence of mental health and ill health. The bulk of our submission will focus on the role of mental health as a barrier to women’s engagement in sport and physical activity, with potential solutions and good practice provided to assist the work of the committee.

* **Mental Health & participation in sport and physical activity**

People experiencing mental ill health are less likely to be physically active than those experiencing a high level of mental wellbeing.[[7]](#footnote-7) Studies consistently show doing more physical activity reduces the likelihood of experiencing low mood, depression, tension and worry.[[8]](#footnote-8) While mental health can be a barrier irrespective of gender, key issues raised by women through our work in sport and physical activity include self-confidence, self-belief and poor body image.

Much needs to be done to tackle barriers such as confidence and self-belief. For example, with Scottish Women in Sport (SWIS) we have established a young women’s leadership and mentorship programme to promote more young women into leadership positions and opportunities within sport and physical activity. The programme aims to tackle barriers such as a lack of self-confidence and self-belief, which influence and impact on women’s levels of engagement within sport, including leadership positions. Nearly 80% of women surveyed to inform the programme identified the need for support to improve their self-belief. Supporting participant’s mental health is a key positive of the mentorship programme. Over 60% of women surveyed stated that mentorship was important or very important to their mental health, with over 90% of women surveyed indicated a need for help to develop mental resilience. In particular, mentorship was useful in increasing self-confidence, mental wellbeing and providing a listening ear, with over 60% choosing these options when asked what they were looking for from a mentor. We believe mentorship opportunities for women and girls should be resourced and embedded across the community sport landscape to help tackle gender based and mental health related barriers to participation.

To reduce barriers to participation in community sport and physical activity we must upskill those managing and working within community sport settings about mental health. This must include increasing awareness and understanding of mental health and tackling stigma as a barrier experienced by people, including women living with mental health. Alarmingly the ground breaking 2022 SeeMe Scottish Mental Illness Stigma Study found that nearly half (47%) of people taking part in the part of the study had experienced stigma around their mental health when accessing sports, community groups and volunteering.[[9]](#footnote-9) Over half of respondents had avoided joining, participating or leading sports groups due to anticipating mental health stigma.[[10]](#footnote-10) Stigma may be related to attitudes or behaviours of those working community sports, a lack of visible inclusivity and diversity and importantly self-stigma.

To increase mental health awareness, tackle stigma and make inclusion a reality, SAMH launched Scotland’s Mental Health Charter for Sport and Physical Activity in 2018, supported by Comic Relief. A new phase of the Charter was launched in 2022 and funded by the Scottish Government.[[11]](#footnote-11) Community groups and organisations are a key target for the charter, with over 80 currently signatories joining in the first 6 months of the new phase. Charter signatories must demonstrate their commitment to inclusion and develop an action plan outlining how they will take concrete steps to ensure people with mental health problems can engage, participate and achieve in sport.

SAMH wants, and is committed, to seeing all sporting organisations and clubs in Scotland become signatories to the Charter. SAMH believes the Scottish Government should ensure that sporting organisations in receipt of Scottish Government funding be required to sign up to Scotland’s Mental Health Charter for Physical Activity and Sport, therefore demonstrating their commitment to being open and inclusive for people with a mental health problem. A potential Charter theme going forward should be tackling gender specific barriers and stigma faced by women engaging in community sport and physical activity. This will be informed in part by research SAMH commissioned exploring the menopause and physical activity due for publication in early 2023.The Charter has reached across diverse communities from the Scottish borders to the islands and is a powerful asset to inform practice and share learning across the physical activity and sporting community to influence positive change.

* **Social Prescribing & Exercise referral**

We know a powerful tool to increase and sustain physical activity for people - including women -with mental health problems is greater use of social prescribing and exercise referral schemes. As set out in our submission to the 2019 Health and Sports committee inquiry into ‘Social Prescribing of Physical Activity’, we are continuing to call for:[[12]](#footnote-12)

* The Scottish Government to make exercise referral schemes available nationwide, with sufficient provision of evidence-based services that are accessible without cost to the participant.
* Continued Scottish Government funding and support for Action 31 of the Mental Health Strategy 2017-27, in the upcoming new Scottish Mental Health and Wellbeing Strategy.
* The expansion of the GP Link Worker Programme nationwide, helping improve knowledge of and access to Exercise Referral Schemes.

