



# Head 4 Health Executive Summary



## June 2022

The Centre for Sport, Physical Education & Activity Research (spear)



#### Context

#### About Head 4 Health

Head 4 Health is funded by the Premier League, Professional Footballers Association, City of Wolverhampton Council and Wolverhampton CCG. The project has been running since 2018 and aims to improve the mental and physical wellbeing of adults over the age of 18. Head 4 Health uses the power of the club and Premier League brand and the appeal of Molineux stadium to engage people unlikely to access traditional support services.

Head 4 Health gives people the chance to come together and take part in physical activity, education and conversation. It is delivered in a structured, routine way through a six-to-eight-week cohort, with the opportunity for sustained engagement through Extra Time activations. Head 4 Health activities include mental health support, stress management and alcohol awareness workshops; inspirational speakers; physical activity sessions; participant interest activity groups; Extra Time sessions and catch-ups; and Walk and Talk sessions. The project also provides timely access to one-to-one counselling.

Wolverhampton Wanderers Foundation works with a range of organisations to inform, support and deliver Head 4 Health. Partners include representatives from the City of Wolverhampton Council; Service User Involvement Team (SUIT); Samaritans; NHS Healthy Minds; Recovery Near You; MIND; Starfish; and Serenity Counselling.

## Key Head 4 Health outcomes

- Improvement in wellbeing and decrease in stress levels.
- Increase in participants' willingness to share experiences, thoughts and feelings.
- Progression of participants into volunteering or paid work or enrolling on a course.
- Increase in knowledge of stress management techniques.

## About *spear's* research

spear has been commissioned from November 2021 to June 2022 to conduct an independent evaluation of Head 4 Health. The evaluation is designed to evidence impact on key stakeholders, explore challenges faced, showcase effective practice, provide recommendations and develop a framework to support impact capture and Head 4 Health development post-evaluation.

Data informing this report are drawn from 185 Head 4 Health survey returns from 99 participants; three site visits to project sessions; site visit interviews and focus groups with participants and deliverers; and 13 telephone interviews with stakeholders including eight partners and one participant.

This Head 4 Health Executive Summary provides the Context for the project and evaluation, Headline Findings, Recommendations and a Feedback Framework.

#### Key research questions

- How has Head 4 Health impacted engagement, wellbeing and progression?
- What have we learnt about engaging, supporting and progressing people in and through Head 4 Health?

## Head 4 Health Headline Findings

Across 2019-2022, Head 4 Health engaged 721 participants (627 male, 94 female) and delivered 41 cohorts. Targets for 2022-2025 are to engage 800 participants (600 male, 200 female) and deliver 50 cohorts.



Head 4 Health activities include mental health support, stress management and alcohol awareness workshops; inspirational speakers; physical activity sessions; participant interest activity groups; Extra Time sessions and catch-ups; Walk and Talk sessions; and access to one-to-one counselling.



Head 4 Health partners include representatives from the City of Wolverhampton Council; Service User Involvement Team (SUIT); Samaritans; NHS Healthy Minds; Recovery Near You; MIND; Starfish; and Serenity Counselling.



Partners see the unique value of Head 4 Health for the people of Wolverhampton and the city as a whole. Head 4 Health is seen as a trusted model that supports partners' priorities and ambitions and provides a tangible opportunity for collaboration that increases organisational exposure, reach, remit and sustainability.



Participants joined Head 4 Health with low levels of wellbeing and moderate to high levels of stress. After taking part in Head 4 Health, WEMWBS, PSS and CORE-OM scores show a 17% increase in wellbeing, a 17% decrease in stress and a 49% decrease in psychological distress. Participants say their mental wellbeing (61%) and quality of life (63%) is better, they feel more motivated (73%) and they enjoyed taking part (91%).



Head 4 Health is seen to raise participants' aspirations, motivating them to pursue further education, volunteering or paid employment. These developmental opportunities have the potential to support positive, sustained progression in participants' mental health, wellbeing and quality of life.



The breadth and depth of Head 4 Health support, effective partnerships, sense of community, welcoming environment, and club and Premier League brand and assets are seen by participants and partners as key to the impacts observed.



Reported challenges for Head for Health include participant attendance, the association with football for some people, and the pandemic and restrictions on face-to-face delivery.



Partners would like to see greater reach and representation (organisations and underrepresented groups), and participant volunteers co-producing Head 4 Health delivery.



Head 4 Health recommendations include encouraging cohort completers to volunteer for Head 4 Health; providing ongoing support beyond the cohorts; initiating cross-sector partnerships; taking the Head 4 Health offer to targeted communities; collecting, reflecting on and sharing evidence; and building support and advocacy across the spectrum.



Spear centre for sport, physical education & activity research

# Recommendations Realising the Potential of Head 4 Health

## **Empower**



Encourage cohort completers to volunteer for Head 4 Health. Let them inform provision, share their stories, peer mentor others and become advocates. Volunteering develops transferable skills and fosters a sense of empowerment. It allows participants to support a culture of positive change; starting conversations, challenging misconceptions and changing attitudes around mental health.

