

AHEAD OF THE GAME UK

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EXECUTIVE SUMMARY

This report presents the key learnings from the Ahead of the Game UK programme funded by Comic Relief from March 2020 to July 2023. These learnings have been collated by the Learning Coordinators appointed by Comic Relief to accompany the cohort of eight *Sport for Change* organisations across the UK. The insights speak to critical success factors and considerations when designing and delivering initiatives to improve mental health outcomes through combined sport-based approaches and quality mental health support. The insights in the report have been organised into three key themes. The key recommendations for each are:



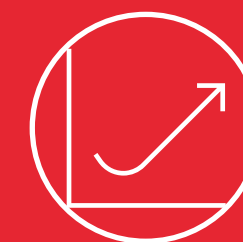
A compassionate and inclusive approach to mental health and wellbeing

- Mental health & wellbeing shouldn't be viewed in isolation: often the cause of poor mental health is societal.
- Understanding these dynamics is crucial to developing effective sport interventions that are inclusive, accessible, and culturally sensitive.
- This should be reflected in staff training and appointment.



Successful partnerships and referrals

- Working in partnerships enables organisations to better address the spectrum of needs.
- Partnerships with mental health service providers are key to support participants beyond the lifespan of the programme.
- Communication is key to engage families and support networks.



Sustainable engagement and impact

- The targeted groups are not homogeneous. Thus, creativity and flexibility is needed when designing the programmes.
- Collect stories and case studies from the participants, not just surveys and attendance.
- Have regular meetings to reflect as a team about the journeys of all the participants. This enables staff to pivot the programme if needed.

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ABOUT AHEAD OF THE GAME UK

Comic Relief's Ahead of the Game UK initiative aims to improve mental health outcomes in the UK through combined sport-based approaches and quality mental health support. The 8 organisations or partnerships (see Annex 1) demonstrated project designs whose focus fulfilled one or more of the following criteria:

1. Improving mental wellbeing and helping people function better
2. Ensuring mental health provision is intentional, not incidental
3. Providing sustained support for individuals and communities
4. Ensuring that provision is high quality, and that delivery staff are themselves well-supported
5. Building partnerships and/or working collaboratively.



ABOUT THIS REPORT AND THE LEARNING METHODOLOGY

The report's primary audience is other organisations who deliver community sport interventions that provide mental health and wellbeing support to their participants. The report also provides insights for funders who support these initiatives, for mental health and wellbeing organisations that are considering sport as a means of delivering projects, and for anyone interested in deepening their understanding of the necessary considerations and conditions to make a difference to the mental health and wellbeing of their communities through sport.

Comic Relief appointed Athlead, a specialist sport and social impact consultancy, to conduct the Learning Coordination. The team was led by Kat Craig and Alison Carney and supported by Joel Williams. The key principles of the Athlead approach to learning were to:

1. Centre the expertise and experience of the funded partners.
2. Create space for funded partners to step back from day-to-day delivery and reflect on challenges and opportunities.
3. Provide regular, facilitated exchanges of information and co-creation of solutions.

This approach led to a flexible, fun, supportive and open space where organisations felt free to share worries and challenges, as well as successes, without feeling that they had to prove their efficacy to a funder. The Learning Coordination team sought a balance between too many meetings and too little support. The Learning Coordinators encouraged the emergence of key themes, documenting the key points and stories to share them back with the group so that they could reflect further and use what they learned from others.

THE IMPORTANCE OF FACILITATED LEARNING AND EXCHANGE SPACES

The learning process, facilitated by Athlead, sought to create a **dedicated space for reflection, learning, solidarity and connection** between the organisations that were facing similar challenges. Striking a balance, so that the learning process felt valuable, efficient and worthwhile while not becoming an additional burden, was a priority for the Learning Coordinators.

The partner organisations appreciated that the learning coordination came as part of the Ahead of the Game UK support and that it was facilitated in a way that was flexible to their needs and created a culture of growth and improvement. This was achieved through:

- Group webinars on specific themes requested by the group
- Bilateral connections between funded partners
- Partner presentation sharing of resources and tools
- 1-to-1 conversations between Learning Coordinators and funded partners
- In-person exchange visits between two or three funded partners.

