



Class of 2035 Commission

Final report and recommendations



Thank you

Youth Sport Trust would like to thank the Class of 2035 Commissioners for their generosity of time and insight. Their commitment to improving children and young people's health and wellbeing is inspiring and their vision for change an important contribution to the national policy debate.



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We would also like to thank Kim Leadbeater, Member of Parliament for Spen Valley, for her support with this project. Her passion for movement, play and sport and determination to build a brighter, more active future for children has helped elevate this topic in Parliament and elsewhere.

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About Youth Sport Trust

Youth Sport Trust is a children's charity founded in 1995 to harness the power of play and sport in children's education and development.

Our **vision** is a future where every child enjoys the life-changing benefits of play and sport

Our **mission** is to equip educators and empower young people to build bright futures

Together we create opportunities for everyone to belong and achieve

Read all Class of 2035 reports here:
www.youthsporttrust.org/class-of-2035



Foreword



Last year, children’s charity Youth Sport Trust – of which I am proud to have previously served as a Trustee – released its latest Class of 2035 report, which warned if current trends in children’s movement, play and sport continue, low participation levels will increasingly impact their health and wellbeing, development and life chances.

This echoes and amplifies worrying signs my colleagues and I in healthcare have seen for some time. There is a decline in children’s health and wellbeing, the like of which we have not seen for decades. Without significant action, decades of progress will be eroded and children’s health will continue to worsen.

In identifying these challenges, Youth Sport Trust has been ahead of the curve. The charity’s first Class of 2035 report, released in 2015, looked ahead 20 years to understand the coming challenges faced by future generations. Subsequent reports commissioned in 2020 and 2025 built on the ambition to explore how movement, play and sport can help deliver the best outcomes for young people. By forecasting ahead a decade based on current trends, the 2025 report painted a picture of where we will be without change. Sharing the charity’s determination to prevent this worst-case outcome, I was proud to be invited to chair the Class of 2035 Commission.

My fellow Commissioners and I share a deep concern about the general health and medical conditions children present today, fuelled by a lack of movement in childhood and adolescence. Whilst focusing on England, our approach and commitment to act informed by data, experiences and collaboration can be replicated at national, regional and community level. I hope others invested in this area follow our lead.

Children’s lives are changing – they are less active and spend less time outdoors. Screen time dominates interaction, and unstructured, independent free play is limited. These seismic societal changes bring consequences with the impact now reaching classrooms, clinics, homes and communities as the impact of reduced movement and physical activity manifests in behavioural, physical and mental health conditions.

The need for change is clear and compelling and we are at a tipping point for childhood. In showing where we are headed, the latest Class of 2035 report provides a destination we must actively avoid. In this report, the Commission puts forward an alternative path to a more active, happier and healthier future for children and young people. I hope you can join us on this journey.

A handwritten signature in black ink, appearing to read 'Paula Franklin'.

Dr Paula Franklin

Chair, Class of 2035 Commission



Executive Summary

The Class of 2035 is a series of research reports from Youth Sport Trust, produced every five years to inform action about the challenges and opportunities facing children's engagement with movement, play and sport.¹

The latest edition, published in 2025 in collaboration with research agency Savanta, combined a nationally representative children's survey and artificial intelligence to model the consequences of current inactivity trends.² The report warned if current trends continue, by 2035:

48%

of children will spend three or more hours on screens for entertainment each day.

34%

will be active for **less than 30 minutes a day**.

500 new cases

of **Type II diabetes** diagnosed in children each year, double current rates.

Over the past year, we, the Class of 35 Commissioners have discussed at length how the impact of limited movement, play and sport in childhood is leading to worse health and wellbeing for this generation. To tackle the crisis of childhood inactivity and avoid the personal, societal and economic consequences presenting today, set to grow in the future, we recommend urgent action to:

- 1** Raise awareness of the UK Chief Medical Officers' physical activity guidance for children among healthcare professionals.
- 2** Strengthen and expand the social prescribing pathway for children and young people.
- 3** Deliver a minimum amount of physical activity within every school and early years setting.
- 4** Increase skills and competence for staff in the PE and School Sport Network.
- 5** Implement a national wellbeing measurement programme for children and young people.
- 6** Create a national, cross-government Children and Young People's Physical Activity Strategy.

