

# **How physical activity, PE and sport can deliver much needed health, education and employment gains for young people in the digital age**

**Graham Morgan**

**Director**

**Evolve - a Social Impact Company**

# Aim of presentation

- Highlight the **crisis affecting children** and young people
- Stress the **need to accept and embrace change**
- Show a real, sustainable, **working example of innovative thinking** that addresses these issues
- **Feedback, questions and discussion**

LittleVox

CHARLES DICKENS



HARD TIMES

# Young people are our future



Do we care enough  
about the future health,  
happiness and quality  
of life of our children  
and our grandchildren?



## Health and Wellbeing



## Education

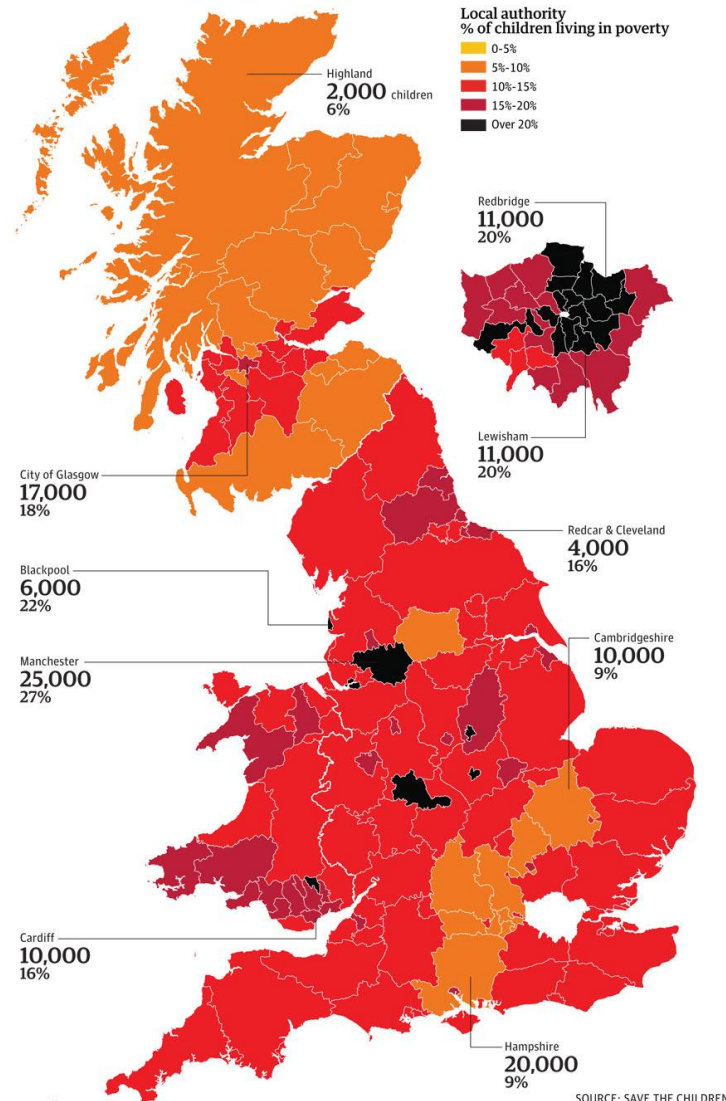


## Employment



# Disadvantaged areas

## Children living in poverty









# Damaged lives



Unfulfilled



Potential

# Disengaged, inactive, helpless





# The UK has the 3rd worst Youth unemployment figures in the EU





Are we witnessing a  
“lost generation”  
globally and nationally?

