

# Best foot forward

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Exploring the barriers and enablers to active travel among 50-70 year olds

October 2021



# Introduction

Active travel – making day-to-day journeys by walking or cycling – is an effective way of bringing more physical activity into our everyday lives. Increasing our physical activity levels will make us healthier and help us to lead longer and more independent lives.

Importantly, **it is never too late to become physically active**. Even for people who have been inactive for most of their lives, there are benefits to becoming active in their 50s and 60s.<sup>i</sup> The Centre for Ageing Better wants more people in this age group to increase their levels of physical activity. The latest available data from Sport England shows that 35% of people aged 45 to 54; 38% of those aged 55 to 64 and 43% of those aged 65 to 74<sup>ii</sup> do not meet the government's physical activity guidelines.<sup>1</sup> And levels of active travel are low; people aged 50 to 59 report spending just 109 minutes per week, and people aged 60 to 69, 93 minutes per week, travelling actively. With levels of physical activity and of active travel dropping off rapidly with age, it's essential that we target people in mid-life so as to arrest this decline.

To understand the personal and environmental barriers and enablers of active travel in people aged 50 to 70, Ageing Better commissioned a team led by Sustrans to carry out a research project. This comprised a review of the existing evidence base<sup>2</sup> and primary qualitative research with 50 individuals in this age cohort to fill gaps identified in the evidence (See Appendix 1 for the methodology of the primary research).

**This report summarises the findings of the work and, for the first time, sets out the factors that govern active travel behaviours in people aged 50 to 70 across the UK.**

These factors are wide-ranging and include such things as infrastructure; confidence; having suitable role models; and enjoyment of the outdoors.

That these factors are so disparate indicates that we must adopt a whole-systems approach if we are to achieve real change in people's active travel habits. This means that myriad interventions must be enacted by a range of actors across the public, private and voluntary sector, local health systems and employers. This report also **sets out a series of actionable recommendations** for those different actors and the sectors and systems they operate in. The pandemic has already led to a change in travel habits, with – at least temporarily – fewer people on public transport and the rapid installation of cycling lanes. It is an opportune time to take advantage of these recent trends.

<sup>i</sup> A recent study in more than 30,000 heart patients shows that becoming active later in life can be nearly as beneficial to survival as continued activity (presented at the European Society of Cardiology Congress 2021). <https://www.escardio.org/The-ESC/Press-Office/Press-releases/It-s-never-too-late-to-get-active>

<sup>ii</sup> Age ranges as specified in the Active Lives survey (November 2019-20). Available at <https://www.sportengland.org/know-your-audience/data/active-lives/active-lives-data-tables>

# Key findings



In our research, the factors that influence active travel behaviour were categorised according to the domains of the COM-B framework, in which **C**apability, **O**pportunity and **M**otivation must be present for a **B**ehaviour to occur (Table 1).<sup>3</sup> The COM-B model of behaviour is widely used to identify where behaviour change interventions should be targeted and what needs to change in order for them to be effective. Key findings of the study are organised here according to these domains.

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## Capability

– **Physical ability** is key to being able to engage in active travel and this is related to the presence or absence of **health conditions** that might make it difficult, as well as being **fit enough** and – for cycling – being **able to ride a bike**. Of note, there was a large range of physical ability within our sample of 50-70-year-old participants so considerations of physical ability need to take an individualised approach.

- As far as **health conditions** are concerned, it was clear that while some might prevent or restrict levels of active travel, others such as visual impairment, osteoarthritis and diabetes do not have to prevent people from being active travellers.
- There is a perception that cycling requires a greater level of **physical fitness** and that there are more (and more significant) barriers to cycling than walking. Hence, the overwhelming preference of most of our study participants was for walking over cycling. Although this preference is likely to be even more pronounced among people with long-term conditions or disabilities, we found evidence that for some people with disabilities, cycling may be easier than walking.