Our findings are informed by an ambition to build a future which balances the demands of the digital age through the human connection of movement, play and sport. These low-cost, high-impact proposals – many of which could be embedded within existing policy development – aim to bring healthcare, education and government together to deliver a commitment which prioritises children moving, playing and spending time outdoors to improve their life chances.



Commissioner Insights

As leaders working across healthcare, we have different experiences of medical practice and health policy.

Drawn from specialities including general practice, paediatric care, neuro-physiotherapy, academic and applied research, workforce development and policy influence, the Class of 2035 Commission has enabled us to share research and evidence, as well as insights from the challenges we observe in children and young people.

We are concerned inactivity is causing children to present with symptoms resembling sedation, excessive screen usage is fuelling conditions such as 'flat heads' and 'still-face syndrome,' low activity levels are contributing to muscular skeletal issues and type II diabetes, and a lack of movement in childhood is driving balance and coordination challenges, from under-development of the vestibular system to challenges around dysregulation and mental health illness.

We are united in our belief movement, play and physical activity are essential to support health, growth and development at all stages in life, but particularly for babies, children and young people. Our ambition is to initiate change to improve children's health.



In my work as an NHS doctor, broadcaster and author with a focus on emotional health and mental wellbeing, I have observed increasing levels of anxiety, loneliness, a sense of loss of direction and low self-esteem in young people. I know the science and the impact that movement has on preventing and improving all of these health indicators.

Physical activity is essential, and we all now need to take the necessary and immediate action required to change what is unravelling before our eyes when it comes to children and young people's mental, emotional and physical health; we owe that to them and to future generations.

Every child should have the opportunity to have sport, play and physical activity as a constant companion throughout their lives as a tool to stay well and to thrive.

Dr Radha Modgil
Doctor, Broadcaster, Author



Children are less active and spend less time playing than any generation before them. This impacts their physical and mental health during childhood but also leads to lasting problems as teenagers and into adulthood. We need to act now to bring back movement and play into our everyday lives - it's not an option, it's a necessity, and a vital way to support positive physical and mental health, and optimal child development.

Dr Kathryn Hesketh – UKRI Future Leaders Fellow, Principal Research Fellow, Behavioural Science and Health, UCL Institute of Epidemiology and Health Care



If we want our children to be healthy and happy, we need to support them to be physically active. Whether that is active play, sport or walking to school we know that the health benefits of movement are huge.

Fewer than half of children meet the standards for physical activity, girls are noticeably less likely to be active than boys, and those from the highest income backgrounds are far more active than their less wealthy peers. Children today are facing complex and evolving health challenges, most notably with rising rates of both obesity and mental health conditions. These are health conditions which do not just impact on children at some abstract future point, but are actively holding them back today.

We have to make it easier for children to be active, not just for their immediate health but for the long term. Children who are regularly active are more likely to continue these habits into adulthood with all of the health benefits which this brings.

William Roberts

Chief Executive, Royal Society for Public Health



In a clinic I ran alongside a physiotherapist colleague, almost none of the children we examined together had the expected muscle strength for their age. They all had been referred with persistent, chronic and debilitating joint pain, but very few had arthritis or a medical reason for their symptoms. These children were in pain because they were physically inactive and deconditioned.

The number of children referred with a delay in their development has been increasing notably during my time as a paediatrician. This has been greatly exacerbated by a reduction in the amount of movement and physical activity young children are exposed to. Most children want to spend time outdoors, playing and being active, but societally we restrict these behaviours for our convenience. If we want to meaningfully improve children's development, we have to improve equitable access to active play and movement. The recommendations in this report begin to address these issues.

Dr Tom Rance

Academic Paediatrician, University of Cambridge; representing the Royal College of Paediatrics and Child Health



There is a clear and growing number of children and young people presenting in General Practice with mental health concerns, often at increasingly younger ages. These include conditions such as insomnia, anxiety, stress, depression and obesity, with physical inactivity recognised as a significant contributing risk factor.

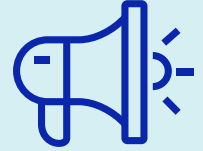
The scale of this challenge means that action is urgently needed, and these recommendations are both timely and welcome. They represent an important opportunity to harness the benefits of physical activity in improving children's health and wellbeing.

