

**Scottish Parliament: Inquiry into female participation in sport and physical activity**

**Response submitted by Intelligent Health - December 2022**

**Introduction**

1. Intelligent Health was founded and is led, by Dr William Bird MBE a practicing GP and an honorary professor at the University of Exeter. Predominantly achieved through our flagship programme Beat the Street, Intelligent Health has engaged 1.6 million people in the UK from the most deprived communities to enable them to be more physically active, help them to connect with their place and their community and in turn, improve their wellbeing. The benefits continue well beyond the intervention, lasting at least two years and possibly longer.
2. Intelligent Health's mission is to create resilience and improve health by connecting people to each other, their communities and their environment. We do this through engagement of communities at scale, sharing knowledge of the foundations of good health, and by using data and evaluation to deliver actionable insight. The vision is simple; to transform people's health through small changes that make a big difference.

**What demographic does your organisation represent?**

3. Intelligent Health has been operating the whole-community physical activity programme, Beat the Street in Scotland since 2015. In total, 20 "games" have been commissioned across Scottish towns and suburbs. This amounted to 186,728 adults and children taking part by walking, wheeling and cycling over 1.8 million miles across their local area during the game phase. Around half of these participants are adults, with the remainder children and young people and of this, 73% of participating adults are females predominantly aged between 35

to 44. In relation to demographic by household income and ethnicity, participants mostly reflect the demographic makeup of the local area.

4. Intelligent Health has delivered Beat the Street programmes in the following areas: Annan and Dalbeattie (2015), North Lanarkshire (2016), Stranraer (2017), Lanark and Rutherglen, Musselburgh, Glasgow Canals (2018), Dumfries, Glasgow City, Cambuslang and Rutherglen, Newton Mearns and Barrhead (2019), Forth and Clyde, Eastwood, East Renfrewshire (2020), Hamilton and Blantyre, East Kilbride, Motherwell and Blantyre, Newton Mearns and Barrhead, Johnstone and Linwood (2021), Paisley and East Kilbride (2022).<sup>1</sup>

**Based on your own experience please indicate your agreement with the following statements, from**

**1 = strongly disagree, to 5 = strongly agree**

5. Women and girls face challenges when taking part in sport and physical activity at community level: 4 – Agree
6. Women and girls face challenges when taking part in sport at professional/elite level: 5- Strongly agree
7. Women and girls from marginalised groups face additional challenges when taking part in sport and physical activity: 5 – Strongly agree

**What issues, if any, affect women and girls taking part in community sport and physical activity?**

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<sup>1</sup> <https://www.dailyrecord.co.uk/in-your-area/lanarkshire/winners-announced-latest-east-kilbride-28371179>

8. Intelligent Health believes that there are many issues that affect women and girls taking part in community sport and physical activity. However, many of these issues can be designated under one of two categories: structural barriers and social barriers.
  
9. Considering the structural barriers that affect women and girls from taking part in community sport and physical activity, requires a reference to the history of women's football in Scotland. Indeed, the first ever record of women's football came from Scotland in 1628 when a minister complained about both women and men "footballing" on a Sunday in Carstairs.<sup>2</sup> May 1881 also saw the first international women's football match where a team from Scotland beat England at the game in Edinburgh. In the following decades there was unrest about women participating in what was deemed a working-class man's game, go so far as medical professionals indicating that girls and women should be banned from playing before the turn of the twentieth century. In 1900, female events were introduced to the Olympic Games for the first time. Years later the female sport faced challenge, and following a brief revival during the First World War, in the 1920s the Scottish FA refused to grant permission for women to play games in the existing grounds of men's clubs. Conclusively, in 1971 UEFA put forward a motion to its members to take control of women's football in their own territories, it would have passed unanimously but starkly, Scotland was the only member to vote against it. The Scotland Women's Football Association was founded in the same year, and this was followed in 1972 by the first ever official women's football international between Scotland and England and hosted in Scotland,<sup>3</sup> echoing the unofficial match between the same countries almost a century earlier.

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<sup>2</sup> <https://www.bbc.co.uk/news/uk-scotland-highlands-islands-24176354>

<sup>3</sup> <http://womenshistoryscotland.org/2017/08/01/the-history-of-womens-football-in-scotland/>

10. Whilst football is being indicated as an example in Paragraph 9, many other traditional sports evolved in the Victorian era for men and boys and were designed by men for men. Of course, we must recognise anomalies such as netball which was first played in England during the late Victorian era and was exclusively for women. However, as mentioned netball is an anomaly and the vast majority of sports were male-designed with the intention to be played by boys and men. As such, this institutionalisation of male-led sport, including successive bans from women playing, has led to embedded behaviours and attitudes from those within sport and the wider community in terms of what an athlete looks like and how sport is structured. The century head start for male-focused sports has led to a global industry that allows little space for women and girls, and particularly in sports that are not deemed as particularly “feminine.”