SAMH’s Achieving Active Lives (AAL) (formally known as ALBA – Active Lives Become Achievable) was funded through Action 31 of the Scottish Government’s mental health strategy. AAL is a good example of a behavioural change programme embedding mental wellbeing into exercise referral schemes; to improve self-management and reduce barriers to sustained physical activity in the long term. Two thirds of AAL participants were women.[[13]](#footnote-13) This behavioural change project helped over 300 people achieve an active lifestyle in the three local authority areas the project is currently working in: West Lothian, North Ayrshire and Fife. AAL is an innovative service based on the principle that sport and physical activity can be a key part of someone’s recovery from a mental health problem. The programme utilises a behaviour change intervention with a cognitive behavioural approach alongside existing exercise referral schemes.

Results from AAL’s evaluation were very positive, with a programme completion rate of 53% and 27% still adhering to physical activity after 6 months.[[14]](#footnote-14) Completion rates were significantly higher than other exercise referral programmes (which average around 20%),[[15]](#footnote-15) highlighting the success of specifically designing physical activity programmes to support people with mental health problems. Importantly the evaluation of AAL also found the programme had a long lasting and beneficial effect on mental wellbeing, confidence and engagement in self-management of health care.[[16]](#footnote-16)

It is critical that programmes such as AAL and other physical activity social prescribing opportunities are made more available across Scotland and that funding for them is sustainable. Primary care will be key to achieving greater use of social prescribing, including for women. While we believe exercise referral and other social prescribing schemes should have the option for self-referral, the role of Community Link Worker’s and the wider primary care workshop are central to ensuring women can access these programmes. It is also important that programmes be designed through a gendered lens with an aim to mitigate specific barriers are faced by women. This could include timing around childcare and caring responsibilities, transport and the use of single gender programmes or sessions.

* **Poverty and other Barriers**

As stated above, barriers to women’s engagement in community sport are intersectional. In preparation for this submission, we gathered experiences from SAMH’s various sport and physical activity team members. We also spoke with key strategic partners such as sportscotland. Key themes that arose included:

* **Lack of available and affordable childcare**: This being a monetary and time barrier to female participation, with parents often not being able to balance childcare commitments with the availability of community sports classes or opportunities.
* **Affordability of sports equipment and memberships**. A common theme raised by our sports and physical activity team was financial barriers women faced when engaging in community sport, including the cost of sporting equipment and clubs. This issue was highlighted as a key barrier by the House of Commons Culture, Media and Sport Committee – Women and Sport Inquiry 2014-15.[[17]](#footnote-17)
* **Women’s safety**: The issue of a lack of public transport or easy access to sporting venues was highlighted as an issue. In part, this related to fears of safety when travelling to community sports venues, particularly when many activities are only available in evenings.
* **Media representation of women in sport**. Research published in 2019 by the Scottish Women and Girls in Sport Advisory Board found the way that women in sport were publically portrayed in the media – which was found to often reinforce gender norms and was often sexualised – had a negative effect on self-confidence and esteem.[[18]](#footnote-18) We support the recommendations made by the advisory group to tackle unhelpful media representation and increase women’s participation. This includes increased media representation of women’s sport and creating more gender balance in executive, management and non-executive (Board) roles across Scottish sport.[[19]](#footnote-19)

Much of the information outlined above, gathered from our own sport and physical activity team aligns with findings from **sport**scotland and the Women’s Sport and Fitness Foundation. Their ‘Barriers to women and girls’ participation in sport and physical activity’ factsheet outlines key practical, personal, social and cultural barriers to participation.[[20]](#footnote-20) These range from challenges such as body image, self-confidence and belief, to issues such as male-dominated culture of sport.

**Menopause**

The menopause can have a significant impact on women’s physical and mental wellbeing, with increased physical activity commonly advised to support general health and well-being during all stages of the menopause.[[21]](#footnote-21) Despite the physical and mental health benefits of physical activity during the menopause, we know there are persistent barriers for menopausal women taking part in sport and physical activity. That is why, in partnership with the University of Edinburgh, we at SAMH are undertaking research to better understand how women are making use of physical activity and sport during the menopause and to explore the barriers to participation. This is with a view of informing recommendations on how best to support menopausal women to be physically active in an enjoyable and healthy way. We would be delighted to share the findings of our research with the committee when it is published in early 2023.