Dr Supreet Sidhu

NHS GP and Lecturer in Medical Education

1

Raise awareness of the UK Chief Medical Officers' physical activity guidance for children among healthcare professionals



The UK Chief Medical Officers recommend all children and young people aged 5–18 should engage in moderate to vigorous physical activity for at least 60 minutes each day, or at least 20 minutes each day for disabled children and young people. Toddlers and pre-school children should be active for 180 minutes per day.³

At present, current awareness of how active children and young people should be is low across society, with just 32% of parents and 34% of teachers aware of recommended physical activity levels for children.⁴ It is unknown what proportion of healthcare professionals are aware of children's physical activity guidance, which is concerning.

A number of organisations are seeking to change this, including through the Royal College of GP's Physical Activity Hub and associated Active Practices Charter, the Moving Health Professionals programme delivered by the Office for Health Improvement and Disparities alongside Sport England, and driven by organisations such as Moving Medicine, whose work highlights to professionals the contribution physical activity makes to health.

To build on this momentum and deliver change, the Department of Health and Social Care should raise awareness of the UK Chief Medical Officers' children's physical activity guidance among healthcare professionals by:

- Conducting annual research to monitor awareness of children's physical activity levels among healthcare professionals.

- Working alongside healthcare leaders and organisations to agree an ambitious target to reach by 2035.

- Bringing together organisations working in this space to inform activity signposting healthcare professionals towards training opportunities, guidance and best practice.

2

Strengthen and expand the social prescribing pathway for children and young people



Social prescribing connects people to activities, groups and services in their local community to support and improve their health and wellbeing. Young people are typically identified as requiring support through their GP, health professional, or someone at their school who refers them to a Link Worker to develop a personalised plan for support.

Whilst the usage of social prescribing has increased in recent years, it remains one of the only healthcare interventions not routinely available to young people, with long waiting times and high thresholds for treatment, despite research by Barnardo's finding a benefit of £1.80 for every £1 invested in children's social prescribing in their LINK Cumbria service.⁵

Ongoing work in areas such as Greater Manchester and Lancashire is highlighting the impact social prescribing can have, including by providing access to green and blue spaces, whilst guidance from organisations such as National Children's Bureau⁶, StreetGames⁷ and the National Academy for Social Prescribing⁸ shares best practice with professionals.

Positively, the recent National Youth Strategy included a commitment to improve young people's access to health services and support, including exploring options around social prescribing⁹. In addition, there is consensus schools can play an integral role as part of a joined-up system responding to different needs.

To deliver change, the Department of Health and Social Care should strengthen and expand the social prescribing pathway for children and young people by:

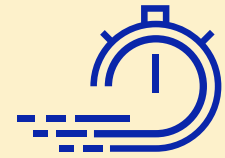
- Implementing the recommendations in the National Academy for Social Prescribing's Connected to Thrive report.¹⁰

- Bringing together voices from healthcare, early years and education to determine how to use social prescribing to support school outcomes, including through physical activity at school.

- Identifying new routes for referral pathways, including the future PE and School Sport Partnership Network, delivering on the schools white paper's ambition for services to be designed to work together.

3

Deliver a minimum amount of physical activity within every school and early years setting



Schools and early years settings play a vital role in supporting children to be active, through active travel, active pedagogy, active classrooms, break and play times, PE, school sport, enrichment and play. Provision within the system is particularly important for those children who are unable to access opportunities beyond and outside the school day.

However, on average, 60 minutes of lunchtimes and playtimes each week have been lost from primary schools since 1995¹¹ and there are 45,000 fewer hours of Physical Education taught in schools each year than in 2012 when the London Olympics and Paralympics were held.¹² In addition, only 56% of primary school teachers feel confident to deliver PE,¹³ and early years education practitioners spend less than six hours on the physical development area of learning across a multi-year qualification. As a result, more than half of early years practitioners identify a lack of staff confidence as a barrier to promoting physical activity.¹⁴

Whilst the recent policy trajectory is more positive – including changes to the national curriculum, imminent Enrichment Framework and forthcoming PE and School Sport Partnership Network – there is a need for further action so schools and early years settings are equipped and empowered to support children to move more.

To deliver change, the Department for Education should ensure the delivery of a minimum amount of physical activity within every school and early years setting by:

Providing training and resources for early years educators so all children develop the physical foundations needed for good health to improve engagement in play and learning when they enter primary school.

Updating guidance for schools to deliver 60 minutes of physical activity per day (or at least 20 minutes each day for disabled children and young people), and 180 for early years settings, and supporting them to introduce physical activity plans.