The first two years of Learning Coordination were carried out online. The Learning Coordinators gathered potential themes from group discussions, and then consulted with the funded partners to determine priorities. Group discussions also provided an essential space for organisations to share challenges and frustrations. In addition to the webinars, the Learning Coordinators scheduled regular individual check-ins with members of the group.

In year three, the learning coordinators organised in-person exchange visits to provide even deeper reflections for organisations. Six exchange visits were carried out. The organisations were matched based on similarities in their challenges and experiences. The webinars continued so that the learning and feedback could be shared with the wider group.

A final webinar was hosted in June 2023, during which the proposed key learnings in this report were shared with the group, discussed and deepened. For a complete timeline of the learning coordination activities, see Annex 2.

“I think having this opportunity to speak to people and know you're not alone, it's been really good. And also just getting ideas of how we can tackle some of [our] challenges.”

– Funded Partner

“Being part of this has been so interesting to learn just what else is out there. And you know, how things are being done differently, what's being tried. And that's really exciting. It's sort of showing me some of our strengths and then also given me plenty of ideas of what could develop in the future. So that's probably been like the biggest win for me, I think it's been really useful.”

– Funded Partner

“Thank you so much for your support over the last few years you have given us, you spoke about us being vulnerable and open and honest, but you guys have created that space. Thank you for allowing us to have that and helping us and supporting the work we do.”

– Funded Partner

THE IMPACT OF COVID-19

COVID-19 has had a massive global impact on mental health, and this has made the work of the Ahead of the Game funded partners more urgent, while simultaneously making it more challenging.

The Ahead of the Game funded partners conducted their work in a challenging context. Most projects were initiated in early 2020, just as the COVID-19 pandemic started. Learning Coordination launched in late March 2020, at the start of the first lockdown, and the initial focus was on providing a platform for partners to share their challenges, worries and insights about their participants and staff during the pandemic.

Funded partners' programming, designed almost entirely on in-person sessions, now needed to reach people who were largely confined to their homes, often in contexts that posed further risks to their mental health and wellbeing. This meant organisations had to get creative about how to engage people and how the different referral pathways into their programme worked. Funded partners were forced to delay their in-person delivery or adapt programming to online settings.

The fact that over these three years all funded partners were able to deliver in some way demonstrates the resilience and creativity of the group in times of unprecedented challenges. Annex 3 includes reflections by funded partners about the impact of COVID-19.



THEME 1: A COMPASSIONATE AND INCLUSIVE APPROACH TO MENTAL HEALTH AND WELLBEING

Two cross-cutting factors significantly impacted the mental health of both participants and staff: **the impact of structural discrimination, and the effects of Covid and the subsequent cost of living crisis.** Funded partners identified that marginalised groups, such as Black people and people of colour, members of the LGBTQIA+ community, and people who have been out of education or are in the criminal justice system, were disproportionately at risk of poor mental health, and poor mental health support. Acknowledging systemic discrimination and intersectional disadvantage, and addressing this practically throughout the design and implementation, was identified as a critical success factor for any effective sport-for-mental-health programme.

Further, funded partners observed that mental health, both in staff and participants, appeared to be deteriorating as a result of the cost-of-living crisis and public funding cuts (as born out in subsequent research). This brought additional, and initially unforeseen, challenges to programme design and delivery.

See [here](#) for more information on key findings regarding the challenges in the broader mental health system and how these disproportionately impact certain participants. See [here](#) for more information on how public funding cuts has meant greater challenges to access mental health support and services.

Acknowledging systemic discrimination and intersectional disadvantage, and addressing this practically throughout the design and implementation, was identified as a critical success factor for any effective sport-for-mental-health programme.

A recognition of the complexity around mental health is a critical success factor for successful and safe sport programming. Mental health needs to be tackled within the societal context in which it emerges, rather than parcelled up as some individual deficiency.”



