



SCORING FOR Health



PRACTITIONER'S
GUIDE

ENGLISH
VERSION





SCORING FOR *Health*



**PRACTITIONER'S
GUIDE**

TABLE OF CONTENTS

1	INTRODUCTION	6
2	ABOUT EFDN	7
3	ABOUT THE SCORING FOR HEALTH PROGRAMME	8
4	IMPORTANCE OF MOVEMENT, NUTRITION AND BEHAVIOUR	9
5	SOCIAL NEED AND HEALTH IMPACT	11
6	MONITORING AND EVALUATION	12
7	PARTNERSHIPS AND FUNDING OPPORTUNITIES	13
8	MARKETING AND COMMUNICATION	14
9	LESSON PLAN	15
10	HOW TO PLAN YOUR SCORING FOR HEALTH PROGRAMME	17
11	HOW TO DELIVER YOUR SCORING FOR HEALTH PROGRAMME	18
12	ADVICE FROM PARTNERS	19
13	PROJECT PARTNERS	25



1

INTRODUCTION

The focus of the Scoring for Health programme is to educate children aged 7–14 and their parents on the importance of adopting a healthy lifestyle, using sport as a medium. The original programme was coordinated by the European Football for Development Network (EFDN) and co-funded by the UEFA Foundation for children and the European Union through the Erasmus+ sports programme. The Scoring for Health programme was delivered by eight organisations from six different countries in Europe, over a three-year period from 2019–2022.

Each Scoring for Health programme is a partnership between a professional football club and a cluster of schools, the majority of which have been identified as socially or economically disadvantaged. However, the programme is likely to have greater impact when other local or regional organisations play an active support role, including housing associations, schools, other voluntary organisations, charities and local businesses. Going forward, the programme will be embedded as much as possible in ongoing lifestyle interventions in the municipalities of the football clubs involved.

Childhood obesity

One of the drivers behind the programme is the recent work by the World Health Organization (WHO), which shows that obesity in children remains an important public health problem in Europe. Childhood obesity is associated with a wide range of serious health and social consequences, including a higher risk of premature death and disability in adulthood.

THERE ARE FOUR OVERARCHING FACTORS THAT CONTRIBUTE TO THE PROBLEM:

1. Poor eating habits;
2. Decrease in physical activity;
3. Increase in sedentary behaviour;
4. Lack of adequate physical environment or secure spaces to play.

THE PROGRAMME AIMS TO TACKLE THIS CRITICAL ISSUE OF CHILDHOOD OBESITY THROUGH FIVE PRINCIPAL GOALS:

- To encourage awareness of healthy lifestyles among children and their parents;
- To allow participants to experience that sport and exercise are healthy and enjoyable;
- To increase physical activity among children (25% more meeting HEPA Guidelines);
- To promote healthy dietary behaviours based on the guidelines for healthy nutrition;
- To improve children's physical fitness.



2

ABOUT EFDN

The European Football for Development Network (EFDN) is a group of community-engaged professional football clubs and associations. In almost every country across the continent, a growing number of football clubs and associations are showing their social responsibility by working in partnership with public, voluntary and commercial organisations to improve the lives of local people. These football clubs and associations, with national and international profiles, facilitate access to huge numbers of disadvantaged – mainly young – people, who are often hard to reach or are not motivated to participate in mainstream society.

Better cooperation between clubs and associations in each country over the last 30 years has led to the creation of the EFDN, which has enabled knowledge sharing on a much broader scale. As well as sharing best practices, the EFDN has organised European programmes on youth employment, education and broader social inclusion issues.

Furthermore, many of the clubs and associations have set up exchange programmes for staff, volunteers and participants to enhance the quality of their own local initiatives. These clubs and associations have a commitment to sharing knowledge, innovating and replicating programmes that have been proven to deliver positive outcomes for their participants. They believe that the key to their long-term success lies in working effectively across their own communities, countries and the continent.

Community Champions League programme

The EFDN believes that football has the potential to change lives, and that clubs and associations work best when they collaborate. The Community Champions League programme is an example of how this can be achieved. Working with the Football League Trust and a carefully selected group of European partners, the Community Champions League programme seeks to address the overarching European policies in the field of sport through the development of a consistent and measurable European model for the delivery of sport-inspired social inclusion programmes. The Community Champions League programme's objectives are influenced by the guiding principles of the EU Work Plan on Sport:

- > To ensure a cooperative and concerted approach among project partners from EU member states in order to deliver added value in the field of sport at EU level;
- > To address the transnational challenges faced by organisations seeking to deliver sport-inspired social inclusion programmes using a coordinated EU approach;
- > To use the power of sport (and football in particular) to give impetus and prominence to the European Commission's work in this field;
- > To provide clear and measurable evidence that can contribute to future EU policies in the field of sport.