# Crisis?

## World Health Organisation

***“In all countries, suicide is now one of the three leading causes of death among people aged 15-34 years; until recently, suicide was predominating among the elderly, but now suicide predominates in younger people in both absolute and relative terms, in a third of all countries”.***

# Public, Private, Third Sector



# Public, Private, Third Sector



HM Government



Youth Sport Trust



**FAILED**

Premier  
Sport.org



**mind**  
Mind Exercise Nutrition... Do it!



Association for  
**Physical  
Education**



**evolve**  
A Social Impact Company







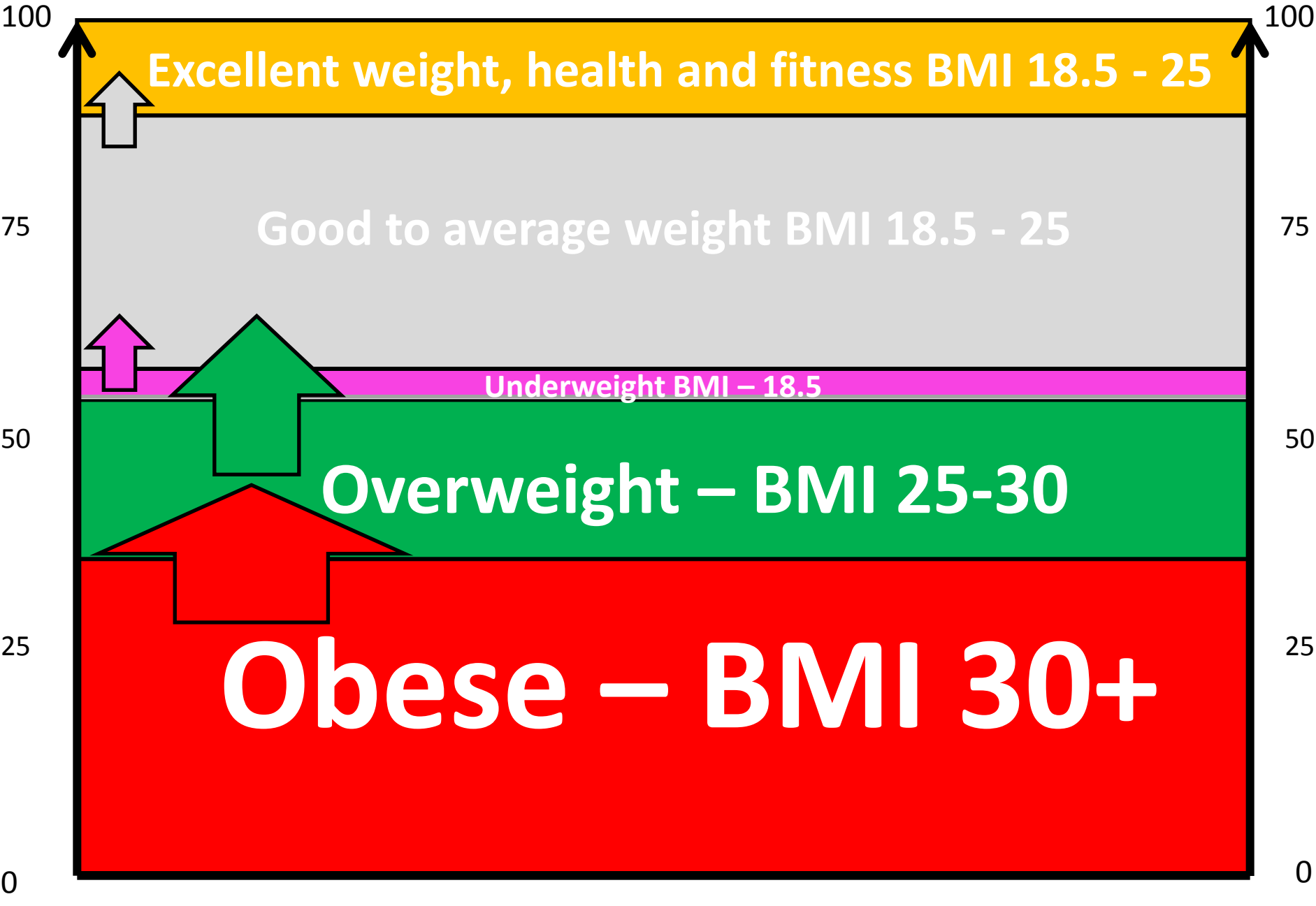
**Sir Liam Donaldson**  
Chief Medical  
Officer  
2009 Report

“By 2050,  
90% of today's children  
will be  
overweight or obese”