THEME 1: KEY ISSUES

- While awareness around mental health and wellbeing has increased, mental **wellbeing** of the **nation is at an all-time low** for some generations and some parts of the community.
- Core **clinical and social services are incredibly stretched**, often disproportionately affecting certain communities. This, and stigma around mental health, caused an increase in demand for ancillary services such as mental health through sport provisions.
- There is **pervasive stigma surrounding mental health, particularly within underrepresented communities** including racial and ethnic minorities, LGBTQ+ individuals, and individuals from lower socioeconomic backgrounds. Many people face compounded stigma due to intersecting identities and societal biases.
- This stigma impacts participants by making them less likely to seek support for mental health problems and there may also be a perception among referral services that the participant is less likely to respond positively to a referral.
- There may also be **negative connotations of social service intervention** among certain participants, in particular those who have been subjected to enforced social services interventions.
- **For many** individuals from underrepresented communities, **the existing narrative around mental health does not resonate** (because it was not created by them, or with them in mind). Instead, they have experienced an **institutional weaponisation of mental health**. For more information see [this](#) excellent report by Ahead of the Game partner Football Beyond Borders.
- This means there are **barriers to seeking or being offered help for certain groups**, exacerbating mental health issues. This can result in limited access to mental health resources and diagnoses, disparities in care, and decreased awareness of available interventions.
- Simultaneously, because of increased demand coupled with public funding cuts, **referrals out from sport-for-mental-health services became more challenging**. For example, if a programme encountered a participant with acute needs that went beyond the expertise of the project staff, it was sometimes difficult to connect with urgent care services.

Some programmes framed their impact more in terms of wellbeing, associated with resilience and the ability to cope with life's challenges. Others supported participants with medically diagnosed conditions and acute clinical needs. Ultimately, both approaches sought to enhance crucial components of overall wellness, with sport interventions seeking to complement existing support or plugging gaps where services were falling short.



THEME 1: KEY TAKEAWAYS / RECOMMENDATIONS

1

Mental health and wellbeing should not be viewed in isolation: often the cause of poor mental health is societal, e.g. structural inequalities and social isolation. This is how people experience their mental health, and so it needs to be acknowledged and tackled within the societal context in which it emerges, rather than parcelled up as some individual deficiency.

2

This can be challenging, because sport-for-change programmes that seek to improve mental health are working within a system that often treat individuals in isolation. For example, funded partners observed that some existing frameworks for mental health treatment did not work and should be challenged – there are insights and perspectives that sport people can offer that show that clinical approaches are not always working.

3

Understanding these complex dynamics is crucial to developing effective sport interventions that are culturally sensitive, inclusive, and accessible.

4

This should be reflected in staff training and appointment. Programmes should be run by staff who understand the challenges faced by participants, either by lived experience or clearly acquired cultural competencies. Having staff who reflect the community and have “expertise by experience” was considered an important asset.



THEME 1: CONCLUSIONS

Sport interventions are particularly well-placed to combat some of these challenges because:

- **Sport can build community** instead of dependency and tackle underlying causes of social exclusion and isolation by building safe and diverse networks of support.
- **Sport interventions create different and often more familiar, safer cultural contexts** which can mitigate the barriers to entry associated with mental health. Sport can therefore become an important entry point for a more specialist support.
- **Sport can focus on building positive mental health and habits**, instead of tackling negative mental health. In cases where there is a clear and substantial diagnosis, it can still create environments where that stigma is minimised.

However, sport is not a silver bullet. Funded partners discussed the need for a distinct and dedicated safeguarding person with a particular expertise of safeguarding in the mental health context, and bespoke processes for handling concerns and reports.

“Sport is not a silver bullet: it will only achieve these outcomes if programming is intentional and great care is given to creating a safe and trusted space.”



THEME 2: SUCCESSFUL PARTNERSHIPS AND REFERRALS

Funded partners agreed that **working together with other institutions was key to a successful programme.** During the Learning Coordination, funded partners discussed what made their partnerships useful, important and effective. In some cases, organisations were delivering their programme in pre-existing and pre-planned consortia which had applied for Ahead of the Game funding together. In other cases, funded partners developed relationships with other services, for referrals in or out of the programme or for additional expertise. Bringing in mental health experts and building those relationships also meant that the organisations augmented their knowledge of services available to participants in their community.

TYPES OF PARTNERSHIPS

Working with other institutions.

For example, Sport Birmingham's partnership with the NHS brings people with mental health support needs into sport activities. Newman University is also part of this partnership and provides the ongoing M&E of the programme to measure impact.

Support networks, families, carers.