3

ABOUT THE SCORING FOR HEALTH PROGRAMME

Scoring for Health encourages children aged 7–14 and their parents to adopt a healthy lifestyle and raises awareness of healthy nutrition. The programme runs for 20 weeks, during which time various activities are delivered by the participating football club in cooperation with local schools and health organisations. Schools selected to participate in the programme are often located in disadvantaged neighbourhoods or in areas where the national or regional health agency indicates that healthy lifestyle initiatives are needed. The programme starts and finishes with a sports event at the club's stadium or academy.

Programme kick-off

At the start of the programme, students sign a healthy lifestyle contract with their favourite players at the kick-off event. This contract is the promise to pursue a healthy lifestyle during the 20 weeks of the programme and beyond.

Week by week

Every week, attention is paid to eating habits and physical exercise at schools in order to motivate students and teach them which types of food are nutritious and which types of food they should reduce or avoid. External stakeholders come to schools once a week to support the teachers with the delivery of the programme. The students participate in classes on nutrition, cooking, healthy eating, physical activity, football games and sports sessions.

Programme conclusion

At the end of the programme, students participate in the final event organised at the club's stadium. Once participants have accomplished their second fitness assessment, first-team players or the team manager thank the students for their participation, encourage them to stay fit and eat well, and make them aware that they can influence others in adopting a healthy lifestyle.

During the closing ceremony, the students receive a diploma, which acknowledges their successful participation in Scoring for Health. This gives the students physical proof of their participation, and they can proudly show it to their parents or classmates.



4

IMPORTANCE OF MOVEMENT, NUTRITION AND BEHAVIOUR

Despite various actions at European level to reverse the trend of obesity, the proportion of the population who are overweight or obese remains worryingly high in adults, children and young people alike. This trend is especially alarming for children aged 5–17, and is primarily caused by unhealthy dietary habits.

Lifestyle analysis has uncovered an imbalance: on the one side, excessive intake of saturated fats, trans fats, sugar and salt (coming from highly processed, energy-dense manufactured foods and sugar-sweetened beverages) combined with an inadequate and declining consumption of vegetables, fruits and whole grains on the other side.

It has been widely and scientifically proven that obesity in childhood and adolescence has immediate implications on health, well-being and even social life. Without a personalised external intervention (nutritionist, doctor, physical activity coach, etc.) to target this vulnerable group, risk factors such as unhealthy lifestyles, inactivity and/or eating disorders could continue throughout adulthood. Promoting early-life nutrition, preventing childhood obesity and supporting the development of healthy dietary preferences from an early age are therefore crucial.

Child Obesity Surveillance Initiative

To monitor and evaluate the development of these health issues, the Child Obesity Surveillance Initiative (COSI) was introduced as a uniform survey methodology in several European countries. In 2010, the COSI evaluated that around one-third of children in Europe aged 6–9 were overweight or obese – a significant increase from one-quarter of children in 2008 – although this proportion had stabilised by 2014. The COSI’s analysis in 2014 demonstrated a higher prevalence of obesity in southern European countries and among groups of low socio-economic status. In addition, the 2013–2014 study of health behaviour in school-aged children showed that 15–39% of 11-year-old boys and 9–32% of 11-year-old girls are overweight or obese.

Socio-economic factors

Whereas nutritionists defend the relationship between diet and health, socio-educational specialists link people’s diet and food preferences to social, economic, climatic and geographical factors, including their religion and customs. In other words,

food and eating habits are also the expression of a multitude of cultural and social identities. Eating habits, or more specifically food consumption and nutrient intake, are influenced by socio-economic determinants. Indeed, the 2018 COSI results indicated that the most influential factor is education, followed by place of residence, household income, occupational status, ethnic group and wealth. Before any community-based health initiative is carried out, we need to take into account the high cultural diversity of Europe’s inhabitants, as well as their social and physical environment.