11. In reference to classically feminine sports, we must consider how sport has operated throughout the education system. During high school physical education (PE) girls would play hockey, netball and rounders where boys would play football, rugby and cricket and for the most part these lessons would remain segregated. Young women were already set on a path through their education system as to where their (if any) sporting preferences should be determined and on the other hand, this programme also alienated boys from participating in the sports which were predetermined for the girls to participate in. School sport and grassroots sport often go hand in hand, as frequently it is through school initially that a child is introduced to a sport. Therefore, if children are not provided with this taster and platform for specific sport in the school environment, this hinders their access at a grassroots and extracurricular level. Times have moved on quite swiftly in recent years with girls now being offered to play sports such as football, cricket and rugby during PE. However, this is not the case for all schools across the board and even this year, sports pundits were calling for equal

access for girls to play football in schools in the wake of the Women's Euros.<sup>4</sup> Beyond the education system, changes have been dramatic over the last few decades but the inequality in support, funding and design for women is still clear. Despite the structural moves, the sheer level of inequality that remains sends a clear message that these sports are just not for women.

12. Societal barriers are arguably even more significant for women and girls to access community sport and physical activity than those structurally. These focus around two issues: capability and capacity. Barriers related to capabilities are something that affect both women and girls. These predominantly revolve around fear of judgement, body image and self-efficacy and there is much literature to support this. Recent data indicates that for girls, their self-esteem drops by 30 per cent from the ages of 8 till 14, this is compared to up until age 8 where there is nominal difference between levels of confidence between boys and girls.<sup>5</sup> As these girls get older research shows that levels of self-confidence and self-belief continue to decline, with 69 per cent of girls aged 7 to 21 stating that they do not feel good enough.<sup>6</sup> Having self-confidence contributes significantly to women and girls participating in sport, and a lack of this and a poor body image (which in turn creates a fear of judgement) can make considering participation difficult. What is important to note here, is the swathes of evidence that points towards sport and physical activity having the ability to improve self-confidence and body image, these results can also vary by sport with teenage girls who play football being indicated as those with the highest levels of self-confidence when compared against other sports.<sup>7</sup>

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<sup>4</sup> <https://www.heraldscotland.com/sport/uk-sport/20584831.deliberate-focus-ensuring-euro-2022-inspires-girls-play-football/>

<sup>5</sup> <https://www.amightygirl.com/blog?p=27408>

<sup>6</sup> <https://cardiffjournalism.co.uk/intercardiff/business-culture/social-media-and-sport-can-it-improve-a-girls-self-confidence>

<sup>7</sup> <https://www.birmingham.ac.uk/news/2017/playing-football-boosts-girls-confidence-study-finds>

13. For women particularly capacity is a considerable barrier as they make up the majority of unpaid caregivers globally with two to ten times more time spent on unpaid care work.<sup>8</sup> Unpaid care work here refers to household tasks such as cooking and cleaning and caring for children (whether their own or others), ill and elderly relatives. Women disproportionately spend more time doing this than their male counterparts. This is a physical barrier for women to participate in community sport and physical activity as structured sport doesn't allow enough flexibility to manage the care burden and to participate in sport.

#### **How might these challenges be overcome?**

14. Unfortunately, it must be recognised that for many of these challenges to be overcome there also needs to be a huge societal shift in attitudes. There are some quicker wins, such as providing enhanced funding to women's sport in order to encourage more girls and women into participation. We know that this interest begins at grassroots, and grassroots and community sport and physical activity face considerable challenge in receiving adequate funding. The Scottish Government should work with Sportscotland to ensure a focused approach towards encouraging women and girls to participate in sport and physical activity. Additionally, Sportscotland should ensure that it works with governing bodies and community sports providers to give more provision for access to flexible sport and physical activity, organisations like jogscotland provide 'Mums on the Run' to help mothers get out and active together with no worry about childcare as they are able to bring their children along with them.<sup>9</sup> Examples such as Mums on the Run are all about flexibility and allowing greater access to movement and exercise for those who may not necessarily have the capacity to do it

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<sup>8</sup> [https://www.oecd.org/dev/development-gender/Unpaid\\_care\\_work.pdf](https://www.oecd.org/dev/development-gender/Unpaid_care_work.pdf)

<sup>9</sup> <https://jogscotland.org.uk/joggers/mums-on-the-run/>

elsewhere. Making sport and physical activity as accessible as possible and removing barriers will only ever encourage greater participation.

