

Cross-Party Group on Sport

5th March 2025, 1pm-2pm

Minute

Present

MSPs

Liz Smith MSP
Maree Todd MSP
Brian Whittle MSP
Tess White MSP

Non-MSP Group Members

Adam Szymoszowskyj, Scottish Sports Futures
Fraser Calderwood, Active Dundee
Gavin MacLeod, Scottish Disability Sport
Gavin McWhinnie, Office of Liz Smith MSP
Gregor Muir, SSA
Jennifer Love, Active Scotland
Kieran Chand, sportscotland
Kim Atkinson, SSA
Kirsty Cumming, Community Leisure UK
Liz Corbett, Parkrun
Penny Hendrick, DR Inclusive Fitness and Wellbeing

Apologies

Claire Drummond, Cricket Scotland
Dale Roberts, DR Inclusive Fitness
Daniel Bisland, Scottish FA
David Stewart, Fedcap Scotland
Dougie Millen, Scottish Sports Futures
Forbes Dunlop, sportscotland
Gary Grieve, Scottish ClubSport
Isabelle Michelson, LTA
Isla Sneddon
Jane Campbell Morrison
Jane Harvey, Scottish Powerchair Football
Joan O'Sullivan, Swimtime UK Ltd. & Skilltime Training Academy
Jon Doig, Commonwealth Games Scotland

Judith McCleary, JudoScotland
Kirsty McNab, Scottish Sports Futures
Krishna Kaur, Cricket Scotland
Liza Linton, RYA Scotland
Lucy Preston, Cricket Scotland
Margarita Sweeney-Baird, Inclusive skating
Maureen McGonigle, Scottish Women in Sport
Penelope Ezady, DR Inclusive Fitness
Rick Kenney, Individual/ClubSport Borders
Steve Walsh, High Life Highland
Stew Fowlie, Scottish Student Sport
Stuart Brown, Chest Heart & Stroke Scotland
Stuart Younie, Mountaineering Scotland
Susan Robertson, Edinburgh Health and Social Care Partnership for disabilities
Susie Benson, CIMSPA
Trudy Lindblade, Cricket Scotland
Walter Macadam, Scottish Football Managers and Coaches Association

Agenda item 1

Matters arising

- Approval of minutes of 28th November 2024 meeting
 - Proposer, Liz Smith MSP
 - Seconder, Gavin Macleod, Scottish Disability Sport
- Minutes approved

Since the last meeting, the New Year UK Honours list was announced, with recipients from Scottish sport including:

- Sammi Kinghorn MBE, awarded an OBE for services to Athletics
- Duncan Scott MBE, awarded an OBE for services to Swimming
- Stephen Clegg, awarded an MBE for services to Swimming
- Finlay Graham, awarded an MBE for services to Cycling
- Alan Hansen, lately broadcaster, awarded an MBE for services to Association Football and to Broadcasting
- Sandra Hardacre, awarded an MBE for voluntary services to Athletics
- Jenny Holl, awarded an MBE for services to Cycling
- Nathan MacQueen, awarded an MBE for services to Archery
- Stephen McGuire, awarded an MBE for services to Boccia and to Young People
- Gail Munro, Stranraer Ice Rink manager, awarded an MBE for services to Curling
- Stephen Neilson, British Handball chair, awarded an MBE for services to Handball
- David Rickman, Executive Director, Governance and Chief of Staff, Royal and Ancient Golf Club, awarded an MBE for services to Golf

- David Christie, awarded a BEM for services to Cricket and to the community in Freuchie, Fife
- Karen Kelly, Head Coach, Lanark Amateur Swimming Club, awarded a BEM for voluntary service
- Alexander Macintosh, awarded a BEM for services to Nairn County Football Club
- Dr Anne McArthur, Committee Member, Banffshire Branch, Royal Scottish Country Dancing Society awarded a BEM for services to Scottish Country Dancing and to the community in Portsoy, Banffshire

Congratulations were given to all of the individuals recognised in this round.

Agenda item 2

Topic for this meeting: Scottish Government Physical Activity for Health Framework

The meeting provided an opportunity for Minister for Social Care, Mental Wellbeing and Sport Maree Todd MSP to update the Cross-Party Group on recent developments from the Scottish Government with regards to sports policy, most notably the recent publication of the Physical Activity for Health Framework.

The Framework aims to support the Government's vision of a Scotland where people are enabled to be more active, more often, taking a systems-based approach to work to improve levels of physical activity at national and local levels.

MT opened by stating that she knows that we all share a belief in improving the physical activity levels of people in Scotland and is always open to discussing how we can work together to achieve that. The wider context here is the impact of inactivity on health. We know that physical activity is a critical risk factor for noncommunicable diseases.

Recent research published by Public Health Scotland estimated that 3,000 deaths a year in Scotland are directly attributable to low physical activity levels each year. The research also identified a significant burden of disability from the same cause. It is really stark when you look at how much cancer is preventable, how much heart disease is preventable, but also 45% of dementia is preventable. Human beings are meant to move, and if we don't move, it's really bad for our health.