As mentioned in the introduction, four overarching factors contribute to childhood obesity:

1. Poor eating habits

In EU member states, only one-third of girls and a quarter of boys aged 15 reported eating at least one piece of fruit daily. However, there is a significant gap between European countries: between 19% and 81% of parents indicated that their children consume fruit every day, and a similar variation was found when they were asked about vegetables (between 9% and 74%). Regarding snacks and soft drinks, more than half of the parents surveyed said that their children would consume them “Never or less than once a week”.

Moreover, as a result of social, cultural and environmental changes over recent decades, eating out and consuming ready-prepared meals have both increased. As a result, young people in Europe consume more food outside the home. This change in lifestyle has perhaps been adopted due to educational or professional issues: for example, the younger generation’s schools, workplaces (apprenticeships or traineeships) and/or hobbies are further away from their homes. Several studies have shown that eating outside the home correlates with higher calorie intake or poor nutritional intake in Europe. More fast-food and substantial amounts of sugar-sweetened beverages are consumed and marketed by the food industry instead of healthier choices. This impacts health, as studies have noted the relationship between increased out-of-home food consumption and the rise in obesity rates.

2. Decrease in physical activity

Lack of physical activity is closely linked to the energy imbalances resulting in children becoming overweight and obese. On the flip side, physical activity benefits children's physical and mental health. The WHO recommends children do at least 60 minutes of moderate-to-vigorous physical activity per day, but only a small proportion of children currently meet this recommendation. Encouraging families to walk or cycle to school would help considerably. Children should also be encouraged to play actively by taking part in activities like running, playing outside or playing indoor games that require movement instead of activities that require no physical exertion. Studies have shown a 50% decrease in the average level of physical activity for boys between the ages of 11 and 15. The results are even more dramatic for the girls: in most EU countries, 15-year-old girls do less than half the physical activity of 11 year-olds. And girls in Austria, Ireland, Romania and Spain show a decrease of over 60%.

3. Increase in sedentary behaviour

Watching television and spending time on computers or video games have become popular pastimes for children and young people. These sedentary habits are now recognised as independent risk factors for several diseases, and are known to have harmful effects on the eating habits of children and young people. Their association with greater consumption of sugar-sweetened beverages and the constant exposure to online marketing for unhealthy products are unquestionably factors behind child obesity and non-restorative sleep, which negatively impacts children's development and growth.

4. Lack of adequate physical environment or secure spaces to play

Unfortunately, urban planning in many communities and neighbourhoods offers little to no safe spaces for children and young people to be physically active in their free time or on their way to and from school. When asked about barriers to being active, limited availability of space and equipment, personal health condition, school curricula and other competing pastimes are mentioned most often.

Conclusion

Problems related to obesity and physical inactivity tend to start in childhood. Given that eating and physical activity habits are established at an early age, addressing the issue of healthy eating and physical activity during this period aims to help children and their families integrate and maintain healthy lifestyles throughout their daily lives. By learning and adopting healthy habits when young, the probability that such habits will be sustained into adulthood is greatly increased. Furthermore, the promotion of a healthy diet and physical activity during childhood not only contributes to better mental, social and physical health during this stage of life; it also improves capacity to perform daily activities and sets the basis for enhanced health, contributing to living better for longer.

Success factors

To be the most effective, nutrition and physical activity programmes should:

- > **Be personally relevant or awaken curiosity and interest;**
- > **Be clearly understandable for all participants e.g. using concrete foods as examples (pasta) rather referring to nutrients (carbohydrates, fatty acid, saturated fat, carboxylic acid, etc.) in order to be comprehensive and accessible for everyone;**
- > **Portray consistent messages, emphasising the benefits of changing habits and addressing barriers in order to promote immediate and sustainable dietary/physical activity changes.**

5

SOCIAL NEED AND
HEALTH IMPACT

European football clubs already deliver a range of programmes that address one or more social issues. At the same time, the progression of obesity and sedentary lifestyles throughout the European population has dramatically increased, leading to national healthcare systems becoming overwhelmed in the near future. There is therefore a growing social need for a health programme targeting obesity and inactivity of primary school children in a fun, informal, sustainable way. Football clubs can fulfil this need.

The problem

Digital and online marketing of products high in fat, sugar and salt affect children's food preferences, dietary behaviour and intake, leading to childhood obesity. The danger of these persuasive techniques appears on multiple media, such as television or social media, which misrepresent the products' real effects on health. It is therefore essential to make children aware of the true consequences of the consumption of these products – ideally by reducing their exposure to them. At the same time, the gap between different groups or social classes in society has grown over recent years. As a result, not everyone has access to sports/free-time activities that allow for physical exercise or fresh, natural and healthy food.

