



**RUGBY LEAGUE CARES AND SPORT RELIEF
MENTAL WELLBEING PROGRAMME: RESULTS
AND FINAL REPORT**

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1. INTRODUCTION

1.1 In 2012, Rugby League Cares (RLC, the charitable arm of the Rugby Football League) was given a two-year grant by Sport Relief to run a number of community-based projects to promote mental wellbeing. This Report sets out what happened including:

- Results of the local community projects run by top Clubs' Community Foundations
- Analysis of the mental wellbeing campaign run by RLC with the NHS in September 2012
- Lessons learnt from Year One and how we applied the learning
- How the programme has contributed to training and capacity building
- Additional contribution to the evidence base for how sport and health can collaborate
- Taking the programme forward: what will happen next to each project and how we are using the overall findings

2. EXECUTIVE SUMMARY

We are very grateful to Sport Relief for their grant funding: having the Sport Relief funding has been crucial to developing and delivering these projects: without it, Foundations would not have had the resource or been able to attract the interest and then the engagement and contribution of partners, nor would the many hundreds of individuals who participated have benefited from the projects.

2.1 The programme had four main aims, to:

- * Create and deliver projects tailored to “at risk” groups within local communities, aimed at improving mental wellbeing
- * Raise awareness of services and how to access them among those in need
- * Create lasting relationships between Foundations and local communities (particularly older people), and with local partners particularly NHS and expert charities
- * Achieve cultural change and greater capacity within Foundations through tailored staff training, giving staff greater confidence and knowledge about mental wellbeing
- * Contribute new knowledge to understanding of how sport and sports clubs can reach and positively influence local communities

All of these objectives have successfully been achieved.

Creation and delivery of projects tailored to “at risk” groups within local communities, aimed at improving mental wellbeing

2.2 Work to design and establish the projects was successfully completed in Year One with RLC and individual Foundations delivering their programmes very much to plan. Some exceeded Year One targets and most added in additional activities to reflect the strong relationships that were formed with partners as a result of the programme and additional needs, which they identified once the programme started.

2.3 As a first stage, Foundations set out to identify and then engage a range of “at risk” audiences. Expert partners confirmed that Foundations correctly identified key audiences,

successfully engaging a range of groups which tend to be socially isolated and cut off from opportunities for activity: those with mental health issues; young people, carers; people with learning disabilities who require support in the community; those making the transition from secure care back into the community; and people of all ages who are unemployed.

2.4 Evaluations have shown the impact of Foundations' work in improving mental wellbeing. Foundations have raised awareness and tackled stigma (for instance with schools, community clubs and players). Participants report increases in their understanding about mental wellbeing and positive changes in their attitude towards it.

2.5 Physical activity is known to have a beneficial impact on mental wellbeing and all these activities build social capital, another determinant of mental health status as well as their physical impact (such as Huddersfield, Wigan and Bradford). Those attending programmes have reported improvements in their own mental wellbeing. Warrington's outreach programme saw a 16-point rise in the WEMWBS score and the HMP Risley programme saw 88.2% of those completing 18-week programme showing a positive improvement. Many participants also reported other positive changes – one has become a well-being mentor. At other Foundations, several participants have gone on to other programmes including 6 signing up for a City and Guilds Course following Hull's programme, and a number reporting that they have joined gyms (Wigan) or are maintaining their activity levels through other programmes. Foundations agree that the public engagement of players and the Club in talking about mental health and their personal challenges has made an important contribution to engaging audiences.

Greater awareness of the services available and access pathways for those in need

2.6 By creating partnerships with specialists in the NHS and not for profit sectors, Foundations have been able to get advice on how best to present their programmes and importantly to ensure that they can signpost all participants to appropriate further information and support. Specific feedback includes:

- One of the most commonly expressed pieces of feedback from participants was that as a result of the programme or event they now knew where to get help
- Many of those running events have had GPs and mental health specialists in attendance who were able to deal with issues that arose, as well as colleagues from housing, employment and training carrying out a similar positive role (such as Featherstone and St Helen's)
- Some programmes such as Wakefield brought in specialists for future sessions in response to requests from participants to ensure that expert information was given
- Hull identified participants who were in need of specialist support but not currently under the care of local services so the Foundation was able to make this important link
- Foundations found that literature setting out details of local services were popular, with participants asking for more copies to give to friends and family.