“ I can walk, but only about half a mile now, before the pain sets in. I find it more convenient to actually cycle, it’s the way my legs are ... The weirdest thing is, if I’m cycling, it must be a different position, I don’t seem to have any problems. It just works for me

Male, 60-70

- Capability also means being *able* to perform a behaviour. There were people in this age cohort who did not feel that they were able to cycle, either because it had been a long time since they had done it, or (and this was the case mainly for women), they had never learned. Many of these people were reluctant to learn (or relearn), some because they thought they were too old (a clear example of harmful internalised ageism).<sup>4</sup> Capability to engage in active travel encompasses the psychological as well as physical (that is, issues of knowing, understanding and confidence). All our study participants understood the importance of physical activity and appreciated the physical and mental health benefits of walking and cycling.

“ I don’t think I would [start cycling] now to be honest. I think I’m probably past that. The amount of practice I would have to do to get to a level of proficiency where I would be confident going out on the roads

Male, 60-70

- E-bikes would appear to avert some of the most common barriers to cycling (namely, around fitness, distance and terrain). However, we found a **lack of understanding about what e-bikes are**, how they work and their potential benefits. And while on the one hand, there were people who didn’t understand that e-bikes could help with low levels of fitness, there were others for whom using an e-bike was ‘cheating’ or evidence of ‘laziness’.

“ If I was cycling I’d want the benefits of the peddling, the exercise and the calorie burning

Female, 50-59

“ I don’t know anybody who’s got an electric bike that I could borrow to try it out. That would be the ideal thing.

Female, 60-70

- A **lack of confidence** was mainly related to ability to cycle, which primarily affected women aged 50 to 70 (see point above).

## Opportunity

- **Being close enough to amenities** is a necessary requirement for engaging in active travel. Living too far from shops, services and the workplace is a major barrier, and this is particularly an issue in rural areas. But proximity is not a sufficient condition because if the amenities that are close by are not affordable or desirable people will still choose to drive to others that are further away but more appealing (for example due to cost).

“ **The only supermarket they’ve got is a [store name] and I personally don’t want to use a mortgage every time we do my shopping. So, we have to travel 10 to 12 miles to get to a supermarket from here.**

Male, 50-59

- Having access to **well-maintained dedicated footpaths and cycle paths** are key in encouraging active travel, and good infrastructure is more important in encouraging cycling than well maintained footpaths are in encouraging walking. In fact, the provision of good-quality, adequately segregated and maintained cycle paths is the single biggest enabler of cycling in people in the 50–70-year age group (especially women), as for other age groups too.

“ **Even on the cycle lanes around here, you don’t tend to feel safe because a car could have come into it, because there’s nothing stopping them apart from a white line drawn on the road.**

Female, 50-59

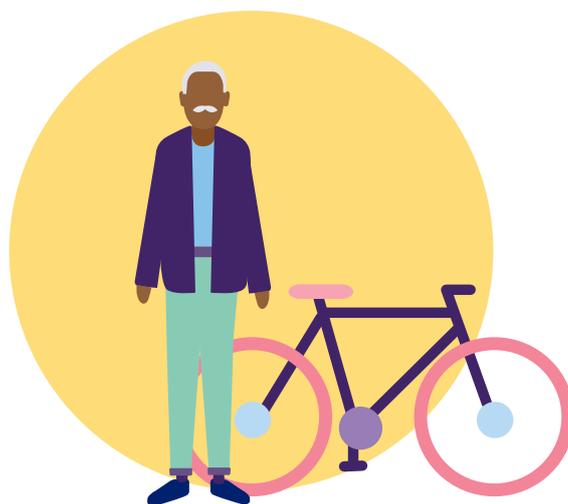
- **Having enough time** to travel actively is a key element of having the opportunity to do so. **Retirement** and a reduction in childcare and other family responsibilities that (often) come in mid to later life are key factors that enable active travel by giving people more time and flexibility. (Overall, we see that active travel habits follow a broadly common pattern across the life-course, with walking and cycling more common in young adulthood, followed by a decline in young and growing families, when a car – the most common

factor that instigates a drop in active travel – seen as essential). Of note, there is a perception that active travel takes longer, but this is not necessarily the case.