**SCORING FOR HEALTH CLUBS AND SCHOOLS WILL:**

- Understand how to overcome barriers to participating in sports;
- Have the tools to change unhealthy food habits;
- See diversity as a means to explore engagement with hard-to-reach populations;
- Develop transferable skills, methods and approaches;
- Directly benefit and impact children and young people in the wider community.

The solution

Elite and grassroots football clubs have the power to touch a wide variety of people. Clubs can unite communities, act as spokespersons for healthy messages, and impact behaviours. The Scoring for Health programme therefore aims to target not only schoolchildren, but also to promote the programme's educational messages, resources and methodology at home – having an indirect impact on the rest of the family and the community. The WHO has repeatedly suggested that school, food and nutrition represent the optimal trio on which educational health initiatives should be based. Schools are an appropriate environment to set learning and development opportunities towards healthy dietary habits, or to teach the skills to increase future nutrition literacy and capacity. In this way, school nutrition policies, courses or concrete activities (e.g. cooking workshops) and targeted external interventions in schools can improve knowledge, preferences and behaviour towards food.

6

MONITORING AND EVALUATION

To provide evidence of the impact that your Scoring for Health programme is having on the health and social well-being of participants, you can implement various monitoring and evaluation tools. We suggest you create two questionnaires: one to be filled in before participants start the programme and one to be filled in at the end. Be transparent about why you're asking them to complete the questionnaires and what you intend to use the data for. Various physical condition indicators and health determinants will be measured, collected and calculated (weight, height, speed, balance, etc). This evaluation will provide an instant analysis of the child's fitness, and offer a scientific basis for tracking their progress.

Data collection

It takes some time and effort to collect data from the participants, but it's worth it. Collecting data allows you to

provide participants with information on their progress, and indicate when they have been able to achieve their goals. Data collection is also essential to the sustainability of your Scoring for Health programme. When collaborating with potential partners such as health associations or sponsors to raise funds, you will be able to demonstrate how your Scoring for Health sessions are having an impact on the participants.

When designing the questionnaires, make sure the questions are formulated appropriately for the age group. Otherwise, the children may not be able to answer clearly and the results may be unusable. If possible, fill in the questionnaires together with the children in small groups, taking time to go through the questions with them. In the appendices, you can find examples of pre- and post-programme questionnaires which are identical for both phases.



7

PARTNERSHIPS AND FUNDING OPPORTUNITIES

Developing partnerships and funding opportunities are critical elements in supporting the creation of your Scoring for Health programme. Working with partners on the project can have massive benefits for your delivery, including extending the programme beyond the 20 weeks.

Programme partners

Programme partners are individuals, groups or organisations in the community that have an impact on the delivery of your Scoring for Health programme, or who will be affected by the outcome and objectives of it. They are primarily stakeholders who have a vested interest in the social impact of your programme. The examples of partners below can be very valuable to your programme delivery, as they can facilitate and increase the potential impact of your programme. Partners can also supply several resources that you may need during your sessions, such as equipment, facilities or health advice. It could also be a good idea to set up a Steering Committee, which can contribute to the stability of the delivery and objectives of the programme, ensuring sustainability for a shared version.

Local government

Keeping local government and municipality informed about the delivery of your Scoring for Health programme can be a real opportunity. Your local municipality can help you with booking facilities, potentially at a reduced rate. They can also inform you about other organisations that could be interested in helping out.

Local community football and sports clubs

Partnerships with community football and sports clubs can be valuable due to their resources, such as staff members, nutritionists, coaches or sports psychologists.

Business partners of the club

Football clubs have business partners who have different types of resources at their disposal – including financial. Club partners are also a source of incentives that could motivate students: for example, the class with the most improvement could win tickets for a game at the stadium.

Health-related services/organisations

Health organisations can be a crucial element of your programme. They can provide additional information related to nutrition and health. Moreover, you can invite them to contribute input for your sessions: for example, they can give you advice on the benefits of certain food groups.

Sports equipments companies

Companies specialising in sports equipment might also be good partners for your programme. They could provide equipment to participants, such as sports kits, water bottles or materials for outdoor activities.