Lasting relationships between Foundations and local communities (particularly older people), and with local partners particularly NHS and expert charities

2.7 Although Foundations already had many relevant strong local connections, the projects enabled them to identify and collaborate with a new range of partners, particularly NHS Mental Health Trusts and specialist charities. The table below summarises the partners that were involved – a total of 64 external partners in Year One and more than 20 further partners in Year Two. At the end of the two-year programme, Foundations report that all original partners are still engaged.

2.8 The table also shows that they came from several different sectors, demonstrating the wide range of issues that impact on mental wellbeing, and which need to be engaged to improve quality of life for those at risk or affected, including their families. Section 5.36 below details partners' input. Many provided valuable expert input to design and recruitment, but most also came to events, sometimes (for instance several mental health Trusts, Job Centre Plus at St Helen's and Carers Wakefield) playing significant roles in delivery. The fact that Foundations were able to engage the target audience made collaboration much more attractive and worthwhile for partners. Most cited the ability of Rugby League and the local Foundation to attract the very people they themselves wished to reach as being a key reason why they became involved.

2.9 RLC specifically hoped to engage over 50s as experience had shown that many can become isolated and drop out of activities and networks as they stop playing and their children grow up, and particularly if they lose their jobs. Seven Foundations engaged with this audience, reaching in excess of 600 people, creating two sets Older People's Champions through training provided free by Age UK (Wakefield and St Helen's). We also made a valuable link with the Dementia Friends programme nationally. We hope to develop this relationship further as work continues with Foundations.

Summary of activities and outcomes from Community Foundations' programmes

2.10 In carrying out the projects, RLC and Foundations:

- Engaged more than 80 external partners
- Worked with at least 10 sectors including health, social care, education, justice, culture and the arts, employment, training bodies and specialist charities
- Secured significant value in terms of expert input from statutory, not for profit and private sector organisations which enabled Foundations to deliver hundreds of events, workshops and programmes over the two year programme All gained input from partners in terms of considerable amounts of expertise and time, free or discounted facilities. Conservative estimates show St Helen's levered in over £10k of support and Bradford £6k
- Reached several thousand people at risk and delivered hundreds of contacts and programmes, and promoted mental wellbeing messages to many thousands more, including;
 - Many thousands of the general public to raise awareness, tackle stigma and signpost to support including through Round 27 mental wellbeing campaign (September 2012) and Salford's media campaign; State of Mind work with professionals and amateur teams and at major events
 - Promoting awareness and resilience to over 1000 young people at school events
 - Over 30 events for older people to reduce isolation and promote mental wellbeing including reminiscences sessions and social events
 - Ran regular programmes to promote physical activity among at risk groups reaching over 600 individuals attending on a regular basis
 - Running physical activity programmes for people with mental health issues with 150 regular attendees
- Have contributed many thousands of pounds of value by Clubs and Foundations themselves in terms of extra staff time, facilities, tickets and prizes. Every Foundation and Club has made a minimum of £1000 of value of contributions with some making considerably more (Salford contributed more than £20k and Warrington and Wakefield each £6k)