# Obesity and Sport



% pupils tested



Excellent weight, health and fitness BMI 18.5 - 25

Good to average weight BMI 18.5 - 25

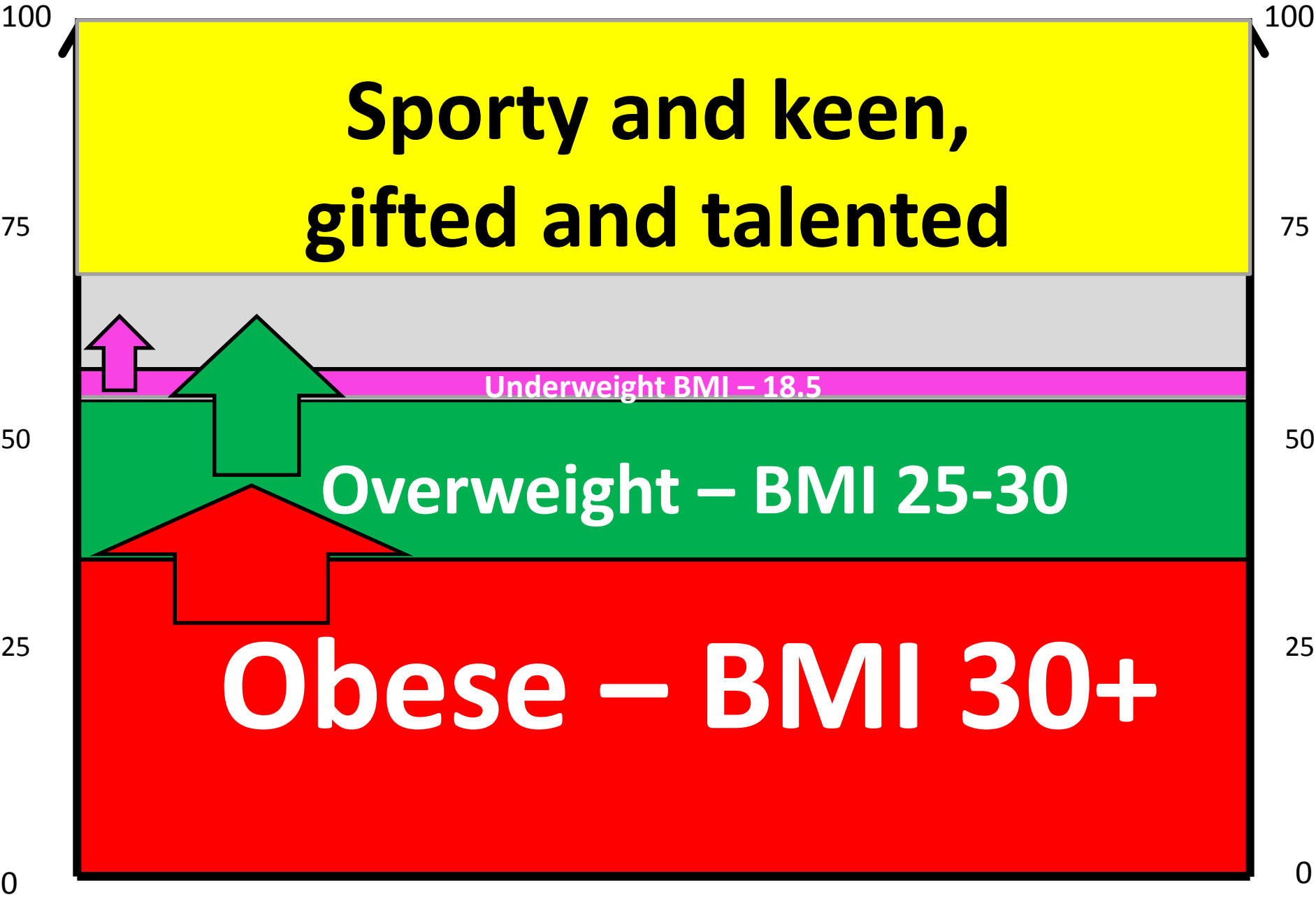
Underweight BMI - 18.5

Overweight - BMI 25-30

Obese - BMI 30+

% pupils tested

% pupils tested



**Sporty and keen,  
gifted and talented**

Underweight BMI – 18.5

**Overweight – BMI 25-30**

**Obese – BMI 30+**



100

100