8

MARKETING AND COMMUNICATION

It's a good idea to create informational content that is simple to understand. The goal is to increase awareness of the programme, promote the kick-off event, and raise awareness about the importance of healthy eating and exercise.

The Scoring for Health programme should be marketed to young people and their parents both through traditional forms of marketing, such as in local media, outreach and working through established local organisations, and through social media. Social media channels can be a really efficient tool through which to attract your target group, most of whom are on social media regularly, as well as potential programme partners. Alternatively, you could reach out via matchday programmes, by handing out flyers in the local area or by visiting schools and community centres.



9

LESSON PLAN

This section covers the 20 weeks of the Scoring for Health programme, lesson by lesson.

Lesson 1

In this first lesson, the teacher tells the class that the school is participating in the Scoring for Health project. The students learn about what the project involves and what's expected of them over the coming 20 weeks – including agreeing on goals, both as a group and individually. The goals are defined and agreed in the first lesson and taken to the kick-off session the following week, where the contract is signed by the students and a football player from the participating football club. Students work together on their goals until the final lesson. Each week, the teacher and students will assess their progress against the group goal, and that progress will be visualised via a points system that each school develops for themselves.

Lesson 2

The big kick-off event takes place in the second lesson, during which all the students and teachers meet in a large outdoor sports area. They do sports together and sign the contracts with the goals for the coming weeks. It's also a good moment to give all the students a Scoring for Health t-shirt.

Lesson 3

After the official kick-off event the week before, the programme starts in lesson 3. The students have agreed on common and individual goals. In order to make the goals measurable, a physical activity test takes place during this lesson, which is repeated again at the end of the programme. There are three different tests to choose from – the 4ss Test, Cooper Test and Yo-Yo Test – depending on the resources available.

Lesson 4

A healthy breakfast ensures a good start to the day. In lesson 4, students learn what makes a healthy breakfast, and they look at the breakfast habits of the class. In order to make the lesson as effective as possible, a communal breakfast is provided. This allows the content of the lesson to be discussed and applied in practice. For this purpose, you should discuss in advance what makes up a healthy breakfast so that the students can all bring something to eat. There are several breakfast quizzes available that can be used interactively.

Lesson 5

In this lesson, an inventory is made of the physical activity habits of the students, based on a questionnaire that they filled in at home with their parents/guardians and later discuss in the classroom. A staff member should also give a lesson later in the week about games during playtime. The students learn more about healthy and responsible exercise, and are introduced to three methods to implement this: injury prevention, warming up and cooling down.

Lesson 6

In lesson 6, the students learn about healthy eating and conscious food choices. They discuss the Eatwell Guide, what makes food healthy, and which choices are responsible. The lesson prepares students for the following week, when they will visit a supermarket. The students also learn how to read and understand food packaging in order to make healthy choices. Ask students to bring in their own packaging to discover what's in their food.

Lesson 7

The students visit a supermarket and are guided through the various aisles by a health service employee. The tour should be organised in groups so that all students can benefit. In addition to the fruit and vegetables aisle, the students should learn other skills and become more aware of their shopping habits.



Lesson 8

In this lesson, students gain important information about healthy snacks: for example, by playing the sugar cube game (please see the teacher manual).

Lesson 9

In lesson 9, the students have the opportunity to play sports or games together outside – using limited resources. They can choose a game from the workbook to play with a staff member.

Lesson 10

At the beginning of programme, goals were set individually and as a group. In this lesson, everyone discusses whether the goals have been achieved so far, to what extent they've been achieved and how to set future goals. With the help of the previously developed points system, progress for the class can also be tracked visually.

Lesson 11

In lesson 3, the students took a physical activity test for the first time. In lesson 11, the students take the same physical activity test again. The challenge is to improve against the first test and to notice whether their fitness, health or mobility has changed. It's best to let the students know one day before the test takes place.

Lesson 12

In this final lesson, the students go to a sports facility or large pitch in the community, where an announcement is made about which class has achieved the most points (or other measurement of success). The students also receive their diploma, which acknowledges their successful participation in Scoring for Health.



10

HOW TO PLAN YOUR SCORING FOR HEALTH PROGRAMME

For schools

Various criteria should be taken into account when selecting and contacting the schools to participate in the programme. Children in disadvantaged neighbourhoods should be the main beneficiaries, so it makes sense to select schools that are located in economically less developed areas.