2.11 The following summarises the outcomes:

Club	Partners Engaged	Key Outcomes	Future plans
<p>Bradford Bulls</p> <p>Older people, young people and amateur clubs</p>	<p>Bradford District Care Trust</p> <p>Marie Curie</p> <p>Sharing Voices (BME-led mental health group)</p> <p>Incommunities (housing charity)</p> <p>Barnardo's</p> <p>High schools</p> <p>Local amateur clubs</p>	<p>Fortnightly reminiscences sessions for older people</p> <p>2 school events for 400 Year 11s</p> <p>Junior tag festival for amateur teams focusing on under 8s and 9s, engaging club with younger children and families and raised £1000 for Sport Relief</p> <p>Input in kind from partners including NHS and Barnardo's to support schools events</p>	<p>Plan to continue</p>
<p>Featherstone Rovers</p> <p>Identified gap in services for local carers</p>	<p>Carers Wakefield</p> <p>Primary health care teams</p> <p>Social Workers from Wakefield Council</p> <p>Wakefield District Housing</p> <p>Job Centre Plus</p>	<p>Established Monthly Carers' Network and events for over 200 people</p> <p>Held Carers' Rights Day for 93 people</p> <p>£2500 in kind input from Carers Wakefield, support from NHS primary health care, Job Centre Plus, Council housing and social care</p>	<p>Planning to continue relationships</p>
<p>Huddersfield Giants</p> <p>Targeting adults and young people at risk/with mental health issues</p>	<p>Kirklees Council (including young people's services)</p> <p>NHS Kirklees</p> <p>South West Yorkshire Partnerships NHS Foundation Trust</p> <p>Club and players (1st and junior squads)</p> <p>Schools and community groups including North Huddersfield School Trust, Deighton into Sport, Kirklees Start</p>	<p>Awareness raising activities for public, schools and community clubs</p> <p>Good Mood League joint with SWY Partnership NHS Trust: 17 at first event; programme re-developed to be Learning Difficulties Fun Days, first session attended by 60 participants</p> <p>School holidays programme (for 30) joint with Council' young people's services set up for spring to summer 2014</p> <p>Strong input from partners through steering group including Council, NHS commissioners and providers</p>	<p>Pilots and evaluations set up: partners awaiting results but indications are they are keen to invest if pilots prove successful</p> <p>Bidding to People's Millions to expand LD Fun Days</p>
<p>Hull FC</p> <p>Educational workshops for young people in Year 11 and 6th form</p> <p>Physical activity programmes for adults with mental health issues</p>	<p>NHS Hull</p> <p>City Health Care Partnership</p> <p>MIND</p> <p>Humber Sports Partnership</p> <p>Schools and colleges</p>	<p>Reminiscences programme: 6 local care homes and 55 participants including Sport Cafes</p> <p>Engaged 150 (year 1) and 120 (year 2) young people through 8 workshops for Year 11 and 6th Form: 86% said more aware and 100% said knew where to get help</p> <p>Delivered physical activity programmes for</p>	<p>Working with partners to make sustainable</p>

<p>Programme for secure unit inpatients</p> <p>Year 2: reminiscences project for Alzheimer's sufferers</p>	<p>Plus: City Council, Hull Training</p> <p>Year 2: Dementia Academy, Dementia Programme Board, Humber NHS Foundation Trust, Humberside Police, Dementia Alliance, Relay Port Agency Limited, Hull Veterans Support Centre and Catch 22</p>	<p>47 adults with mental health issues</p> <p>13 completed more than 10 sessions</p> <p>6 have signed up to take City & Guilds qualification</p> <p>Delivered programme for 17 inpatients of local secure unit over two years with all but 1 competing full programme</p>	
<p>Leeds Rhinos</p> <p>Creating and training mental wellbeing Ambassadors in community clubs</p>	<p>Community Rugby League Clubs NHS Leeds</p> <p>Leeds and York Partnerships NHS Foundation Trust</p> <p>NHS Resource Centre Leeds</p>	<p>28 trained mental wellbeing ambassadors in community clubs across Leeds able to engage 10,000 club members</p> <p>17 attended Mental Health First Aid training</p>	<p>Plan to continue relationships</p>
<p>London Broncos/London Rugby League</p> <p>Running a series of Road shows on wellbeing and mental health at major events in London and South East</p> <p>Event with Construction Workers at Olympic Park</p>	<p>Young Pioneers Affinity First</p> <p>See separate note about Year 2: reflecting feedback from Year 1 we are now working with Young Pioneers on a project on Cyber Bullying</p>	<p>Road shows run at major events promoting mental wellbeing and how to monitor own health using technology (mobiles, apps and tablets) including:</p> <p>Olympic Park: worked with over 500 construction workers</p> <p>Big Bang Fair Excel London March 2013 (over 65,000 people attended event)</p> <p>Big Bang South East, July 2013: event for all schools in South East England, for pupils aged 9 to 19 years</p> <p>Big Bang Fair, July 2013</p> <p>Survey of 1000 young people to find out health status, views and preferences</p> <p>Produced top tips via social media for Construction workers</p>	<p>Year 2 focus on Cyber-bullying project</p>
<p>St Helens "Saints"</p> <p>Men under 25 and over 50</p> <p>Unemployed</p>	<p>St Helen's Health Improvement Team Job Centre Plus Mersey Care (NHS) Bridgewater NHS Trust Age UK</p>	<p>Of those reached 48% were in target groups of U25 and over 50; 63% unemployed</p> <p>243 health checks (target 200). 45% improved understanding of mental health. 16% intend to visit GP as a</p>	<p>Will continue with DWP/JCP and also new partnership "Heart of Glass"</p>

