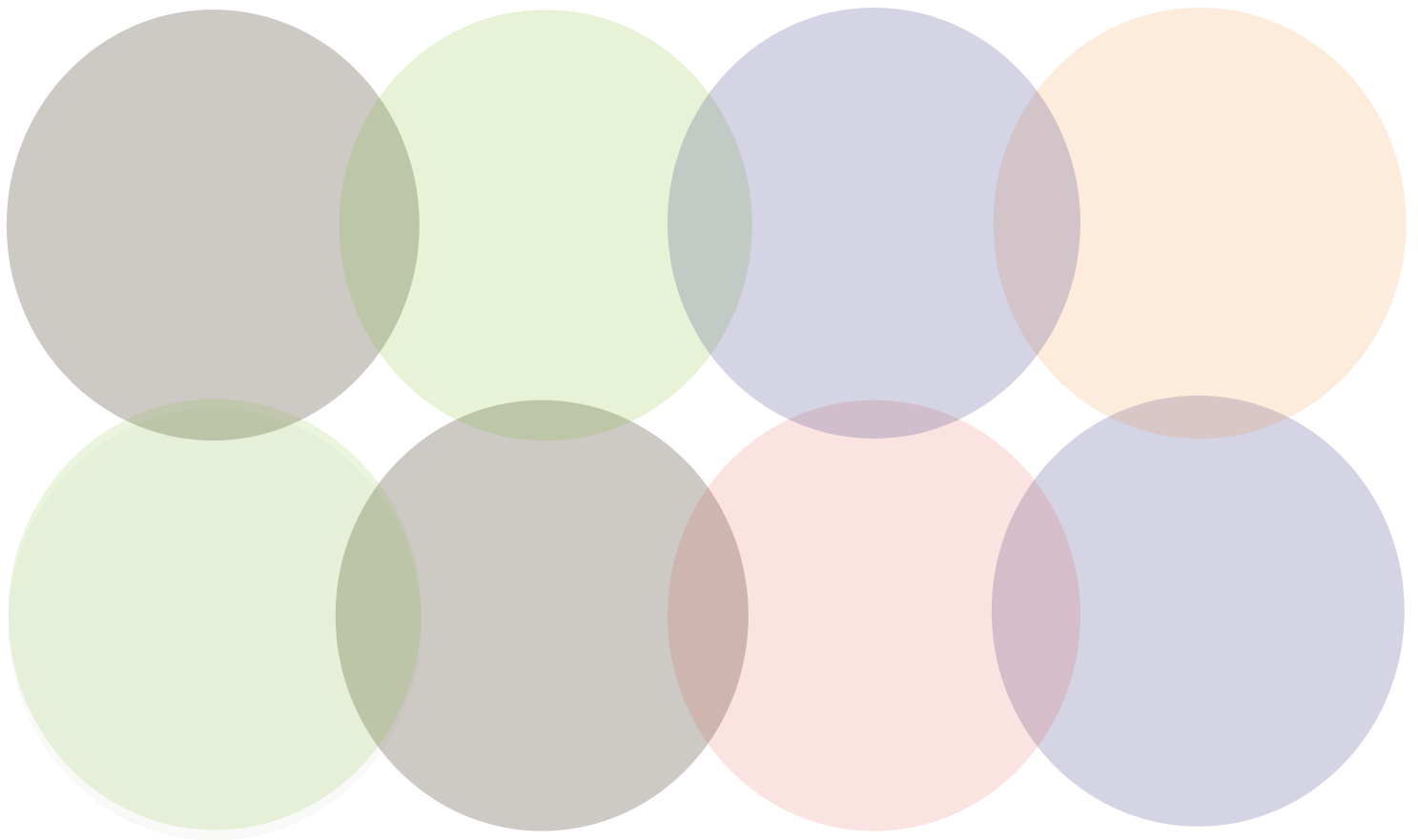


# spear

centre for sport, physical education  
& activity research

## Change4Life Sports Clubs Research 2016: Part One Report



April 2016

## About *spear*

The Centre for Sport, Physical Education & Activity Research (*spear*) is located within the School of Human & Life Sciences at Canterbury Christ Church University. *spear* undertakes a range of theoretically-informed analyses, from critical commentaries and reflections on current policy and practice, to commissioned research, evaluation and consultancy.

The Centre's research is funded by a range of national and international funders such as the International Olympic Committee, World Health Organisation, Terres des Hommes, Department of Health, Department for Education, English Federation for Disability Sport, Mencap, Access Sport, Youth Sport Trust, UK Sport, Sports Coach UK, Sport England and Sport Wales. Recent work has focused on sport, physical activity, health and wellbeing in schools and communities.

Research conducted by *spear* has helped guide and inform public policy by contributing to the wider evidence base used by policy makers, providing a rationale for government and commercial investment, and steering programme improvements that enhance the experience of practitioners and participants.

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Change4Life Sports Clubs Research 2016 undertaken by *spear* and commissioned by Youth Sport Trust. Report produced by *spear*.

April 2016



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## Headlines

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### Impact on healthy lifestyles

- *Change4Life Sports Clubs have a significant, positive impact on participants' activity levels, with a 67% increase in children achieving 60 active minutes every day and over 41,000 additional children meeting CMO recommended levels of physical activity.*
  - *Inactivity among participants has decreased significantly, with almost 7,500 previously inactive children lifted out of inactivity over 12 weeks of participation in Change4Life Sports Clubs.*
  - *Wellbeing and individual development has increased significantly, with participants reporting enhanced social and emotional skills and attributes after 12 weeks of the programme.*
- 

### Impact on behaviour & engagement

- *Change4Life Sports Clubs are seen to support behaviour and engagement in school, with SGOs and deliverers reporting positive impacts on children's confidence (99%), aspirations (92%), behaviour (67%), attendance (52%) and cross-curricular learning (70%).*
  - *Improvements in behaviour, communication, confidence and aspirations are reported by club leads at site visit schools, all of which impact on learning across the curriculum by enhancing children's 'availability to learn'.*
  - *Participants' confidence and ability to positively engage in school life is seen by club leads at site visit schools to be enhanced through participation in the Change4Life Sports Clubs.*
- 

### Embedding & sustaining

- *Training and supporting young leaders aids the delivery of Change4Life Sports Clubs by increasing capacity, nurturing respect and enhancing sustainability.*
  - *Involving non-PE and non-teaching staff in the Change4Life Sports Clubs increases capacity, maximises participation and helps embed healthy lifestyle teaching and learning across the curriculum.*
  - *Working collaboratively with partners and parents can help sustain programme impacts by encouraging healthy lifestyle behaviours beyond the clubs.*
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## Supporting whole school agenda

- *Change4Life Sports Clubs support whole school agenda by improving pupils' health and wellbeing.*
  - *All schools interviewed reported a positive impact on children's physical activity, confidence, self-esteem, social and emotional skills and engagement in school.*
  - *Schools report that they are building sustainability into delivery of their Change4Life Sports Clubs by training and supporting school staff and young leaders.*
- 

## Supporting public health priorities

- *Change4Life Sports Clubs are used by public health teams to support the priorities of reducing childhood obesity and improving healthy lifestyle behaviours by increasing knowledge and understanding.*
  - *The Change4Life brand is regarded as a recognisable 'quality mark' that encourages engagement with healthy lifestyle initiatives.*
  - *The ability of public health teams to work collaboratively with local organisations to deliver a cohesive message and programme is sometimes hindered by the structural separation of local services and data-sharing protocols.*
- 

## Recommendations

1. *Encourage schools to think big and start small; align Change4Life Sports Clubs to pupil health and wellbeing outcomes and provide ongoing support to maximise impact and embed the programme in schools.*
  2. *Consider support for schools in developing partnerships with families and other organisations to maximise and sustain the impact of Change4Life Sports Clubs.*
  3. *Promote the Change4Life Sports Clubs among Public Health Directorates to raise awareness, provide the impact data they require and increase programme sustainability.*
-



# 1) Context

## 1.1 Evaluation context & research summary

Change4Life Sports Clubs are funded by the Department of Health and managed by the Youth Sport Trust (YST). The clubs were introduced into primary schools in 2011/12 and aim to increase the physical activity, health and wellbeing of less active 7-9 year olds through the provision of fun multi-sport themes and healthy lifestyle activities. The success of the clubs has resulted in additional funding to expand the programme as a central part of a broader healthy lifestyle offer in schools. This is supported by the development of a hub of expertise focused in the areas of greatest health inequalities (priority areas) to support and share effective practice among schools and local authority Health and Wellbeing boards.

In 2015, *spear* produced a Lifetime Impact Evaluation of the Change4Life Sports Clubs (2011-2015). The evaluation incorporated a controlled experimental evaluation at the forefront of research in the social sciences and NESTA rated 4-5. Data from over 7,500 children in more than 500 clubs showed that Change4Life Sports Clubs have a significant, positive impact on the activity levels, health behaviours and wellbeing of participating children. The Lifetime Evaluation Report included a number of recommendations for enhancing and building upon the evidence base for the programme. These recommendations included assessing the effectiveness of programme infrastructure in the sustainability of the clubs, assessing programme alignment with public health priorities and exploring the possibility of an economic assessment of the impact of the programme.

The Change4Life Sports Clubs Research 2016 has three key objectives:

1. Demonstrate the wider impact of the Change4Life Sports Clubs
2. Assess the value for money and return on investment of the Change4Life Sports Clubs
3. Capture good practice for embedding and sustaining the programme (locally and nationally)

This Part 1 Report examines the evidence of the wider impact of Change4Life Sports Clubs (objective 1), explored and presented in 5 main sections:

1. *Evaluation of the wider impact of Change4Life Sports Clubs on healthy lifestyles*
2. *Evaluation of the wider impact of Change4Life Sports Clubs on behaviour and engagement*
3. *Exploration of how the Change4Life Sports Clubs are being embedded and sustained in schools*
4. *Exploration of how the Change4Life Sports Clubs programme supports whole school agenda*
5. *Exploration of how the Change4Life Sports Clubs programme supports public health priorities*

The final section of this report presents 6 area profiles to provide a geographical context to the wider impact of the Change4Life Sports Clubs.

YST returns on participation from SGO areas have been analysed to generate overall participation figures for 2015/16. The total number of unique club participants since 2011 is 354,556;<sup>1</sup> figures are provided in table 1.1.<sup>2</sup>

Table 1.1) Change4Life Sports Clubs delivery outcomes across 2011-2016

Number of...	2011/12	2012/13	2013/14	2014/15	2015/16	Change 2011/12 - 2014/15
Clubs established	4,074	4,012	5,910	7,015	7,481	+72%
Children participating	62,598	70,207	102,324	119,376	74,901	+91%
Young people with disabilities participating	-	4,197	7,572	9,637	6,527	+130%
Young Leaders developed	4,136	6,025	10,715	17,737	14,189	+329%
Coaches trained	2,058	3,812	6,293	8,038	4,987	+291%
Average participants per club	15	17	17	17	10	+13%

All children's survey data received from 2011 to 2016 has been (re)analysed for this report; survey returns have been received from 3,971 unique children at 2 or more time points. In reference to all data analysis presented in the report, the term 'significant' refers to statistical significance at  $p < .001$  unless stated otherwise. In addition to quantitative and qualitative data analysis of extant data, 12 telephone interviews have been undertaken to inform sections 5, 6 and 8. Table 1.2 shows a summary of the research process.

<sup>1</sup> This figure represents the total number of new participants each year; it does not include children who have remained in clubs from one year to the next. Participation presented in table 1.1 includes all children (newly participating and continuing participation).

<sup>2</sup> Figures for 2011/12, 2012/13, 2013/14 and 2014/15 are drawn from full year monitoring data; figures for 2015/16 are drawn from interim (Autumn 2015) monitoring data. Therefore percentage increase for change presented from full year outputs 2011/12 – 2014/15. Figures for young people with disabilities are not available for 2011/12; percentage increase therefore shows 2012/13 – 2014/15.

Table 1.2) Change4Life Sports Clubs Research 2016 Summary

	Research	Sample
2011-2016 Secondary Analysis	<ul style="list-style-type: none"> <li>YST returns on participation from SGO areas analysed to generate overall participation figures for 2011-16.</li> </ul>	Returns from 393-447 of 448-451 SGO areas <sup>3</sup> (MME <sup>~</sup> +/-1%). <sup>4</sup>
2011-2016 Children Survey Data Analysis	<ul style="list-style-type: none"> <li>Repeated measures analysis of children survey data to evidence impact on physical activity, inactivity, wellbeing and individual development.</li> </ul>	<p>15,298 survey returns from 9,094 children in 574 Change4Life Sports Clubs with 3,971 survey returns at 2 or more time points (MME<sup>+</sup>+/-1.6%).</p> <p>966 survey returns from 489 children in 15 control schools with 477 repeated measures (MME<sup>~</sup>+/-5%).</p>
2013-2015 SGO & Deliverer Survey Data Analysis	<ul style="list-style-type: none"> <li>Re-analysis of SGO and deliverer survey data to capture perceptions of impact on behaviour and engagement.</li> </ul>	Survey completions from 257 SGOs (MME <sup>~</sup> +/-4%) and 912 club deliverers (MME <sup>~</sup> +/-3%).
2016 Stakeholder Telephone Interviews	<ul style="list-style-type: none"> <li>Telephone interviews with senior leadership team school staff and public health directors to explore perceptions of how Change4Life Sports Clubs programme support whole school agenda and public health priorities.</li> </ul>	Interview data: senior members of staff in 6 schools and 6 public health teams.
2013-2015 Site Visit Data Analysis	<ul style="list-style-type: none"> <li>Qualitative site visit data re-analysed to explore impact on behavior and engagement.</li> </ul>	Data from 8 site visits.
2016 Local Area Profiles	<ul style="list-style-type: none"> <li>Cross-sectional area sub-analysis of 2013-16 children survey data upscaled using lifetime (2011-16) participation data, comparison with national public health data, national Change4Life Sports Clubs data (2011-16) and qualitative data from stakeholder telephone interviews.</li> </ul>	<p>East: week 1 n=574, week 12 n=185 (MME<sup>+</sup>+/-7.2%).</p> <p>East Midlands: week 1 n=656, week 12 n=335 (MME<sup>+</sup>+/-5.4%).</p> <p>London: week 1 n=198, week 12 n=77 (MME<sup>+</sup>+/-11.2%).</p> <p>North East: week 1 n=535, week 12 n=294 (MME<sup>+</sup>+/-5.7%).</p> <p>North West: week 1 n=426, week 12 n=150 (MME<sup>+</sup>+/-8%).</p> <p>South East: week 1 n=576, week 12 n=103 (MME<sup>+</sup>+/-9.7%).</p>

<sup>3</sup> There were 448 SGO areas in 2011/12, 450 in 2012/13 and 2013/14, and 451 in 2014/15 and 2015/16.

<sup>4</sup> Maximum Margin of Error.



## 1.2 Policy Context

In 2014-2015 the Department for Culture, Media and Sport (DCMS), Department of Health (DoH) and Public Health England (PHE) produced a number of strategies outlining the Government's public health priorities and key outcomes<sup>5</sup>. These documents highlight the need for robust evidence in assessing 'what works' in addressing priorities and provide high level outcomes and key performance indicators against which to measure this. These include the development of a Public Health Outcomes Framework with two high level outcomes: increased healthy life expectancy and reduced inequalities in healthy life expectancy. Alignment of the Change4Life Sports Clubs programme with public health priorities and the efficacy in which the programme can address these priorities will be important to securing future investment in the programme.

Government priorities have been reflected in structural changes to the remits and commissioning powers of both Sport England and the NHS. The removal of distinctions between sport and types of physical activity (e.g. dance, cycling, walking) has resulted in a broadening of Sport England's role in measuring and supporting such physical activity, particularly in areas of inactivity. Such areas are identified through Health and Wellbeing Strategies and Boards arising from the devolution of public health from the NHS to Local Authorities in 2013, with the stated aim of integrating physical activity into public health policy and the policy shift from treating ill health to promoting wellbeing:

Funding decisions will be made on the basis of the social good that sport and physical activity can deliver.<sup>6</sup>

Evidence shows clearly how taking part in sport improves educational behaviour and attainment, though greater self-esteem and confidence and direct cognitive benefits... For the future, we will make sure that public investment in sport recognizes and encourages the broader benefits of sport to the individual, in particular... improvements in perceived self-efficacy.<sup>7</sup>

The Government has stated the need for a cross-party and cross-departmental approach in this area<sup>8</sup> with agreed outcomes against which progress can be monitored and evaluated. Most recently, the Government strategy 'Sporting Future'<sup>9</sup> sets out 5 key outcomes: physical health/wellbeing; mental health/wellbeing; individual development; social and community development and; economic development. It recognizes the influence and importance of early experiences in shaping attitudes to sport and physical activity and of engaging the less active. It also highlights the links between physical activity, physical health and mental health; the importance of a 'friendly and welcoming environment' in attracting the less active, such as the safe spaces that *spear's* Change4Life Sports Clubs Lifetime Impact Evaluation (2015) found to be provided by Change4Life Sports Clubs; the role of peer leaders in increasing confidence also reported in the 2015 Impact Evaluation ('ownership' of clubs playing a key role in their success); and the role of enjoyment, confidence and satisfaction in promoting mental wellbeing again reported to be enhanced by Change4Life Sports Clubs in the 2015 Impact Evaluation. This report examines these wider impacts of Change4Life Sports Clubs on the key outcomes, closely aligned to those defined in 'Sporting Future': physical activity, inactivity, and wellbeing and individual development.

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<sup>5</sup> Department for Culture, Media and Sport (Dec 2015). Sporting Future: A new strategy for an active nation; Public Health England (Oct 2014). Everybody Active, Every Day; Public Health England (Nov 2014). Identifying what works for local physical inactivity interventions; Department of Health (2013-2016). The Public Health Outcomes Framework for England.

<sup>6</sup> Department for Culture, Media and Sport (Dec 2015), 10 Sporting Future: A new strategy for an active nation.

<sup>7</sup> Department for Culture, Media and Sport (Dec 2015), 74 Sporting Future: A new strategy for an active nation

<sup>8</sup> All-Party Commission on Physical Activity (2014). Tackling Physical Inactivity – A Coordinated Approach.

<sup>9</sup> Department for Culture, Media and Sport (Dec 2015). Sporting Future: A new strategy for an active nation.

PHE has also reported on the wider health benefits of physical activity and concomitantly on the burden to health and social care and the negative impact on quality of life of inactivity.<sup>10</sup> It highlights the need for a long term evidence based approach in order to effect real and lasting change. 'Everybody Active, Every Day' stresses the need to build physical activity into everyday lives and integrate it into health treatments in order to tackle preventable diseases (including obesity, depression and diabetes), pursue a lifelong journey of physical literacy development and effect a 'cultural turnaround' in attitudes and behaviours:

Physical activity needs to be made easy, made fun and made affordable.<sup>11</sup>

Among its five steps for local areas to support change are 1) Teach every child to enjoy, value and have the skills to be active every day; and 2) Evaluate and share findings so that the learning of what works can grow.<sup>12</sup>

PHE has highlighted the links between pupil health, wellbeing and educational attainment,<sup>13</sup> recognizing the role of schools in shaping children's wellbeing and the close links between this and their ability to reach their full academic potential:

Promoting physical and mental health in schools creates a virtuous circle reinforcing children's attainment and achievement that in turn improves their wellbeing, enabling children to thrive and achieve their full potential.<sup>14</sup>

PHE reports on evidence of the impact of social and emotional wellbeing on academic attainment<sup>15</sup> and highlights the importance of school-based programmes that enhance social and emotional wellbeing in helping young people to acquire the skills required for their academic progress, including confidence, resilience and a 'growth mind-set' (a willingness to take on new challenges and tackle obstacles in the learning process).<sup>16</sup>

In addition, the new Ofsted inspection framework highlights the need for sustainability; inspectors assessing how effectively schools use the Primary PE and Sport Premium and measure its impact on outcomes for pupils. New grant conditions place greater emphasis on the sustainability of improvements achieved with the help of the Premium and schools will need to demonstrate this in order to receive it.

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<sup>10</sup> Public Health England (Oct 2014). Everybody Active, Every Day.

<sup>11</sup> Public Health England (Oct 2014), 13. Everybody Active, Every Day.

<sup>12</sup> Public Health England (Oct 2014), 20. Everybody Active, Every Day.

<sup>13</sup> Public Health England (Nov 2014). The link between pupil health and wellbeing and attainment.

<sup>14</sup> Brooks F (2013). Chapter 7: Life stage: School Years, in Chief Medical Officer's annual report 2012: Our Children Deserve Better: Prevention Pays, ed. Professor Dame Sally C Davies. London: Department of Health in Public Health England (2014). The link between pupil health and wellbeing and attainment.

<sup>15</sup> Murray N, Low B, Hollis C, Cross A, Davis S (2007). Coordinated school health programs and academic achievement: A systematic review of the literature. *J Sch Health*. 77:589-600; Duckworth A & Seligman M (2005). Self discipline out does IQ in predicting academic performance of adolescents. *Psychological science*, 16, 939-944; Zins J, Weissberg M, Wang & Walberg H (2004). Building academic success on social and emotional learning: What does the research say? New York: Teachers College Press in Public Health England (Nov 2014). The link between pupil health and wellbeing and attainment.

<sup>16</sup> Dweck C (2012). *Mindset: How You Can Fulfil Your Potential*. New York: Constable & Robinson Limited in Public Health England (Nov 2014). The link between pupil health and wellbeing and attainment.



## 2) Impact on healthy lifestyles

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### Headlines

- *Change4Life Sports Clubs have a significant, positive impact on participants' activity levels, with a 67% increase in children achieving 60 active minutes every day and over 41,000 additional children meeting CMO recommended levels of physical activity.*
  - *Inactivity among participants has decreased significantly, with almost 7,500 previously inactive children lifted out of inactivity over 12 weeks of participation in Change4Life Sports Clubs.*
  - *Wellbeing and individual development has increased significantly, with participants reporting enhanced social and emotional skills and attributes after 12 weeks of the programme.*
- 

Section 1.2 provided a brief overview of policy in relation to children's physical activity, inactivity, and wellbeing and individual development. Policy and research in this area strongly suggest that these aspects of children's health and wellbeing, and inequalities therein, are inextricably linked. PHE highlights the role of physical activity itself and the social and emotional impacts of physical activity (such as enhanced sense of belonging) in improving pupil health, behaviour and attainment in schools.<sup>17</sup>

Despite complex interrelationships between aspects of children's health and wellbeing, it is useful and necessary to separate them for purposes of examination. It is increasingly crucial for physical activity and wellbeing programmes to demonstrate achievement of key outcomes and performance indicators (and therefore to monitor progress and measure impacts) in order to gain funding. It is also important for schools to evidence use of the Primary Sport Premium to meet Ofsted requirements.