**Sporty and keen,  
gifted and talented**

75

75

50

50

25

25

0

0

**“Inactive and  
disengaged”**

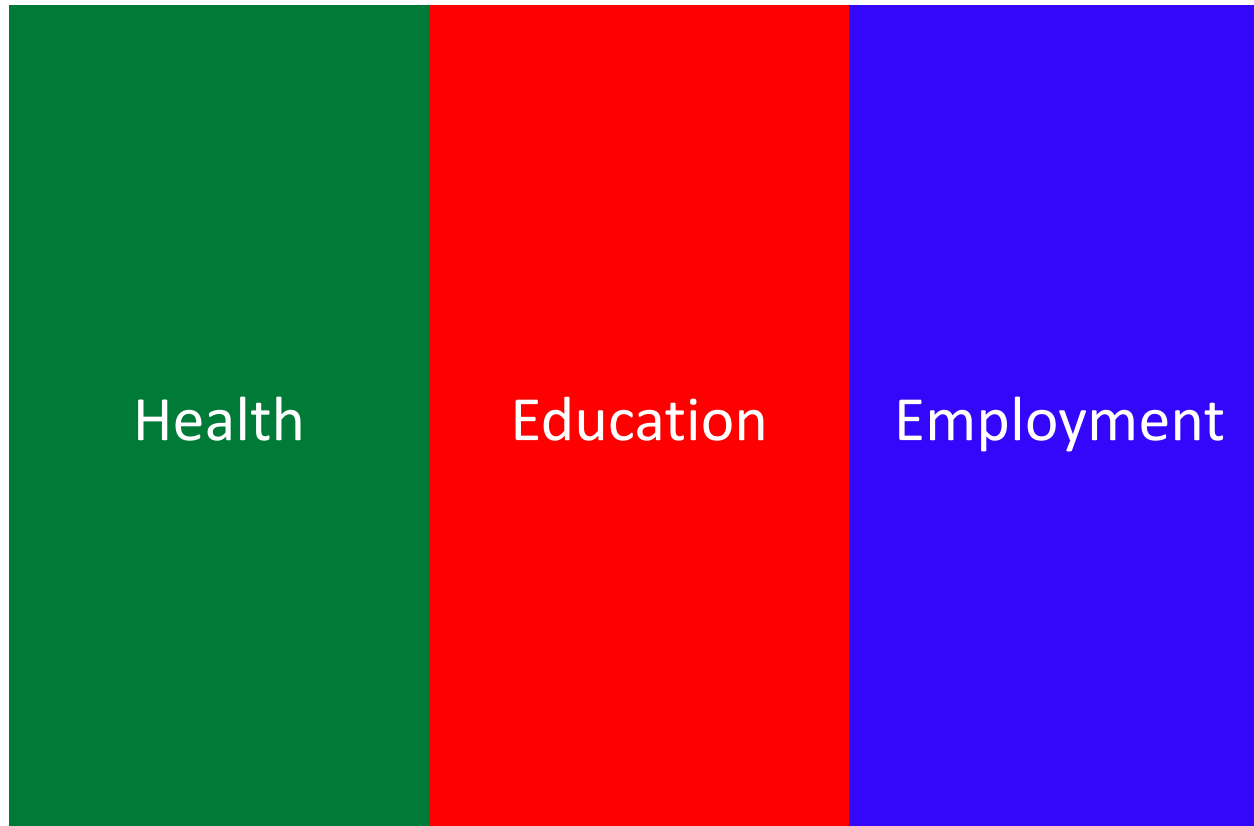
# Traditional thinking

Health

Education

Employment

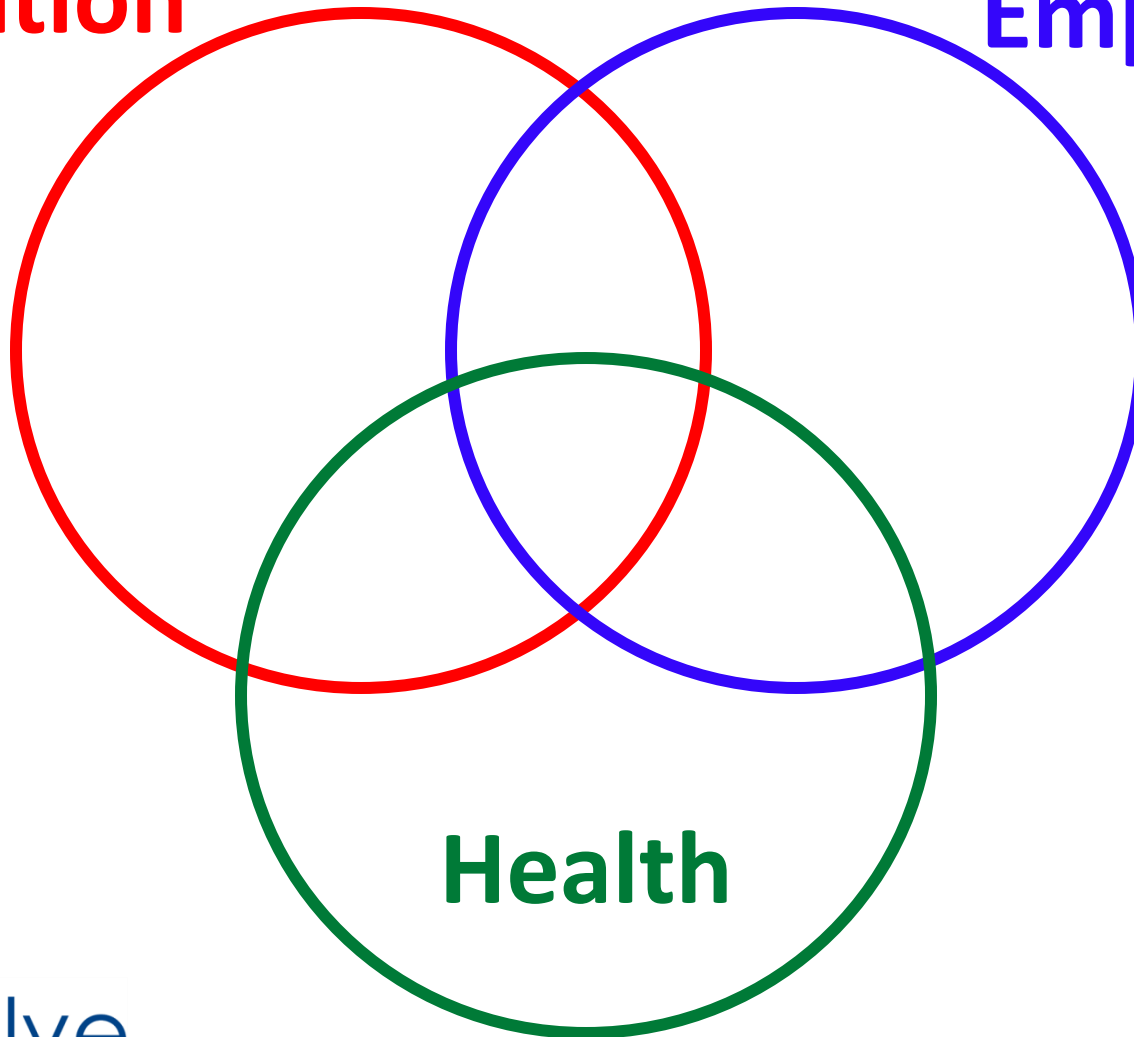
# Better thinking



# Best thinking

**Education**

**Employment**



**Health**



# Changes

- Health – Public Health with LAs, Doctors Commissioning, Health and Wellbeing Boards
- Education – YST/SSP cuts, Academies and Free schools, Pupil Premium funding
- Employment - Employment Opportunities Fund to create new jobs with employers

# Physical activity, PE and Sport



# Physical activity in everyday life

## NOT by:

- Not appreciating benefits
- Serendipity approach
- Random activity
- Left to family
- Left to child
- Overt “Health & Safety” excuses
- Change 4 Life
- After school clubs