<p>Group making transition from secure accommodation</p>	<p>New in Year 2: CALM and CCG</p> <p>Helena Housing, St Helen's Art Service, FACT, the World of Glass and The Citadel working to create a new partnership Heart of Glass</p>	<p>result and 44% intended to make lifestyle changes</p> <p>Weekly sessions with Job Centre Plus engaging unemployed young people in employment support and mental wellbeing: delivered throughout the 2 year programme</p> <p>Secured in kind contributions:</p> <p>£900 training by Age UK £1800 NHS/LA input £1680 Job Centre Plus £3000 in time from health trainers</p>	<p>Talking to corporate sponsors to try to identify source of funding for future</p>
<p>Salford Red Devils</p> <p>Mental wellbeing dimension to employment programmes, and for players and families</p>	<p>Greater Manchester Police</p> <p>Salford City College</p> <p>Salford University</p> <p>NHS Salford</p>	<p>Reached 7,500 people through two matches focused on raising awareness of mental wellbeing</p> <p>Now established dedicated Tackle Mental Health web pages</p> <p>Exceeded targets for 16-24 year olds (226 against target of 200) and over 24 years (114 against target of 100)</p> <p>Collaboration with local newspaper reached readership of 234,000</p> <p>£18,500 in kind contributions from Salford Red Devils and £3,100 from Foundation</p>	<p>Putting in bids with partners to make it sustainable</p> <p>How have own web page on Tackle Mental Health</p>
<p>Wakefield Wildcats</p> <p>Over 50s, Past Players, "buddying" programme to support fans with learning disabilities</p>	<p>Carers Wakefield</p> <p>Wakefield Diocese</p> <p>South West Yorkshire Partnerships NHS Foundation Trust</p> <p>Age UK</p> <p>Wakefield Hospice</p> <p>Wakefield Trinity Wildcats Supporters Trust</p> <p>Wakefield Trinity Wildcats</p> <p>Wakefield Past Players' Association</p>	<p>delivered a range of social events and activities with mental health theme to group of 24 over 50s and three events for Past Players' Associations: June 2014 attracted 46 people at over 50s</p> <p>secured Age UK training for 14 Older Men's Champions</p> <p>training 20 volunteer "buddies"</p> <p>successfully set up Companion's Card being administered by Carers Wakefield, to enable fans with learning disabilities and mental health problems to attend matches with a fellow fan</p> <p>secured £600 input in kind from Carers Wakefield and £900 in kind from Club chaplain</p>	<p>Both projects now self sustaining</p>
<p>Warrington Wolves</p> <p>Events to raise awareness and</p>	<p>Warrington Public Health</p> <p>Warrington Mental Health Promotion and</p>	<p>Seven Further Education College/School 6th form events reaching 173 young people; 100% found it useful and said their</p>	<p>Funding secured to run 5 programmes in HMP Risley until April 2015</p>