The programme should begin shortly after the start of the new school year, so you should make contact with the selected schools a few weeks before that to arrange the project coordination. In many cases, schools may prefer to leave the primary responsibility with the football clubs.

In cooperation with the school, specific classes must be selected for the programme. The teachers can give advice on which classes or children would benefit most from participation. In addition, a decision must be made as to which age group to work with. Note that with younger children, a simpler approach is needed – especially when it comes to the questionnaires.

Make sure you also check the location of the activities with the schools: Are there enough sports facilities available or do the

activities need to be moved to another facility? If necessary, a briefing can be given to teachers shortly before the programme starts. There is also a Teacher’s Manual that can be distributed.

For football clubs

The participating football club should think about the best location for the kick-off event to take place. Locations around the stadium are particularly popular, as this naturally generates enthusiasm among the students. Note that the integration of professional players is part of the programme, and should be planned with plenty of time.

After the classes have been selected, the club will have a good idea of how many coaches are needed. The coaches should receive a briefing before the start of the programme to help them understand the content and purpose of the project, which will ensure better implementation.

Be sure to keep in touch with the coaches at all times so they know who to contact if they have any questions.



11

HOW TO DELIVER YOUR SCORING FOR HEALTH PROGRAMME

The coaches' role

The coaches have the main responsibility for delivering the lessons, as they are best equipped to help the participants achieve their objectives. In order to achieve the best results, coaches must create a safe atmosphere for the students so that they feel comfortable and gain the full benefit from the project. Coaches also need to be able to fulfil the role of entertainer – to make the sessions approachable, fun and engaging – in order to help the participants stay motivated. The coach must have a good rapport, understanding and trust with children and adolescents, and ideally should be an excellent communicator.

Smart goals

The creation of goals with the participants is an important part of the delivery of the programme. The lesson in which the goals are determined should therefore be given a special focus by the coach. All coaches should engage with the students in order to set up specific and feasible goals for each of them – being careful not to set unrealistic goals. The goals can of course be adjusted by the students in cooperation with the coach over the course of the programme, in order to make sure that they are specific, measurable, achievable, relevant and time-bound.

Parents and teachers

Another important factor for success are the parents and teachers. Integrating both profitably into the project is therefore crucial. Teachers can help with implementation because they know the students better. A parents' evening or day can help to ensure that the parents also receive important information on the subject of healthy nutrition and exercise. After all, children spend a large part of their time at home and depend on their parents for the food they eat. The integration of parents can therefore be seen as critical to the programme's positive impact over the long term.

Homework assignments

The students are used to being given homework from school and completing it by the next lesson. To keep the students engaged with the programme from one week to the next, it's a good idea to set small homework assignments. For example: set movement tasks that the students are not yet very good at; this enables them to take initiative, learn something new, and create beneficial habits that could last a lifetime.



12

ADVICE FROM PARTNERS

Partners who have already delivered the Scoring for Health programme shared their lessons learned.