For example, Watford FC sends regular newsletters to engage families and carers as well as participants because they have an important role both in supporting the participant's journey through the programme and also in understanding how that participant is when they are not at programme activities. This enabled participants to build varied healthy relationships.

Working in partnership with schools.

For example, Empire Fighting Chance works with local schools who refer students to the programme who they believe will benefit from the programme.

“Working in partnership with the BACP Counsellor and Fitness instructor has allowed us to enhance the support that we provide, and the young people have really enjoyed the variety of activities. It has also allowed us to look at how we can adapt some of these activities into our other programmes.”

- Funding Partner

“Working in partnership makes organisations better able to address the spectrum of needs of the participants and communities that they serve. This is particularly important as those needs may not always be apparent when a participant is first accepted onto a programme.”

- Funding Partner



THEME 2: KEY TAKEAWAYS / RECOMMENDATIONS

One of the main benefits of partnerships was to receive referrals, but this did not come without challenges. Funded partners faced challenges both when receiving referrals into their programmes and when dealing with referrals out of their programmes.

1

Working in partnership enables organisations to better address the spectrum of needs of the participants while they take part in programming. This is particularly important as those needs may not always be apparent when a participant is first accepted onto a programme.

2

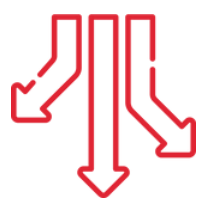
Building partnerships with mental health service providers in the community is also key to providing ongoing support to participants beyond the lifespan of the programme.

3

Communication is key, especially to engage families and support networks of participants. It is important to find different ways to engage the support networks of participants so that they understand the programme and how best to support participants.



THEME 2: REFERRALS INTO A PROGRAMME



Referrals into a programme came from different places. The organisations that work with young people get referrals from institutions such as schools, young people's mental health services, or directly from families. The organisations that work with adults received referrals from the NHS and mental health services, as well as from other social services.

The main challenge regarding receiving referrals was inadequate information from the referring institution. The information that funded partners receive about participants is essential for understanding their needs and making sure that all partners have the resources to support them. One solution that was tried by one of the organisations in the group was to provide their referral partners with a clear referral form that gave them all the information they needed. Another organisation found that it worked better to call the referring institution to follow up about a referral form and new participant. They asked direct questions and recorded their answers, which gave them a clearer picture of the participant's need.

Example from Empire Fighting Chance

Working in partnership with schools means that Empire Fighting Chance (EFC) is reliant on the information provided by the schools to understand the needs and experience of the young person so that they can provide them with support. Often the referral forms and information provided are incomplete, which means that the staff at EFC may not have all the information needed to understand the experiences of each participant referred.

This has led EFC to create a more flexible system for assigning referred participants into different activities. The staff review how a participant is doing in the activities and decide whether the participant may need a different type of support, in which case staff may invite the participant to additional activities or change the activities that they offer.

Top Tips for building a strong referral relationship

- 1** Involve the partner organisations who refer participants into the programme in meetings to observe how the programme is working and what it can offer.
- 2** Have a key contact at the referring institution to have a direct line to someone who might be able to fill in information gaps.
- 3** Clearly communicate to all referral institutions what the programme offers and who the programme is designed to serve.



THEME 2: REFERRALS OUT OF A PROGRAMME



Referrals out of a sport programme can provide a pathway for sustained or alternative support for participants not suited to the sports programme on offer (more detail in Theme 3). Sometimes the limited number of sessions that a partner can provide is not enough and participants need continued support. This is why **long-term interventions, or referral pathways going out of the programmes, are important.**

Example from School of Hard Knocks

School of Hard Knocks provides an eight-week programme during which the participants take part in sporting activities and classroom sessions on different mental health themes. They work with a staff that is made up of both rugby coaches and mental health professionals. At the end of the eight-week programme some of the participants are referred on to continue to have 1-to-1 therapy sessions with the psychotherapist on staff for additional mental health support.

Example from Sport Birmingham

Sport Birmingham's programme provides ten weeks of sport activities to participants who have been referred in through the NHS partnership. The coaches of the local sport organisation who run these activities have been trained in mental health, but the project lead at NHS is the key contact and mental health support for all participants. The aim of Sport Birmingham is that the participants who go through the 24 weeks feel the benefits of getting physically active, and that after the 24 weeks they join community sport activities that are not exclusively for people with mental health needs.