Of particular relevance to the aims and impact of Change4Life Sports Clubs are the Government's most recently defined outcomes in this area: increasing the percentage of the population meeting CMO guidelines for physical activity, decreasing the percentage of people physically inactive, improving subjective wellbeing, and increasing levels of perceived self-efficacy.<sup>18</sup> PHE has linked Ofsted requirements to the physical health and mental wellbeing of pupils. DCMS outcomes, definitions and KPIs are provided in appendix A and the links between the Ofsted inspection framework and pupil health and wellbeing in appendix B.

*spear's* 2015 Impact Evaluation of Change4Life Sports Clubs showed that almost 90% of SGOs and Change4Life Sports Club deliverers in schools reported that the clubs added value to the schools' healthy lifestyle offer. The aims of the Change4Life Sports Clubs programme are closely aligned to those of the National Healthy Schools Programme (promoting links between good health, behaviour and achievement through healthy eating, physical activity and emotional health and wellbeing) and clubs were widely reported by schools to contribute towards their Healthy School Status.

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<sup>17</sup> Public Health England (Nov 2014). The link between pupil health and wellbeing and attainment.

<sup>18</sup> Department for Culture, Media and Sport (Dec 2015). Sporting Future: A new strategy for an active nation.

This section presents data from the Change4Life Sports Clubs children’s survey responses (2011-2016) to explore the impact of the clubs on children’s knowledge and behaviour in respect of healthy lifestyles: on their physical activity levels (section 2.1); physical inactivity (section 2.2) and wellbeing and individual development (section 2.3).

## 2.1 Physical activity

Health Survey for England data shows 24% of children aged 7-9 years nationally meeting the minimum 60 active minutes every day recommended by the Chief Medical Officers.<sup>19</sup> Levels of physical activity among participants in Change4Life Sports Clubs are measured in the self-report survey completed by children at 6 week intervals. Specifically, children are asked whether they are active for 60 minutes ‘every day’/‘most days’/‘some days’/‘never’. They are also asked whether they are active for 30 minutes, with the same response options. Data for ‘every day’ responses to the 60 active minutes question is presented in this section in alignment with CMO recommendations, alongside data for ‘every day’ responses to the 30 active minutes in figures 2.1 and 2.2. In addition to measuring activity frequency, data give an indication of activity intensity by asking children how often they play games where they get out of breath; a strong correlation between responses to the activity frequency and intensity questions in the children’s survey indicates that the reported activity is of at least moderate intensity.

A key aspect of the research undertaken for the 2015 Change4Life Sports Clubs Lifetime Impact Evaluation, which has been supplemented for this report with data collected in 2015/16, was a control condition; data collected through the same self-report surveys completed by children not participating in Change4Life Sports Clubs (in schools not participating in the programme). Data for the control condition show almost no difference in physical activity levels over a 12 week period (non-significant increase from 29% to 30% of children achieving 60 active minutes every day).

Data presented in figures 2.1 and 2.2 show the change in levels of activity among Change4Life Sports Club participants between weeks 1 and 12 of the programme, measured against activity levels in the control condition in figure 2.1.

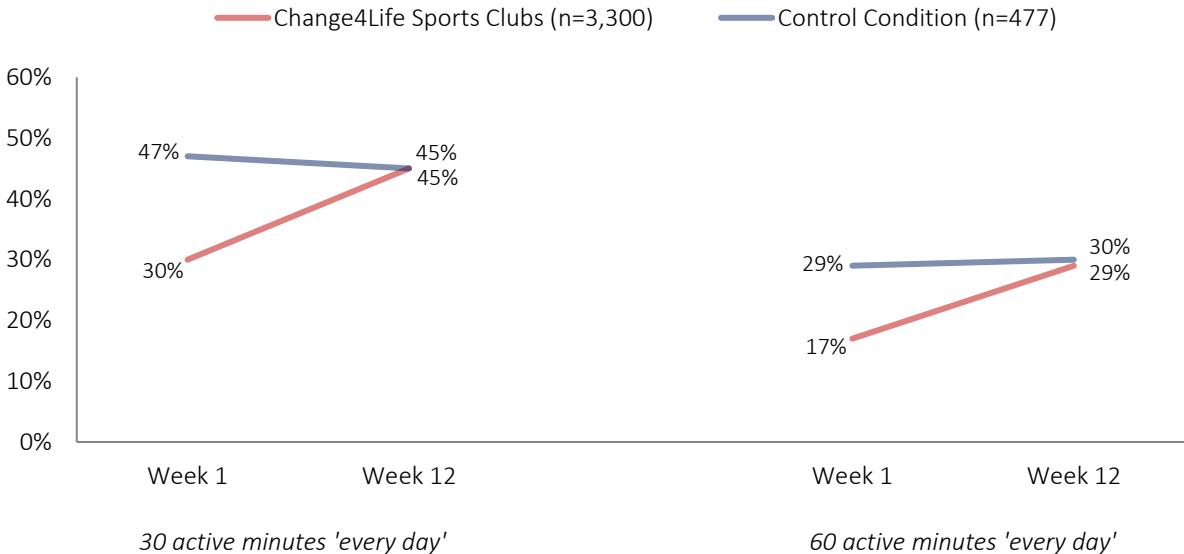


Figure 2.1) Achieving 30 & 60 active minutes ‘every day’: Change4Life Sports Clubs vs. control

<sup>19</sup> The Health and Social Care Information Centre (2013). Health Survey for England 2012.

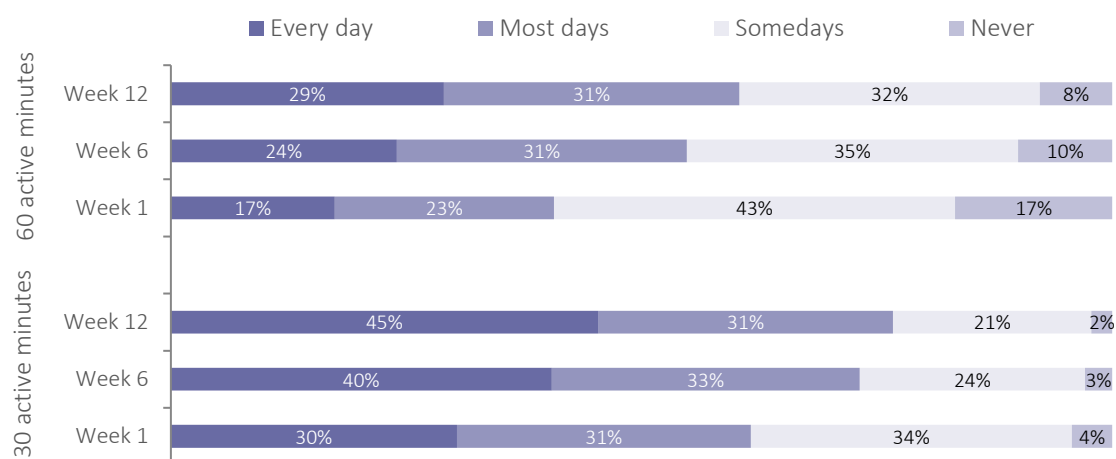


Figure 2.2) Physical activity levels of Change4Life Sports Clubs participants (n=3,300)

Data show that *Change4Life Sports Clubs have a significant, positive impact on participants' activity levels, with a 67% increase in children achieving 60 active minutes every day, rising from 17% of children to 29% of children.* This means that while Change4Life Sports Clubs participants joined clubs with levels of physical activity below the national average reported in the 2012 Health Survey for England, they exceeded the national average by week 12. Upscaling the sample of 3,300 repeated measures survey returns using the overall participation figure of 354,556, data show *over 41,000 additional children meeting CMO recommended levels of physical activity between 2011 and 2016.*<sup>20</sup>

Survey data also show children's physical activity levels continue to rise with continued participation in Change4Life Sports Clubs beyond 12 weeks. The sample size of repeated measures survey returns at both weeks 12 and 24 is relatively small. However data suggest an increase from 29% to 32% of children achieving 60 active minutes every day between weeks 12 and 24 of participation in Change4Life Sports Clubs, representing over 11,000 additional children meeting CMO recommendations. The addition of survey data received in 2015/16 has not altered the impact trend shown in the 2015 Change4Life Sports Clubs Impact Evaluation for clubs running for more than 12 weeks; data continue to show a significant increase in activity levels between weeks 12 and 24 among participants not achieving at least 60 active minutes every day by week 12, and a significant decrease in those who are achieving at least 60 active minutes every day by week 12 (figure 2.3). Therefore continued club participation beyond 12 weeks remains to be seen as beneficial in increasing the physical activity levels of the less active. However, for participants already achieving at least 60 active minutes by week 12, new pathways need to be provided so that these participants are given opportunities to build on the skills, confidence and resilience gained from participation in the Change4Life Sports Clubs.

<sup>20</sup> Survey data was collected 2011-2016 and has been upscaled to participation data for the same period. It is not possible to estimate the number of children who attended but did not complete 12 weeks of the programme, as a non-return of survey does not equate to non-attendance. Data suggest that attendance at Change4Life Sports Clubs is high and stable over a 12 week period and the representativeness of the sample is indicated in the MME of +/-1.6%. For further details please see [spear, 2015, 21. Lifetime Evaluation of the Change4Life Sports Clubs](#)

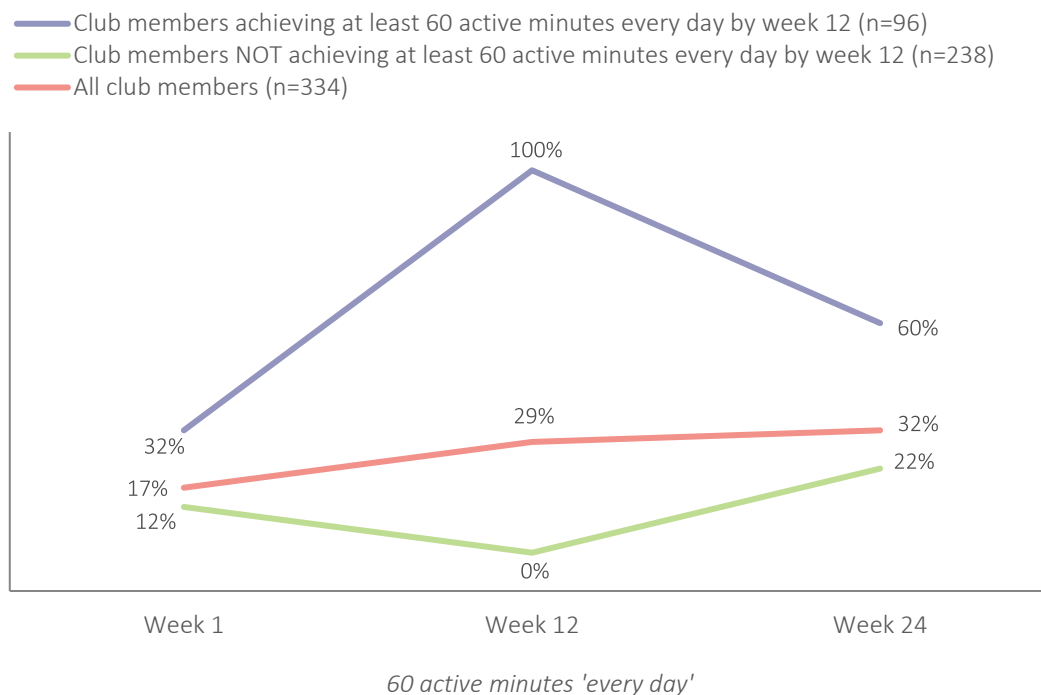


Figure 2.3) Physical activity levels of participants at weeks 1, 12 and 24

Data has also been collected from children at a time point 12 weeks after participation in a Change4Life Sports Club. Analysis shows a 13% decrease in children achieving 60 active minutes every day 12 weeks after they left the clubs, with 29% achieving 60 active minutes every day when leaving the club and 25% achieving this level of physical activity 12 weeks later. While this indicates that activity levels achieved by the last week of club participation are not sustained, the decrease is not significant. Levels of physical activity 12 weeks later remain higher than when participants joined the programme: 12 weeks after club participation 25% of children report undertaking 60 active minutes 'every day', compared to 17% on joining the clubs. Moreover, this level of sustained physical activity compares favourably with the national average of 24% (7-9 year olds),<sup>21</sup> despite the below average percentage of participants achieving this level of activity on joining the programme.

Additionally, the Change4Life Sports Clubs children's survey asks children to report the frequency with which they undertake 30 active minutes. Data show a significant increase in participating children undertaking 30 active minutes 'every day' (from 30% to 45%). This data will be further explored in section 2.2 in relation to inactivity, as it sheds light on the effectiveness of the Change4Life Sports Club programme in reaching less active children and reducing health and wellbeing inequalities. Here data is presented to show the significant increase in physical activity levels of Change4Life Sports Clubs participants achieving 30 and 60 active minutes, alongside the physical activity levels of non-participants. Children's survey data therefore show significant increases in the activity levels of participating children between weeks 1 and 12; no significant differences are observed in the control condition. This demonstrates that the Change4Life Sports Clubs have a significant positive impact on the physical activity levels of participating children measured against a control condition.

<sup>21</sup> The Health and Social Care Information Centre (2013). Health Survey for England 2012.

## 2.2 Inactivity

This section considers the impact of Change4Life Sports Clubs on tackling inactivity. Alongside the key DCMS<sup>22</sup> outcome of increasing the percentage of the population meeting CMO guidelines for physical activity sits the outcome of decreasing the percentage of people physically inactive. Inactivity is defined as participation in less than 30 minutes of activity a week.<sup>23</sup> In addition, the Public Health Outcomes Framework for England<sup>24</sup> sets out two high level outcomes: increasing healthy life expectancy and reducing differences in (healthy) life expectancy. Guidance therefore points towards the need for reductions in inequalities in relation to health, physical activity and wellbeing; towards ‘closing the gap’.

Key to tackling inactivity (and inequality in levels of activity) is successful engagement of the least active. Children’s survey data presented in figure 2.2 show that 83% of children joining Change4Life Sports Clubs were not achieving 60 active minutes every day and 70% were not achieving 30 active minutes every day. These data suggest that Change4Life Sports Clubs successfully reach the key target group of less active children and increase their activity levels, regardless of their initial level of inactivity.

Data from *spear*’s Change4Life School Games Organiser (SGO) and deliverer survey<sup>25</sup> also indicate that schools have specifically aimed their Change4Life Sports Clubs to reach less active children, with 65% of respondents reporting this group as their targeted participants.

Children undertaking less than 30 minutes of physical activity per week are classed as ‘inactive’;<sup>26</sup> that is, those children reporting that they ‘never’ undertake 30 minutes of physical activity in a week. For Change4Life Sports Clubs participants, these responses accounted for 4% of the survey sample at week 1 and this decreased to 2% by week 12. This means that *inactivity among participants has decreased significantly, with almost 7,500 previously inactive children lifted out of inactivity over 12 weeks of participation in Change4Life Sports Clubs*. In the control condition there was no significant change (figure 2.4), supporting a causal relationship between Change4Life Sports Club participation and decreasing levels of inactivity.

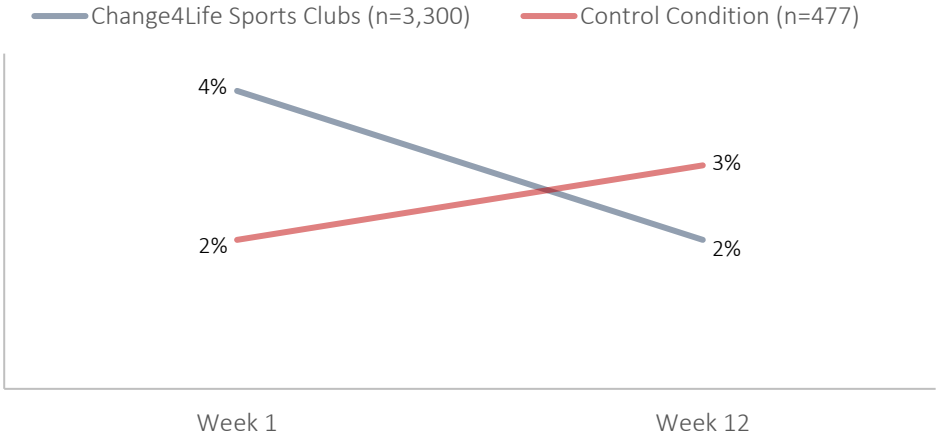


Figure 2.4) Inactivity: Change4Life Sports Clubs vs. control.

<sup>22</sup> Department for Culture, Media and Sport (Dec 2015). Sporting Future: A new strategy for an active nation.  
<sup>23</sup> Department of Health (2011) Start Active, Stay Active: A report on physical activity from the four home countries’ Chief Medical Officers.  
<sup>24</sup> Department of Health (2012) The Public Health Outcomes Framework for England, 2013-2016.  
<sup>25</sup> SGO & Deliverer Change4Life Survey 2013-2015, n=530.  
<sup>26</sup> The Health and Social Care Information Centre (2013). Health Survey for England 2012.

The wider impacts of Change4Life Sports Clubs, beyond levels of physical activity and inactivity, are explored in section 2.3. However, it is worth expanding here on some of the findings of the 2015 Change4Life Sports Clubs Lifetime Impact Evaluation in relation to the ways in which Change4Life Sports Clubs have been shown to increase activity levels by enhancing confidence and creating 'safe spaces' for children to develop self-efficacy, as this sheds light on how the programme has lifted children out of inactivity. In addition to targeting the clubs at the less active, respondents to the SGO and deliverer survey reported that they aimed to reach other groups, including overweight or obese children (38%), children who didn't join other clubs (49%) and children with low confidence/self-esteem (54%).

As well as questions relating to levels of physical activity, the children's survey asks questions about what respondents did, felt and liked in relation to physical activity and health/wellbeing behaviours. Responses are used to measure children's confidence, aspirations, empathy, social skills, resilience, creativity, happiness and behaviour. Further detail of these questions and the impact measured is discussed in section 2.3. Here though it is important to note that reported increases in children's confidence within the clubs is strongly related to the development of a sense of belonging and the opportunity to contribute to club delivery. *spear's* Change4Life Sports Clubs Evaluations 2011-2015 have shown that children's sense of belonging and ownership of the clubs are important aspects of their success in lifting children out of inactivity. The provision of a 'safe space' for children who may not join 'traditional' sports clubs to participate in and help run a club has contributed towards the ability of the programme to impact on a range of outcomes central to the development of broader health and wellbeing. These aspects are explored in the following sections and further information and evidence relating to this can be found in [spear's Lifetime Evaluation of the Change4Life Sports Clubs \(2015\)](#).



## 2.3 Wellbeing & individual development

This section explores further the impact of Change4Life Sports Clubs on children's wellbeing and individual development. Questions in the children's survey are provided in sections linked to 'healthy me', 'thinking me', 'social me', 'creative me' and 'physical me' to guide completion. Children's wellbeing and individual development is measured by analysis of survey responses to a number of questions relating to how often they like, think they are good at, feel happy, help others, and so on, when playing games. Questions are closely aligned with CARE<sup>27</sup> and provide an indication of children's creativity, aspiration, resilience and empathy as well as wider social skills, confidence and happiness. The full set of questions/children's survey is provided in appendix C. Survey data has been analysed to examine changes over time reported by respondents in their wellbeing and individual development, through analysis of individual question responses and by testing for significance in the overall construct of 'wellbeing and individual development'.

Responses to every question relating to wellbeing and individual development show significant increases<sup>28</sup> in overall responses for Change4Life Sports Clubs participants and no significant changes in the control group over a 12 week period. While difference in sample sizes between the Change4Life Sports Clubs cohort and control group<sup>29</sup> is likely to impact on statistical significance, qualitative data from the SGO and deliverer survey and from school site visits support quantitative evidence of significant increases in the wellbeing and individual development of Change4Life Sports Clubs participants; illustrative examples are provided in this section.

Figures presented in this section relate to children reporting that they liked, did or were good at aspects relating to games/physical activity 'every day'. Children's survey data show that the percentage of children reporting they like to be active increased among Change4Life Sports Clubs participants, suggesting attitudinal and behavioural changes in line with the increases in physical activity outlined in section 2.1. Respondents who thought they were good at playing games 'every day' increased from 54% to 60% between weeks 1 and 12 of club participation, suggesting an increase in children's confidence. It is difficult to measure changes in aspirations in a self-report survey of children of this age group; however, the increase in participants reporting that they look forward to playing games and like being active does suggest that clubs had a positive impact in this respect with 'every day' responses increasing from 67% to 74% for the aspiration construct comprised of these questions. Children reporting that they like trying new games and learning new skills (questions which comprise the resilience construct) 'every day' rises from 55% on joining the clubs to 60% at week 12. The increase in their enjoyment of trying new things and in not being afraid to do so suggests increases in both resilience and confidence. Similarly, responses to 'I make up new games to play' indicate that children became more able to do so ('every day' responses increasing from 28% to 33%), suggesting enhanced creativity through participation in the Change4Life Sports Clubs. The percentage of children enjoying playing games with others 'every day' showed a small change from 68% in week 1 to 70% in week 12, and those reporting that when they play games they help others improve 'every day' increased from 27% on joining the club to 36% at week 12. These increases indicate a positive impact on social skills and that club participation increases levels of empathy and members' confidence in their ability to help others. Statistically significant increases for each outcome suggest that the Change4Life Sports Clubs are impacting positively on participants' wellbeing and individual development and therefore on the target groups of children reported to join the clubs with lower self-esteem, confidence, social and emotional skills than their peers. Outcome data is presented in figure 2.5.

