PHYSICAL HEALTH & HEALTHY LIVING FACTSHEET

Understanding Physical Health and Healthy Living

Building health through realistic, evidence-informed everyday choices

The short version

Physical health is shaped by biology, health conditions, healthcare, movement, food, sleep, substances, relationships, work, housing, income, environment and access to support. Healthy living is not about perfection or preventing every illness. It is about making suitable choices, using preventive care and adapting support to the person's body, circumstances and priorities.

Physical health is more than fitness or weight

Body function	How the heart, lungs, brain, muscles, bones, digestion, hormones, immune system and other body systems work together.
Symptoms and conditions	Pain, fatigue, disability, acute illness, long-term conditions, treatment effects and the ability to manage daily activities.
Health behaviours	Movement, food, fluids, sleep, oral care, smoking, alcohol, medicines, sexual health and engagement with healthcare.
Living conditions	Income, housing, food access, transport, work, caring, safety, discrimination, green space and the availability of suitable services.
Personal resources	Knowledge, confidence, time, energy, support, culture, values and the ability to make and sustain changes.

Two people can receive the same advice but have very different opportunities to follow it. Good health guidance starts by understanding barriers and strengths rather than assuming that outcomes depend only on willpower.

The foundations of healthy living

Movement	Regular activity supports cardiovascular health, strength, mobility, function, sleep and mental wellbeing. Activity should be appropriate to health, ability and current fitness.
Food and fluids	A varied, balanced pattern helps provide energy, protein, fibre, fats, vitamins, minerals and hydration. Medical needs may require individual advice.
Sleep and recovery	Sleep supports attention, mood, immunity, metabolism and physical recovery. Persistent sleep problems, severe tiredness or suspected sleep apnoea need assessment.
Risk reduction	Not smoking, limiting alcohol, using medicines safely, practising safer sex and reducing harmful exposures can lower preventable risk.
Preventive care	Vaccination, screening, dental care, eye tests, health checks and condition reviews can identify risks or problems earlier.
Connection and purpose	Relationships, community, meaningful activity and mental wellbeing influence physical health, recovery and the ability to maintain routines.

Health behaviours interact

Pain may reduce movement; reduced movement may affect sleep, mood and confidence; poor sleep can influence appetite and energy; financial stress may narrow food or transport choices. Improving one area can support others, but a plan should not overload someone by trying to change everything simultaneously.

Start with what matters most

The best first step may not be the behaviour that looks most important on paper. Stabilising pain, sleep, housing, medication, food access or emotional safety may create the capacity for other health changes later.

Health is dynamic

Needs change with age, pregnancy, menopause, disability, illness, injury, treatment, caring responsibilities and life events. A plan that worked previously may need adapting rather than judging the person for no longer being able to follow it.

Movement for health

The 2026 UK Chief Medical Officers' guidance says adults should aim to be active every day: any activity is better than none and more is better still. Adults should aim for at least 150 minutes of moderate activity or 75 minutes of vigorous activity each week, include strength activity on at least two days and reduce long periods of inactivity where physically possible.

Moderate intensity	Breathing becomes faster, the body feels warmer and conversation is possible, although singing may be difficult. Intensity is relative to the person.
Strength	Activities that challenge major muscle groups, such as resistance bands, weights, carrying, climbing, adapted exercises, gardening or body-weight movements.
Balance and function	Particularly important for older adults or people at risk of falls. Activities should reflect individual mobility, safety and professional advice.
Sedentary time	Where possible, break up long periods of sitting or lying with light movement, position changes or suitable activity. Rest needed because of illness is not a personal failure.

Inclusive movement

- start at low duration and intensity and build gradually
- use pacing when pain, fatigue or post-exertional symptoms occur
- seek clinical advice for concerning symptoms or complex conditions
- count wheelchair propulsion, seated movement and adapted sport
- include enjoyable daily tasks, recreation and active travel
- value consistency and function, not only calories or weight

Stop and seek help when appropriate

New chest pain, collapse, severe breathing difficulty, signs of stroke or another medical emergency require urgent help. Recurrent dizziness, palpitations, unusual breathlessness, worsening pain or symptoms triggered by activity should be discussed with a healthcare professional.