<p>improve wellbeing for at risk groups: younger adults in schools and FE colleges; community outreach for adults; workshops for in-patients and prisoners</p>	<p>Prevention Operational Group</p> <p>Warrington Borough Council</p> <p>5 Boroughs Partnership NHS Trust.</p> <p>Papyrus</p> <p>Livewire Leisure</p> <p>Warrington Collegiate</p> <p>Mind Art, Culture Warrington, Creative Support</p> <p>Warrington Clinical Commissioning Group</p> <p>HMP Risley, Probation Services and CRI (Pathways to Recovery Team)</p>	<p>perceptions of mental health had changed as a result</p> <p>45 older “at risk” people reached through a range of activities showing increase in awareness and wellbeing. WEMWBS questionnaires for outreach groups show mean score for participants increased from 42.5 to 58.5 (16 point improvement in well-being)</p> <p>100% of educational workshop participants found session useful and perceptions of mental health changed as result</p> <p>Programmes delivered at HMP Risley and group in Fairhaven in-patient unit (87 men)</p> <p>Project participants are now involved with a follow-on local community project entitled Mind Art. Mind Art now running series of community workshops to produce pieces for display around Warrington in Year 2</p>	<p>Hoping to continue collaboration with Papyrus to hold more workshops with young people</p> <p>Carrying out scoping exercise to identify funding sources</p>
<p>Widnes Vikings</p> <p>Isolated older people</p> <p>Children at risk (SEN and vulnerable)</p> <p>Children in hospitals</p>	<p>Age UK (Mid Mersey Age Concern)</p> <p>5 Boroughs Partnership NHS Trust, Halton Borough Council</p> <p>Halton Housing Trust and Wellbeing Enterprises</p> <p>Past Players Association and their volunteers</p> <p>In Year 2: NHS Trust (Whiston) Schools</p>	<p>“Invisible Vulnerables”: programme with statutory and voluntary bodies in Halton and surrounding area to engage isolated older people through visits to Halton Housing Trust including 16 coffee mornings and reminiscences events</p> <p>Used partners to identify vulnerable older people with poor mental health and design appropriate activities including building resilience, feeling safe and feeling connected through range of physical activities of differing levels, social activities and input from specialist bodies who can help with priority areas including health, housing and social care</p> <p>Extended to further vulnerable groups: over 100 children with SEN/considered vulnerable by schools, and 40 seriously ill children</p>	<p>Will continue stadium project, hospital visits and Housing Trust work</p> <p>Seeking funding from community projects and in partnership with Young Federation to expand projects for young people</p>
<p>Wigan Warriors</p> <p>Tackle it: combined mental and physical activity programme to increase resilience and self esteem</p>	<p>ABL Health</p> <p>Current and past players</p> <p>Wigan Active Living Team</p> <p>Sports coaches, sports conditioners</p>	<p>54 men aged 24-75 years</p> <p>80% achieved 100% attendance. At end of year 2, still at 80% retention</p> <p>90% set goals to change lifestyles and are making significant progress towards them</p> <p>75% made positive mental health related changes and are continuing</p>	<p>Project to continue</p>

		<p>to engage in health related programmes, fitness or group exercise on a regular basis</p> <p>25% have gone on from the programme to join the local gym</p>	
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Cultural change and greater capacity within Clubs through tailored staff training and education, giving staff greater confidence and knowledge about mental wellbeing

2.12 One of the most significant and frequently expressed comments by Foundations is the impact Involvement in creating and delivering the projects has increased capacity and given Foundation staff a better understanding of the issues involved generally and for their specific audiences. Key examples include:

- All Foundations have had to consider what “at risk” means, how the Foundation could constructively become involved, and how to make the case to local partners to get them to engage successfully
- Staff have learnt about how to shape programmes taking into account the specific needs of their audiences, including young people (who tend to want a lot of facts), older people and carers (who can find it difficult to overcome isolation)
- Most Foundations have run training sessions for staff, coaches and players of all ages both professional and amateur
- Some staff have been trained including to be Older People’s Champions (by Age UK)

2.13 Staff have made a number of comments about their personal experience and the benefits gained, including that they:

- have learnt more about mental wellbeing and what we can do about it
- got a lot of out of the experience of supporting others and helping to bring about change
- improved their understanding of the real life social barriers that young people face to getting involved in sporting activities

2.14 We also asked staff to tell us what they thought was best and what was worst. Quotes include:

“By running an event for Sport Relief we gained tremendous pride in supporting others and acknowledge that sport is a key pillar for change” (Bradford Bulls)

“Seeing the look of absolute joy on the mentally disabled fans when they were given the opportunity to come to games watch from the hospitality boxes. Being able to facilitate this is amazing. I still have the mental picture of 25 fans with learning/mental difficulties cheering for Wakefield with a local Councillor in the next box looking on with a smile - and shedding a tear that we had done this for them” (Wakefield)

“the impact that the Club brand and profile has on engaging, enthusing and inspiring the local community to initiate and sustain positive lifestyle changes is immeasurable” (Warrington)

What was worst was *“starting initial conversations with people immediately after the local amateur player took his own life as I initially felt like it was too little too late. I later*

realised that we could be potentially preventing it from happening again.....the project gave me a lot of confidence to be able to speak openly with people about mental health and this will hopefully prevent such tragedies happening again” (Salford Red Devils)

”Overall, we wouldn’t change very much. We were proud as a Foundation to work with more people in the community, particularly those in need of support” (St Helen’s)

2.15 As a direct result of Sport Relief’s funding we have worked with Foundations to understand how we can better manage projects. As a result, we have created a new Governance Framework which Foundations need to use to demonstrate that they fully meet all of the governance criteria. This will give RLC and any external funders and sponsors additional assurance that their money is being well used. This Framework provides a useful, easy to use structure that will guide Foundations in ensuring that they are collecting, using and reporting the right information which will help them make the best use of their resources and external funds and ensure that their projects are well focused.