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<sup>27</sup> YST's CARE model: Creativity, Aspiration, Resilience, Empathy.

<sup>28</sup> Statistical significance at  $p < .001$  for all questions, except 'I feel happy after playing games' which shows a significant increase at  $p < .05$ .

<sup>29</sup> Change4Life Sports Clubs  $n = 3,300$  repeated measures children survey returns at weeks 1 and 12; Control  $n = 477$  repeated measures children survey returns at weeks 1 and 12.

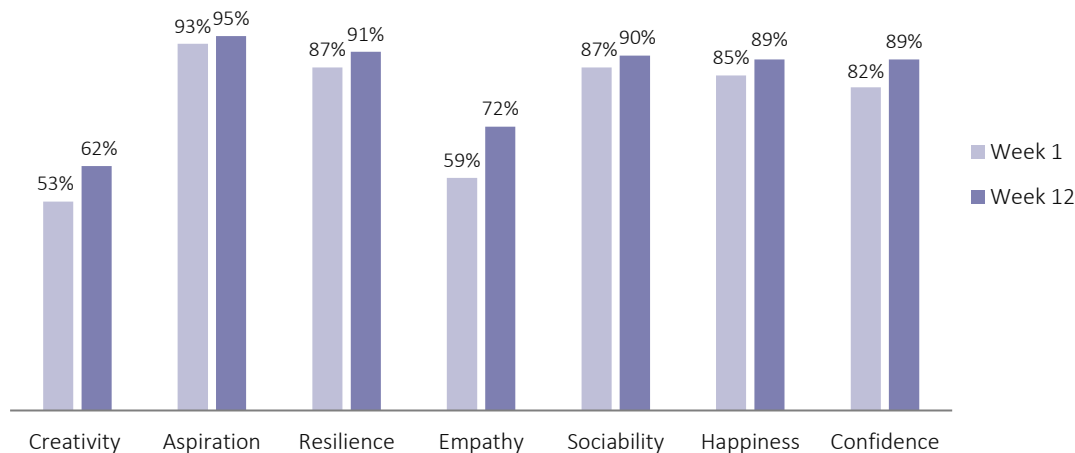


Figure 2.5) Impact on wellbeing and individual development outcomes, including CARE<sup>30</sup> (n=3,300)

Together these outcomes form the construct Wellbeing and Individual Development. Data show that *wellbeing and individual development has increased significantly, with participants reporting enhanced social and emotional skills and attributes after 12 weeks of the programme.*

In relation to broader health and wellbeing, significant increases are evident in overall responses to the questions ‘I eat my 5-a-day’ and ‘I drink water before, during and after games’ (‘every day’ responses increasing from 35% to 40% at week 12 for the former and from 39% to 47% for the latter), indicating increases in knowledge of healthy lifestyle choices among Change4Life Sports Clubs participants; again, no significant changes were observed in the control group responses in relation to these aspects. Data showing all questions and response options for both Change4Life Sports Clubs participants and the control condition are provided at appendix D.

The increases in Change4Life Sports Clubs participants’ confidence, aspirations, resilience and wider social skills reported by respondents have also been highlighted by deliverers of Change4Life Sports Clubs at site visit schools. Deliverers explained how the clubs helped children develop the social skills they sometimes lacked on joining the programme: in a telephone interview, one club lead described a child with SEN who struggled to interact with his peers and often ‘kicked out’ at other children. The lead saw the Change4Life Sports Club as the catalyst for changing this child’s behaviour and described how at break times he now plays, shares and shows empathy.

At Wimbourne Junior School, the club lead was passionate about the children having ‘ownership’ of the Change4Life Sports Club activities and young Sports Leaders facilitate all activities. She noted how the club not only empowered the young leaders but encouraged their peers to participate. She described the positive impact of the Change4Life Sports Club on the self-esteem of all children involved: *“it’s very empowering for them, their self-esteem grows as they see changes over time.”* As well as increasing confidence and self-esteem, the lead commented on the holistic outcomes she saw the Change4Life Sports Club as achieving: *“happy, keeping fit, having a healthy body and a healthy mind”* (club lead, Wimbourne Junior School).

At St Patricks RC Primary School, the Change4Life Sports Club provides a unique opportunity for involvement in physical activity for those pupils who are less engaged in PE and sport and there is an onus on ensuring the sessions are fun and inclusive. The deliverers commented on the increase in

<sup>30</sup> CARE: Creativity, Aspiration, Resilience, Empathy

children's confidence and their concomitant increasing involvement in sessions. Despite the children's reported reluctance to attend at the beginning, by the time of the visit children were openly enthusiastic: *"I get to play games and do exercises I wouldn't do if I didn't come here", "I really enjoy the club", "it's exciting"* (participants, St Patricks RC Primary School). This enjoyment of sessions is a key theme of the Change4Life Sports Clubs programme and the fun aspect is reported by both children and deliverers to be important in order to reach and engage those most in need.

Change4Life Sports Clubs in visit schools were widely seen as a 'safe house' in which children could develop the confidence and resilience required to participate in wider school life, including PE. Participants at Rowanfield Primary School spoke about feeling more confident since their participation in the Change4Life Sports Club: *"I didn't really think I was that fast, but playing these games it doesn't matter how fast you are", "I didn't want to take part in PE because I didn't think I would be good enough for it. But the activities here have helped me. I feel I can take part in PE now"* (participants, Rowanfield Primary School). The deliverer stated that healthy eating choices are encouraged through the programme and noted the importance of this in the absence of dietary/home economics teaching elsewhere in the school curriculum. He described the positive impact the club was having on the children's healthy lifestyle choices, implementing small changes gradually over time, by cooking healthy foods and sharing recipes for children to take home. Positive feedback from children during the visit supported his perceptions: *"I have learnt how to cook, how to make pasta and how to make healthier choices", "I have stopped eating sweets every day. Now I just eat sweets on Fridays", "Sometimes my mum puts a Pepperami in my lunchbox and I ask if I can change it for a banana"* (participants, Rowanfield Primary School).

During a visit to the Change4Life Sports Club at Our Lady of Lourdes RC Primary School, there was an emphasis on teamwork and resilience, with the club lead encouraging children to keep trying and working together until they experienced success. The club provided a supportive environment in which children were keen to help each other improve. In addition, the deliverer reported increases in children's confidence, willingness to 'have a go', levels of physical activity and enjoyment of physical activity and sport. He also highlighted that children were now much more aware of healthy eating and the value of this to them and their families.

Deliverers expressed their belief that the Change4Life Sports Clubs have a positive impact on a broad range of outcomes, including children's confidence, resilience, knowledge of healthy lifestyles and sense of belonging. Deliverers' perceptions are supportive of the quantitative data presented in this section. Further illustrative comments on wellbeing and individual outcomes, some of which indicate longer-term benefits, are presented in panel 2.1.

Panel 2.1) Illustrative comments from SGO and deliverer survey on aspects of wellbeing and individual development

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*Social skills improved and also behaviour and working with other students.*

*Great programme for specific children with low participation rates and low self-esteem.*

*Children who have attended the club have raised their self-esteem and levels of performance. They are all very excited about the activities provided every week.*

*It provides equal sporting opportunities for pupils in a special school and enables some to attend a club who otherwise would not be able to. It enhances their school life experience.*

*The schools have found the C4L Clubs beneficial to raising participation and involving children to becoming part of a team.*

*Parents of children who have attended tell me how it has improved their child's confidence and self-esteem.*

*Opportunity to develop skills so more equal with peers and more willing to participate.*

*More positive attitudes towards PE and sport. A sense of belonging and teamwork. General fitness. Participation rates in PE.*

*Massive change in awareness of healthy eating. Children who attended two years ago still come up to me in school and tell me about new fruit and veg they have eaten.*

*It's difficult to get parents on board and involved, especially in the families of children we want to come to the club – important to have their support.*

*They continue to show more positive attitudes towards PE and sport. They have better general fitness and participation rates in PE. Social skills are improved and also behaviour and working with others.*

*Children have independently chosen to attend other clubs – Change4Life has given them the confidence to have a go! Some children have gone on to be picked for sports teams inside and outside of school.*

*A huge difference has been made in ex-club members' physical activity, behaviour, self-esteem, pupil peer support, confidence, sense of achievement, friendship skills and social skills.*

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### 3) Impact on behaviour & engagement

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#### Headlines

- *Change4Life Sports Clubs are seen to support behaviour and engagement in school, with SGOs and deliverers reporting positive impacts on children's confidence (99%), aspirations (92%), behaviour (67%), attendance (52%) and cross-curricular learning (70%).*
  - *Improvements in behaviour, communication, confidence and aspirations are reported by club leads at site visit schools, all of which impact on learning across the curriculum by enhancing children's 'availability to learn'.*
  - *Participants' confidence and ability to positively engage in school life is seen by club leads at site visit schools to be enhanced through participation in the Change4Life Sports Clubs.*
- 

The links between pupil behaviour, engagement, wellbeing and attainment are highlighted in previous sections. Public Health England explicitly states *'a positive association exists between academic attainment and physical activity level of pupils', 'pupils with better health and wellbeing are likely to achieve better academically'<sup>31</sup> and 'social and emotional competencies have been found to be a more significant determinant of academic attainment than IQ'.<sup>32</sup>*

Academic attainment data in relation to the impact of Change4Life Sports Clubs is not available. However, qualitative data on the wider impacts, including wellbeing, behaviour and engagement, provide insights in this area: *'the level of school engagement pupils feel... is strongly associated with their attainment'*.<sup>33</sup> This section explores data from the Change4Life Sports Clubs SGO and deliverer survey to examine the perceived impact of Change4Life Sports Clubs on the behaviour and engagement of pupils. Qualitative insights gained from school site visits undertaken 2013-2015 are also presented.

School Games Organisers and deliverers in schools (teachers, teaching assistants, staff) responding to the survey were asked how much they thought the programme had impacted on a number of physical activity, health and wellbeing outcomes. They were also asked about their perceptions of impact of the clubs on a number of whole school outcomes, including improved behaviour, increased attendance and contribution to cross-curricular learning.

Figure 3.1 supports the evidence in section 2 that Change4Life Sports Clubs raise the activity levels and improve attitudes towards physical activity and sport among participants, as well as improving physical skills and encouraging healthy eating.

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<sup>31</sup> Public Health England (Nov 2014). The link between pupil health and wellbeing and attainment, 4.

<sup>32</sup> Public Health England (Nov 2014). The link between pupil health and wellbeing and attainment, 16.

<sup>33</sup> Public Health England (Nov 2014). The link between pupil health and wellbeing and attainment, 22.

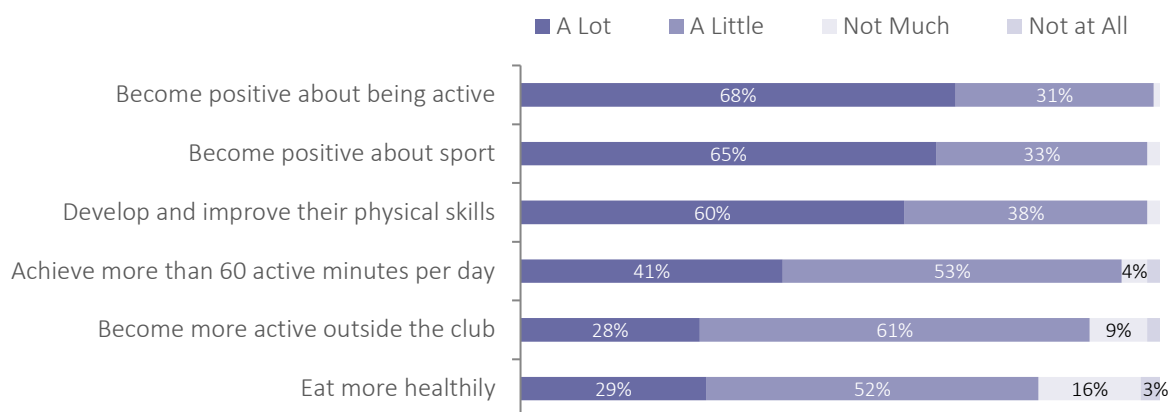


Figure 3.1) Impact on physical activity, health and wellbeing outcomes across 2013-2015 (n=508)

Moreover, *Change4Life Sports Clubs* are seen to support behaviour and engagement in school, with SGOs and deliverers reporting positive impacts on children’s confidence (99%), aspirations (92%), behaviour (67%), attendance (52%) and cross-curricular learning (70%). Figure 3.2 provides data from responses in relation to impact on these whole school outcomes.

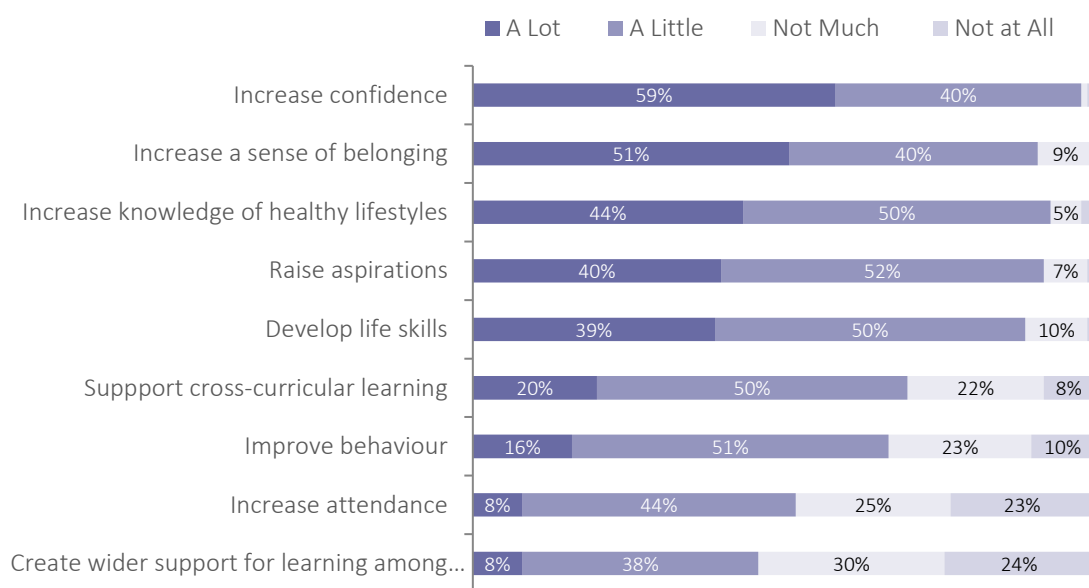


Figure 3.2) Impact on whole school outcomes across 2013-2015 (n=500)

Given the links between poverty, health inequalities and educational attainment<sup>34</sup> schools have also been challenged to evidence how they are using the Pupil Premium to promote health and wellbeing and to ‘close the gap’ for those children most in need. Qualitative responses to the SGO and deliverer survey suggest that the programme has helped schools promote health and wellbeing to all pupils, including those most in need, and crucially to evidence this. By engaging both pupils and staff not usually involved in PE or sports clubs (thereby widening the reach of both teaching and learning), they were better able to promote health and wellbeing across the school, including to those who were typically less engaged. Illustrative comments from the SGO and deliverer survey are provided in panel 3.1.

<sup>34</sup> Public Health England (Nov 2014). The link between pupil health and wellbeing and attainment.

Panel 3.1) Illustrative comments from SGO and deliverer survey on  
Change4Life Sports Clubs & closing the gap

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<i>Provides opportunities to develop self-esteem which may or may not be linked with obesity.</i>	<i>Running Change4Life Sports Clubs as breakfast clubs and targeting pupil premium children.</i>
<i>Great way to target pupils to meet their needs related to engagement and obesity, etc.</i>	<i>SEN children and FSM cohort supported.</i>
<i>We had to re-name the club as children and parents perceived Change4Life negatively – more successful in attracting target children once it wasn't seen as a 'fat club'.</i>	<i>Feedback has been very positive regarding participation and enjoyment and the effect on behaviour, confidence and physical ability of those attending the clubs.</i>
<i>Used the Change4Life Sports Clubs as an opportunity for less active children to take part in physical activity, therefore promoting healthy lifestyles.</i>	<i>It enables some to attend a club who otherwise would not be able to. It enhances their school life experience. They are now a lot more involved.</i>
<i>Having a Change4Life Club in school helps with filling the criteria for Schools Games Mark in the areas of leadership, activities that attract the less sporty/physically active and having a school games crew.</i>	

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*Improvements in behaviour, communication, confidence and aspirations are reported by club leads at site visit schools, all of which impact on learning across the curriculum by enhancing children's 'availability to learn'.* In this section, evidence from school site visits is presented to illustrate the impact of Change4Life Sports Clubs on the behaviour and engagement of pupils at these schools.

Rowanfield Primary School is situated in a socio-economically deprived area with concomitant health inequalities. The majority of children at whom the Change4Life Sports Club is aimed have health problems, are deemed overweight and/or have further educational needs. The club lead reported how the programme encourages good behaviour and positive lifestyle choices. The club utilises a behaviour chart, with participants aiming to become a 'dazzler' or 'double dazzler' by exhibiting good behaviour; good behaviour along with positive lifestyle choices in terms of healthy eating are rewarded with 'Freedom Friday' during which children are given a treat (decided upon by the school health counsellors, who are also pupils). The deliverer commented on the impact of the club on engaging all pupils and highlighted one example of a child who, prior to the Change4Life Sports Club, would not engage with anything in school. He described how she now asks to borrow PE kit so that she can participate in PE and has integrated better with peers in school. During the visit, participating children indicated that they had gained confidence through the programme, played more outside of the club and had learned about healthy eating and lifestyle choices. They and the club lead spoke about how the confidence and resilience gained through the Change4Life Sports Club (and its provision of a 'safe house') enabled the children to participate in wider school life.

Similarly, at Wimbourne Junior School the club lead reported that, while the club had initially been aimed at increasing the physical activity of the less active and/or overweight children, wider benefits in terms of behaviour and engagement soon became apparent:

*We realised that some children struggled with social skills, behaviour and friendship issues... as we started to run the Change4Life activities in the playground, more and more were coming to join in... so as well as collecting data for children who were becoming more active, we could look at children who struggled to make friends or struggled with social skills and see they were massively improving... It's really motivated them to exercise and be more health conscious but they're so much happier... they're making friends and they're learning really good skills... it's just had a huge impact.*

(Club lead, Wimbourne Junior School)

In addition, the lunchtime supervisor involved with the Change4Life Sports Club activities noted the impact of the programme on those children who had previously demonstrated non-social (sitting alone at lunch times) or anti-social behaviour. The Change4Life Sports Club activities at this school involved all children in the playground and were led by young Sports Leaders. The school adopted positive behaviour management, with Sports Leaders awarding 'green cards' or stickers to peers for good behaviour and nominating children for awards where appropriate. The club lead spoke enthusiastically of the increased levels of children's physical health and fitness, and crucially their enhanced mental wellbeing and happiness.

The club lead at Our Lady of Lourdes RC Primary School commented on the link between physical activity/inactivity and academic progress and aims to use the Change4Life Sports Club to enhance the academic attainment of pupils:

*If you look at the top performing children academically they are the most active children sport wise and if you look at the underachievers, the ones who aren't making the progress as needed they are actually less active so that's who I'm trying to target.*

(Club lead, Our Lady of Lourdes RC Primary School)

In this school, the deliverer is keen to disown the 'fat club' image he perceives Change4Life Sports Clubs have gained, by engaging children other than, though including, the less active. The school aims to employ a holistic approach to healthy and active lifestyles by spanning home and community life as well as school, encouraging children to engage their families in healthy lifestyle choices. The club lead sees the Change4Life Sports Club as an integral part of a wider approach that treats physical activity as key to pupil wellbeing and achievement.

Initiated as part of the school's Pupil Premium spend, at Yarborough Academy the club has been able to broaden its impact beyond these pupils across the school. A natural synergy is seen between the Change4Life Sports Club ethos and the school's project based teaching and learning approach, allowing the club to link across the curriculum. For example, linking healthy food activities from the club to numeracy and maths (fractions, ratios, quantities) and vice versa: *"there was a strong relationship between their academic work, healthy lifestyles and reality"* (club lead, Yarborough Academy). The club now includes children who are overweight, underweight, have low self-esteem, those not attaining academically, and some who dislike PE. The Change4Life Sports Club lead commented on his aim to use the Change4Life Sports Club to impact widely on pupil wellbeing and academic attainment:

*We look at role models, leadership and taking ownership with the idea of empowering the children to achieve and make healthier choices as well as making them much more resilient... we use the Change4Life Club to improve and develop physical and emotional health, as well as enhancing aspirations which will hopefully improve academic attainment too.*

(Club lead, Yarborough Academy)



School staff and the SGO involved with the Change4Life Sports Club at Yarborough expressed their belief that one of the main impacts of the programme has been the increased self-esteem, confidence and resilience of participating children: *“the children have really thrived in a smaller group environment, which has really developed their self-confidence and resilience”* (Head teacher, Yarborough Academy). Alongside the positive impact of the programme on physical activity levels, these changes have the potential to impact positively on behaviour and academic attainment at the school. The development of confidence and social/team-working skills was seen as key to unlocking this potential. During the site visit, every child was enthusiastically engaged and energetic throughout the session and the club lead highlighted the impact on one participant who had initially found the games too intimidating:

*One little girl finds being in the circle too much so she chose a role outside the circle, pushing the ball into play and fetching the ball when it went out of play. She said ‘this is my role and I like it, I am responsible for this bit’...previously she would cry and didn’t want to take part so we adapted a role for her and as you could see she loved it and participated in the rest of the session.*

(Deliverer, Yarborough Academy)

*Participants’ confidence and ability to positively engage in school life is seen by club leads at site visit schools to be enhanced through participation in the Change4Life Sports Clubs.* While deliverers at visit schools were unable to evidence direct impact of Change4Life Sports Clubs on academic attainment, many of those interviewed during site visits expressed their belief that the programme had impacted positively on the behaviour and engagement of participants and this is supported by SGO and deliverer survey data presented in this section. The ability of the programme in visit schools and schools responding to the survey to raise the confidence and self-esteem of the target groups (children with low self-esteem, overweight children, those with behavioural and engagement issues), was reported to be key to their success and was seen at visit schools as a contributory factor in improving behaviour and engagement.