Food and hydration

The Eatwell Guide describes the overall balance of food groups across a day or week; every meal does not need to look identical. NHS guidance for the general population recommends variety, at least five portions of fruit and vegetables a day, higher-fibre starchy foods, protein foods, dairy or alternatives, small amounts of unsaturated oils and adequate fluids.

Fruit and vegetables	Fresh, frozen, canned and dried options can contribute. Variety supports fibre and a range of vitamins and minerals.
Higher-fibre starches	Potatoes, bread, rice, pasta and cereals provide energy. Wholegrain or higher-fibre choices can increase fibre where tolerated.
Protein foods	Beans, pulses, fish, eggs, meat and alternatives support growth, repair and muscle. Needs may change with age, illness or recovery.
Dairy and alternatives	These can provide protein and calcium. Fortified alternatives may be useful; allergies, intolerances and dietary choices require suitable options.
Fats, salt and sugar	Unsaturated fats are generally preferred. Foods high in saturated fat, salt and free sugar are best eaten less often or in smaller amounts.
Fluids	NHS general guidance suggests around 6 to 8 glasses daily, but needs vary with weather, activity, pregnancy, illness and medical advice.

When general advice is not enough

A GP or registered dietitian may be needed for kidney, liver, heart or digestive disease; diabetes; allergies; swallowing problems; malnutrition; eating disorders; pregnancy; unexplained weight change; complex medication interactions or highly restricted diets. Supplements do not replace a balanced diet and can interact with medicines.

Healthy eating must also be affordable and accessible

Frozen vegetables, canned pulses, own-brand staples and simple repeated meals can still support health. Advice should consider budget, cooking facilities, fatigue, dexterity, sensory needs, culture, food availability and help from others.

Sleep, recovery and daily rhythm

Regular timing	A reasonably consistent wake time, morning light and predictable wind-down can support the body clock, while allowing flexibility for illness, shifts or caring.
Sleep environment	Comfort, darkness, temperature, noise, bedding, positioning and accessibility may affect sleep. Pain and night-time symptoms need suitable management.
Daytime influences	Movement, daylight, naps, caffeine, alcohol, nicotine, stress and medicines can all affect sleep, although not every factor is controllable.
Assessment	Seek advice for persistent insomnia, loud snoring with pauses, choking, severe daytime sleepiness, restless legs, unusual night behaviours or sleep affecting safety.

Smoking, alcohol and other substances

Smoking	Stopping smoking is one of the most effective ways to reduce preventable health risk. NHS stop-smoking support and medicines can improve the chance of success.
Alcohol	Alcohol can affect sleep, mood, blood pressure, liver health, medicines and safety. Lower-risk guidance is not a guarantee of no harm; some people should avoid alcohol.
Drugs and misuse	Recreational drugs and misuse of prescribed or over-the-counter medicines can cause physical and mental harm. Seek confidential professional support rather than stopping dependent use abruptly without advice.

Medicines and supplements

- keep an up-to-date list of prescriptions, non-prescription medicines and supplements
- use the correct dose and check instructions, timing and storage
- ask a pharmacist about interactions, side effects and missed doses
- attend medication reviews, especially when health or symptoms change
- do not share medicines or stop important treatment without clinical advice

Prevention, checks and early action

Vaccination	Keep routine and risk-based vaccinations up to date. Eligibility varies with age, pregnancy, health conditions, occupation and current NHS programmes.
Screening	Attend NHS screening when invited and make an informed choice after reading the benefits, limitations and possible outcomes.
NHS Health Check	Eligible adults aged 40 to 74 without specified pre-existing cardiovascular conditions should generally be invited every five years.
Dental and eye care	Routine dental care and appropriate eye tests support oral health, vision and detection of some wider health problems.
Condition reviews	Long-term condition, medication and monitoring appointments help assess control, treatment effects and changing support needs.
New symptoms	Do not wait for a routine check when new, persistent, worsening or concerning symptoms need assessment.