Around 80% of those 3,000 deaths were amongst those who reported the lowest levels of activity - being active for less than 30 minutes a week. In 2023, that group represents 22% of the population. Even a small increase in physical activity for the least active can have a significant impact on their health.

Sport and regular participation feels unobtainable for many of these people, so we need to think about building a little bit more movement into everyday life. The impacts of activity are huge, not just for individuals' health, but for the NHS and for the wider economy.

We already know that activity levels are lower amongst specific groups, including older adults, and ethnic minority groups. We need to look at people with health conditions who often don't have confidence to exercise, and people living in more deprived communities, and of course, we need to understand that there's a whole lot of crossover amongst these groups.

We've seen some progress in reducing some of these disparities, so older adults are more active than they were 10 years ago and the gap between men and women has narrowed slightly, although not nearly enough. However, the latest data from the Scottish Health Survey shows that some disparities are widening - the percentage of people meeting activity guidelines in the most deprived areas compared to those in the least deprived areas increased from 16 points in 2022 to 22 points in 2023, so that has to be an area of focus.

It's not necessarily a choice not to move. It's because there are massive great barriers in the way. As with health outcomes generally, those barriers are often deeply rooted in social, economic and environmental factors. In our forthcoming Population Health Framework, we absolutely recognise the need for systemic action across society to address these wider challenges. Those issues are as relevant to physical inactivity as they are to the other health challenges, like poor diet, tobacco or alcohol use.

Sport is one very important way we can be active, and it brings much more than physical health. MT is very passionate about the benefits that participation brings, and there's lots of solid evidence around sport and the benefits – there is solid evidence that participating in team sports is protective from adverse childhood experiences that really can change people's lives. However, we also need to think about physical activity in daily life. Can I walk, wheel or cycle? Can we get kids playing outdoors and involved in active play? There's lots of ways to be physically active that might appeal to people who aren't engaged with sport.

Considering the implications for other policy areas, keeping people active is hugely beneficial, for example with consideration for the growing burden of care for older people. Being able to stay active is connected to how we plan our housing, how we design our towns and villages. This is particularly key for the people who are least active - sport alone can't fix inactivity levels that we see today.

We've got very clear guidance from the World Health Organization and others that supporting people to be more active requires a systems-based approach with action right across sectors, including education, transport and the environment, as well as health and sport. The international guidance is definitely very helpful, but we need to be able to translate that guidance into the Scottish context for it to be meaningful. Public Health Scotland undertook the task of translating it into a Scottish context in 2022 and I would highly recommend that you read that report if you haven't already. That report forms the basis of the Physical Activity for Health Framework, which we published in October.

The Framework supports the systems-based approach and it also recognises that the delivery of that approach takes place primarily at a local level and it has to be responsive to local needs and priorities. There's a lot of fabulous collaboration happening around that piece of work, including from PHS working with a number of

local authorities to support them in the development of local physical activity plans and strategies and encouraging these to take a systems-based approach.

I'm very grateful for the support that COSLA provided as we developed the Framework. Previous national physical activity plans and strategies have proved pretty tricky to implement on the ground. The close collaboration that has informed this Framework and our approach going forward will help to reduce that problem.

The Framework positions physical activity across portfolios and the foreword from the First Minister and contributions from Cabinet Secretaries and Ministers across the Scottish Government highlights that we recognise the need for action and collaboration.

We have to ensure that that Framework remains relevant and it doesn't just simply sit on a shelf as a nice policy document - one way we're doing that is through the online platform which we launched alongside the document, working with Actify and a social enterprise. The platform highlights successful initiatives that have already made a difference in communities across Scotland, used to share examples of good practice and experiences.

There are some really inspiring collaborations happening across the country. At the launch, I was blown away by some of the stories I heard and there are some great examples there. If you have a moment, it would be very good if you can visit the online platform and officials in the Active Scotland team would be very happy to receive any comments and suggestions for improvement. The intention is to continue to develop and improve with new material to make sure that it remains a useful resource.

I'm sure that we all have different thoughts and ideas on how we can address the challenge of inactivity. Some might agree with our approach, others might not, but I am absolutely certain that we can all agree that physical activity and sport is important and that we need to help people to be more active. We in this room, I would say are already converted. I find I spend a great deal of my time preaching to the converted, and we all know that we need to get out there and convince the unconverted, those who really don't know about the importance of being active or who see it too narrowly.

We have opportunities to do just that over the next couple of years through some really high profile events coming to Scotland. As you know, Glasgow hosts the Commonwealth Games in 2026, St Andrews will host the 155th Open Championship in 2027. As I said earlier, encouraging people to be active is about a great deal more than sport, but we can still use the publicity and interest associated with sport and the interest that accompanies these sporting events to raise awareness and the importance of being active and the many ways it can be done. There would be no better legacy from any of those events than wider public awareness of the messages. I hope you can all come together to support Scotland to be a more active nation, so thank you for inviting me today and I look forward to hearing your thoughts and how we can work together.