**What additional issues, if any, affect women and girls from marginalised groups taking part in sport or physical activity? How might these challenges be overcome?**

There are large volumes of research and data highlighting the low levels of participation in sport and physical activity by marginalised groups. For example, people experiencing homelessness,[[22]](#footnote-22) people who are LGBT, issues associated with rurality, and racialised communities. Indeed in Scotland we know that women from an East Asian, and particularly Pakistani, heritage are the least likely ethnic group to achieve recommended physical activity levels and are also the least likely to participate in sport.[[23]](#footnote-23)

The reasons for a lack of participation of marginalised women are multifaceted, including direct discrimination, a lack of culturally appropriate equipment and sportswear, the role of traditional gender norms within different communities and a greater likelihood of living in poverty.

At SAMH, we recognised the need for specific community led engagement and programmes to facilitate sport and psychical activity engagement with Scotland’s BME (Black, Minority and Ethnic) communities*.* In partnership with jogscotland, we established the Community Strides project.[[24]](#footnote-24) Embedded within communities and utilising existing community assets, this project supports people from BAME communities to be more included in their community and improve their own physical health, mental health, and wellbeing through the power of physical activity. The project also aims to build capacity within racialised communities through providing opportunities for people taking part to undertake jogscotland jog leader training and establish their own jog groups. We believe this community led approach of increasing capacity from within marginalised communities is key to increasing participation in the long term.

While women from different marginalised groups may experience specific and varying barriers, we believe that action towards inclusivity by community sports groups must be explicit. This must go beyond a diversity and inclusion policy. Sports clubs and communities need to be intentional about what they mean by inclusivity and accessibility. For example, proactively checking if a chosen venue is accessible to disabled people and making that information transparent to attendees or making clear how a club will adapt for women who are experiencing the menopause. This is the approach we have taken with the Scottish Mental Health and Sports Charter, and is one that should be replicated in other areas of marginalisation.