“ **I made some changes, and started going to the gym, but I really got much more active when I had the time when I retired.**

Female, 60-70

- **Having a bike** or being **able to access a bike** are essential if one is to have the opportunity to engage in cycling for active travel. While many people who cycle own old or basic low-cost bikes, for people from lower socioeconomic groups, the cost of purchasing or replacing a bike is not always affordable. Related to this is having **appropriate, secure storage for a bike** at home, at work and at any travel destination.



**43%**

**Of those aged 65 to 74 do not meet the government’s physical activity guidelines**

## Key findings

- As well as the physical opportunity required to engage in active travel (having the time, places you can get to, and ways to get there), there is social opportunity; where there is **stigma** around a particular activity or where it is not a **social norm**, the social opportunity to engage in that activity does not exist and it will be very difficult for people to engage, even when the capability, or physical opportunity is present.
  - We found that active travel may, in some communities, be seen as a lower status form of travel – something that people do because they have no other options. Suitable **role models** (explained later in this report) in such communities could help combat such perceptions.

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## Motivation

- A key motivation for travelling actively is the **desire to improve or maintain levels of physical health and fitness**. It is notable, however, that some people who keep physically active in other ways (for example, by doing sports) see no reason to travel actively.

“ **[Keeping physical active is] becoming more important because I am getting to the age now where I’m aware I will get health problems if I don’t.**

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Female, 50-59

- Interestingly, in spite of increasing awareness of climate change and air pollution, and strong public support amongst older age groups to tackle these,<sup>5</sup> the **environmental benefits** of active travel did not appear to be a strong motivator among this age group as a whole.

- **However, enjoyment, fun and engagement with the natural environment** are important motivations for walking or cycling for this age group. Related to this are the **mental health** and other psychological benefits and the **social pleasure** (seeing others when out and about in the community) that people recognise as something they experience from active travel.

“ **I mean my nearest supermarket is only ten minutes away... but it won’t take me ten minutes to get there because I’ll walk through a park and walk through a sort of river area. So, I’ll probably spend about three quarters of an hour going for a walk first and then doing the shopping and then walking back from shopping. So, there’s lots of exercise.**

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Male, 50-59

- Somewhat counter to the idea that active travel takes more time is the fact that some people are motivated to travel actively in order to **avoid the stresses** and annoyances of driving (including traffic, parking and costs).
- Fear of, and worry about, traffic danger are particular barriers to cycling but less often mentioned in relation to walking, except in rural areas without pavements as well as in some urban areas that feel unsafe.

“ **There’s nobody about sometimes and I feel vulnerable. I think that’s one of the advantages of a car, isn’t it? You always feel safe locked in a car.**

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Female, 50-59

- When an individual has sufficient capability, opportunity and motivation to travel actively; when enough barriers have been removed and enablers put in place, then active travel should become a habit, something that is done automatically without any forethought or analysis. Indeed, we found that habit plays an important role in determining travel choices. Among regular active travellers, the decision to walk or cycle is often not something they consciously think about but is part of their everyday routine. The ability to break or form habits is related to the ease and convenience of active travel versus other methods.

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**“ I think that you’ve got to enjoy it and incorporate it into your daily thing, rather than making it, ‘I’ve got to go for a cycle now’.**

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Male, 50-59

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**“ I think it’s because we’ve got into a routine, and if we do want something from the shop, it’s just a natural flow.**