Change4Life Sports Clubs Site Visit Case Studies are available [here](#).



## 4) Embedding & sustaining

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### Headlines

- *Training and supporting young leaders aids the delivery of Change4Life Sports Clubs by increasing capacity, nurturing respect and enhancing sustainability.*
  - *Involving non-PE and non-teaching staff in the Change4Life Sports Clubs increases capacity, maximises participation and helps embed healthy lifestyle teaching and learning across the curriculum.*
  - *Working collaboratively with partners and parents can help sustain programme impacts by encouraging healthy lifestyle behaviours beyond the clubs.*
- 

The added value of Change4Life Sports Clubs to schools' healthy lifestyle offer, PE and sports/games provision and delivery across the curriculum was noted in section 3. The impact of the programme on whole school outcomes, including improved behaviour and the development of life skills, was also noted and is further explored in section 5. This section presents qualitative data from site visit schools to explore best practice and challenges faced by schools in embedding and sustaining the programme.

Several of the visit schools successfully utilised young leaders in the delivery of Change4Life Sports Clubs. They reported that this not only had a positive impact on the young leaders themselves, most noticeably in their confidence, empathy and ability to help others, but that their involvement enhanced the engagement of participants. These schools reported and demonstrated that *training and supporting young leaders aids the delivery of Change4Life Sports Clubs by increasing capacity, nurturing respect and enhancing sustainability*; younger participants were inspired to become young leaders themselves and were able to contribute to club delivery when the current young leaders left the clubs.

Schools also reported that *involving non-PE and non-teaching staff in the Change4Life Sports Clubs increases capacity, maximises participation and helps embed healthy lifestyle teaching and learning across the curriculum*. The provision of training and support to a broad range of staff, including lunchtime supervisors, enabled schools to deliver clubs at varying times in the school day thereby increasing the numbers of children able to attend. It also broadened knowledge and understanding of the aims of the Change4Life Sports Clubs and enabled teachers to link these with lessons across the curriculum.

At Wimbourne Junior School embedding and sustaining the Change4Life Sports Club has been enhanced by the involvement and commitment of young Sports Leaders, who facilitate Change4Life Sports Club activities and inspire the younger children to go on to train to lead activities themselves. The lunchtime activities involve the whole school, with stations set up around the playground every day, run by young sports leaders and overseen by the Change4Life Sports Club lead and the lunchtime supervisor. The club lead considers gaining the support of lunchtime supervisors crucial to the sustainability of the programme. In addition, with the support of the head teacher and senior leadership team, the school has made changes to new teaching assistant contracts to incorporate involvement in supervising

Change4Life Sports Club activities, thereby increasing capacity for delivery. The club lead noted the disparity between the school meal offer and Change4Life Sports Club message with regard to healthy eating. She plans to address this by encouraging closer alignment between the programme and external school meal providers by raising awareness of the Change4Life Sports Clubs. She hopes that the Change4Life brand will persuade external providers to adapt provision: *“I do feel that Change4Life has enough pull to make some influence”* (club lead, Wimbourne Junior School).

The club lead at Our Lady of Lourdes RC Primary School described how the enhanced ‘priority area’ support the school received has enabled them to receive valuable mentor support following the initial Change4Life Sports Clubs training. This included guidance on how to embed the programme successfully across the school, ensuring that clubs are sustainable and less dependent on external funding: *“the funding we currently have is great, but if it all goes tomorrow we wouldn’t want to lose the clubs or activity so it is all about sustainability and quality really”* (club lead, Our Lady of Lourdes RC Primary School). He praised the additional support received from SGOs in line with the new support framework; the SGOs have actively supported and signposted the school to additional training, resources and links to other initiatives, adding value to the school’s Change4Life Sports Club activities. The club lead described the sustainable model the school has developed in relation to active lifestyles, PE and competition, with PE teachers mentoring and supporting non-PE teachers to develop skills and confidence in delivery of the programme across the school.

The SGOs and Change4Life Sports Club lead at Yarborough Academy successfully brought together knowledge, expertise and resources from Change4Life Sports Clubs and other programmes, such as the active pack for primary schools, British Heart Foundation’s ‘Active Clubs’ and Val Sabin’s ‘Positive Play’ guide to enhance and supplement delivery of Change4Life Sports Club activities: *“one of the most important elements to the most successful Change4Life Sports Clubs across our area is sharing activities, ideas and resources and transferring knowledge from different programmes to enhance and supplement delivery”* (SGO, Yarborough Academy). In addition to the ‘excellent’ Change4Life Sports Clubs training, the SGOs provided mentoring support with a team-teaching approach for the first 6 to 10 weeks of the programme. This allowed deliverers to build confidence in their delivery of Change4Life Sports Clubs until they felt able to deliver independently and take ownership of the programme. Deliverers have adopted a holistic ‘healthy lifestyle’ approach to the programme, enhancing the physical activity elements with healthy eating learning. Continued support from the SGOs ensures that the programme can evolve and the enthusiasm and motivation for Change4Life Sports Clubs is sustained across the school.

At Robert Blair School, the SGO and school work in collaboration with the Healthy School Team. The club lead stated that the school currently receives additional support and resources to run a Change4Life Plus Club, funded by the local public health team. Contingency plans for funding and resourcing the club include the use of the Primary Sports Premium to enhance the sustainability of the programme. In addition, the school is embedding the programme in the curriculum by linking in healthy lifestyle and healthy food ‘at every opportunity’, and is building external school-club and school-activity links so that children can be signposted to activities outside of the school to sustain the impact of the Change4Life Sports Club.

Several club leads noted the importance of a collaborative approach to programme delivery. They reported that *working collaboratively with partners and parents can help to sustain programme impacts by encouraging healthy lifestyle behaviours beyond the clubs*. While club leads reported difficulties in engaging parents, this element was seen as key to both achieving the desired outcomes and sustaining them; schools offered parental involvement opportunities through assemblies, letters and activity ideas (including activities to be undertaken at home which are entered into competitions), family cookery sessions, lunch-box ideas/policies, resource bags for home use and YouTube videos. However, several club leads reported that parental engagement strategies were not as successful as they would have

hoped. At some schools the need for collaboration was also expressed through their partnerships with other organisations. Robert Blair School, for example, works with the Healthy Schools Team to provide a cohesive approach in the area combining physical activity, health eating and lifestyle choices. For Rowanfield Junior School, being part of a multi-academy trust provides staff development opportunities and the means for three 'like-minded' schools to work together to provide enhanced teaching and opportunities for children across the schools.

The Change4Life Sports Clubs Research 2016 included telephone interviews with senior members of staff in 6 schools to explore how the Change4Life Sports Clubs support whole school agenda. Section 5 therefore further expands upon the ways in which schools are embedding and sustaining Change4Life Sports Clubs.

## 5) Supporting whole school agenda

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### Headlines

- *Change4Life Sports Clubs support whole school agenda by improving pupils' health and wellbeing.*
  - *All schools interviewed reported a positive impact on children's physical activity, confidence, self-esteem, social and emotional skills and engagement in school.*
  - *Schools report that they are building sustainability into delivery of their Change4Life Sports Clubs by training and supporting school staff and young leaders.*
- 

This section presents qualitative data from telephone interviews with senior members of staff at schools across England to explore perceptions of how the Change4Life Sports Clubs support whole school agenda. It presents good practice examples to demonstrate how schools are utilising Change4Life Sports Clubs to assist in the achievement of whole school outcomes. It also provides insight into some of the challenges faced by schools and the approaches they adopt to overcome these.

In all schools interviewed, staff reported that *Change4Life Sports Clubs support whole school agenda by improving pupils' health and wellbeing*. Specifically, all schools reported that the Change4Life Sports Clubs have *a positive impact on children's physical activity, confidence, self-esteem, social and emotional skills and engagement in school*.

The whole school priorities for the school in the North West include improving the health and fitness of every child; the school aims to encourage every child to achieve 60 active minutes a day and eat healthily. The Change4Life Sports Club has evolved over 4 years; starting as a means of addressing obesity, this objective is reported to have been met and the focus of the club is now social and emotional development. The club offers opportunities for involvement to children who do not participate in other clubs and activities. The interviewee stated that the key impacts of the current Change4Life Sports Club are improved confidence, self-esteem, resilience and 'a positive outlook'. The club provides an opportunity for children who struggle with PE or lack confidence to try new things and participate in a small group, without fear of comparison with or judgement from their peers:

*Change4Life allows children to try new activities without anyone judging them; having a go at something without anyone judging them... Change4Life helps them to believe in themselves.*

(Teacher, North West school)

The teacher interviewed provided the example of a boy who would always watch the other children playing football, but did not want to join in because he said he was 'not good enough'. He was given the opportunity to join the Change4Life Sports Club and, having participated in this, he then went on to high school. The interviewee recently spoke with the boy who told him that he now represents his school for football. Another example given was of a girl who participated in gymnastics but lacked confidence and

struggled academically. The teacher described how her participation in the Change4Life Sports Club has positively impacted on her efforts more widely at school, with increased attendance, concentration and sociability in playing with friends.

The school interviewed in the South East adopted a different, whole-school approach to Change4Life Sports Clubs, reporting similar outcomes: enhanced social skills, increased confidence, happiness and wellbeing. Key priorities for the school include enhancing healthy and active lifestyles and in addition to wider wellbeing, the school aims to increase children's physical activity levels. At this school, the programme is embedded in the school day and runs every lunchtime, facilitated by young leaders and supervised by lunchtime staff, with activities available to all children in the playground. Regular assemblies publicise Change4Life Sports Club activities, young leaders take 'Active Registers' every week to record and monitor pupils' activity and meet regularly to discuss and review activities and their roles. The school reports that provision of active lunchtimes play a key role in improving physical activity levels and enhancing children's social and emotional wellbeing. In particular, the club lead interviewed reported the positive impact of the programme on children who, before the Change4Life Sports Club, would sit in the room provided for those who found lunchtimes 'difficult', experienced friendship problems or exhibited behavioural issues. Many of these children now play with others on the playground, joining in the structured Change4Life Sports Club activities. The club lead noted, however, that her approach to targeting is a careful one; she aims to encourage enthusiasm for the programme among all pupils, ensuring that children most in need of the intervention are included and encouraged to participate without drawing attention to them. The young leaders play a key role in setting a good example and fostering mutual respect among pupils:

*Where best to teach social skills, well that (the playground) is where children are being sociable and they are not sociable in the classroom, they are working. They are sociable outside, that's where they need to be taught: how to make friends, how to solve arguments, sharing and how to work collaboratively. All of that is underpinned by Change4Life.*

(Club lead, South East school)

In addition, the Change4Life Sports Club provides a platform at the South East school for increasing understanding of physical activity as encompassing more than traditional sport and for enhancing creativity:

*They (children) understand they can integrate it (physical activity) into their life and it is not a chore. Children recognising you can have a lot of fun being active. You can be creative with being fit; something you do every day.*

(Club lead, South East school)

Further, enhanced activity levels and emotional wellbeing are linked to improvements in behaviour and learning across the school through increased confidence and resilience:

*Overall the children are happier. I know that happiness impacts on emotional wellbeing in itself. So in terms of positive attitude there is a huge improvement...from a confidence and self-esteem point of view, they are happy children, they are active children. It teaches children it is ok to have different abilities. And if they can learn to apply the resilience they have learnt through Change4Life in the classroom then that is a life lesson in itself in terms of learning.*

(Club lead, South East school)

The importance of children's 'ownership' of Change4Life Sports Clubs was a key message from several schools interviewed. At the school interviewed in the East of England, once again young leaders and

participants play a crucial role in club delivery; deciding which activities to undertake, mentoring, supporting and leading the groups. The programme is seen as supportive of whole school priorities: increasing children's physical activity, addressing weight management, promoting friendship, and enhancing the health and wellbeing of pupils.

The Change4Life Sports Club at the school interviewed in the East targeted children with weight issues. In this instance, the Change4Life brand was perceived as detrimental to the appeal of the club and the school decided to change the name to 'Super Life Changers' (chosen by participants). The teacher interviewed reported that the club has been instrumental in increasing children's physical activity levels and key to this has been the use of incentives to encourage engagement in the sessions and 'activity passports' which participants get stamped every week. Alongside the Change4Life Sports Club quizzes, the passports have raised awareness among children of their own levels of physical activity, which has positively impacted on the amount of activity undertaken. In addition, the club has facilitated friendships between peers of all ages and inspired confidence in both participants and young leaders. To enhance and sustain the impact of the club, the school is keen to involve parents in the programme, which it has sometimes found difficult to do. The club lead reported that the school encourages 'easy' family activities by sending home equipment such as balls, cones and resource cards.

Whole school priorities for the school interviewed in the North East include meeting the requirements of the new national curriculum and supporting pupils' wellbeing and mental health. The head teacher explained how the school are using the Change4Life Sports Clubs to impact on the health behaviours, body image and self-esteem of pupils by engaging children who would not previously get involved in activities, lacked confidence and overweight or obese children. By expanding the school's club offer and targeting those children most in need, the Change4Life Sports Club has impacted positively on key areas of whole-school agenda. The head teacher described how the potential stigma of targeting pupils is minimised by inviting 'more extravert' friends of targeted pupils to participate also, expanding the range of children involved. She praised the programme for its ability to engage children who, without it, would have not engaged, raising both their self-esteem and physical activity levels. Key to the success of the clubs is the involvement of local academy students in delivery who have contributed to the engagement of younger participants, good relationships between pupils and staff, the range and flexibility of activities suitable for all abilities, training and supporting staff and young leaders so that they have the confidence to deliver, and running clubs at different times of the day (the school runs a lunchtime and afterschool club) to maximise participation. The head teacher noted that the increased confidence and self-esteem of pupils involved in the Change4Life Sports Club enhanced their learning in the classroom and that, as staff and pupils have been able to see the positive impacts of the Change4Life Sports Club, the programme has become embraced across the whole school.

While the format and delivery of Change4Life Sports Clubs across the country varies, in interviews *schools report that they are building sustainability into delivery of their Change4Life Sports Clubs by training and supporting school staff and young leaders.* Training, mentoring and supporting deliverers across the board, including lunchtime staff and young leaders, is seen as key to club sustainability and therefore to maintaining the programme's positive contribution to the achievement of whole-school agenda.



## 6) Supporting public health priorities

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### Headlines

- *Change4Life Sports Clubs are used by public health teams to support the priorities of reducing childhood obesity and improving healthy lifestyle behaviours by increasing knowledge and understanding.*
  - *The Change4Life brand is regarded as a recognisable 'quality mark' that encourages engagement with healthy lifestyle initiatives.*
  - *The ability of public health teams to work collaboratively with local organisations to deliver a cohesive message and programme is sometimes hindered by the structural separation of local services and data-sharing protocols.*
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In this section qualitative data from telephone interviews with public health teams across England is presented to explore how Change4Life Sports Clubs support public health priorities. It provides good practice examples to demonstrate the diverse ways in which public health teams are utilising the programme to further their aims. It also provides insight into some of the challenges reported by public health teams, further considered in section 7.

Interview data suggest that *Change4Life Sports Clubs are used by public health teams to support the priorities of reducing childhood obesity and improving healthy lifestyle behaviours by increasing knowledge and understanding*. Public health teams reported that *the Change4Life brand<sup>35</sup> is regarded as a recognisable 'quality mark' that encourages engagement with healthy lifestyle initiatives*; they are able to use national Change4Life campaigns and publicity material to effectively raise awareness locally and encourage participation in local initiatives.

The interviewee in the North West public health team stated their priorities as tackling obesity and poor diet. A high percentage of the population is obese or overweight, although NCMP<sup>35</sup> data compares more favourably with the national average, which the interviewee noted as due to cultural changes towards healthier lifestyle choices among younger generations. While activity levels locally are reported as high, the area has a high rate of cardiovascular disease (CVD) and associated mortality; a causal relationship is drawn by the public health team between poor diet and high CVD mortality rates. The Change4Life Sports Clubs are incorporated into the tier 1 (preventative) weight management strategy and the team has been working with Change4Life for 7 years:

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<sup>35</sup> National Child Measurement Programme.



*Change4Life is a structure to deliver all those preventative messages. Take it as seriously as commissioning a new service, a Change4Life programme in your area; understanding the scope of what it can achieve... It is a structure by which you can look at local need and start delivering to families and engage with all those different services in your area. Change4Life is much more than a campaign.*

(Public health team member, North West)

The public health team meets regularly with a multi-agency group, including members from council, health agencies, housing associations and voluntary groups, to consider local delivery of the national Change4Life programme. While Change4Life holistic healthy lifestyle messages and activities are seen by the team as key to tackling local issues, political structures inhibit a joined up approach with the separation of sports/physical activity for which the council is responsible, and healthy eating the responsibility of the public health team and NHS. Change4Life Sports Clubs fall within the remit of the School Sports Partnership and the public health team works with one of the SGOs on publicising and coordinating clubs. In addition, the public health team use Change4Life resources in the public health resource library to deliver community sessions and events and has found the 'sugar swaps' sessions particularly successful in raising awareness and changing behaviours in relation to healthy eating. The interviewee noted the potential to tie in Change4Life Sports Clubs with local sports facilities which are perceived by schools (in local consultation) as lacking health and wellbeing information and services. It is hoped that in this way, the Change4Life Sports Clubs will link with PE sports membership to offer a more holistic approach to healthy lifestyles. The interactive and unthreatening nature of the programme is seen as key to enabling discussion of healthy lifestyle choices with the aim of influencing these choices:

*It has been the interactive, allowing the conversations... It's the discussion and game element that have made all the difference. It is non-threatening and people really wanted to talk about it.*

(Public health team member, North West)

Public health priorities expressed by the team interviewed in the South East are addressing health inequality and improving health outcomes. The team adopts a consistent change approach to achieving healthcare in the population, with systems of interventions working alongside each other to influence behaviours. The team uses and adapts national Change4Life campaign materials to publicise local initiatives, sending information about available resources to a range of partners including schools:

*Change4Life by and large sits alongside our communication and engagement approach and because what we are doing is trying to run a campaign to pan across the year we see Change4Life as a major strand of the children's health promotion.*

(Public health team member, South East)

In addition to utilising Change4Life publicity, the team distribute grants to schools to develop health improvement plans around priority areas, including the development of school-community links. The grants programme provides support to schools, with the aim of giving schools ownership and responsibility for the appropriate healthcare measures for their pupils. The interviewee noted that schools' recognition and trust of the Change4Life brand contributes to the effectiveness of the programme:

*The best thing about Change4Life is that recognisable brand, so we have something that over time people know what it means... Because of the brand and its look people come to trust them and therefore use them.*

(Public health team member, South East)

Similarly, the public health team in East Midlands reported the usefulness of free promotional Change4Life material which they are able to take to local events such as play days and health watch sessions. Resources are utilised to support healthy lifestyle messages in relation to: reducing obesity, raising alcohol-awareness, increasing physical activity, enhancing healthy lifestyles and mental wellbeing. The interviewee noted resource limitations as restricting the team's use of the Change4Life Sports Clubs, although reported that when they have used resources to support events *"they were well received and good conversation starters"* (public health team member, East Midlands).

The public health team in the North West also reported that brand recognition and the facilitation of a unified healthy lifestyle offer is key to the appeal of Change4Life. This enables the team to brand and promote services which the local population can access *"without having to navigate which provider gives them"* (public health team member, North West). The interviewee reported that impact on awareness and wider health impacts is evaluated locally in relation to 'sign-ups', although the team was not aware of any other type of evaluation; specifically regarding Change4Life Sports Clubs: *"in terms of school sport club sign-ups we have information about volume of take up but not anything more around change in activity levels"* (public health team, North West). The interviewee noted that the School Sports Partnership run Change4Life in schools but that the public health team had found it difficult to engage with schools beyond sending out resources.

The public health team in London stated priorities as reducing differences in life expectancy, ensuring adults retain their independence and good quality of life for longer and ensuring every child has the best possible start in life. The latter has three strands: improving oral health in children under 5, routine immunisations and reducing childhood obesity, and the focus for the team this year has been on the last of these strands. The interviewee stated that Change4Life plays a key role in marketing aimed at achieving behaviour change. Recognition of the Change4Life brand as representing trustworthiness and high quality is seen as important in enhancing people's understanding of healthy lifestyle information. The Change4Life brand has given messages a cohesiveness, bringing together healthy eating, physical activity, active travel messages distributed to diverse organisations, including libraries, schools, leisure centres and parks. The team uses Change4Life as a headline brand to publicise and promote health initiatives, and supports Change4Life activities by sending out information and resources and coordinating publicity. However, the interviewee noted that while national campaigns garnered support for local initiatives, the public health team are not able to access data in relation to local take-up of the national Change4Life programme. He commented that this data would be useful in order to track progress and target local initiatives effectively.

Similarly, the public health team member interviewed in the East reported difficulties in assessing the impact of Change4Life Sports Clubs locally due to the lack of data. In relation to challenges, teams in the East, East Midlands and North West commented on the timing of receiving Change4Life resources and noted that this impacted the efficacy of the programme:

*Materials, news releases, toolkits were released without enough notice, consistently each year, which would result in missed opportunities and lack of awareness of available materials to distribute at the best time.*

(Public health team member, East)

The public health team in the East uses Change4Life to work with schools, the County Sports Partnership and early years to promote key messages around health improvement to families in a *"relevant, informative, motivational, interactive and fun way"* (public health team member, East). The public health priorities in the area are starting well, living well, mental health and wellbeing, and ageing well; the team considers that Change4Life supports these aims. Like other teams interviewed, the team reported their use of 'sugar swaps' and '10 minute shake up' in schools locally, and it actively encourages local primary schools to run Change4Life Sports Clubs, in order to *"provide inclusive opportunities for all"*

*children to fulfil their love of movement and activity, giving parents and guardians ideas to be active as a family at home”* (public health team member, East). Beyond schools, the team works with pharmacies and libraries to further publicise Change4Life messages and considers that the programme positively impacts on increasing the health and wellbeing knowledge of local residents by offering simple ideas in an effective, non-clinical format.