Top Tips for building a strong referral relationship

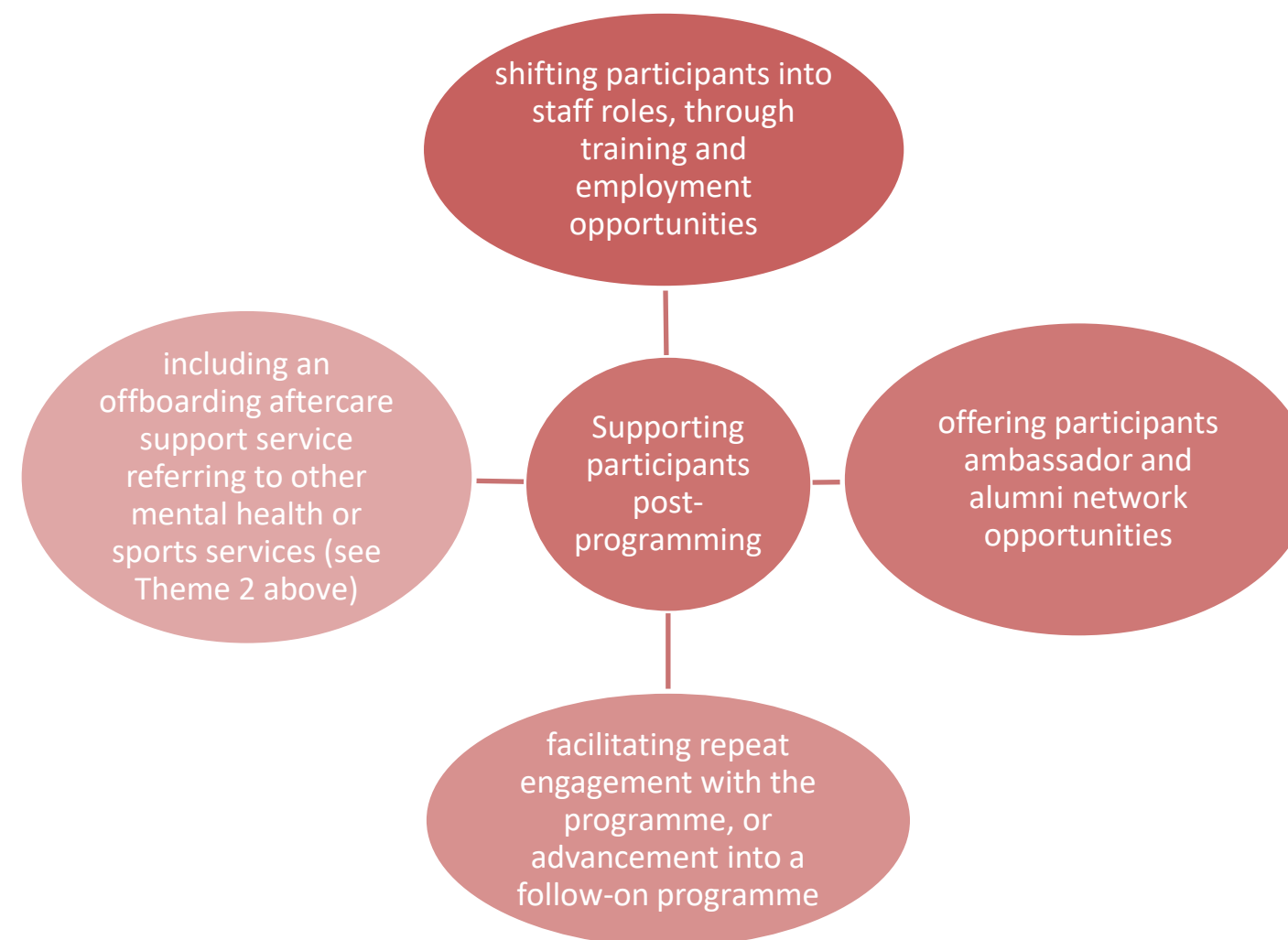
- 1** A degree of multidisciplinary expertise in the team, even if it is minimal training, is essential to spot and understand the evolving and ongoing needs of participants.
- 2** If participants are introduced to a sport or physical activity, provide a pathway for them to continue to participate in that sport or physical activity through a partner club or association that is vetted and trained, providing a free and easily accessible pathway.
- 3** If the programme has a limited timeline, have ready a list of other services or places where participants can continue to access mental health and wellbeing support.