Encouraging the use of Always Active Uniforms as best practice within primary schools and introducing guidance on minimum break time allowances for each age and stage.

4

Increase skills and competence for staff in the PE and School Sport Network



Staff working in PE and school sport make a vital contribution supporting children and young people to be active. However, with plans developing for a new PE and School Sport Partnership Network to be operational from September 2026, there is an opportunity to use the capability and capacity within the PE and school sport delivery network to leverage and influence better health outcomes for children.

Increasing opportunities for children to play and be active will be a key priority. Alongside this, it is important to ensure staff have a greater awareness of the impact that movement and physical activity have on cognitive, social, and emotional health, while also building their understanding of the developmental issues moving more can prevent or help manage.

This has the potential to amplify the impact of their work and better identify which young people are in greatest need and would benefit most from targeted interventions. This improved crossover between public health and physical activity in schools could also help inform the cross-agency delivery of social prescribing.

To deliver change, the Department for Education should increase skills and competence for staff in the PE and School Sport Network by:

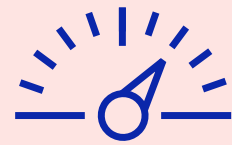
Embedding public health skills and knowledge within the national training programme for strategic leaders of the national PE and School Sport Network and providing all PE and school sport staff with training on public health principles.

Extending the current reference to the role of physical activity within the wellbeing content of the National Professional Qualification for Headship.

Encouraging the use of the PE and School Sport Partnership Network as an active participant in social prescribing for children and young people.

5

Implement a national wellbeing measurement programme for children and young people



At present, there is no single national wellbeing measurement programme for children and young people, despite the work of organisations such as the Our Wellbeing, Our Voice campaign, which has highlighted the impact this could have if introduced.¹⁵ Research by #BeeWell outlines the different approaches to wellbeing measurement including in Australia, Finland and Denmark, providing insights which could inform future policy development here.¹⁶

A new national wellbeing measurement programme would give policymakers a holistic view of children's health and development, across a range of areas including physical, social and emotional health.

This would provide a wealth of data to track progress and identify areas for improvement, as well as ensuring support can be targeted towards children and young people as soon as needs appear.

It could help understand which drivers of wellbeing, including physical activity, are the most effective, inform investment, and be used as an informant for social prescribing.

To deliver change, the Government should implement a national wellbeing measurement programme for children and young people by:

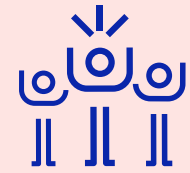
Convening relevant departments to develop and introduce a national wellbeing measurement programme for children and young people, building on successful local initiatives and international practice.

Providing a vision for how measures could be used for accountability and tracking progress, including making data accessible to key actors such as devolved administrations and local authorities.

Embedding a measurement programme within strategic investment principles to target resources and opportunities to those areas and populations in greatest need of support.

6

Create a national, cross-government Children and Young People's Physical Activity Strategy



The stagnation in children's physical activity levels and associated impact on children's health is a clear indication we need to do things differently. Shifting the dial requires a comprehensive and coordinated approach, utilising levers for change across government and society, in education and health. This should incorporate immediate and long-term approaches, and where possible seek to build a cross-party consensus, given the moral obligation we owe to this and future generations to give them the best possible start in life.

Our view is a holistic approach which builds daily movement, play and sport into every stage of childhood is essential to develop a happier, healthier generation and nation. There is a wealth of knowledge across our own sector, in education, physical activity and the children's space which can contribute to this approach.

By bringing together this enthusiasm and experience, we are optimistic we can build a society where children and young people move more and play more, supporting their development and life chances. Our hope is the Government shares our view of the potential for change and draws on the vast insight available to develop and deliver a strategy giving every child an active start in life.

To deliver change, the Government should create a national, cross-government Children and Young People's Physical Activity Strategy by:

- Building on Let's Move¹⁷ to deliver a national, year-round campaign to raise awareness of how active children and young people should be, and opportunities to do so.
- Encouraging organisations responsible for children's health and wellbeing to embed regular active minutes across a child's typical day.
- Incorporating active design principles and protections in planning policy to increase places for children to be active, including green spaces and playgrounds.

References

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- 16 – [Wellbeing at School: International insights from twelve jurisdictions, #BeeWell](#)
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