## Through:

- Appreciating value
- Strategic thinking
- Focussed interventions
- Inspiring role models
- Compelling programmes
- Everyday reinforcement
- Small challenges
- Rewarding progress
- Encouraging adventure

# Physical Education in schools

## NOT by:

- Current approach to PE
- PE seen as just another school subject
- Poorly trained teachers in primary schools
- Poorly motivated staff
- Thinking Sport is the same as PE
- PPA - Using peripatetic sports coaches as low cost and disposable commodities

## Through:

- New pragmatic approach
- Prioritise Education, Health and Personal Development
- PE as fundamental to support lifelong learning
- PE not Sport focus – physical literacy to breed confidence
- Youthful, specially trained and active Role Models
- Embedded in everyday school life plus special mass events



# Sport in schools

## NOT by:

- Continuing with what has gone before thinking Sport reaches every child
- Thinking Sport is PE and that Sport Coaches are the same as PE Teachers
- Introducing Sport too early in primary schools
- Thinking Sport is about representative school teams
- Thinking Sport is about winning medals
- Following NGB agendas
- Having no significant legacy from 2012

## Through:

- Understanding team sport is a minority activity for the gifted and keen – individual sport
- Changing the role of sport to support PE and Education
- Bridging the skills gap between Sports Coach and Activity Leadership
- Introducing Sport once adequate Physical Literacy has been established
- Putting mass intra school competition before elite inter school competition
- Using Sport to inspire and shape attitudes: Paralympics

**PROJECT**  
**HERO**  
**HEALTH ENGAGEMENT**  
**REAL OUTCOMES**

# Benefits

## Education

**Improved attainment,  
attendance and behaviour.  
Happier, healthier children;  
more ready to learn.  
Support for vulnerable  
children.  
Excellent Transition.**

# Benefits

## Health

**Preventative intervention to  
allow data collection.  
Healthier nation with  
healthier children.  
More active nation making  
better lifestyle choices.  
Save budget for treatment.**



# Benefits

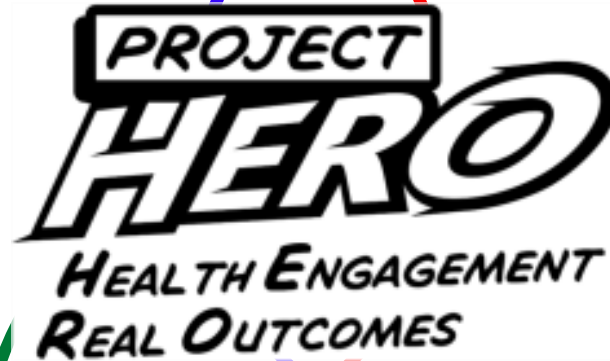
## Employment

**Reduced unemployment and  
more jobs for young people.  
Better vocational training  
and more apprenticeships.  
Better choice of jobs, and  
more fulfilling jobs**