While interviewees stated a desire for a coordinated approach to meeting health priorities locally, *the ability of public health teams to work collaboratively with local organisations to deliver a cohesive message and programme is sometimes hindered by the structural separation of local services and data-sharing protocols*. In some local authorities this means that different departments across the council are responsible for different aspects of health and wellbeing, which results in an imposed separation of delivery and outcomes despite shared objectives. In addition, public health teams reported that this separation means they are unable to track or evaluate progress against desired outcomes and priorities effectively, as data is either not collected or not reported back to them. For example, while they distribute Change4Life Sports Clubs information and resources to schools and offer direction on their use, there are no effective mechanisms in place for them to receive comprehensive feedback on how these are being used or measure how effective they are in achieving desired outcomes. In addition, the majority of public health teams reported that their inability to access local level data in relation to the Change4Life Sports Clubs impedes their ability to evaluate impact. Moreover, while public health teams widely reported using the Change4Life brand and resources to give cohesion to local healthy lifestyle messages, reported levels of engagement with the Change4Life Sports Clubs were not high. Public health teams participating in interviews were aware of the Change4Life Sports Clubs, but are not involved with them and widely see the Sports Clubs programme as operating outside of their remit.

## 7) Recommendations

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### Headlines

- 1. Encourage schools to think big and start small; align Change4Life Sports Clubs to pupil health and wellbeing outcomes and provide ongoing support to maximise impact and embed the programme in schools.*
  - 2. Consider support for schools in developing partnerships with families and other organisations to maximise and sustain the impact of Change4Life Sports Clubs.*
  - 3. Promote the Change4Life Sports Clubs among Public Health Directorates to raise awareness, provide the impact data they require and increase programme sustainability.*
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- 1. Encourage schools to think big and start small; align Change4Life Sports Clubs to pupil health and wellbeing outcomes and provide ongoing support to maximise impact and embed the programme in schools.*

A key message from schools participating in the research was that Change4Life Sports Clubs impacted on a broad range of health and wellbeing outcomes, as shown in sections 2, 3 and 5; the programme was seen as successful in schools where they had recognised, or come to recognise, these wider benefits. However, schools warned against becoming overwhelmed by trying to tackle too many issues at once. In interviews several schools stated that a key lesson learnt was that it was important to plan carefully in advance, ensure adequate resources are available and ‘get it right’ on a small scale to begin with. Sections 3 and 4 showed that while a whole-school approach has been shown to be effective in some schools, others reported important impacts of clubs with small numbers of targeted pupils; the advice generally was to start small and encourage the programme to evolve as staff and pupils see the wider benefits that can be applied across the school. Continued guidance, mentoring and support were reported to encourage the expansion of the programme in schools, garnering support, increasing capacity and helping to embed the programme across the curriculum.

- 2. Consider support for schools in developing partnerships with families and other organisations to maximise and sustain the impact of Change4Life Sports Clubs.*

Section 2 highlighted the importance of creating pathways beyond Change4Life Sports Clubs for children achieving CMO recommended levels of physical activity by week 12 of club participation. School-club and school-community links play an important role in such pathways. In sections 3, 4 and 5 schools reported the vital role of families in increasing and sustaining children’s physical activity levels and healthy eating choices. And in sections 5 and 6 public health teams and school staff noted the ability of Change4Life Sports Clubs to tackle health and wellbeing issues in an ‘un-threatening’ and inclusive way. However, in section 4 schools also reported challenges in engaging parents; some examples of approaches taken are provided in the same section. Supporting schools in the engagement of parents in Change4Life Sports Clubs and in forging links with external organisations such as public health teams,

local leisure providers and physical activity clubs provides opportunities to enhance and sustain the outcomes achieved in Change4Life Sports Clubs.

*3. Promote the Change4Life Sports Clubs among Public Health Directorates to raise awareness, provide the impact data they require and increase programme sustainability.*

In section 6 public health teams reported that the Change4Life brand was effective in increasing participation in local health and wellbeing initiatives; the programme provides a cohesive message and 'trusted' branding to a range of initiatives spanning a number of organisations and departments. However, they reported that effective mechanisms for gathering data on outcomes from the diverse organisations involved, including schools, were not yet in place. Public health teams could be directed towards this data; as an evidence-based programme, the Change4Life Sports Clubs offer data on impacts and outcomes achieved in schools which can support wider local health and wellbeing priorities and service planning. Raising awareness among public health teams of the Change4Life Sports Clubs and the availability of impact data could in turn facilitate enhanced support from public health teams to increase the sustainability of the programme.



## 8) Area profiles

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This section presents Area Profiles for 6 geographical areas in England: East, East Midlands, London, North East, North West and South East. The profiles provide impact data for the Change4Life Sports Clubs alongside national and local physical activity, health and wellbeing data.

In recognition of the varying levels of socio-economic and health deprivation across England, and concomitant diversity in health and wellbeing priorities, the profiles provide a geographical context for the programme and impact.

Each profile is informed by analysis of the national Change4Life Sports Clubs children's survey data; sub-analysis of data relating to each area; national and local health and wellbeing data from other sources (referenced in each profile); and telephone interviews conducted with public health teams and senior school staff to provide insight into how the Change4Life Sports Clubs support public health priorities and whole school agenda in each area.

## East

This profile provides a snapshot of Change4Life (C4L) Sports Clubs in the East. It captures the impact on public health priorities and whole school agenda at both national and regional levels.

### Regional Impact

After taking part in the C4L Sports Clubs, **over 2,200 children across the East are newly achieving at least 60 active minutes every day** and meeting CMO guidelines for physical activity.

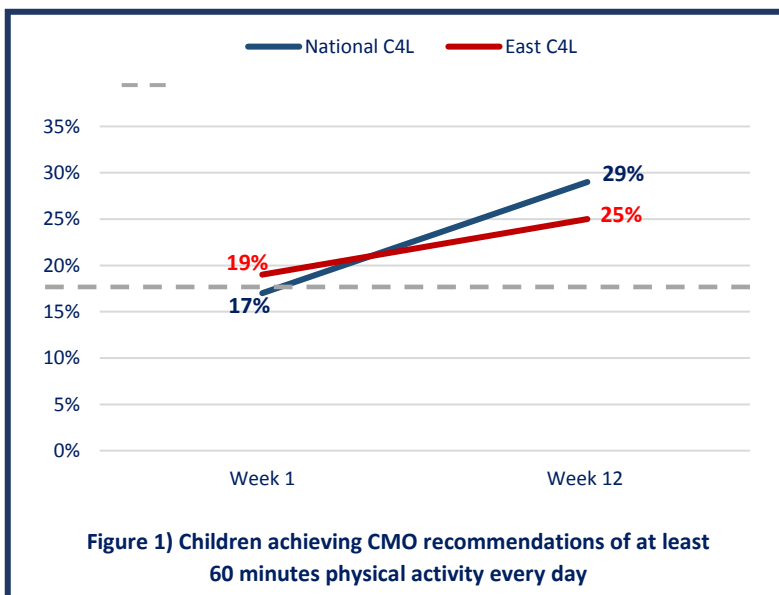
While the number of inactive children has not changed, **over 4,500 children who joined the programme with low levels of activity are now more active, more often.**

The programme has provided an effective mechanism for **enhancing the wellbeing and individual development of more than 3,600 less active children** (↑29%) across the East.

Table 1) Impact of C4L after 12 weeks of club participation

	C4L: East <sup>1</sup> (7-9yrs)	C4L: England <sup>2</sup> (7-9yrs)
Meeting recommendations <sup>3</sup>	8,934 (25%)	102,821 (29%)
Low activity <sup>4</sup>	11,840 (33%)	2,886,492 (42%)
Inactivity <sup>5</sup>	1,902 (5%)	7,800 (2%)
Wellbeing and individual development	16,218 (45%)	160,968 (45%)

**Data sources:** <sup>1</sup> spear C4L Sports Clubs evaluation data (2013-2016); <sup>2</sup> spear C4L Sports Clubs evaluation data (2011-2016); <sup>3</sup> CMO recommendations of at least 60 minutes physical activity per day (DoH, 2011); <sup>4</sup> Less than 30 minutes per day (HSCIC, 2013; HSE 2012); <sup>5</sup> Children NOT meeting 30 minutes of physical activity per week (DCMS, 2015)



### Key Findings

#### Regional Impact

- Supported over **2,200** additional children to meet CMO guidelines for physical activity
- Over **4,500** children who joined the programme with low levels of activity are now more active, more often
- Enhanced the wellbeing and individual development of over **3,600** less active children

#### Public Health Priorities

- C4L Sports Clubs underpin the healthy schools initiative and support a preventative approach to health and wellbeing across the region:

*“We use C4L in our schools as a universal or tier 1 weight management offer promoting healthy lifestyles and positive choices”*

(Children’s Lifestyle Coordinator,  
Southend-on-Sea Borough Council)

#### Whole School Agenda

- C4L Sports Clubs are implemented as a holistic approach to promoting the health, wellbeing and individual development of learners:

*“C4L supports those children who may be overweight or obese, slightly introvert or lack self-esteem... which links into our health and wellbeing agenda”*

(Club Lead,  
Ramsey Community Junior School)

## Physical Activity

Children engaged in C4L Sports Clubs in the East exceeded regional (14%) and national (18%) figures for achieving at least 60 active minutes every day, with **over 8,934 children (25%) meeting CMO recommendations** by week 12 of the programme.

On joining the East C4L Sports Clubs over 16,700 children (46%) had low levels of activity; by week 12 of the programme **over 4,500 club members (↑28%) had effectively increased their activity levels.**

Increases in the number of children meeting CMO guidelines and decreases in the proportion of less active children suggests **the programme is having a positive impact on the activity levels of participating children across the East.**

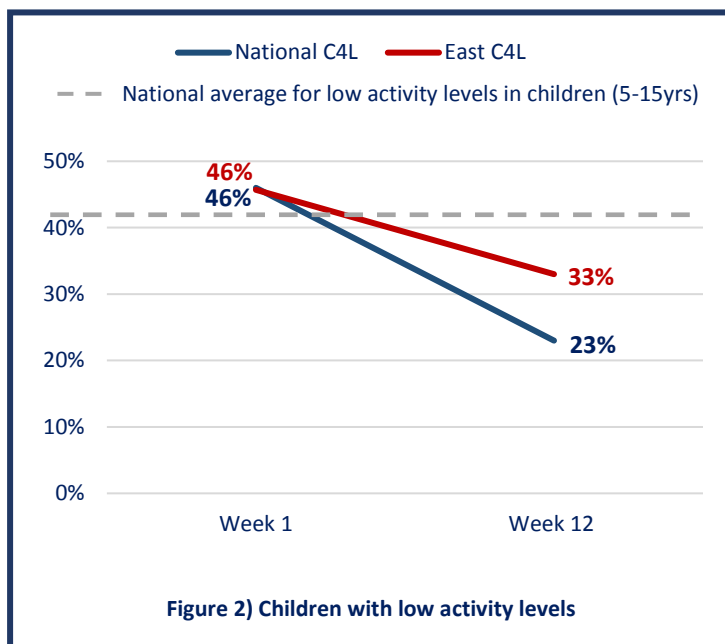


Table 2) Physical activity profile: a comparison of national, regional & C4L Sports Clubs data

	C4L: East <sup>1</sup> (7-9yrs)	HSE (2012): East (5-15yrs)	C4L: England <sup>2</sup> (7-9yrs)	HSE (2012): England (5-15yrs)
Child population size <sup>6</sup>	35,880	766,645	354,556	6,872,599
Meeting recommendations <sup>3</sup>	8,934 (25%)	107,330 (14%)	102,821 (29%)	1,237,068 (18%)
Low activity <sup>4</sup>	11,840 (33%)	321,991 (42%)	81,548 (23%)	2,886,492 (42%)

**Data sources:** <sup>1</sup>spear C4L Sports Clubs evaluation data (2013-2016); <sup>2</sup>spear C4L Sports Clubs evaluation data (2011-2016); <sup>3</sup>CMO recommendations of at least 60 minutes physical activity per day (DOH, 2011); <sup>4</sup>Less than 30 minutes per day (HSCIC, 2013; HSE 2012); <sup>6</sup>ONS (2014)

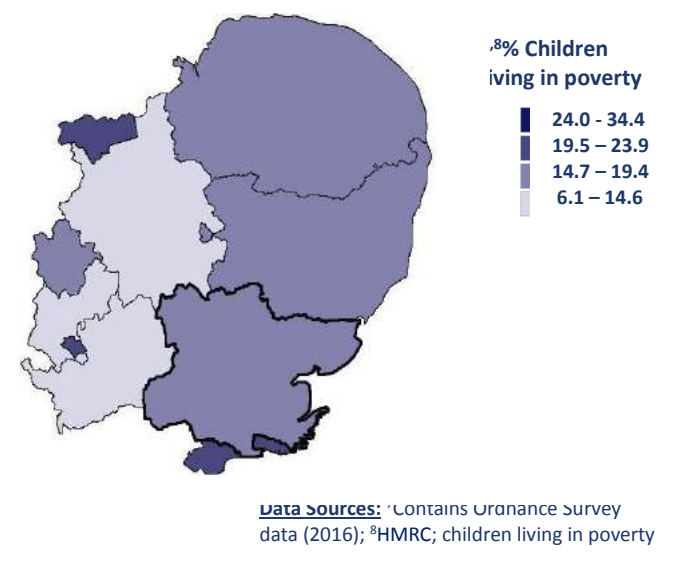
## Public Health Priorities

While the health and wellbeing profile across the East is generally positive relative to other regions, the public health teams are committed to tackling child obesity, increasing activity levels, raising individual aspirations and supporting residents to take ownership of their health and wellbeing.

The C4L Sports Clubs underpin the healthy schools initiative and support a preventative approach to health and wellbeing across the region: *“we use C4L in our schools as a universal or tier 1 weight management offer promoting healthy lifestyles and positive choices”* (Children’s Lifestyle Coordinator).

## Children living in poverty:

Map of the East showing relative levels of children living in poverty.





## Public Health Priorities

C4L Sports Clubs provide the public health teams across the East with a platform to “*deliver consistent messages around activity, health eating and healthy choices and reinforce these messages year on year*” (Children’s Lifestyle Coordinator).

The success of the programme across the region has, in part, been attributed to the recognition of C4L as a trusted and high quality brand: “*the big thing is the brand recognition and the trust the brand has created, we can deliver consistent messages under one banner that is recognised by all*” (Health Improvement Practitioner, Southend-on-Sea Borough Council).

**Table 3) Child profile in the East & England**

	East	England
Children (age 0-19 years), 2014 <sup>6</sup>	1,425,000 (23.7%)	12,907,300 (23.8%)
Children (age 0-19 years) in 2025 (predicted) <sup>6</sup>	1,558,300 (23.7%)	13,865,500 (23.7%)
School children from minority ethnic groups, 2015 <sup>9</sup>	166,729 (22.1%)	1,931,855 (28.9%)
Children living in poverty (age under 16 years), 2013 <sup>8</sup>	15.4%	18.6%
Life expectancy at birth, 2012-14 <sup>10</sup> :		
Boys	80.4yrs	79.4yrs
Girls	83.8yrs	83.1yrs

**Data Sources:** <sup>6</sup>ONS (2014); <sup>9</sup>DfE (2015); <sup>8</sup>HMRC; <sup>10</sup>ONS (2012-14)

## Whole School Agenda

Schools across the East have implemented C4L Sports Clubs as a holistic approach to promoting the health, wellbeing and individual development of learners: “*C4L supports those children who may be overweight or obese, slightly introvert or lack self-esteem. C4L gives them unique opportunities to be more active, more often, which links into our health and wellbeing agenda*” (Club Lead, Ramsey Community Junior School).

Using young sports leaders in delivery of the clubs, is seen to have helped participants; to make friends, develop social skills and raise aspirations: “*sports leaders have worked closely with the children to create a positive environment, encouraging everyone to try new things, make new friends and develop those broader life skills*” (Club Lead).

Schools have noted marked improvements in children’s self-esteem, confidence, enthusiasm and overall engagement in school life: “*there have been huge improvements in self-esteem; children are happy, more able to make friends and class teachers have commented on the children’s level of confidence and willingness to share their experiences with others back in the classroom*” (Club Lead).

**Table 4) Child health profile in the East & England**

	East	England
Obese children (Year 6): % of children (2014/15) <sup>11</sup>	16.9%	19.1%
Estimated prevalence of any mental health disorder: % population aged 5-16 (2014) <sup>12</sup>	8.8%	9.3%
Child admissions for mental health: rate per 100,000 aged 0 -17 years (2014/15) <sup>12</sup>	78.8	87.4
Pupils with social, emotional and mental health needs (2015) <sup>13</sup>	1.87%	2%
16-18 year olds not in education, employment or training (2014) <sup>14</sup>	4.5%	4.7%
15 year olds reporting general health as excellent (2014/15) <sup>15</sup>	28.1%	29.3%
15 year olds who eat 5 portions or more of fruit and veg per day (2014/15) <sup>15</sup>	52%	52.4%
15 year olds with a mean daily sedentary time in the last week over 7 hours per day (2014/15) <sup>15</sup>	71%	70.1%
15 year olds physically active for at least one hour per day seven days a week (2014/15) <sup>15</sup>	13.3%	13.9%
15 year olds reporting low life satisfaction (2014/15) <sup>15</sup>	14.1%	13.7%

**Data Sources:** <sup>11</sup>HSCIC NCMP (2014-2015); <sup>12</sup>HES (2014); <sup>13</sup>HSCIC (2004); <sup>14</sup>DfE (2013); <sup>15</sup>HSCIC (2014-15); data derived from <sup>16</sup>PHE, Public Health Profiles (2016)

## Data Sources

- <sup>1&2</sup>spear (2011-2016) Evaluation of the Change4Life Sports Clubs. 2011-2015 reports available at: <https://www.canterbury.ac.uk/social-and-applied-sciences/human-and-life-sciences/spear/research-projects/change-4-life-school-sports-club.aspx>
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## East Midlands

This profile provides a snapshot of Change4Life (C4L) Sports Clubs in the East Midlands. It captures the impact on public health priorities and whole school agenda at both national and regional levels.

### Regional Impact

After taking part in the C4L Sports Clubs, **over 1,900 children across the East Midlands are newly achieving at least 60 active minutes every day** and meeting CMO guidelines for physical activity.

C4L Sports Clubs have reduced inactivity among participants by 44%, **lifting over 700 children out of inactivity** and helping them to achieve at least 30 minutes physical activity per week.

The programme has provided an effective mechanism for **enhancing the wellbeing and individual development of over 2,600 less active children** (↑28%) across the East Midlands.

Table 1) Impact of C4L after 12 weeks of club participation

	C4L: East Midlands <sup>1</sup> (7-9yrs)	C4L: England <sup>2</sup> (7-9yrs)
Meeting recommendations <sup>3</sup>	7,027 (25%)	102,821 (29%)
Low activity <sup>4</sup>	9,178 (32%)	2,886,492 (42%)
Inactivity <sup>5</sup>	946 (3%)	7,800 (2%)
Wellbeing and individual development	12,017 (42%)	160,968 (45%)

**Data sources** <sup>1</sup>spear C4L Sports Clubs evaluation data (2013-2016); <sup>2</sup>spear C4L Sports Clubs evaluation data (2011-2016); <sup>3</sup>CMO recommendations of at least 60 minutes physical activity per day (DoH, 2011); <sup>4</sup>Less than 30 minutes per day (HSCIC, 2013; HSE 2012); <sup>5</sup>Children NOT meeting 30 minutes of physical activity per week (DCMS, 2015)

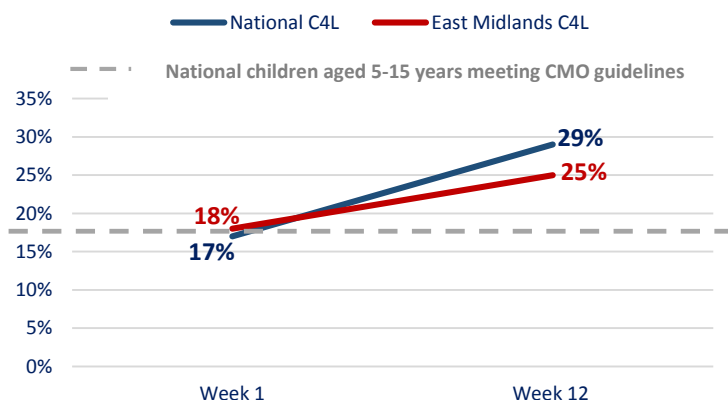


Figure 1) Children achieving CMO recommendations of at least 60 minutes physical activity every day

### Key Findings

#### Regional Impact

- Supported over **1,900** additional children to meet CMO guidelines for physical activity
- Over **4,800** children who joined the programme with low levels of activity are now more active, more often
- Lifted **700** participating children out of inactivity
- Enhanced the wellbeing and individual development of over **2,600** less active children

#### Public Health Priorities

- C4L Sports Clubs form part of a life course approach to effecting positive behaviour change:

*“C4L resources and key messages have been used to support the ‘Making Every Contact Count’ programme, which includes links to our children’s weight management services and healthy schools awards”*

(Health Improvement Team,  
Milton Keynes Council)

#### Whole School Agenda

- C4L Sports Clubs have been used as a holistic approach to tackling obesity, promoting physical activity and developing broader social and emotional skills:

*“we support children who are overweight or obese, those who perhaps are not very sporty or active, and those who are ‘quieter’ with lower levels of self-esteem”*

(Director of Sport, Boston,  
Tower Road Academy)

## Physical Activity

Children engaged in East Midlands C4L Sports Clubs exceeded regional (21%) and national (18%) figures for achieving at least 60 active minutes every day, with **over 7,000 children (29%) meeting CMO recommendations** by week 12 of the programme.

After taking part in the clubs, **less than 9,200 children (35%) had low levels of activity**. This figure is lower than both regional (40%) and national (42%) averages.

The clubs have reduced levels of inactivity, with **less than 1,000 club members (3%) remaining inactive** by week 12 of the programme.

Increases in children meeting CMO guidelines and decreases in the proportion of inactive children suggests **the programme is having a positive impact on the activity levels of participating children across the East Midlands**.