THEME 3: SUSTAINABLE ENGAGEMENT AND IMPACT

Funded partners all agreed that **mental health**, like physical health, is something that **requires sustained investment** and engagement. This posed a challenge for organisations because all programmes have an end point, which may not tally with **the complex and ongoing mental health needs of participants that continue after they leave the programme.**

Another question that was posed by funded partners was **how to best measure the long-term impact of their programme for all participants**, given the challenge that each participant will be on a distinct journey in terms of their own mental health. To address this question, Learning Coordinators hosted a webinar on Most Significant Change (MSC) as a creative method to collect change stories and better understand the impact of the programme for different participants. During the MSC webinar, the group shared other ways in which they keep track of how the programme is making change for the different participants who are attending.

As funded partners were working within the confines of a time-bound programme and most were seeking to engage multiple cohorts over the course of a relatively short-term trajectory, they discussed ways to mitigate the impact of participants exiting the programme. Funded partners shared a range of ways in which to achieve sustained engagement. These included a combination of approaches outlined in the figure below.



Mental health is not something that you develop and can then ignore; it is a journey that goes beyond any specific programme.

Many funded partners' programming therefore focussed explicitly on building knowledge, equipping participants with tools to manage their wellbeing, and building healthy habits.

“Success looks different for each person, especially in a sport setting. For one participant, change and success may be that they are actively engaging in sport with others, whereas for another participant the fact that they show up to the session and just sit on the side and have a bag of crisps might be a huge change. Quantitative surveys do not capture these very different journeys.”

- Funded Partner

“Staff may also be living in challenging times, experiencing the cost-of-living crisis and associated poor mental health. So, staff training and support is a critical success factor.”

- Funded Partner



THEME 3: KEY TAKEAWAYS / RECOMMENDATIONS

1

Sport interventions for mental health and wellbeing target a group that is not homogenous. Therefore, it's necessary to be creative and flexible in designing the programmes and measuring whether it's impacting participants.

2

Collect stories from participants and write case studies that describe their experiences in the programme; do not just collect survey and attendance data. This is particularly important for programmes that support participants with varying mental health challenges and needs.

3

Plan for regular meetings to reflect as a team about the journeys of all the participants. This enables staff to amend or pivot the programme if participants have a specific need.



THEME 3: UNDERSTANDING THE IMPACT FOR DIFFERENT PARTICIPANTS

In one of the exchange visits, between Watford FC, Football Beyond Borders and SSF, the funded partners were encouraged to complete a “Project lifespan” exercise. This tool helps them reflect on the journey of different participants through a particular programme. **Funded partners can recognise and understand that each participant’s journey may look different,** and that partners’ interventions might play only a small part in the overall support offered to participants.

The aim of the exercise is to track the expected experience of participants and draw conclusions. The exercise can be conducted with three imaginary scenarios: a best-case scenario participant, an average participant, and a participant who has complex needs and struggles to reap a benefit from the programme.

Funded partners can consider tracking the following factors across the lifespan of engagement:

- The challenges that participants may face along the way, and how to support them through it to sustain engagement.
- The risks of participants dropping out of the programme or reducing engagement.
- The opportunities to gather data and celebrate their successes.
- The opportunities to engage wider support networks and build a safe and trusted community of care.
- The opportunities to build longer term engagement between participant and programme through alternative means.

Example from Scottish Sport Futures

Participants with different experiences and mental health needs attend the SSF activities. To understand if the programme is helping these participants and generating impact, it is essential to **have a way of understanding the change for each individual, and to recognise that this change will not be the same for all.**

Finally, because **impact can take time and be difficult to measure, staff may not always see the benefit of their work.** Given that staff may also be living in challenging times, experiencing the cost-of-living crisis and associated poor mental health, funded partners agreed that extensive training and support was a critical success factor. Staff training might include mental health first aid training, specific training around mental health safeguarding processes and training on how staff can manage their own wellbeing. Funded partners recommended various staff care initiatives to avoid burnout and improve staff retention and morale.