#### Refresh



Provide ongoing support beyond the lifespan of the Head 4 Health cohorts. Strategies and skills learnt may be forgotten over time or be challenged by new experiences. Offer top-ups or refreshers to help participants revisit newly acquired skills and reinforce behaviour change. Support the community built during Head 4 Health to continue and care for its members.

#### **Collaborate**



Initiate cross-sector partnerships. Develop new relationships with groups and organisations that serve target populations and are invested in building healthier communities. These organisations can help connect you with hard-to-reach groups and increase representation. They can also help promote, and importantly, validate your offer to members.

#### Inform



Take your offer to them. People interact and engage with support services in different ways and may be unlikely to come to you. Go to their community and cultural spaces and to the organisations that deliver services to these communities. Find out where and how to disseminate information and be resourceful in your communications.

#### **Reflect**



Evidence-based decision-making is critical for effective development of Head 4 Health. Look for ways to evidence impact and find out what works, what doesn't, and why. Share this evidence as widely as possible to inform policy and investment and support provision and practice.

## Buil



Build support and advocacy across the board, from policymakers at the top to practitioners on the ground. Show policymakers how Head 4 Health maps to public health priorities and demonstrate to funders how it achieves its goals. Show practitioners how it improves practice and tell end users about the difference it makes to their lives.

## **Head 4 Health Feedback** Framework A Guide For Capturing Impact & Learning From Head 4 Health Why What approach should we nything else we should take? consider? Head4Health Α Q How will we What do we share our need to findings? know? Why evaluate? What data should we



# What approach should we take?

\* Light touch to minimise burden

collect?

- \* Beneficiary-focused to value and engage stakeholders
- \* Sufficient to produce robust, timely and accessible evidence



# What do we need to know? Key Questions

Has Head 4 Health impacted on participants'

- \* Mental, social, emotional and physical health?
- \* Willingness to share experiences, thoughts and feelings?
- \* Knowledge and use of stress management techniques?
- \* Progression into education, volunteering or paid work?
- \* Quality of life?

- \* Demonstrate impact and value for money
- \* Show alignment with key policy priorities
- \* Assess effectiveness of delivery to better meet stakeholders' needs
- \* Support Head 4 Health development and sustainability



# What do we need to know? Secondary Questions

- \* Are there differences in preferences, perceptions and impact between different cohorts?
- \* What is the role of stakeholders, including families, communities and organisations and how could their role and representation be enhanced?
- \* How effective are aspects of our approach, communication and delivery in engaging stakeholders and sustaining engagement and outcomes?



#### What data should we collect?

#### **Monitor outputs**

- \* Cohorts and sessions delivered
- \* Participants engaged
- \* Engagement and representation of hard-to-reach groups (LTBTQ+, ethnic minorities etc.)
- \* Progression into volunteering, paid work or training

#### **Evaluate process and impact**

Use both quantitative and qualitative methods to provide the timely, robust and accessible evidence necessary to demonstrate impact and inform and support Head 4 Health development

#### Consider:

- Surveys
- Interviews
- Focus groups
- Observation
- Graffiti walls
- Diary rooms
- Participant researchers



#### How will we share our findings?

Varying formats and levels of complexity depending on the audience

- Written report
- Infographics
- Slide deck
- Case studies
- **Profiles**
- Video snapshots







- Build survey sample to enable analysis of impact by cohort/subgroup.
- Invest resource in maintaining contact with cohort completers to build the survey sample at follow up necessary to demonstrate sustained impact.
- Seek external expertise (advice, guidance, evaluation or quality assurance) where necessary.

## About spear

The Centre for Sport, Physical Education & Activity Research (*spear*) is located within the Faculty of Science, Engineering & Social Sciences at Canterbury Christ Church University. *spear* undertakes a range of evidence-led 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, Terre des Hommes, Department of Health, Department for Education, Youth Sport Trust, Chance to Shine, Premiership Rugby, Sport Birmingham, parkrun UK and Sport England. Recent work has focused on sport, physical activity, health and wellbeing in schools and communities.

Research conducted by *spear* helps 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.

The Centre for Sport, Physical Education & Activity Research (*spear*)
Canterbury Christ Church University
North Holmes Road
Canterbury, Kent, CT1 1QU

Tel: 01227 922680

email: <a href="mailto:spear@canterbury.ac.uk/spear">spear@canterbury.ac.uk/spear</a>

Twitter: @spear\_news

Head 4 Health evaluation undertaken by *spear* and commissioned by Wolverhampton Wanderers Foundation. Evaluation Report and Executive Summary produced by *spear*.

Authors: Dr Abby Foad and Dr Ashok Patnaik Project Team: Dr Abby Foad, Dr Ashok Patnaik, Dan Stretch, James Fuller, Aidan Ainsley, Hazel Solly, Laura Ackerley and Professor Mike Weed