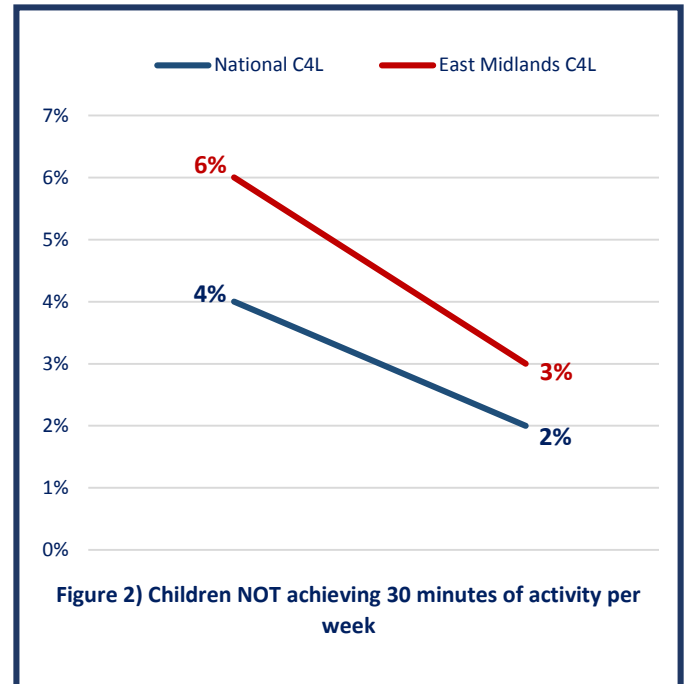


Table 2) Physical activity profile: a comparison of national, regional & C4L Sports Clubs data

	C4L: East Midlands <sup>1</sup> (7-9yrs)	HSE (2012): East Midlands (5-15yrs)	C4L: England <sup>2</sup> (7-9yrs)	HSE (2012): England (5-15yrs)
Child population size <sup>6</sup>	28,681	577,121	354,556	6,872,599
Meeting recommendations <sup>3</sup>	7,027 (25%)	121,195 (21%)	102,821 (29%)	1,237,068 (18%)
Low activity <sup>4</sup>	9,178 (32%)	230,848 (40%)	81,548 (23%)	2,886,492 (42%)

**Data sources:** <sup>1</sup>spear C4L Sports Clubs evaluation data (2013-2016); <sup>2</sup>spear C4L Sports Clubs evaluation data (2011-2016); <sup>3</sup>CMO recommendations of at least 60 minutes physical activity per day (DOH, 2011); <sup>4</sup>Less than 30 minutes per day (HSCIC, 2013; HSE 2012); <sup>6</sup>ONS (2014)

## Public Health Priorities

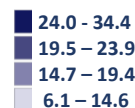
While the health and wellbeing profile across the East Midlands is generally positive relative to other areas, public health teams are committed to giving every child the best start in life, working with communities to live longer healthier lives and improving outcomes for older people.

The C4L Sports Clubs form part of a life course approach to effecting positive behaviour change, with a particular focus on tackling obesity, inactivity and mental health: *“C4L resources and key messages have been used to support the ‘Making Every Contact Count’ programme, which includes links to our children’s weight management services and healthy schools awards”* (Health Improvement Team, Milton Keynes Council).

## Children living in poverty:

Map of the East Midlands showing relative levels of children living in poverty.

7.8% Children living in poverty



**Data Sources:** <sup>7</sup>Contains Ordnance Survey data (2016); <sup>8</sup>HMRC; children living in poverty (2013)

## Public Health Priorities

The C4L Sports Clubs programme and branding is perceived to have successfully raised awareness of healthy lifestyle choices among providers, practitioners and the public across the region:

*“C4L has increased knowledge and raised awareness of the key messages around healthy lifestyles. It has also provided useful information to partner agencies who can disseminate this information to those they work with”*

(Health Improvement Team, Milton Keynes Council)

Table 3) Child profile in the East Midlands & England

	East Midlands	England
Children (age 0-19 years), 2014 <sup>6</sup>	1,086,200 (23.4%)	12,907,300 (23.8%)
Children (age 0-19 years) in 2025 (predicted) <sup>6</sup>	1,154,500 (23.4%)	13,865,50 (23.7%)
School children from minority ethnic groups, 2015 <sup>9</sup>	121,481 (21.0%)	1,931,855 (28.9%)
Children living in poverty (age under 16 years), 2013 <sup>8</sup>	17.8%	18.6%
Life expectancy at birth, 2012-14: <sup>10</sup>		
Boys	79.4yrs	79.4yrs
Girls	83.0yrs	83.1yrs

Data Sources: <sup>6</sup>ONS (2014); <sup>9</sup>DfE (2015); <sup>8</sup>HMRC; <sup>10</sup>ONS (2012-14)

## Whole School Agenda

Schools across the East Midlands have implemented C4L Sports Clubs as a holistic approach to tackling obesity, promoting physical activity and developing broader social and emotional skills: *“we support children who are overweight or obese, those who perhaps are not very sporty or active, and those who are ‘quieter’ with lower levels of self-esteem”* (Director of Sport, Boston Tower Road Academy).

With the support of sport ambassadors children have been able to take ownership of their C4L Sports Club experiences, making informed lifestyle choices with the support of their peers: *“sport ambassadors support C4L children and collectively they have taken ownership of the clubs. This has created an inclusive, fun, exciting and positive environment for all involved”* (Director of Sport).

Schools have observed marked improvements in participant’s self-esteem, confidence, attitudes and engagement in school life: *“children are happier, they come along with big smiles on their faces. They strive to try new things and are much more resilient. Teachers across the school have remarked on the improved levels of confidence and self-esteem”* (Director of Sport).

Table 4) Child health profile in the East Midlands & England

	East Midlands	England
Obese children (Year 6): % of children (2014/15) <sup>11</sup>	18.5%	19.1%
Estimated prevalence of any mental health disorder: % population aged 5-16 (2014) <sup>12</sup>	9.4%	9.3%
Child admissions for mental health: rate per 100,000 aged 0 -17 years (2014/15) <sup>12</sup>	83.3	87.4
Pupils with social, emotional and mental health needs (2015) <sup>13</sup>	1.89%	2%
16-18 year olds not in education, employment or training (2014) <sup>14</sup>	4.4%	4.7%
15 year olds reporting general health as excellent (2014/15) <sup>15</sup>	29.8%	29.3%
15 year olds who eat 5 portions or more of fruit and veg per day (2014/15) <sup>15</sup>	52%	52.4%
15 year olds with a mean daily sedentary time in the last week over 7 hours per day (2014/15) <sup>15</sup>	70.6%	70.1%
15 year olds physically active for at least one hour per day seven days a week (2014/15) <sup>15</sup>	15.3%	13.9%
15 year olds reporting low life satisfaction (2014/15) <sup>15</sup>	13.2%	13.7%

Data Sources: <sup>11</sup>HSCIC NCMP (2014-2015); <sup>12</sup>HES (2014); <sup>13</sup>HSCIC (2004); <sup>14</sup>DfE (2013); <sup>15</sup>HSCIC (2014-15); data derived from <sup>16</sup>PHE, Public Health Profiles (2016)

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## London

This profile provides a snapshot of Change4Life (C4L) Sports Clubs in London. It captures the impact on public health priorities and whole school agenda at both national and regional levels.

### Regional Impact

C4L Sports Clubs have reduced inactivity among participants by 100%, **lifting over 1,300 children out of inactivity** and helping them to achieve at least 30 minutes of physical activity per week.

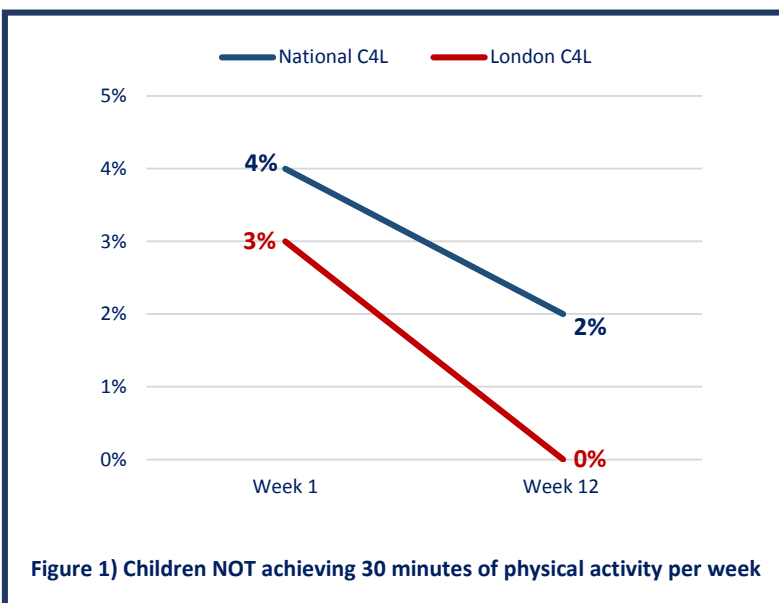
While the number of children meeting CMO guidelines has not changed, **over 3,900 children who joined the programme with low levels of activity are now more active, more often.**

The programme has provided an effective mechanism for **enhancing the wellbeing and individual development of more than 2,500 less active children** (↑12%) across London.

Table 1) Impact of C4L after 12 weeks of club participation

	C4L: London <sup>1</sup> (7-9yrs)	C4L: England <sup>2</sup> (7-9yrs)
Meeting recommendations <sup>3</sup>	10,547 (20%)	102,821 (29%)
Low activity <sup>4</sup>	15,902 (29%)	2,886,492 (42%)
Inactivity <sup>5</sup>	0 (0%)	7,800 (2%)
Wellbeing and individual development	23,907 (44%)	160,968 (45%)

**Data sources:** <sup>1</sup>spear C4L Sports Clubs evaluation data (2013-2016); <sup>2</sup>spear C4L Sports Clubs evaluation data (2011-2016); <sup>3</sup>CMO recommendations of at least 60 minutes physical activity per day (DoH, 2011); <sup>4</sup>Less than 30 minutes per day (HSCIC, 2013; HSE 2012); <sup>5</sup>Children NOT meeting 30 minutes of physical activity per week (DCMS, 2015)



### Key Findings

#### Regional Impact

- Over **3,900** children who joined the programme with low levels of activity are now more active, more often
- Lifted over **1,300** participating children out of inactivity
- Enhanced the wellbeing and individual development of more than **2,500** less active children

#### Public Health Priorities

- The C4L Sports Clubs form part of a wider C4L marketing campaign designed to improve the health and wellbeing of children:

*“Working with a range of local providers we have used C4L as a central marketing campaign, focused on changing behaviours and improving the health and wellbeing of children under one banner”*

(Public Health Strategist: Behaviour Change, London Borough of Hounslow)

#### Whole School Agenda

- C4L Sports Clubs provide schools with a vehicle for increasing physical activity, improving healthy choices and developing a sense of belonging, confidence and competence in their learners:

*“We use C4L and healthy schools to promote the importance of being active, eating well and making choices”*

(Teacher, Robert Blaire Primary School, Islington, London)

## Physical Activity

The London C4L Sports Clubs have reduced inactivity among participants, with **no club members (0%) remaining inactive** by week 12 of the programme.

On joining the London C4L Sports Clubs over 19,800 children (37%) had low levels of activity; by week 12 of the programme **over 3,900 club members (+20%) had effectively increased their activity levels.**

Increases in the activity levels of the least active children in the London C4L Sports Clubs suggests that **the programme is working effectively across London to reduce inactivity and increase the activity of children most in need of the programme.**

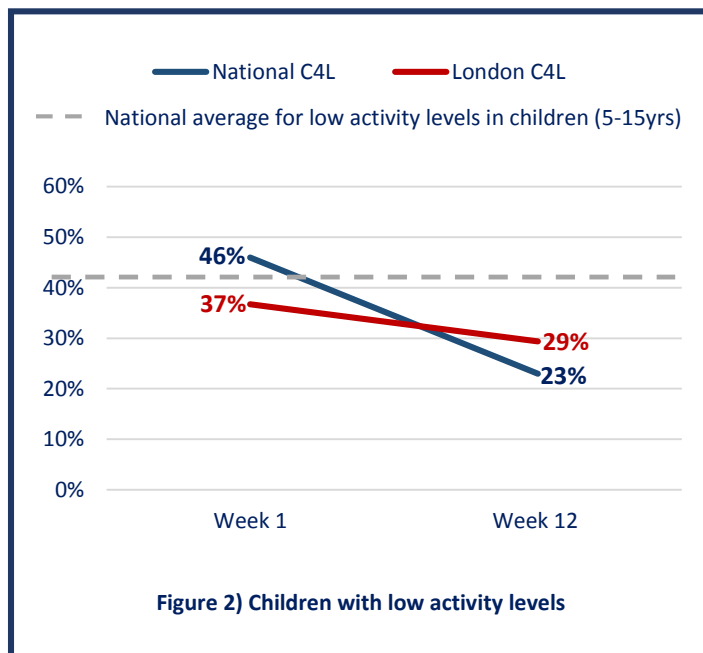


Table 2) Physical activity profile: a comparison of national, regional & C4L Sports Clubs data

	C4L: London <sup>1</sup> (7-9yrs)	HSE (2012): London (5-15yrs)	C4L: England <sup>2</sup> (7-9yrs)	HSE (2012): England (5-15yrs)
Child population size <sup>6</sup>	54,088	1,103,690	354,556	6,872,599
Meeting recommendations <sup>3</sup>	10,547 (20%)	253,849 (23%)	102,821 (29%)	1,237,068 (18%)
Low activity <sup>4</sup>	15,902 (29%)	474,587 (43%)	81,548 (23%)	2,886,492 (42%)

**Data sources:** <sup>1</sup>spear C4L Sports Clubs evaluation data (2013-2016); <sup>2</sup>spear C4L Sports Clubs evaluation data (2011-2016); <sup>3</sup>CMO recommendations of at least 60 minutes physical activity per day (DOH, 2011); <sup>4</sup>Less than 30 minutes per day (HSCIC, 2013; HSE 2012); <sup>6</sup>ONS (2014)

## Public Health Priorities

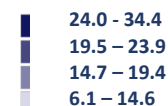
The level of child poverty and obesity in London is higher than the England average, with 24.6% of children under 16 living in poverty and 22.6% of year 6 children classified as obese. To give children living in London a healthy and happy start to life, tackling obesity has been identified as one of the key health priorities.

The C4L Sports Clubs form part of a wider C4L marketing campaign designed to improve the health and wellbeing of children in the region: *“working with a range of local providers we have used C4L as a central marketing campaign, focused on changing behaviours and improving the health and wellbeing of children under one banner”* (Public Health Strategist). A consistent and proactive multi-agency approach to the promotion of C4L has successfully engaged schools.

## Children living in poverty:

Map of London showing relative levels of children living in poverty.

7.8 % Children living in poverty



**Data Sources:** <sup>7</sup>Contains Ordnance Survey data (2016); <sup>8</sup>HMRC; children living in poverty (2013)



## Public Health Priorities

*“By using the partner network and knowledge hub to establish strong communication with schools, we have been able to provide consistent messages about healthy behaviours and up and coming C4L campaigns” (Public Health Strategist).*

The success of the programme has in part been attributed to the C4L brand: *“It is a high quality and trusted brand that people feel confident in. People recognise the brand and we use that, for example on active travel maps around walking and cycling; the overall look and feel really helps us” (Public Health Strategist).* Moving forward the region is exploring how best to integrate Start4Life, C4L and One You as a holistic approach to promoting health and wellbeing across the life course of those living in London.

Table 3) Child profile in London & England

	London	England
Children (age 0-19 years), 2014 <sup>6</sup>	2,103,800 (24.6%)	12,907,300 (23.8%)
Children (age 0-19 years) in 2025 (predicted) <sup>6</sup>	2,392,900 (24.7%)	13,865,500 (23.7%)
School children from minority ethnic groups, 2015 <sup>9</sup>	731,710 (71.3%)	1,931,855 (28.9%)
Children living in poverty (age under 16 years), 2013 <sup>8</sup>	21.8%	18.6%
Life expectancy at birth, 2012-14 <sup>10</sup> :		
Boys	80.3yrs	79.4yrs
Girls	84.2yrs	83.1yrs

Data Sources: <sup>6</sup>ONS (2014); <sup>9</sup>DfE (2015); <sup>8</sup>HMRC; <sup>10</sup>ONS (2012-14)

## Whole School Agenda

C4L Sports Clubs have provided participating schools with a vehicle for increasing physical activity, improving healthy choices and developing a sense of belonging, confidence and competence in their learners: *“as a school we are very much on board with the healthy schools ethos and we use C4L and healthy schools to promote the importance of being active, eating well and making choices” (Teacher, Robert Blaire Primary School).* C4L Sports Clubs are seen to support whole school priorities including social and emotional wellbeing, behaviour and attainment: *“We use a number of criteria for targeting those who really need the intervention and support. But we also work with class teachers to identify children with behavioural issues, and those who are struggling with attainment who would also benefit from the club” (Teacher).*

The clubs give children an opportunity to develop friendships and enjoy being active and healthy *together*. Embedding C4L Sports Club activities across the curriculum and promoting active and healthy lifestyles at every opportunity is noted to have had a positive impact on children’s activity behaviour and choices: *“the children have the confidence to be active during playtimes and lunchtimes. They engage more in PE and even remember to bring their PE kit!” (Teacher).*

Table 4) Child health profile in London & England

	London	England
Obese children (Year 6): % of children (2014/15) <sup>11</sup>	22.6%	19.1%
Estimated prevalence of any mental health disorder: % population aged 5-16 (2014) <sup>12</sup>	9.3%	9.3%
Child admissions for mental health: rate per 100,000 aged 0 -17 years (2014/15) <sup>12</sup>	94.2	87.4
Pupils with social, emotional and mental health needs (2015) <sup>13</sup>	2.11%	2%
16-18 year olds not in education, employment or training (2014) <sup>14</sup>	3.4%	4.7%
15 year olds reporting general health as excellent (2014/15) <sup>15</sup>	27.7%	29.3%
15 year olds who eat 5 portions or more of fruit and veg per day (2014/15) <sup>15</sup>	56.2%	52.4%
15 year olds with a mean daily sedentary time in the last week over 7 hours per day (2014/15) <sup>15</sup>	69.8%	70.1%
15 year olds physically active for at least one hour per day seven days a week (2014/15) <sup>15</sup>	11.8%	13.9%
15 year olds reporting low life satisfaction (2014/15) <sup>15</sup>	15.5%	13.7%

Data Sources: <sup>11</sup>HSCIC NCMP (2014-2015); <sup>12</sup>HES (2014); <sup>13</sup>HSCIC (2004); <sup>14</sup>DfE (2013); <sup>15</sup>HSCIC (2014-15); data derived from <sup>16</sup>PHE, Public Health Profiles (2016)

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- <sup>16</sup>Public Health England (PHE). Public Health Profiles. Available at: <http://fingertips.phe.org.uk/>

## Profile Authors

Dr Abby Foad (Research Director), Dr Sarah Fullick (Senior Research Fellow), Michelle Secker (Research Manager), Professor Mike Weed (Pro Vice-Chancellor Research and Enterprise), Jessica Foad (Researcher).

## North East

This profile provides a snapshot of Change4Life (C4L) Sports Clubs in the North East. It captures the impact on public health priorities and whole school agenda at both national and regional levels.

### Regional Impact

After taking part in the C4L Sports Clubs, **over 7,000 children across the North East are newly achieving at least 60 active minutes every day** and meeting CMO guidelines for physical activity.

C4L Sports Clubs have reduced inactivity among participants by 79%, **lifting 700 children out of inactivity** and helping them to achieve at least 30 minutes physical activity per week.

The programme has provided an effective mechanism for **enhancing the wellbeing and individual development of over 2,100 less active children** (↑23%) across the North East.

Table 1) Impact of C4L after 12 weeks of club participation

	C4L: North East <sup>1</sup> (7-9yrs)	C4L: England <sup>2</sup> (7-9yrs)
Meeting recommendations <sup>3</sup>	7,384 (28%)	102,821 (29%)
Low activity <sup>4</sup>	7304 (28%)	2,886,492 (42%)
Inactivity <sup>5</sup>	185 (1%)	7,800 (2%)
Wellbeing and individual development	11,724 (44%)	160,968 (45%)

**Data sources:** <sup>1</sup>spear C4L Sports Clubs evaluation data (2013-2016); <sup>2</sup>spear C4L Sports Clubs evaluation data (2011-2016); <sup>3</sup>CMO recommendations of at least 60 minutes physical activity per day (DoH, 2011); <sup>4</sup>Less than 30 minutes per day (HSCIC, 2013; HSE 2012); <sup>5</sup>Children NOT meeting 30 minutes of physical activity per week (DCMS, 2015)

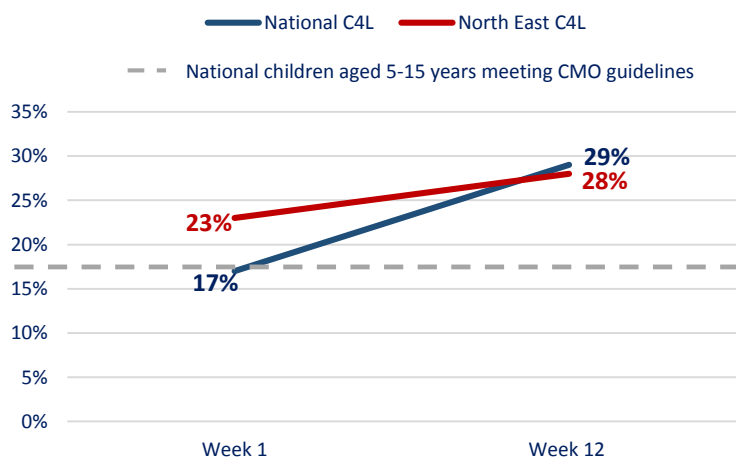


Figure 1) Children achieving CMO recommendations of at least 60 minutes physical activity every day

### Key Findings

#### Regional Impact

- Supported over **1,200** additional children to meet CMO guidelines for physical activity
- Over **4,300** children who joined the programme with low levels of activity are now more active, more often
- Lifted more than **700** participating children out of inactivity
- Enhanced the wellbeing and individual development of over **2,100** less active children

#### Public Health Priorities

- C4L Sports Clubs are used as a vehicle to provide positive environments and activities that encourage healthy weight management:

*“The healthy weight management alliance supports the delivery of the healthy weight strategic framework. Within that is a commitment for the delivery of C4L”*

(Public Health Portfolio Lead, County Durham)

#### Whole School Agenda

- C4L Sports Clubs play an important role in supporting schools’ efforts to promote healthy lifestyles and positive health and wellbeing:

*“we use C4L to support health and wellbeing by raising self-esteem and engaging pupils who normally wouldn’t engage in group sport. We also work with children who are overweight or obese”*

(Headteacher, Herrington Primary School, Sunderland)

## Physical Activity

Children engaged in the North East C4L Sports Clubs exceeded regional (17%) and national (18%) figures for achieving at least 60 active minutes every day, with **over 7,300 children (28%) meeting CMO recommendations** by week 12 of the programme.