CONCLUSION / WHAT NEXT?



While the Ahead of the Game UK Learning Coordination has ended, the eight funded partners are still devoting their time and energy to their vitally important work. Their commitment – both to the participants and to deepening and sharing their learning – is inspiring. This is especially the case given that they faced unprecedented challenges throughout the grant term.

To ensure that the benefit of this learning is scaled to its full potential, Comic Relief has commissioned Athlead to complete two follow-up companion pieces to this report. First, **an accompanying toolkit is in development**. The toolkit will dig deeper into these themes and provide practical examples and insights from funded partners that will help other organisations to develop their programming. The toolkit will also offer a roadmap for anyone who wants to deliver mental health and wellbeing support through sport. It will provide a checklist of essential considerations for making mental health interventions inclusive and compassionate, building directly on the experience of the funded partners of the Ahead of the Game UK cohort.

Second, Comic Relief believes these learnings may also assist other institutional funders. It is clear from the initiative that **sport can significantly improve the mental health and wellbeing of communities and provide a complementary approach that may reach different demographics or offer a more accessible entry point** for mental health support services. But the nation is facing a mental health crisis, and in that context funded partners must be adequately supported, funded and connected. **Comic Relief will therefore host an in-person learning opportunity for funders, funded partners and other institutions seeking to promote sport-for-mental-health initiatives.**

These initiatives will hopefully enable many others to benefit from and apply the learnings so generously shared by the partners throughout the Ahead of the Game Learning Coordination.

EMPIRE FIGHTING CHANCE

Bristol



Empire Fighting Chance takes mental health services out of clinics and into boxing gyms in deprived neighbourhoods in Bristol and South Wales. They provide high quality mental health support in the form of a flexible, needs-based programme of boxing, mentoring and psychological education combined with a deeper programme of intensive boxing therapy delivered by professional psychotherapists.

Age group: 8–25 years old.

FOOTBALL BEYOND BORDERS

London



Football Beyond Borders works with young people excluded or at risk of exclusion, providing football therapeutic mentoring interventions that operate in over 45 schools, with qualified and trainee counsellors. Young people have access to 1:1 therapeutic mentoring, group support, and on and off the pitch football-themed social and emotional learning activities which support them in developing emotional resilience, team working skills, and provide them with the tools to manage and process trauma and mental health challenges.

Age group: 11–14 years old.

SCHOOL OF HARD KNOCKS

Wales



Reaching Your Potential (RYP) is a targeted health and wellbeing intervention for those with diagnosed or self-diagnosed mild to moderate mental health problems. RYP aims to improve individuals' mental and physical health through sport (rugby, boxing, and team games), a structured curriculum, and counselling from expert psychologists. RYP takes place in two communities in Wales (Cardiff and Ebbw Vale).

Age group: 18+ years old.

STABLE LIFE

Scotland



Working with a British Association for Counselling and a psychotherapy registered counsellor and a fitness trainer, the project delivers support for young people with mental health issues. The project combines equestrian therapy, psychotherapy, and fitness to build resilience, core strength, social skills, and confidence. This increases mental wellbeing and self-belief among young people and strengthens the local support offered to them.

Age group: 8–18 years old.

ANNEX 1: FUNDED PARTNERS - AHEAD OF THE GAME UK COHORT

WATFORD FC COMMUNITY SPORTS & TRUST

East of England



The Empower Programme delivered by Watford FC CSE Trust provides sessions that combine sport with psychotherapy. Empower supports children with mild to moderate mental health issues by combining physical activity with the fundamentals of various therapeutic approaches and group CBT (Cognitive-behavioral therapy) to develop resilience, self-esteem and effective coping strategies.

Age group: 9-12 years old.

SCOTTISH SPORTS FUTURES

Scotland



SSF use sport for change programmes to combat the effects of living in poverty and buffer against trauma and adversity, engaging and empowering young people to be confident, happy and healthy. Active:2:Grow is a wellbeing and multisport focused programme delivered in partnership with the Scottish Association of Mental Health in communities across Glasgow, Fife, Stirling and North Ayrshire, offering young people a safe and inclusive environment to explore their wellbeing, connect with peers, socialise and become more active.

Age group: 11+ years old.