1. SAMH ALBA [ALBA | SAMH](https://www.samh.org.uk/get-involved/physical-activity-and-sport/our-projects/alba) [↑](#footnote-ref-1)
2. SAMH [Charter for Sport | SAMH](https://www.samh.org.uk/get-involved/physical-activity-and-sport/our-projects/mental-health-charter) [↑](#footnote-ref-2)
3. SAMH [Feel Your Personal Best | SAMH](https://www.samh.org.uk/get-involved/physical-activity-and-sport/our-projects/feel-your-personal-best) [↑](#footnote-ref-3)
4. Scottish Government 2022 [The Scottish Health Survey 2021 - Volume 1: Main Report (www.gov.scot)](https://www.gov.scot/binaries/content/documents/govscot/publications/statistics/2022/11/scottish-health-survey-2021-volume-1-main-report/documents/scottish-health-survey-2021-volume-1-main-report/scottish-health-survey-2021-volume-1-main-report/govscot%3Adocument/scottish-health-survey-2021-volume-1-main-report.pdf) [↑](#footnote-ref-4)
5. Scottish Government 2022 [The Scottish Health Survey 2021 - Volume 1: Main Report (www.gov.scot)](https://www.gov.scot/binaries/content/documents/govscot/publications/statistics/2022/11/scottish-health-survey-2021-volume-1-main-report/documents/scottish-health-survey-2021-volume-1-main-report/scottish-health-survey-2021-volume-1-main-report/govscot%3Adocument/scottish-health-survey-2021-volume-1-main-report.pdf) [↑](#footnote-ref-5)
6. Scottish Government Scottish Government 2022 [The Scottish Health Survey 2021 - Volume 1: Main Report (www.gov.scot)](https://www.gov.scot/binaries/content/documents/govscot/publications/statistics/2022/11/scottish-health-survey-2021-volume-1-main-report/documents/scottish-health-survey-2021-volume-1-main-report/scottish-health-survey-2021-volume-1-main-report/govscot%3Adocument/scottish-health-survey-2021-volume-1-main-report.pdf) [↑](#footnote-ref-6)
7. Shor, R & Shalev, A, [Barriers to involvement in physical activities of person with mental illness](https://academic.oup.com/heapro/article/31/1/116/2355913), 2014 [↑](#footnote-ref-7)
8. Royal College of Psychiatrists, [Physical Activity and Mental Health](https://www.rcpsych.ac.uk/mentalhealthinfo/treatments/physicalactivity.aspx)  [↑](#footnote-ref-8)
9. See Me [Scottish Mental Illness Stigma Study](https://www.mentalhealth.org.uk/sites/default/files/2022-11/MHF-Scotland-See-Me-SMISS-Final-Report-2022.pdf) 2022 [↑](#footnote-ref-9)
10. See Me [Scottish Mental Illness Stigma Study](https://www.mentalhealth.org.uk/sites/default/files/2022-11/MHF-Scotland-See-Me-SMISS-Final-Report-2022.pdf) 2022 [↑](#footnote-ref-10)
11. [Charter for Sport | SAMH](https://www.samh.org.uk/get-involved/physical-activity-and-sport/our-projects/mental-health-charter) [↑](#footnote-ref-11)
12. SAMH [Health and Sports Committee Social Prescribing and Physical Activity Inquiry – SAMH Submission](https://archive2021.parliament.scot/S5_HealthandSportCommittee/Inquiries/HS_S5_19_SP_76__SAMH.pdf) 2019 [↑](#footnote-ref-12)
13. SAMH [Evaluation\_of\_ALBA\_February\_2020\_-\_FINAL.pdf (samh.org.uk)](https://www.samh.org.uk/documents/Evaluation_of_ALBA_February_2020_-_FINAL.pdf) 2020 [↑](#footnote-ref-13)
14. SAMH [Evaluation\_of\_ALBA\_February\_2020\_-\_FINAL.pdf (samh.org.uk)](https://www.samh.org.uk/documents/Evaluation_of_ALBA_February_2020_-_FINAL.pdf) 2020 [↑](#footnote-ref-14)
15. SAMH [Evaluation\_of\_ALBA\_February\_2020\_-\_FINAL.pdf (samh.org.uk)](https://www.samh.org.uk/documents/Evaluation_of_ALBA_February_2020_-_FINAL.pdf) 2020 [↑](#footnote-ref-15)
16. SAMH [Evaluation\_of\_ALBA\_February\_2020\_-\_FINAL.pdf (samh.org.uk)](https://www.samh.org.uk/documents/Evaluation_of_ALBA_February_2020_-_FINAL.pdf) 2020 [↑](#footnote-ref-16)
17. <https://publications.parliament.uk/pa/cm201415/cmselect/cmcumeds/513/513.pdf> [↑](#footnote-ref-17)
18. Scottish Women and Girls in Sport Advisory [Board Levelling the Playing Field](https://actify-assets-prod.fra1.cdn.digitaloceanspaces.com/53e5da02-d9e0-48d7-8601-aeb6ae3f196e) 2019 [↑](#footnote-ref-18)
19. Scottish Women and Girls in Sport Advisory [Board Levelling the Playing Field](https://actify-assets-prod.fra1.cdn.digitaloceanspaces.com/53e5da02-d9e0-48d7-8601-aeb6ae3f196e) 2019 [↑](#footnote-ref-19)
20. Sportscotland [Barriers to women and girls’ participation in sport and physical activity](https://www.funding4sport.co.uk/downloads/women_barriers_participation.pdf) [↑](#footnote-ref-20)
21. Gynaecologists RCoOa. [Treatment for the symptoms of menopause](https://www.rcog.org.uk/for-the-public/browse-all-patient-information-leaflets/treatment-for%20symptoms-of-the-menopause/) N.D. [↑](#footnote-ref-21)
22. [(PDF) (Re)engaging marginalized groups through sport: The Homeless World Cup (researchgate.net)](https://www.researchgate.net/publication/258142829_Reengaging_marginalized_groups_through_sport_The_Homeless_World_Cup#:~:text=Marginalized%20groups%2C%20such%20as%20those%20experiencing%20homelessness%2C%20are,the%20benefits%20provided%20by%2C%20sport%20programs%20and%20events.) [↑](#footnote-ref-22)
23. Scottish Government [Active Scotland Outcomes: Indicator Equality Analysis - gov.scot (www.gov.scot)](https://www.gov.scot/publications/active-scotland-outcomes-indicator-equality-analysis/) [↑](#footnote-ref-23)
24. [Community Strides | SAMH](https://www.samh.org.uk/about-mental-health/samh-stories/community-strides) [↑](#footnote-ref-24)