

Physical Activity Referral Schemes

involve sedentary patients being referred to specialist physical activity (PA) services and aim to increase PA. We don't know if they work the same way for men and women.



We interviewed 136 people by telephone at baseline, 120 after 12 weeks and 92 after 1 year

Men and women both valued the scheme





Communication should be timely and personalised

Schemes should contact people who stop attending due to poor health and help them restart



PA type (and intensity) must be individualised and affordable



Living in an affluent area but NOT gender was associated with adherence

Women

Significantly increased self-reported PA after 12 weeks but not 1 year

Liked group and social support

Men

Significantly increased exercise self-efficacy between baseline and 1 year, but not PA

From more deprived areas were significantly less likely to start the scheme

Personal engagement influences Health Transport Social circumstances

Attendance benefits

Scheme engagement influences

Staff and social support Communication Individualisation