After taking part in the clubs, **less than 7,400 children (28%) had low levels of activity**. This figure is lower than both regional (41%) and national (42%) averages.

The clubs have reduced levels of inactivity, with **less than 200 club members (1%) remaining inactive** by week 12 of the programme.

Increases in the number of children meeting CMO guidelines and decreases in the proportion of inactive children suggests **the programme is having a positive impact on the activity levels of participating children across the North East**.

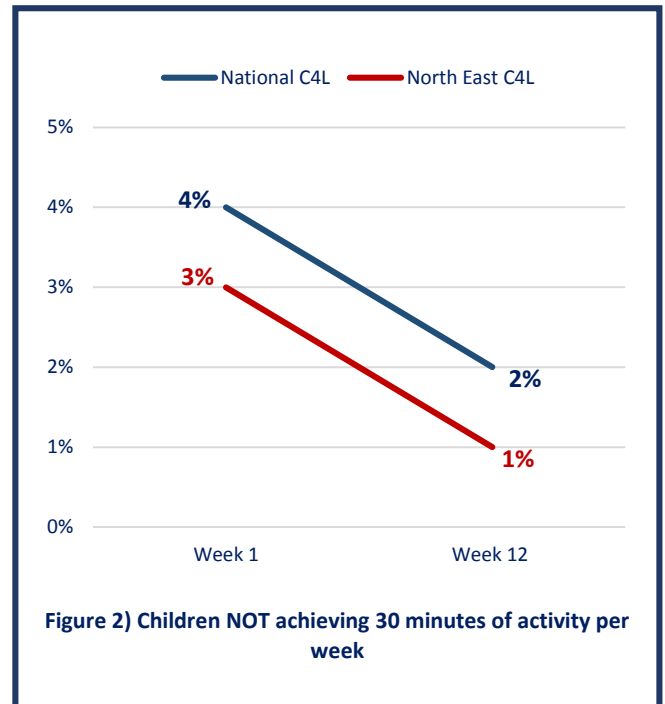


Table 2) Physical activity profile: a comparison of national, regional & C4L Sports Clubs data

	C4L: North East <sup>1</sup> (7-9yrs)	HSE (2012): North East (5-15yrs)	C4L: England <sup>2</sup> (7-9yrs)	HSE (2012): England (5-15yrs)
Child population size <sup>6</sup>	26,464	312,242	354,556	6,872,599
Meeting recommendations <sup>3</sup>	7,384 (28%)	53,081 (17%)	102,821 (29%)	1,237,068 (18%)
Low activity <sup>4</sup>	7304 (28%)	128,019 (41%)	81,548 (23%)	2,886,492 (42%)

**Data sources:** <sup>1</sup>spear C4L Sports Clubs evaluation data (2013-2016); <sup>2</sup>spear C4L Sports Clubs evaluation data (2011-2016); <sup>3</sup>CMO recommendations of at least 60 minutes physical activity per day (DOH, 2011); <sup>4</sup>Less than 30 minutes per day (HSCIC, 2013; HSE 2012); <sup>6</sup>ONS (2014)

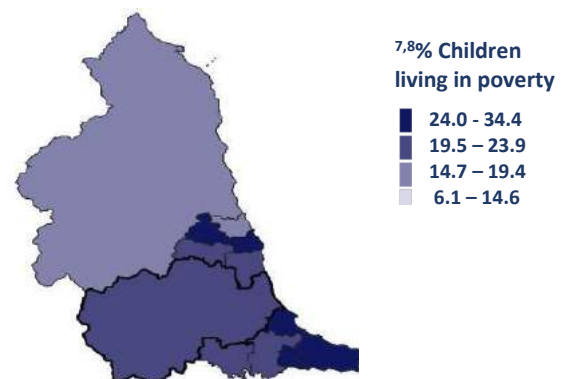
## Public Health Priorities

Levels of child poverty, child obesity and the health and wellbeing of children in the North East is generally less favourable than the England average. Public health teams across the North East are committed to tackling a range of health inequalities including obesity, inactivity and mental health.

C4L Sports Clubs are used as a vehicle to create positive environments and activities that actively promote and encourage healthy weight management: *“the healthy weight management alliance supports the delivery of the healthy weight strategic framework. Within that is a commitment for the delivery of C4L”* (Public Health Portfolio Lead).

## Children living in poverty:

Map of the North East showing relative levels of children living in poverty.



**Data Sources:** <sup>7</sup>Contains Ordnance Survey data (2016); <sup>8</sup>HMRC; children living in poverty (2013)

## Public Health Priorities

C4L has provided the region with a trusted and recognisable brand. While the national campaigns effectively raise awareness of health and wellbeing, the programme provides enough scope for public health teams to develop offers that meet local need: *“nationally C4L raises awareness; we then adapt these messages to provide local C4L offers for local people to access. For example, we had a double page spread in the local newspaper with all of the C4L activities in the area advertised”* (Public Health Portfolio Lead).

Table 3) Child profile in the North East & England

	North East	England
Children (age 0-19 years), 2014 <sup>6</sup>	593,200 (22.7%)	12,907,300 (23.8%)
Children (age 0-19 years) in 2025 (predicted) <sup>6</sup>	608,800 (22.5%)	13,865,500 (23.7%)
School children from minority ethnic groups, 2015 <sup>9</sup>	29,842 (9.5%)	1,931,855 (28.9%)
Children living in poverty (age under 16 years), 2013 <sup>8</sup>	23.3%	18.6%
Life expectancy at birth, 2012-14: <sup>10</sup>		
Boys	78.0yrs	79.4yrs
Girls	81.7yrs	83.1yrs

Data Sources: <sup>6</sup>ONS (2014); <sup>9</sup>DfE (2015); <sup>8</sup>HMRC; <sup>10</sup>ONS (2012-14)

## Whole School Agenda

C4L Sports Clubs are seen to support schools' efforts to tackle obesity and address mental health and wellbeing issues across the North East: *“we use C4L to support health and wellbeing by raising self-esteem and engaging pupils who normally wouldn't engage in group sport. We also work with children who are overweight or obese”* (Headteacher, Herrington Primary School).

The provision of fun activities in a 'safe' and inclusive environment has been found to increase children's activity levels, improve self-esteem and enhance engagement: *“the children involved are really engaged trying activities they wouldn't have ordinarily tried before. Because it is fun and accessible their self-esteem and confidence has increased, which is evident during my classroom observations”* (Headteacher).

Using peer leaders to support delivery of the clubs helps to raise the aspirations of young participants and develop transferable skills: *“through our partnership with Farrington Community School we train past pupils as C4L mentors and leaders. The children involved in C4L respond well to this model; it inspires them, raises their aspirations and develops social skills that extend beyond the C4L Club”* (Headteacher).

Table 4) Child health profile in the North East & England

	North East	England
Obese children (Year 6): % of children (2014/15) <sup>11</sup>	21.5%	19.1%
Estimated prevalence of any mental health disorder: % population aged 5-16 (2014) <sup>12</sup>	10%	9.3%
Child admissions for mental health: rate per 100,000 aged 0 -17 years (2014/15) <sup>12</sup>	93.1	87.4
Pupils with social, emotional and mental health needs (2015) <sup>13</sup>	2.45%	2%
16-18 year olds not in education, employment or training (2014) <sup>14</sup>	7%	4.7%
15 year olds reporting general health as excellent (2014/15) <sup>15</sup>	30.9%	29.3%
15 year olds who eat 5 portions or more of fruit and veg per day (2014/15) <sup>15</sup>	46.8%	52.4%
15 year olds with a mean daily sedentary time in the last week over 7 hours per day (2014/15) <sup>15</sup>	75.2%	70.1%
15 year olds physically active for at least one hour per day seven days a week (2014/15) <sup>15</sup>	14.2%	13.9%
15 year olds reporting low life satisfaction (2014/15) <sup>15</sup>	13.1%	13.7%

Data Sources: <sup>11</sup>HSCIC NCMP (2014-2015); <sup>12</sup>HES (2014); <sup>13</sup>HSCIC (2004); <sup>14</sup>DfE (2013); <sup>15</sup>HSCIC (2014-15); data derived from <sup>16</sup>PHE, Public Health Profiles (2016)

## Data Sources

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## North West

This profile provides a snapshot of Change4Life (C4L) Sports Clubs in the North West. It captures the impact on public health priorities and whole school agenda at both national and regional levels.

### Regional Impact

After taking part in the C4L Sports Clubs, **over 8,000 children across the North West are newly achieving at least 60 active minutes every day** and meeting CMO guidelines for physical activity.

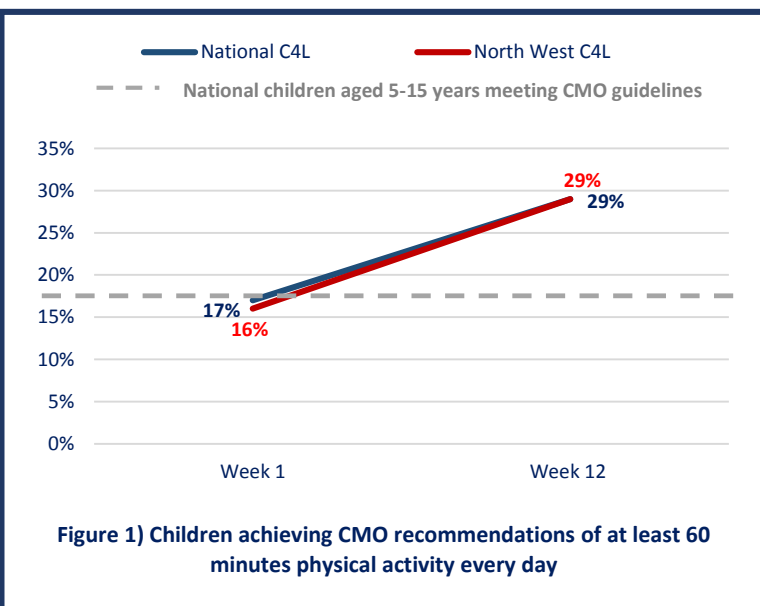
C4L Sports Clubs have reduced inactivity among participants by 34%, **lifting 1,300 children out of inactivity** and helping them to achieve at least 30 minutes physical activity per week.

The programme has provided an effective mechanism for **enhancing the wellbeing and individual development of over 9,300 less active children** (↑47%) across the North West.

**Table 1) Impact of C4L after 12 weeks of club participation**

	C4L: North West <sup>1</sup> (7-9yrs)	C4L: England <sup>2</sup> (7-9yrs)
Meeting recommendations <sup>3</sup>	17,772 (29%)	102,821 (29%)
Low activity <sup>4</sup>	6378 (10%)	2,886,492 (42%)
Inactivity <sup>5</sup>	2,477 (4%)	7,800 (2%)
Wellbeing and individual development	29,351 (47%)	160,968 (45%)

**Data sources:** <sup>1</sup>spear C4L Sports Clubs evaluation data (2013-2016); <sup>2</sup>spear C4L Sports Clubs evaluation data (2011-2016); <sup>3</sup>CMO recommendations of at least 60 minutes physical activity per day (DoH, 2011); <sup>4</sup>Less than 30 minutes per day (HSCIC, 2013; HSE 2012); <sup>5</sup>Children NOT meeting 30 minutes of physical activity per week (DCMS, 2015)



### Key Findings

#### Regional Impact

- Supported over **8,000** additional children to meet CMO guidelines for physical activity
- Over **25,300** children who joined the programme with low levels of activity are now more active, more often
- Lifted **1,300** participating children out of inactivity
- Enhanced the wellbeing and individual development of over **9,300** less active children

#### Public Health Priorities

- C4L Sports Clubs are used to promote healthy lifestyles, including physical activity, nutrition and weight management across the region:

*“C4L is a structure for delivering preventative messages and effecting positive and long term behaviour change... we use C4L as a tier 1 lifestyle and weight management service”*

(Health Improvement Specialist,  
Warrington Public Health)

#### Whole School Agenda

- C4L Sports Clubs are seen by schools to play an important role in supporting their health and wellbeing agenda and the holistic development of pupils across the school:

*“C4L is now much broader with the aim of getting the whole school healthier, fitter and happier”*

(HLTA, St Peter's Church of England Primary School, Chorley, Lancashire)

## Physical Activity

Children engaged in the North West C4L Sports Clubs exceeded regional (20%) and national (18%) figures for achieving at least 60 active minutes every day, with **over 17,700 children (29%) meeting CMO recommendations** by week 12 of the programme.

After taking part in the clubs, **less than 6,400 children (10%) had low levels of activity**. This figure is lower than both regional (39%) and national (42%) averages.

The clubs have reduced levels of inactivity, with **less than 2,500 club members (4%) remaining inactive** by week 12 of the programme.

Increases in children meeting CMO guidelines and decreases in the proportion of inactive children suggests **the programme is having a positive impact on the activity levels of participating children across the North West**.

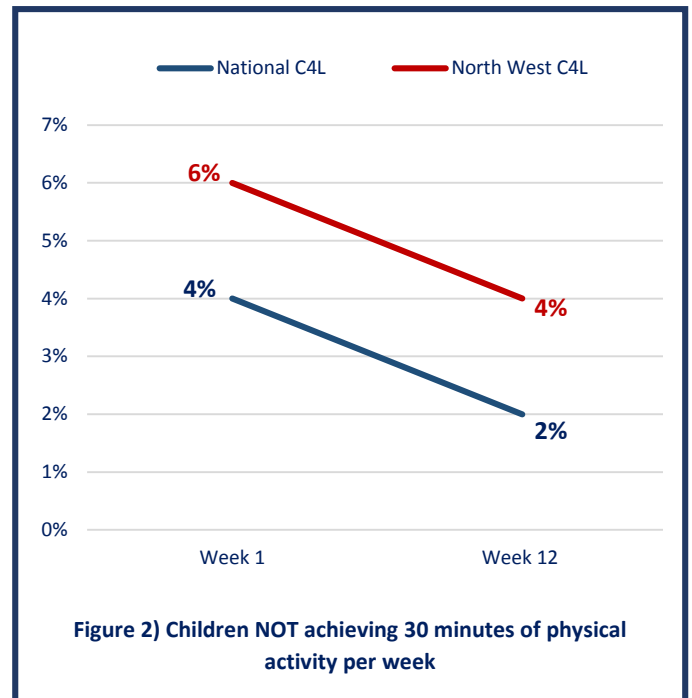


Table 2) Physical activity profile: a comparison of national, regional & C4L Sports Clubs data

	C4L: North West <sup>1</sup> (7-9yrs)	HSE (2012): North West (5-15yrs)	C4L: England <sup>2</sup> (7-9yrs)	HSE (2012): England (5-15yrs)
Child population size <sup>6</sup>	61,922	900,273	354,556	6,872,599
Meeting recommendations <sup>3</sup>	17,772 (29%)	180,055 (20%)	102,821 (29%)	1,237,068 (18%)
Low activity <sup>4</sup>	6378 (10%)	351,106 (39%)	81,548 (23%)	2,886,492 (42%)

**Data sources:** <sup>1</sup>spear C4L Sports Clubs evaluation data (2013-2016); <sup>2</sup>spear C4L Sports Clubs evaluation data (2011-2016); <sup>3</sup>CMO recommendations of at least 60 minutes physical activity per day (DOH, 2011); <sup>4</sup>Less than 30 minutes per day (HSCIC, 2013; HSE 2012); <sup>6</sup>ONS (2014)

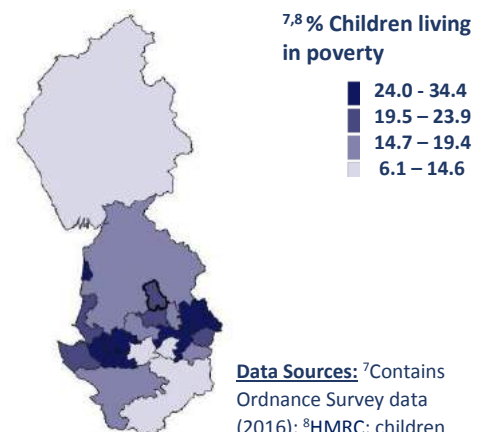
## Public Health Priorities

Children in the North West have higher than average levels of obesity, with 19.4% of year 6 children (10-11years) classified as obese. Child obesity is linked to poorer health outcomes in adulthood and has therefore been identified as a key public health priority. The C4L Sports Clubs have been used as a vehicle to tackle inactivity, poor diet and obesity across the region. Warrington Borough Council's Public Health Team "use C4L as a structure for delivering preventative messages and effecting positive and long term behaviour change" (Health Improvement Specialist).

The programme provides sufficient flexibility to address national priorities while also attending to local need: "if used effectively it is so much more than a health and social marketing campaign or communication strategy" (Health Improvement Specialist).

## Children living in poverty:

Map of the North West showing relative levels of children living in poverty



**Data Sources:** <sup>7</sup>Contains Ordnance Survey data (2016); <sup>8</sup>HMRC; children living in poverty (2013)



## Public Health Priorities

The success of the C4L Sports Clubs has meant that the Public Health Team implement the programme as “a tier 1 lifestyle and weight management service, with the Public Health Director allocating financial resources to the programme” (Health Improvement Specialist). Recognition of the scope of the programme means that the Public Health Team is committed to “working with the C4L operational group, the School Games Organiser and Livewire (Community Interest Company (CIC) that delivers Leisure, Libraries and Lifestyles services in Warrington) to ensure that every school can deliver a C4L element each year” (Health Improvement Specialist).

Table 3) Child profile in the North West & England

	North West	England
Children (age 0-19 years), 2014 <sup>6</sup>	1,689,900 (23.7%)	12,907,300 (23.8%)
Children (age 0-19 years) in 2025 (predicted) <sup>6</sup>	1,754,000 (23.7%)	13,865,500 (23.7%)
School children from minority ethnic groups, 2015 <sup>9</sup>	180,266 (20.1%)	1,931,855 (28.9%)
Children living in poverty (age under 16 years), 2013 <sup>8</sup>	21.0%	18.6%
Life expectancy at birth, 2012-14: <sup>10</sup>		
Boys	78.1yrs	79.4yrs
Girls	81.9yrs	83.1yrs

Data Sources: <sup>6</sup>ONS (2014); <sup>9</sup>DfE (2015); <sup>8</sup>HMRC; <sup>10</sup>ONS (2012-14)

## Whole School Agenda

Schools across the North West have implemented the C4L Sports Clubs as a holistic approach to promoting the health and wellbeing agenda: “initially the main focus was to tackle obesity, but now it is much broader with the aim of getting the whole school healthier, fitter and happier” (HLTA, St Peter’s Church of England Primary School). The clubs also offer a ‘safe’ and supportive environment in which to develop the social and emotional skills of less confident children: “our current group have been targeted to develop their social and emotional skills. C4L allows them to try new activities in smaller groups and without anyone judging them. This has had a positive impact on their confidence, self-esteem and general outlook on life” (HTLA).

While the programme is used primarily to support health and wellbeing, schools have noted a positive association between the enhanced health and wellbeing of participating children and broader educational outcomes: “one little girl is not academic but through C4L she feels she has learnt something; she tries harder at school, can share what she has done, play with friends and her concentration in class and attendance have improved” (HTLA).

Table 4) Child health profile in the North West & England

	North West	England
Obese children (Year 6): % of children (2014/15) <sup>11</sup>	19.4%	19.1%
Estimated prevalence of any mental health disorder: % population aged 5-16 (2014) <sup>12</sup>	9.6%	9.3%
Child admissions for mental health: rate per 100,000 aged 0 -17 years (2014/15) <sup>12</sup>	116.2	87.4
Pupils with social, emotional and mental health needs (2015) <sup>13</sup>	1.87%	2%
16-18 year olds not in education, employment or training (2014) <sup>14</sup>	5.2%	4.7%
15 year olds reporting general health as excellent (2014/15) <sup>15</sup>	30.7%	29.3%
15 year olds who eat 5 portions or more of fruit and veg per day (2014/15) <sup>15</sup>	48.7%	52.4%
15 year olds with a mean daily sedentary time in the last week over 7 hours per day (2014/15) <sup>15</sup>	71.2%	70.1%
15 year olds physically active for at least one hour per day seven days a week (2014/15) <sup>15</sup>	13.2%	13.9%
15 year olds reporting low life satisfaction (2014/15) <sup>15</sup>	13.3%	13.7%

Data Sources: <sup>11</sup>HSCIC NCMP (2014-2015); <sup>12</sup>HES (2014); <sup>13</sup>HSCIC (2004); <sup>14</sup>DfE (2013); <sup>15</sup>HSCIC (2014-15); data derived from <sup>16</sup>PHE, Public Health Profiles (2016)

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## Profile Authors

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## South East

This profile provides a snapshot of Change4Life (C4L) Sports Clubs in the South East. It captures the impact on public health priorities and whole school agenda at both national and regional levels.

### Regional Impact

C4L Sports Clubs have reduced inactivity among participants by 56%, **lifting over 1,200 children out of inactivity** and helping them to achieve at least 30 minutes of physical activity per week.

While the number of children meeting CMO guidelines has not changed, **over 11,900 children who joined the programme with low levels of activity are now more active, more often.**

The programme has provided an effective mechanism for **enhancing the wellbeing and individual development of more than 7,000 less active children** (↑44%) across the South East.