1. MAKE SURE EVERY CHILD FEELS INCLUDED BY PLAYING GAMES AND ACTIVITIES IN WHICH EVERYONE IS ABLE AND WILLING TO TAKE PART.
2. ASK QUESTIONS.
3. USE SMALL GROUPS TO ALLOW FOR RECIPROCAL LEARNING. GATHER FEEDBACK FROM TEACHERS.
4. USE KINETIC LEARNING TECHNIQUES.
5. PROVIDE OPPORTUNITIES FOR THE CHILDREN TO GET MOVING FOR HALF AN HOUR EVERY SCHOOL DAY.
6. INVITE INTERESTED SCHOOLS TO A GENERAL INFORMATION EVENT.
7. IMPLEMENT VARIOUS OTHER SESSIONS IN ADDITION TO THE 12 LESSONS.
8. INVOLVE PLAYERS FROM THE FIRST TEAM (BOTH MALE AND FEMALE).
9. MAINTAIN REGULAR CONTACT WITH THE TEACHERS.
10. PROVIDE LOTS OF CONTACT MOMENTS WITH THE STUDENTS.
11. PLAN WELL BEFORE THE START OF THE PROGRAMME.
12. ENLIST THE HELP OF GOOD COACHES – THE PROGRAMME’S SUCCESS DEPENDS MOSTLY ON THEM.
13. GET FEEDBACK FROM SCHOOLS/TEACHERS/STUDENTS.
14. BE PATIENT AND TRUST THE PROCESS.
15. IMPLEMENT SEVERAL SMALL GROUPS IN ONE SCHOOL.
16. ENSURE COACHES ARE COMMUNICATING EFFECTIVELY.
17. PROVIDE PARTICIPANTS WITH GIFTS.
18. USE EXTRA VIDEOS VIA YOUTUBE OR FILM PLAYERS.
19. KEEP PROGRAMME PARTNERS UP TO DATE.
20. DON’T PLAY THE SAME GAMES/ACTIVITIES EVERY WEEK.
21. THERE IS LESS SPACE AVAILABLE IN CLASSROOMS FOR MOVEMENT EXERCISES.
22. COOPERATION BETWEEN THE CLUB AND SCHOOLS COULD BE MORE INTENSIVE.
23. IF TEACHERS ACTIVELY STAND UP AND ENCOURAGE CHILDREN TO PARTICIPATE, A MUCH LARGER GROUP OF CHILDREN CAN BE REACHED.
24. DON’T ASSUME THAT TEACHERS WILL SEND PHOTOS OF THE LESSONS AND THAT STUDENTS WILL FILL IN THE QUESTIONNAIRES.
25. LONG QUESTIONNAIRES WITH COMPLICATED QUESTIONS DON’T WORK – BEAR IN MIND THAT PROJECTS TAKE PLACE IN DEPRIVED NEIGHBOURHOODS.
26. NEVER LET THE TEACHERS TAKE CHARGE AND CHANGE THE DIRECTION OF THE PROJECT.
27. MAKE SURE YOU HAVE SUFFICIENT SUPPORT STAFF (ROLE MODELS).
28. TOO MUCH THEORETICAL INPUT AT ONCE IS CONFUSING FOR STUDENTS.
29. KEEP SESSIONS SHORT, FUN AND INTERESTING.
30. DON’T WAIT FOR SCHOOLS TO RESPOND UNTIL THEY RESPOND, BUT BE PROACTIVE.

CHALLENGES

Of course, any programme implementation brings challenges. Below are several of the key challenges experienced to date:

Cultural differences

There may be cultural or language differences in the class, which can be challenging to manage. The theoretical content should therefore be kept simple and understandable for everyone, no matter how well they speak the language. When it comes to outdoor games, care should also be taken to keep them simple. It's important to keep them inclusive, as Scoring for Health is a programme that should be for everyone.

Theoretical content

The theoretical part can be a challenge for coaches depending on their enthusiasm for the topic, but it is an essential part of the project. Coaches need to find a way to make the theoretical parts of the programme more approachable, to ensure students are able to retain as much information as possible.

Cooperation between schools and clubs

Football clubs are dependent on cooperation and commitment from schools. Some schools lack the necessary understanding

of the relevance of the subject, which means enthusiasm on the part of the schools can suffer. Good cooperation between schools and clubs is important for successful implementation of the Scoring for Health programme.

Questionnaires

In order to be able to draw conclusions from the project, a pre-programme and post-programme questionnaire was integrated, in addition to the physical activity assessment, in order to measure progress. During the implementation of the questionnaire, many schools encountered problems with the number and difficulty of the questions. The questions should be kept as simple as possible and, if necessary, be reviewed personally with the students.

Supermarket visit

For some schools and clubs, the visit to the supermarket turned out to be a challenge. Firstly, the logistics of getting all the students to the supermarket and creating added value posed a problem. Secondly, there were no suitable supermarkets in the immediate vicinity. The possibility of bringing the supermarket into the classroom was therefore introduced as another option.



PARTICIPANT TESTIMONIALS

“A number of our pupils really struggle to focus and engage in the classroom environment, but the Scoring for Health programme really grabbed and held their attention in a way that no other programme has before.”

“What a fantastic programme! Our class loved participating and Friday mornings quickly became the highlight of their school week!”

“It was cool that the coaches played a lot of games together with us.”

“The Cooper Test was the highlight!”

“The games with the food pyramid were really cool!”

“The kids are motivated to deal with the topic of nutrition due to the playful design of the sessions.”

“It’s great that the content of the lessons can be linked with school content.”

“Good programme: the competition motivates the children to deal with the topic of nutrition.”

“The children can learn important information about healthy nutrition and exercise in a playful way.”

“The children enjoyed learning new things and participating in the project on a weekly basis.”



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