# Term time opportunity

Education

Employment

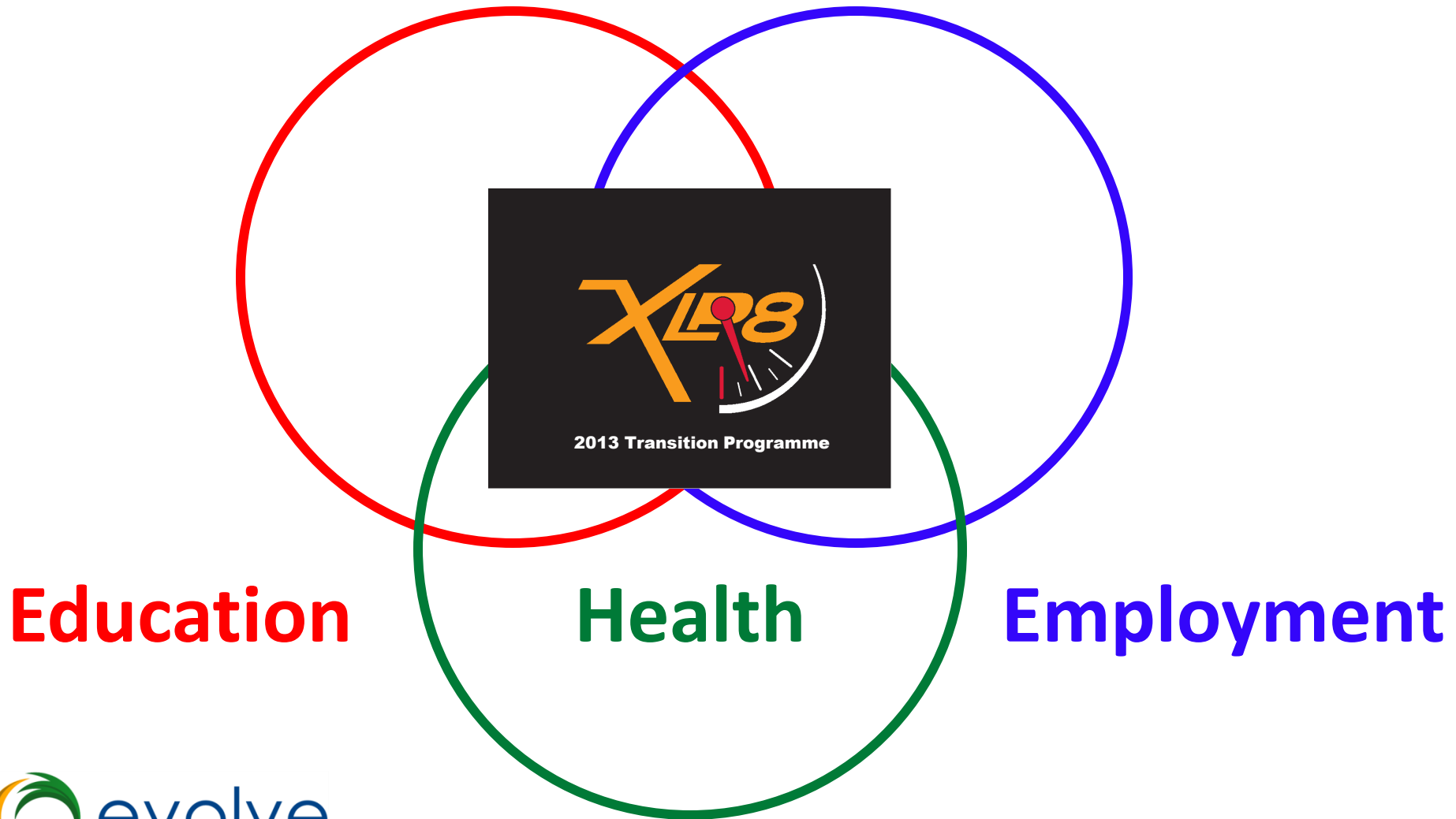


Health

# Project HE:RO concept 2008

- Created to combat rising levels of inactivity and obesity amongst children: add vitality prevent health damage
- Embedded, innovative, preventative intervention
- Working in close partnership with Headteachers for a bespoke delivery in their schools
- Delivered by specially recruited and trained Health Mentors who are embedded into everyday school life
- Using enhanced Physical Engagement and Active learning
- Actively mentoring pupils
- Flexible deployment to suit Headteachers

# Transition/holiday opportunity





## 2013 Transition Programme



# XLR8 Camp Content



Each week long programme has an individual theme e. g. “Superheroes”, “What’s the big idea”, “My future” etc. However, content is developed with the following 3 pillars in mind and fully using ICT:



**XLR8 Talent**



**XLR8 Vitality**



**XLR8 Enterprise**

Whether it’s developing a talent showcase similar to “The Voice” and “BGT”, “Young Apprentice” style team challenges or fun physical games. Each session at XLR8 2012 is bursting with creative fun and each day brings something new.



# **XLR8 Transition Programme 2013**

A comprehensive year long programme of activities designed to address two key issues relating to vulnerable children during the key transition year

- Identify and address any issues or concerns relating to the student's "big step up" to Secondary School
- Support the ongoing academic attainment of the students during this often challenging time

## **3 Phases:**



# About Health Mentors

## Headteachers' testimonials

"All evolve staff are enthusiastic, well trained and act as great role models for our pupils."