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Female, 50-59

## Recommendations for England



### National government should:

- Continue to increase funding available for local areas through the Active Travel Fund to install safe, supportive infrastructure for both walking and cycling, i.e. well-maintained paths, adequate lighting, separation from traffic, distinct paths for walkers and cyclists and adequate places to lock bikes in town centres and other public spaces.
- Encourage the provision of ‘opportunity to try’ schemes to debunk common misconceptions about e-bikes; develop and fund e-bike purchase and loan schemes to address the prohibitive cost of e-bikes for many people.
- Working across government, develop and pilot a national campaign targeting people of all ages that highlights how active travel can be part of your daily exercise and that it provides benefits for physical and mental health even if it’s low intensity.
  - While targeting people of all ages, ensure that any campaign messaging represents people aged 50-70 alongside other groups.
- Active Travel England should require combined and local authorities funded through the Active Travel Fund to evaluate effectiveness of interventions for those of different ages.
- Encourage employers to provide better facilities at work for storage of bikes and for showering after an active travel journey to work and to take part in the Cycle to Work scheme.



### Local government should:

- Design and create neighbourhoods (either existing or new) that have features that encourage active travel, including:
  - Well-connected paths, streets and spaces
  - Good green spaces in the right places
  - Community health and wellbeing facilities
- Design active travel routes that allow all – not just part – of a journey to be made using cycle lanes, traffic-free paths and/or quiet roads.
- Route walking and cycling paths through or by parks, green spaces or other beauty spots to enable enjoyment of the natural surroundings.
- Work to reduce reliance on cars through the implementation, for example, of low-traffic neighbourhoods, making it more appealing and easier to undertake journeys actively.



### Local commissioners and service providers<sup>i</sup> should:

- Develop and pilot affordable bike hire schemes (including e-bikes) alongside campaigns to highlight the benefits of active travel for those aged 50-70 (e.g. that they help where levels of fitness are low; that they enable travel over longer distances and hilly terrain; that you can get to work without becoming sweaty; and that in spite of these features, you are still getting exercise).
- Provide support for people aged 50-70 to learn or re-learn to cycle so that they have both the ability and confidence to do so.
- Use role models when promoting any interventions to show people aged 50-70 that people like them travel actively, aiming to remove stigma and normalise the behaviour.



### Local health systems and places should:

- Ensure the health workforce has the skills and knowledge to encourage people to engage in active travel and offer personalised advice for those with health conditions.
- Enable primary care, including through primary care networks and Link Workers, to identify people who might benefit from physical activity, connect them to opportunities, and support them to overcome practical, emotional and psychological barriers to engagement.

<sup>i</sup> Service providers could include the voluntary and community sector and private and public sector organisations such as gyms, health and fitness centres.

## Recommendations

**Table 1.** Key factors influencing active travel behaviour in people aged 50 -70 as identified in our primary research; additional factors identified in our evidence review<sup>2</sup> are shown in italics. Factors are classified according to whether they pertain to someone having the capability, opportunity or motivation to engage in active travel, in accordance with the COM-B framework.

### Domain of the COM-B framework

	Capability		Opportunity		Motivation	
	Physical	Psychological	Physical	Social	Reflective	Automatic
	Physical skills, strength or stamina	Knowledge, understanding, confidence	Opportunity afforded by the environment, involving time, resources, locations	Opportunity afforded by interpersonal influences, social cues and cultural norms	Processes involving self-conscious intentions and beliefs	Processes involving emotional reactions, desires, impulses, inhibitions
<b>Factors influencing active travel generally</b>	<ul style="list-style-type: none"> <li>- Physical ability necessary to walk or cycle</li> <li>- Health conditions that prevent or restrict levels of active travel</li> <li>- Fatigue/tiredness</li> </ul>	<ul style="list-style-type: none"> <li>- Understanding of the importance of physical activity</li> <li>- Understanding of the physical and mental health benefits of walking and cycling</li> </ul>	<ul style="list-style-type: none"> <li>- Shops, services and workplaces within walking or cycling distance</li> <li>- Having the time to travel actively</li> <li>- Local terrain is such that active travel is physically manageable</li> </ul>	<ul style="list-style-type: none"> <li>- Influence (negative and positive) from family</li> <li>- Active travel being a social norm in the community</li> </ul>	<ul style="list-style-type: none"> <li>- Intention to keep fit, healthy and to lose or manage weight, particularly as people age</li> <li>- Mental health and other psychological benefits</li> <li>- Wanting to avoid the annoyances of driving</li> <li>- Intention to save money</li> <li>- Concern about effects of air pollution</li> <li>- Concern to reduce carbon footprint / use of motor vehicles</li> </ul>	<ul style="list-style-type: none"> <li>- Habit and routine</li> <li>- Social pleasure as a result of active travel</li> <li>- Enjoyment of natural environment and outdoors</li> <li>- Goals and friendly competition</li> <li>- Unpleasantness of active travel in poor weather</li> <li>- <i>Feeling independent</i></li> </ul>