Know urgent warning signs

- chest pressure or pain with concerning associated symptoms
- severe breathing difficulty, blue or grey colour, or collapse
- serious allergic reaction or rapidly worsening swelling
- face or arm weakness, speech difficulty or other stroke signs
- heavy bleeding, severe injury or sudden extreme pain
- confusion, seizure, loss of consciousness or immediate danger

Use the right level of help

Call 999 for life-threatening emergencies. Use NHS 111 online or by phone when you need urgent medical advice but it is not an emergency. Contact a GP, pharmacist, dentist, optometrist or another appropriate service for non-urgent concerns.

Tracking can help—but should not take over

A short record of symptoms, blood pressure when advised, sleep, activity, food or medication may reveal useful patterns. Tracking should have a purpose, use reliable equipment and be reviewed appropriately. More data is not always better, and home measurements do not replace clinical assessment.

Building a realistic health plan

1. Understand	What matters to you? What symptoms, risks, strengths and medical advice need to be considered?
2. Identify barriers	Consider pain, fatigue, disability, time, money, transport, food access, caring, confidence, culture and environment.
3. Choose one step	Select a small action that is specific, realistic and worth doing—for example adding one vegetable, a five-minute adapted activity or booking a review.
4. Make it easier	Prepare the environment, use reminders, ask for support, reduce unnecessary decisions and have a lower-energy alternative.
5. Review	Notice effects on symptoms, function and wellbeing. Adapt the plan rather than treating difficulty as failure.

Measures that matter

- energy for a valued activity
- sleep quality and daytime alertness
- blood pressure, blood tests or clinical measures when relevant
- quality of life and participation
- strength, balance, mobility or independence
- symptoms, pain or recovery
- confidence and consistency without obsession
- weight or body composition only when useful and appropriate

How Health Matters UK can support

Health Matters UK can provide general health education, help you identify patterns and barriers, organise questions for healthcare appointments and build realistic wellbeing actions around your circumstances. We can signpost appropriate professionals. We do not diagnose, prescribe, replace medical treatment or guarantee outcomes.

Progress should fit your life

Health is not a moral score, and a diagnosis or disability is not evidence that someone has failed. Useful change begins with listening, respecting limits and finding the next step that is both beneficial and possible.

Your physical-health review checklist

Current health	Conditions, symptoms, pain, fatigue, sleep, mobility, mood, dental health and any recent changes.
Treatment	Medicines, supplements, side effects, monitoring, appointments and questions for your care team.
Daily foundations	Movement, food, fluids, sleep, smoking, alcohol, connection, work, caring and recovery.
Prevention	Vaccinations, screening, NHS Health Check eligibility, dental care, eye tests and condition reviews.
Barriers and support	Money, housing, transport, access, disability, time, knowledge, equipment and people who can help.
Next step	Choose one action, how you will make it easier, when you will review it and when professional advice is needed.

Important information

This factsheet gives general education for adults and does not replace personalised medical, dietary, exercise or medication advice. Needs differ during pregnancy, older age, disability, illness and recovery. Seek suitable professional advice before making changes that may affect a health condition or treatment.

Evidence and review

Prepared in line with Health Matters UK's Evidence & Editorial Standards. Information was checked against current NHS and UK government resources. External guidance remains the responsibility of the issuing organisation.

• NHS. Healthy living. nhs.uk/live-well/

• NHS. Eating a balanced diet. nhs.uk/live-well/eat-well/how-to-eat-a-balanced-diet/eating-a-balanced-diet/

• Office for Health Improvement and Disparities. The Eatwell Guide. gov.uk/government/publications/the-eatwell-guide

• UK Chief Medical Officers. Physical activity guidelines, updated July 2026. gov.uk/government/publications/physical-activity-guidelines-uk-chief-medical-officers-report/

• NHS. NHS Health Check. nhs.uk/tests-and-treatments/nhs-health-check/

• NHS. When to use 111. nhs.uk/nhs-services/urgent-and-emergency-care-services/when-to-use-111/

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