**P. Hargrave, Head Teacher - Broughton Junior School**



"I would recommend Health Mentors unreservedly to other schools"

**R. Haselgrove, Head Teacher – Chad Vale Primary School**

"It is early days but our Health Mentor has already created a great atmosphere with the groups he is working with – our children are positively engaged with his activities."

**Stuart Plaskitt – Headteacher Woodseats Primary School**

"Our Health Mentor is like a full time member of my staff without the financial restraints that it might put on me." **J. Edwards, Head Teacher –St. George's CE School**



# More about Health Mentors

## OFSTED FEEDBACK

“The Health Mentors are a key element in the school's provision, not only in providing a **high quality** of basic care for pupils whose circumstances make them **vulnerable**, but also in promoting basic **literacy** and **numeracy** skills through individual support and **providing positive role models in promoting a healthy lifestyle**.

As a result, **the pupils feel safe** and know that there is always someone who will listen.”

- OFSTED report on St George's CE Primary School, March 2011

# Current situation 2013

70+ Health Mentors (50 FTE) deployed

- London, Birmingham, Nottingham, Sheffield, Bradford,
  - Lincolnshire
  - South Yorkshire
  - South and West Wales
- 
- Training planned for further cohorts of 35 Health Mentor Trainees



# Ambition

- Increase take up in schools
- Support more children
- Gain all party support
- Attract corporate spend
- Reduce NHS spending by £Billions
- Improve attendance, behaviour and attainment of pupils in schools
- Create 25,000 + jobs for young people as Health Mentors in schools



**CHANGE  
AHEAD**

# Baroness Sue Campbell



2010: Gove cutting SSP funding

- Over the last 10 years this has become a very important route through which governing bodies deliver their grassroots strategies.
- That's particularly true of Olympic sport.
- The School Sports Partnerships have become an integral part of sports provision.

# Baroness Sue Campbell



2013:

- Thousands of 11-year-olds are 'physically illiterate'
- Olympic legacy could be lost without specialist training for primary teachers
- Some pupils unable to take part in basic sports when they leave primary school

# Governing Bodies: The FA

**Sports Minister  
Hugh Robertson MP**



- “The worst-governed sport in Britain” - Hugh Robertson, 2011
- “Much greater reform in football is needed to make the game inclusive, sustainable and driven from the grassroots, where it should be.” John Whittingdale, Chair of House of Commons Culture, Media and Sport committee.

# **NICE: National Institute for Health and Clinical Excellence: 2009**

Recommendations made in 'Promoting physical activity, active play and sport for pre-school and school-age children in family, pre-school, school and community settings'. 15 point guide diagram.

The guidance is for all those who have a direct or indirect role in – and responsibility for – promoting physical activity for children and young people.

This includes those working in the NHS, education, local authorities and the wider public, private, voluntary and community sectors.



# Shared funding

## Education

**Improved attainment,  
attendance and behaviour.  
Happier, healthier children;  
more ready to learn.  
Support for vulnerable  
children.  
Excellent Transition.**

# Shared funding

## Health

**Preventative intervention to  
allow data collection.  
Healthier nation with  
healthier children.  
More active nation making  
better lifestyle choices.  
Save budget for treatment.**

# Shared funding

## Employment

**Reduced unemployment and  
more jobs for young people.  
Better vocational training  
and more apprenticeships.  
Better choice of jobs, and  
more fulfilling jobs**

# Barriers to creative commissioning

- Continue throwing good money after bad
- Fear of change
- Treatment versus Prevention
- Protectionism
- Vested interests: NHS, “Big Pharma”
- Narrow, specialist views
- Focus on the problem – not the solution
- Meanwhile the NHS heads towards bankruptcy

# Opportunity

- Education spend to be complemented by Health and Employment
- Significantly reduce the cost to schools
- Fuel accelerated growth across the country
- Inspire millions of active, engaged young people thereby preventing damaged lives
- Save NHS £billions
- Create more jobs



# Michelangelo

*"The greatest danger for most of us is not that our aim is too high and we miss it, but that it is too low and we reach it."*





# Thank You