LS thanked the Minister for her update and also thanked Jennifer Love from Active Scotland for her hard work in getting the Framework to this position.

Following the update from the Minister, questions and discussion were raised by attendees.

Brian Whittle commended the Framework and suggested that there was plenty of alignment between the ambition and what he believes needs to be put in place, and noted that it is a shared desire to get Scotland more active.

He highlighted opportunities around pre-school, primary and secondary education to better embed fun physical activity and improve physical literacy at an early age. There are opportunities around free bus travel to enable extra curricular activity, potentially for those in most deprived communities, and we have opportunities to better connect PE with community sport and activity. However, the reality is that in the last 10 years, we have a reduction of over 40% of PE specialists in primary schools.

We don't have an audit of the facilities that we have, so we don't know how to utilise them properly and we have declining budgets in sport, but importantly also declining budgets in councils where a lot of this activity would actually be deployed. We need to look at how the ease of access to the opportunity of activity is declining. Budgets need to come alongside the political will to make genuine change.

MT agreed that long term financial pressures are a significant issue, and that an ever-increasing health budget is not the answer. Investment must be moved upstream with longer term thinking, which is a difficult thing to achieve in Parliamentary and Government cycles, as the benefits will not be seen for 20 years. You have to be willing to take those long term decisions and not mind who gets the credit for the benefit in the end.

Part of that change is additional investment in sport, but it is also about thinking beyond sport and those interventions that will enable the least active to be active in their daily lives. Scotland benefits from high quality academics in the health policy space and the ambition is to continue to get those principles which we all agreed are good ideas into practical changes to make a difference.

Penny Hendrick shared her experience running a gym for disabled people. She noted issues with individuals being unable to use social care budgets to self-support and access physical activity provision. This suggests a lack of appreciation of the value of accessing physical activity (both in terms of health and social benefits) and that inconsistencies in local application of restrictions are presenting a barrier to people accessing services which could be hugely beneficial to them. Self-support is intended to create a positive outcome, and eligibility restrictions for how this can be spent are causing issues.

MT agreed that there are challenges presented by differing approaches across the Local Authority landscape, and that a more uniform approach would be beneficial. She also agreed that not being able to access physical activity services generates a greater burden in the long term, by pushing people into a critical need position. She added that having support mechanisms in place that are accessible and support individuals is the right thing to do, regardless of the economic implications – the investment is worth it on a social as well as financial level. MT requested further detail on the issues raised and to follow up directly.

Gavin Macleod noted the time it takes to change cultures – these things take time, have to be tackled consistently and have to be resourced. Physical education is key, and despite some very strong work and good progress with key partners, SDS still sees exclusion from PE happening for disabled children, so further efforts are required.

Engaging directly with health is a challenge – the GOGA Tayside program was a leap in the dark for Scottish Disability Sport in terms of providing a physical activity offering, and not what would traditionally be considered ‘sport’. The focus is on social activity, and physical activity by stealth. The impacts have been very positive and have opened eyes to possibilities, but there are still frustrations about getting programmes like that embedded within an NHS setting.

The benefits system is a key issue for many disabled people. There is a genuine fear among many that by increasing their level of physical activity, they will find their benefits cut. Accessing physical activity is already more expensive for disabled people and there is a risk that the benefits system disincentivises people becoming more active, and in turn finding the costs even harder to manage.

GM also raised the particular challenges around intersectionality – where strategic and political interventions are too siloed, individuals who have multiple barriers to participation, be it disability, ethnicity, poverty, slip through the cracks of short term fixes that don’t really solve the problems.

Fraser Calderwood noted the consistently increasing cost of the NHS, health and social welfare at the same time as cuts to budgets to invest in and operate local facilities. There are real dangers in the coming years if this pattern continues.

FC provided examples of the benefits of physical activity and has made concerted efforts to put health programmes into the sports facility that he manages, with programmes focused on a range of health outcomes including disability, mental health, and conditions including Parkinson’s. He raised the question of how we can be sufficiently aligned with the NHS and social welfare so as to be seen as a vital part of improving our nation’s health.

MT cited a recent example she had attended of a falls prevention class, where the physical health outcomes of activity were married to mental health benefits and social benefits, and run through a leisure trust. It was an example of delivering physical activity that achieves multiple benefits, to individuals and to the community.

LS had to leave the meeting at this point, and BW took over chair of the meeting.

Further discussion focused on the importance of accessibility and local green and blue space to enable everyday activity, the importance of making activities fun and enjoyable as this is a much more impactful motivator for individuals than health outcomes, and to consider physical activity within wider related health ambitions, including diet.

Thanks were given to all speakers and attendees.

Date of next meeting was TBC.

Meeting Closed