15. Intelligent Health has developed a behaviour change programme that flips the traditional sports model, addresses the barriers and tries to remove them by taking activity out to people, especially women, making it free, accessible and able to incorporate into daily life, when and how it suits them. This programme, which turns a whole area into on big game, is called Beat the Street.<sup>10</sup> Beat the Street follows the EAST framework (Easy, Accessible, Simple, Timely)<sup>11</sup> as well as the COM-B model (Capability, Opportunity, Motivation – Behaviour)<sup>12</sup> and tries to encourage building a social norm around daily activity. The premise is gamifying an area to help people make small changes to behaviour that make a big difference to their activity levels. There is no need for expensive equipment, memberships nor timetable restrictions. The game is driven via pupils in schools who help ‘give permission’ for adults’ participants to take part and see how to make the change. Results are striking with over 70% of inactive female adults becoming and remaining active following the intervention.

16. Representation in decision making has also been an issue and for real and lasting change structures need to be reviewed. At Intelligent Health our Director, Katherine Knight is a female chair of a sports governing body, her experience has been as follows: “I have worked in sport for over 25 years and traditionally many sports organisations have had boards which are ‘predominantly stale, male and pale’ and do not represent the wider community. I became Chair of Rounders England in 2018 and have been able to structure a board which has both

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<sup>10</sup> <https://www.beatthestreet.me/>

<sup>11</sup> <https://www.bi.team/publications/east-four-simple-ways-to-apply-behavioural-insights/>

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<https://www.qeios.com/read/WW04E6.2#:~:text=The%20COM%2DB%20model%20of%20behaviour%20is%20widely%20used%20to,%3A%20capability%2C%20opportunity%20and%20motivation.>

male and female equal representation along with representation from marginalised groups and a focus on diversity and inclusion. I believe this puts us in a strong position to understand how to attract and retain women and girls from marginalised groups and build a healthy vibrant sporting community.”

**What additional issues, if any, affect women and girls from marginalised groups taking part in sport or physical activity?**

17. The physical activity sector has moved slower than other sectors to recognise and address some of the increased barriers to women and girls taking part in sport and even more so for those from marginalised groups. This includes women and girls who are ethnically diverse and also those from lower socioeconomic groups. Some organisations have been at the forefront of supporting the sector to understand the change i.e. the Scottish Ethnic Minority Sports Association (SEMSA).<sup>13</sup> They have been working with organisations such as Glasgow Life since 1990 to ensure barriers are understood and addressed. They also run various activities across sport and physical activity to encourage women and girls from ethnically diverse communities to participate. For women and girls from ethnically diverse communities, there are other barriers to be considered such as cultural and religious barriers. For example: many practicing Muslim women would not participate in a sport if it was not a female-only session, and up until very recently a lot of women from African or Caribbean descent could have been deterred from swimming due to the affect of chlorine on their hair and a lack of appropriate swimming caps (with the Soul Cap being banned in the 2021 Olympics).<sup>14</sup>

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<sup>13</sup> <https://semscotland.com/>

<sup>14</sup> <https://www.theguardian.com/sport/2021/jul/02/swimming-caps-for-natural-black-hair-ruled-out-of-olympic-games-alice-dearing>



18. In a cost of living crisis, and even prior to this, it is not surprising that it is well documented that a lack of resource is a huge barrier in accessing sport for women and girls. Outside of a school setting or exercising in greenspaces or the home, participating in sport and physical activity has costed elements. This can include: gym memberships, club fees, equipment and kit. A recent YouGov poll found that around 5 million people in the UK will be or have already cancelled their gym memberships due to the cost of living crisis.<sup>15</sup> Intelligent Health was recently made aware of children who have turned up to a free sport session where children arrived in their school uniform rather than their PE or sports kit as their parents could not afford to keep washing their kit. This indicates that even where free sessions are made available, where money is a barrier, it goes beyond the provision of the activity and also includes the lack of appropriate kit and equipment to participate. Unfortunately, with the pressures of cost of living exercise and recreation is often one of the first things to be affected where money is involved as it is difficult for individuals to quantify this spend when they are already have to make decisions between heating and eating.

#### **How might these challenges be overcome?**

19. What is imperative in order to overcome these challenges is that women and girls from these marginalised groups must be consulted with to ensure that their own views are platformed and amplified, and taken into consideration before any action is decided in order to combat these challenges. As discussed in Paragraph 16, Intelligent Health also believes that

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<sup>15</sup> <https://inews.co.uk/inews-lifestyle/wellbeing/cost-living-five-million-cancelling-gym-memberships-health-fitness-crisis-2005079>

governance structures should be reviewed and allow for women and girls from these groups to be a part in the decision-making process.

**Do you have any further comments?**

20. Intelligent Health would be happy to be involved in any further discussions regarding female participation in sport and physical activity.

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