Table 1) Impact of C4L after 12 weeks of club participation

	C4L: South East <sup>1</sup> (7-9yrs)	C4L: England <sup>2</sup> (7-9yrs)
Meeting recommendations <sup>3</sup>	10,779 (21%)	102,821 (29%)
Low activity <sup>4</sup>	9,721 (19%)	2,886,492 (42%)
Inactivity <sup>5</sup>	957 (2%)	7,800 (2%)
Wellbeing and individual development	22,969 (46%)	160,968 (45%)

**Data sources:** <sup>1</sup>spear C4L Sports Clubs evaluation data (2013-2016); <sup>2</sup>spear C4L Sports Clubs evaluation data (2011-2016); <sup>3</sup>CMO recommendations of at least 60 minutes physical activity per day (DoH, 2011); <sup>4</sup>Less than 30 minutes per day (HSCIC, 2013; HSE 2012); <sup>5</sup>Children NOT meeting 30 minutes of physical activity per week (DCMS, 2015)

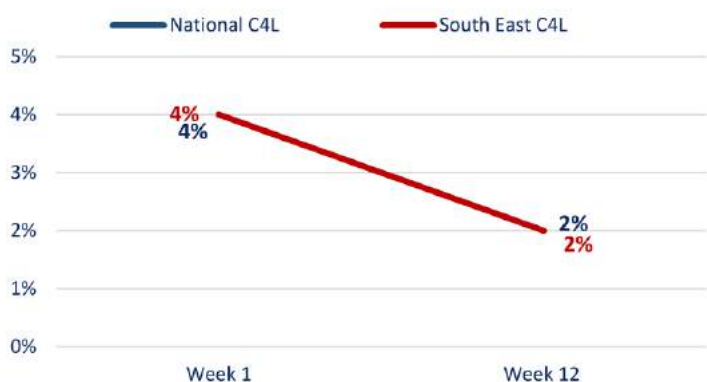


Figure 1) Children NOT achieving 30 minutes of physical activity per week

### Key Findings

#### Regional Impact

- Over **11,900** children who joined the programme with low levels of activity are now more active, more often
- Lifted over **1,200** participating children out of inactivity
- Enhanced the wellbeing and individual development of more than **7,000** less active children

#### Public Health Priorities

- C4L Sports Clubs form part of a systematic approach to effecting positive behaviour change:

*“C4L is one of the health and schools programmes that we use as an evidence based intervention to address child health improvement by tackling multiple lifestyle behaviours”*

(Head of Specialist Health Commissioning and Health Improvement, East Sussex County Council)

#### Whole School Agenda

- C4L Sports Clubs are used by schools to tackle inactivity and develop social and emotional health across schools:

*“Children involved in C4L are happier, which has impacted on their emotional wellbeing, confidence, self-esteem, and resilience. We have happy and active children with positive attitudes”*

(Club Lead, Wimborne Junior School, Portsmouth, Hampshire)

## Physical Activity

The South East C4L Sports Clubs have reduced inactivity among participants, with **less than 1000 club members (2%) remaining inactive** by week 12 of the programme.

On joining the South East C4L Sports Clubs, over 21,600 children (43%) had low levels of activity, exceeding national (42%) and regional (40%) averages. By week 12 of the programme, **over 11,900 club members (↑55%) had effectively increased their activity levels.**

Increases in the activity levels of less active children in South East C4L Sports Clubs suggests that **the programme is working effectively across the South East to reduce inactivity and increase the activity of children most in need of the programme.**

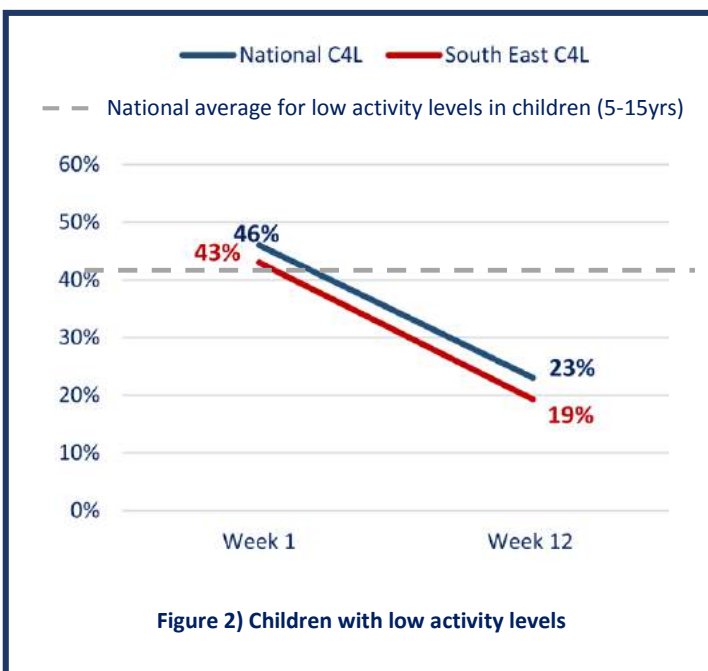


Table 2) Physical activity profile: a comparison of national, regional & C4L Sports Clubs data

	C4L: South East <sup>1</sup> (7-9yrs)	HSE (2012): South East (5-15yrs)	C4L: England <sup>2</sup> (7-9yrs)	HSE (2012): England (5-15yrs)
Child population size <sup>6</sup>	50,370	1,141,450	354,556	6,872,599
Meeting recommendations <sup>3</sup>	10,779 (21%)	239,705 (21%)	102,821 (29%)	1,237,068 (18%)
Low activity <sup>4</sup>	9,721 (19%)	456,580 (40%)	81,548 (23%)	2,886,492 (42%)

**Data sources:** <sup>1</sup>spear C4L Sports Clubs evaluation data (2013-2016); <sup>2</sup>spear C4L Sports Clubs evaluation data (2011-2016); <sup>3</sup>CMO recommendations of at least 60 minutes physical activity per day (DOH, 2011); <sup>4</sup>Less than 30 minutes per day (HSCIC, 2013; HSE 2012); <sup>6</sup>ONS (2014)

## Public Health Priorities

While the health profile across the South East is generally positive relative to other areas, the public health teams are committed to reducing health inequalities, improving health outcomes and enhancing the quality of life and life years. The C4L Sports Clubs form part of a systematic approach to effecting positive behaviour change. The focus is on increasing physical activity, reducing obesity and enhancing the social and emotional wellbeing of children: *“we use a whole systems approach to effect positive behaviour change. C4L is one of the health and schools programmes that we use as an evidence-based intervention to address child health improvement by tackling multiple lifestyle behaviours”* (Head of Specialist Health Commissioning and Health Improvement).

## Children living in poverty:

Map of the South East showing relative levels of children living in poverty



**Data Sources:** <sup>7</sup>Contains Ordnance Survey data (2016); <sup>8</sup>HMRC; children living in poverty (2013)

## Public Health Priorities

C4L provides “a trusted brand that schools and other organisations recognise and understand” (Head of Specialist Health Commissioning and Health Improvement). East Sussex County Council have developed a ‘grants for schools’ programme, supporting schools to develop sustainable health improvement plans. C4L underpins the health and activity elements of this offer: “We will strengthen the school to community link and use C4L to address the broader elements of health and activity, creating a real step change in how we use school settings for health improvements in children” (Head of Specialist Health Commissioning and Health Improvement).

Table 3) Child profile in the South East & England

	South East	England
Children (age 0-19 years), 2014 <sup>6</sup>	2,117,200 (23.9%)	12,907,300 (23.8%)
Children (age 0-19 years) in 2025 (predicted) <sup>6</sup>	2,280,700 (23.7%)	13,865,500 (23.7%)
School children from minority ethnic groups, 2015 <sup>9</sup>	225,556 (21.3%)	1,931,855 (28.9%)
Children living in poverty (age under 16 years), 2013 <sup>8</sup>	13.7%	18.6%
Life expectancy at birth, 2012-14: <sup>10</sup>		
Boys	80.5yrs	79.4yrs
Girls	84.0yrs	83.1yrs

Data Sources: <sup>6</sup>ONS (2014); <sup>9</sup>DfE (2015); <sup>8</sup>HMRC; <sup>10</sup>ONS (2012-14)

## Whole School Agenda

Participating schools across the South East have used C4L Sports Clubs to support whole school agenda around activity levels, healthy lifestyles and holistic development: “we use C4L as a whole school approach to increasing physical activity; we identify children who are not participating on a regular basis and they become our target group” (Club Lead, Wimborne Junior School). C4L Sports Clubs have provided schools with an opportunity to develop pupil’s transferable ‘life skills’ outside of the classroom. Schools have noted marked improvements in children’s resilience, conflict resolution, teamwork, anger management and social skills: “the children involved in C4L are happier, which has impacted on their emotional wellbeing, confidence, self-esteem and resilience. We have happy and active children with positive attitudes” (Club Lead).

The clubs have developed a ‘safe’, fun environment which encourages the engagement of less active and less confident children: “The C4L programme gives children the opportunity to be active. Encouraging them to enjoy being active not only helps them in the classroom, but is also something they can take forward for the rest of their lives” (Headteacher, Wimborne Junior School).

Table 4) Child health profile in the South East & England

	South East	England
Obese children (Year 6): % of children (2014/15) <sup>11</sup>	16.4%	19.1%
Estimated prevalence of any mental health disorder: % population aged 5-16 (2014) <sup>12</sup>	8.5%	9.3%
Child admissions for mental health: rate per 100,000 aged 0 -17 years (2014/15) <sup>12</sup>	76.7	87.4
Pupils with social, emotional and mental health needs (2015) <sup>13</sup>	2.09%	2%
16-18 year olds not in education, employment or training (2014) <sup>14</sup>	4.5%	4.7%
15 year olds reporting general health as excellent (2014/15) <sup>15</sup>	30.6%	29.3%
15 year olds who eat 5 portions or more of fruit and veg per day (2014/15) <sup>15</sup>	56.5%	52.4%
15 year olds with a mean daily sedentary time in the last week over 7 hours per day (2014/15) <sup>15</sup>	66.9%	70.1%
15 year olds physically active for at least one hour per day seven days a week (2014/15) <sup>15</sup>	16%	13.9%
15 year olds reporting low life satisfaction (2014/15) <sup>15</sup>	13.4%	13.7%

Data Sources: <sup>11</sup>HSCIC NCMP (2014-2015); <sup>12</sup>HES (2014); <sup>13</sup>HSCIC (2004); <sup>14</sup>DfE (2013); <sup>15</sup>HSCIC (2014-15); data derived from <sup>16</sup>PHE, Public Health Profiles (2016)

## Data Sources

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- <sup>15</sup>Health and Social Care Information Centre (HSCIC, 2015). Health and Wellbeing of 15-year-olds in England - the What About YOUth? Survey 2014/15. The Information Centre: Leeds. Available at: <http://www.hscic.gov.uk/catalogue/PUB19244> or <http://fingertips.phe.org.uk/profile/what-about-youth/data#page/0>
- <sup>16</sup>Public Health England (PHE). Public Health Profiles. Available at: <http://fingertips.phe.org.uk/>

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## Appendix A

Table A1) DCMS outcomes and key performance indicators.<sup>36</sup>

Key Outcomes	Definitions	KPIs
<p>Increase in the percentage of the population in England meeting the CMO guidelines for physical activity (DCMS, 2015).</p> <p>Decrease in percentage of people physically inactive (DCMS, 2015).</p> <p>Improved subjective wellbeing (DCMS, 2015).</p> <p>Increased levels of perceived self-efficacy. DCMS, 2015).</p>	<ul style="list-style-type: none"> <li>All children and young people should engage in moderate to vigorous intensity physical activity for at least 60 minutes and up to several hours every day (5-18 years of age) (CMO, 2011).</li> <li>Physical inactivity is defined as a person participating in less than 30 minutes of activity a week (CMO, 2011).</li> <li>Physical Literacy: the motivation, confidence, physical competence, knowledge and understanding that provides children with the movement foundation for lifelong participation in physical activity (Sport England, 2013).</li> <li>Mental wellbeing is more than just the absence of disease; it is a positive state of mind and body, underpinned by social and psychological wellbeing. It enables and supports good relationships, improved resilience, improved health, meaning, purpose and control (DoH, 2013).</li> <li>Self-efficacy refers to an individual's belief in his or her capacity to execute behaviours necessary to produce specific performance attainments. Self-efficacy reflects confidence in ability to exert control over one's own motivation, behaviour and social environment.</li> </ul>	<ul style="list-style-type: none"> <li>DCMS (2015): KPI 1: Increase in percentage of the population taking part in sport and physical activity at least twice in the last month.</li> <li>DCMS (2015): KPI 2: Decrease in percentage of people physically inactive.</li> <li>DCMS (2015): KPI 4: Increase in the percentage of children achieving physical literacy standards.</li> <li>DCMS (2015): KPI 6: Increase in the percentage of young people (11-18) with a positive attitude towards sport and being active.</li> </ul> <p>The DCMS (2015) strategic document has no KPIs aligned to wellbeing and self-efficacy outcomes. <i>spear</i> identifies the following aspects that encompass wellbeing and individual development:</p> <ul style="list-style-type: none"> <li>Increase in the percentage of participants reporting an increase in: <ul style="list-style-type: none"> <li>Confidence</li> <li>Self-esteem</li> <li>Resilience</li> <li>Happiness</li> <li>Self-efficacy</li> <li>Creativity</li> <li>Aspirations</li> <li>Empathy</li> <li>Social skills</li> </ul> </li> </ul>

<sup>36</sup> Department for Culture, Media and Sport (Dec 2015). Sporting Future: A new strategy for an active nation.

# Appendix B

Table B1) Ofsted Inspection Framework links with pupil health and wellbeing and attainment.<sup>37</sup>

Ofsted inspection framework:	Links with pupil health and wellbeing key judgements
1. Achievement of pupils	<ul style="list-style-type: none"> <li>• an 11% boost in results in standardised achievement tests has been linked to school programmes that directly improve students’ social and emotional learning</li> <li>• higher attaining schools have greater levels of participation in physical activity and sports programmes than lower performing schools</li> </ul>
2. Quality of teaching	<ul style="list-style-type: none"> <li>• systematic structured teaching of social and emotional life-skills and values throughout school life has the potential to increase emotional wellbeing and academic achievement</li> </ul>
3. Quality of leadership in, and management of, the school	<ul style="list-style-type: none"> <li>• Ofsted reported a close correlation between the grade that schools “were awarded for overall effectiveness in their last section 5 inspection and their grade for PSHE education”</li> <li>• the quality and nature of relationships – spanning pupil-to-pupil and pupil-to-teacher relationships are key to engendering a sense of belonging and pupils liking school, which influences student wellbeing and readiness to learn</li> </ul>
4. Behaviour and safety of pupils at the school	<ul style="list-style-type: none"> <li>• pupils’ sense of belonging to school is a key determinant of their wellbeing and is higher in schools where children feel safe and have lower levels of bullying. These are also more likely to be high-achieving schools</li> </ul>

<sup>37</sup> Public Health England (Nov 2014). The link between pupil health and wellbeing and attainment.



# Appendix C: Change4Life Sports Clubs Children's Survey

## a bit about me

**Week 1**

So that you can see how active you are, take five minutes to fill in this quiz. You can ask a grown up to help you if you don't understand anything. Use the other copies of this quiz at the back of the 'get going' logbook to see how you are getting on. Make sure you do this quiz when your club leader asks you to and hand it to them when you have finished.

My name is:

I am a:  boy  girl

Age:

My school is:

Joined the club:  this school year  last school year

I do more than 30 minutes of physical activity

every day  most days  some days  never

I do more than 60 minutes of physical activity

every day  most days  some days  never

**Thinking me**

I think I am good at playing games

every day  most days  some days  never

I look forward to playing games

every day  most days  some days  never

**Social me**

When I play games I help others improve

every day  most days  some days  never

I like playing games with others

every day  most days  some days  never

**Physical me**

I play games where I get out of breath

every day  most days  some days  never

When I play games I like learning new skills

every day  most days  some days  never

**Creative me**

I make up new games to play

every day  most days  some days  never

I like trying new games

every day  most days  some days  never

**Healthy me**

I eat my 5-a-day fruit and veg

every day  most days  some days  never

I feel happy after playing games

every day  most days  some days  never

I drink water before, during and after games

every day  most days  some days  never

I like to be active

every day  most days  some days  never

Please return all quizzes to:  
SPEAR, Canterbury Christ Church University, Canterbury, Kent CT1 1QU.

## Appendix D: Change4Life Sports Clubs Children's Survey Data

### C4L Construct data (n=3,300 repeated measures survey returns)

SIGNIFICANT DIFFERENCE ALL CONSTRUCTS (p <.001)

Table D1) Inactivity

	Week 1	Week 12
<b>Never</b>	<b>4%</b>	<b>2%</b>
Some days	34%	21%
Most days	31%	31%
Every day	30%	45%

Table D2) Physical Activity

	Week 1	Week 12
Never	17%	8%
Some days	43%	32%
Most days	23%	31%
<b>Every day</b>	<b>17%</b>	<b>29%</b>

Table D3) Wellbeing & Individual Development

	Week 1	Week 12
Never	1%	0%
Some days	9%	6%
Most days	54%	49%
<b>Every day</b>	<b>37%</b>	<b>45%</b>

### Control Construct data (n=477 repeated measures survey returns)

NO SIGNIFICANT DIFFERENCE ANY CONSTRUCTS

Table D4) Inactivity

	Week 1	Week 12
<b>Never</b>	<b>2%</b>	<b>3%</b>
Some days	22%	20%
Most days	29%	32%
Every day	47%	45%

Table D5) Physical Activity

	Week 1	Week 12
Never	10%	9%
Some days	35%	33%
Most days	25%	28%
<b>Every day</b>	<b>29%</b>	<b>30%</b>

Table D6) Wellbeing & Individual Development

	Week 1	Week 12
Never	0%	0%
Some days	7%	7%
Most days	57%	51%
<b>Every day</b>	<b>36%</b>	<b>42%</b>

Individual questions:

Change4Life Sports Clubs (C4L)

vs.

Control

C4L n=3,300  
repeated measures

SIGNIFICANT DIFFERENCE (p<.001)

Control n=477  
repeated measures

NO SIGNIFICANT  
DIFFERENCE

SIGNIFICANT DIFFERENCE (p<.05)

Table D7) Physical activity

C4L

Control

I do more than 30 minutes of physical activity			I do more than 60 minutes of physical activity			I do more than 30 minutes of physical activity			I do more than 60 minutes of physical activity		
	W1	W12		W1	W12		W1	W12		W1	W12
Never	4%	2%	Never	17%	8%	Never	2%	3%	Never	10%	9%
Some days	34%	21%	Some days	43%	32%	Some days	22%	20%	Some days	35%	33%
Most days	31%	31%	Most days	23%	31%	Most days	29%	32%	Most days	25%	28%
Every day	30%	45%	Every day	17%	29%	Every day	47%	45%	Every day	29%	30%

Table D8) Thinking me

C4L

Control

I think I am good at playing games			I look forward to playing games			I think I am good at playing games			I look forward to playing games		
	W1	W12		W1	W12		W1	W12		W1	W12
Never	2%	1%	Never	2%	1%	Never	2%	3%	Never	2%	2%
Some days	16%	10%	Some days	13%	9%	Some days	12%	9%	Some days	10%	9%
Most days	28%	29%	Most days	21%	23%	Most days	27%	22%	Most days	23%	18%
Every day	54%	60%	Every day	64%	67%	Every day	60%	66%	Every day	66%	71%

Table D9) Social me

C4L			Control								
When I play games I help others improve			I like playing games with others			When I play games I help others improve			I like playing games with others		
	W1	W12		W1	W12		W1	W12		W1	W12
Never	7%	3%	Never	2%	1%	Never	7%	7%	Never	1%	3%
Some days	34%	25%	Some days	11%	9%	Some days	35%	32%	Some days	8%	6%
Most days	32%	35%	Most days	19%	21%	Most days	32%	31%	Most days	16%	15%
Every day	27%	36%	Every day	68%	70%	Every day	25%	31%	Every day	75%	77%

Table D10) Physical me

C4L			Control								
I play games where I get out of breath			When I play games I like learning new skills			I play games where I get out of breath			When I play games I like learning new skills		
	W1	W12		W1	W12		W1	W12		W1	W12
Never	11%	8%	Never	4%	2%	Never	9%	7%	Never	6%	4%
Some days	21%	22%	Some days	20%	16%	Some days	24%	20%	Some days	18%	18%
Most days	30%	32%	Most days	24%	30%	Most days	31%	29%	Most days	21%	20%
Every day	29%	39%	Every day	52%	53%	Every day	37%	46%	Every day	55%	58%

Table D11) Creative me

C4L			Control								
I make up new games to play			I like trying new games			I make up new games to play			I like trying new games		
	W1	W12		W1	W12		W1	W12		W1	W12
Never	10%	7%	Never	3%	2%	Never	12%	11%	Never	4%	3%
Some days	37%	31%	Some days	19%	15%	Some days	40%	38%	Some days	19%	18%
Most days	25%	29%	Most days	27%	28%	Most days	24%	22%	Most days	30%	26%
Every day	28%	33%	Every day	51%	55%	Every day	25%	29%	Every day	46%	53%

Table D12) Healthy me

C4L			Control								
I eat my 5-a-day			I feel happy after playing games			I eat my 5-a-day			I feel happy after playing games		
	W1	W12		W1	W12		W1	W12		W1	W12
Never	8%	4%	Never	2%	2%	Never	7%	7%	Never	2%	2%
Some days	30%	26%	Some days	13%	10%	Some days	21%	20%	Some days	11%	8%
Most days	28%	30%	Most days	24%	26%	Most days	31%	29%	Most days	21%	25%
Every day	35%	40%	Every day	61%	62%	Every day	41%	43%	Every day	66%	65%

Table D13) Healthy me

C4L			Control								
I drink water before, during and after games			I like to be active			I drink water before, during and after games			I like to be active		
	W1	W12		W1	W12		W1	W12		W1	W12
Never	11%	6%	Never	3%	2%	Never	7%	5%	Never	2%	3%
Some days	27%	21%	Some days	15%	10%	Some days	20%	18%	Some days	12%	11%
Most days	24%	27%	Most days	22%	22%	Most days	25%	22%	Most days	18%	18%
Every day	39%	47%	Every day	61%	66%	Every day	48%	54%	Every day	69%	68%