YMCA ROBIN HOOD GROUP

East Midlands



This project supports young homeless people from Mansfield with mental health conditions, including anxiety/depression. The young people develop resilient, transferable life skills through support from a behavioural psychologist and by engaging in weekly outdoor sports activities. The project improves young people's mental health, increases their engagement, and supports them with transitions while also ensuring that the homeless accommodation becomes a more supportive, psychologically informed environment.

Age group: 16-25 years old.

BIRMINGHAM SPORT AND PHYSICAL ACTIVITY TRUST

West Midlands



This sport-based social recovery project is for adults who access Community Mental Health Services and have been diagnosed with severe and enduring mental illness. A three-way partnership between Sport Birmingham, NHS and Newman University has developed a sustainable local network based on peer support and co-production to improve mental wellbeing and access into appealing, high quality community activity.

Age group: +25 years old.

ANNEX 2: AHEAD OF THE GAME LEARNING COORDINATION TIMELINE

OUR JOURNEY TOGETHER

Start-up webinar with
Comic Relief

Webinar: How Covid 19 is
affecting our work?

Webinar: Most Significant
Change

2020

Sharing Learning:
*Empire Fighting
Chance*
*School of Hard
Knocks*

Webinar:
Working in
Partnerships

Sharing Learning: Sport
Birmingham shares
Skills360 tool for tracking
resilience and skills
*FBB: Therapists in
traccksuits*

Individual check-ins
about new
challenges

Re-connect
webinar

2021

Individual calls
to plan 2022
support

Webinar: engaging
existing support
networks

Webinar:
measuring mental
health v wellbeing

Webinar: building
healthy cultures
and exchange visit
planning

Exchange visits: *Watford*
and *SSF* to *FBB*
& *FBB* and *SSF* to
Watford

2022

Webinar
Changes and
Challenges in
referrals

Exchange visit:
Empire to
*School of
Hard Knocks*

Exchange visit:
Birmingham to
Empire

Exchange visit:
SoHK and
Nottingham to
Birmingham

FINAL
LEARNING
WEBINAR

Virtual
exchange visit:
Stable Life to
SSF

Learning
Report draft
complete for
feedback

January

February

March

April

May

June

July

2023



Ahead of the Game: Sport and mental health

Learning summary: The impact of COVID-19 | September 2020

On 25/08/2020, we ran a cohort-wide webinar with UK organisations and partnerships funded through the Comic Relief programme *Ahead of the Game*. Funding commenced in Spring 2020, at the height of the UK lockdown. Here, we share five key takeaways focussing on the impact of COVID-19 on this cohort, how they have adapted and how they are looking to rebuild during and after the pandemic.

The impact of lockdown has been very different for different people. For many it has had a negative mental health impact due to increased isolation. For those people, the interventions offered were often one of the few times in a week that someone would ask after their wellbeing and check in on them. However, for others lockdown has meant being away from an environment which was stressful, for example where young people have been bullied in school and lockdown offered a reprieve from that. It all depends on where your safe and supportive space is.



Security vs Isolation

Project staff have also been affected by COVID, with many being unable to access go-to support systems and self-care (for example, playing sport was important for many of these workers). Managing staff wellbeing while also having to move away from a 9-5 engagement was proving a challenge.

Moving to digital engagement presents both opportunities and challenges. For some, it meant that there was an increase in 1:1 feedback and engagement, and for agile organisations this helped them to adapt their programming. For others, digital poverty was a huge problem: Participants did not have access to screens, wifi or mobile data; some partners had just started to build trust and introduce a degree of routine through in-person sessions and this was completely disrupted. Building and maintaining trust in the context of digital poverty is difficult but remote contact is important.

Ensuring cultural competencies in staff. In both the context of COVID and systemic racism, we recognised the need to recruit staff with the relevant experience and competencies, and the need for training within organisations to address prejudices and unconscious bias. COVID has disproportionately impacted under-represented and minority groups.

Other issues. We discussed challenges related to adapting programming, schools returning and managing intake (for example, adapting to school bubbles in scheduling activities). Increased and more complex demands have been placed on sporting partners as ill-health increased, where this was *already* a barrier to sport. There is a need to balance the risk of managing COVID with the negative mental health impact associated with disengagement and a need to adapt programming to equip young people with coping tools so they can also support themselves.



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