Domain of the COM-B framework

	Capability		Opportunity		Motivation	
	Physical	Psychological	Physical	Social	Reflective	Automatic
	Physical skills, strength or stamina	Knowledge, understanding, confidence	Opportunity afforded by the environment, involving time, resources, locations	Opportunity afforded by interpersonal influences, social cues and cultural norms	Processes involving self-conscious intentions and beliefs	Processes involving emotional reactions, desires, impulses, inhibitions
<b>Factors influencing cycling in particular</b>	<ul style="list-style-type: none"> <li>- Physical skill of being able to ride a bike</li> <li>- Fitness levels</li> </ul>	<ul style="list-style-type: none"> <li>- Knowledge of e-bikes and other non-standard bikes and their benefits</li> <li>- Confidence to ride a bike</li> </ul>	<ul style="list-style-type: none"> <li>- Availability of well-maintained, traffic free cycle routes</li> <li>- Ownership or access to a suitable bike – cost can be a barrier, particularly in relation to e-bikes</li> <li>- Appropriate, secure storage for a bike at home, and at travel destination</li> </ul>	<ul style="list-style-type: none"> <li>- Social stigma and embarrassment – in particular of using e-bikes and non-standard bikes</li> </ul>		<ul style="list-style-type: none"> <li>- Fear - of traffic danger,</li> <li>- unsafe areas, dark or isolated places</li> <li>- Bad experiences with other road users</li> </ul>

# Conclusions



Active travel is a promising way in which to increase levels of physical activity in people aged 50 to 70. Active travel primarily involves either walking or cycling but we lack the evidence to say which, if either of these, provides greater physical activity benefits when used for active travel. Certainly, the distances covered can be greater by bike so that proximity to services – an essential enabler of active travel – is more easily met using a bike than with walking. However, it is clear that many people in their 50s and 60s prefer walking to cycling and would be very reluctant to learn to cycle or to take it up again if they haven't cycled for a long time. And many women in this age group never learned to cycle at all. So, while we make no assumptions as to whether one type of active travel is preferable over the other, it would be useful if the evaluation of interventions to increase the uptake of active travel among people aged 50 to 70 could consider the relative health benefits of both modes (walking and cycling).

Government physical activity guidelines stipulate that adults of all ages should aim for at least 150 minutes of moderate intensity exercise or at least 75 minutes of vigorous intensity exercise (or some combination of both) per week.<sup>1</sup> It is not practicable to set out what the threshold amount of active travel should be (moreover, some people who walk or cycle for leisure, or do other active pursuits or sports see no need to use active travel to keep fit at all). Instead, our objective is that people will understand that active travel can be used to meet their physical activity requirements so that they will incorporate active travel of either type into their daily lives and do as much as is feasible for them. As in the government's physical activity guidelines we believe that it is a matter that 'some is good, more is better'.

Our project has shown that there is a large range of physical capability within the 50-70-year age group so a one-size fits all approach to active travel as a means of increasing physical activity will not be appropriate.

## Conclusion

Rather, interventions must take into account the range of capacity and capability across the age group as well as the wide variety of past behaviours and habits that will impact the ease with which people can engage or re-engage with active travel. Moreover, any initiatives or interventions must take into consideration how race, age, gender and socioeconomic status intersect to influence how people in this age group perceive active travel and the likelihood of them doing it themselves.

However, bearing in mind people's individual circumstances, the 50-70-year life stage may well be a particularly fruitful time at which to enact interventions to increase levels of active travel; the time and flexibility that comes with fewer responsibilities (where that's the case) and with retirement allow people to increase their active travel. In fact, the main differentiating characteristic in the 50-70-year age group as regards their active travel habits is between those still working and those retired. However, it is also the case that people in this age group may need support to start travelling actively, or to increase their levels, particularly where cycling is concerned, and particularly if they have not cycled for some time.

The COM-B behaviour change framework has proven to be a useful way in which to conceptualise the factors involved in getting people to engage in active travel. We know that the motivation to engage in a behaviour is shaped by our capability and opportunity to do so. For some people in some places, the only barrier might be capability; for others it may be enough to provide opportunities; and for others changes to capability, motivation, and opportunity may be required. Some barriers – such as not having the physical ability to walk or cycle – are clearly 'deal breakers', and the more barriers there are for someone, the harder it will be to create change. And factors will combine in different ways for different people, so for example, the physical barrier of hilly terrain

may be less of a barrier for someone with greater physical fitness.

Overall, getting someone to engage automatically in active travel means strengthening the assets in communities where people live so that they have the agency to make change in their lives (in this case becoming more active). And the range of factors across various domains points clearly to a whole systems approach, in which a host of different interventions must be enacted by a range of actors across the public, private and voluntary sector, local health systems and employers.

Most of the people we engaged with on this project felt that their activity levels had increased since the start of the pandemic, although this did not necessarily mean an increase in active travel. For some, changes to working patterns, including time saved by not commuting and quieter roads have made walking and cycling more attractive. But for others, those same changes to working patterns mean no or reduced opportunities for active commuting. Policies must reflect the precise changes in the nature and patterns of active travel that have developed over this period. Nevertheless, the changes in active lifestyles and active travel habits brought about by lockdown provide policy makers with a unique opportunity to push at an open door.

# References

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- 5 Who cares about climate change? Attitudes across the generations. <https://www.kcl.ac.uk/policy-institute/assets/who-cares-about-climate-change.pdf>

# Appendix 1: Study methodology

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## Research questions:

1. What are the overarching preferences of adults in mid-life (aged 50-70) for active travel and their attitudes towards, access to and past experiences of active travel?

- What motivates them to undertake active travel and what prevents them?
- What would motivate and/or enable them to use or trial new forms of active travel such as e-bikes?
- How do behaviours and preferences differ for working and non-working people?
- How and when is active travel combined with public transport? Are there barriers to this?
- What is the link between unmet transport needs and active travel?
- How do peoples' active travel habits change over the life course and why do they change?
- Are there trigger points which precipitate starting or stopping active travel and how are these trigger points different for different people?
- Do preferences, habits and motivations differ for different age groups? Is the biggest variation by age or by other factors within the same age cohort?

2. What role does the built environment play in encouraging or discouraging active travel for those aged 50-70?

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## Sampling

Fifty participants aged 50–70 from across the UK (excluding NI) were purposively selected to ensure a mix of gender, age group, rural/urban locations, socioeconomic status and both retired and working people; people from minority ethnic backgrounds and disabled people were over-sampled. The sample focused on:

- those who currently use active travel, either regularly or occasionally
- those who have previously been active travellers
- those who expressed an interest in undertaking active travel

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## Interviews

All participants took part in a semi-structured depth interview lasting up to one hour; 24 of these participants were invited to take part in mobile ethnography involving recording information about their daily lives (photos, audio/video diary entries and written responses to open questions) using a smartphone app. See the [full research report](#) for more details on the sample.

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## Analysis

The COM-B model behavioural framework was used to guide the analysis of the findings.

Let's take action today for all our tomorrows.  
**Let's make ageing better.**



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