Contributing new knowledge to understanding of how sport and sports clubs can reach and positively influence local communities (see section 5.52)

2.16 We gained new knowledge on what is effective (and less effective) in engaging staff, communities and media, and have created a series of good ideas, lessons and case studies that can be shared more widely. Section 5.52 and Annexes G and H (which will become a standalone document) set these out in more detail. Key points include:

- Foundations can make a contribution to many different aspects of mental wellbeing health and to different audiences
- Foundations can work effectively with a range of partners – and make a tangible and unique contribution to partners’ own programmes through their position in the community and the value of the brand and the game
- Value of having Sport Relief’s funding
- Fans are very interested in mental health issues, respond to programmes promoted by Foundations: they are attracted by the brand, the players and the facilities
- To some extent, stigma can be reduced by the public involvement of Foundations and players being open about the issues
- We have increased capacity among Foundation staff and those in communities through participation in the projects, working with partners and through more formal training
- Partnerships are valuable in terms of quality, recruitment, signposting, and follow up
- Foundations can make a big contribution to the work of partners because they can identify those in need and engage them effectively
- We have identified several ideas on how best to engage different groups

3. CONTEXT: RUGBY LEAGUE CARES, COMMUNITY FOUNDATIONS AND MENTAL WELLBEING

About Rugby League Cares and the Clubs’ Foundations

3.1 Rugby League has a long and proud history of working closely with its local communities. Rugby League¹ has a wide reach and is identified as one of Sport England’s priority sports. With over 250,000 people involved in the sport in some capacity and with over 57,000 weekly participants, it plays an important role in many communities. The reach of the elite side of

¹ Rugby Football League website www.therfl.co.uk

the sport is extensive with 2 million² attendances at Super League matches in 2012 and with 29 million TV viewers.

3.2 A key feature of Rugby League is its family appeal, with some 40% of regular supporters being female. Fans of all ages attend matches and club-related activities, often in family groups spanning the generations. Due to its heritage, Rugby League has a strong base within some of the most deprived areas of the country, although it is now extending far more widely both geographically and in schools and higher education.

3.3 Each major Club has an independent charitable community Foundation, which uses the Club's name, players and its iconic buildings as well as their own links and reputations, to engage with local people. Each runs community based activities with local health bodies, councils, charities and community groups, providing support and a range of activities on education, training and employment, health and wellbeing, heritage, social inclusion and of course sport, nutrition and physical activity. Research³ has shown that using sporting settings and sports clubs is an effective way of reaching local communities, particularly those who are most in need but often regarded as "hard to reach": media, fans and local people are interested in the Club and see the players as role models.

3.4 Rugby League Cares was created in 2012 to bring together the previous Rugby League family of charities: the Rugby League Foundation, RFL Benevolent Fund and RFL Heritage Trust. We act as an umbrella and coordinator for the network of Charitable Foundations at each Club. Our mission is to enhance and enrich people's lives through the power and positive influence of Rugby League. We work with local communities to help them lead a more positive and healthy life through the delivery of high quality sports, education, employment, heritage and health based activities. In 2012, we worked with 600,000 people, providing services with an added value of some £6 million.

3.5 Following the success of Sport Relief's funding and Foundations working collaboratively on central initiatives, the RFL and RLC have developed a Governance Framework outlining the key elements of organisational capacity and compliance. Foundations will be required to demonstrate that they have in place before they are eligible for central support. The framework covers: Governance, Human Resources, Safeguarding, Planning & Financial Status and Commitment to the RFL & RLC (see **Annex I**)

Mental Wellbeing and Rugby League

3.6 Mental wellbeing is one of the most significant issues both for individuals and their families, but also because of its wider impact on communities and the economy. Poor mental wellbeing is more prevalent in more deprived areas which tend to be the traditional heartlands of Rugby League. At any one time 1 in 4 of the population are thought to be sufferers and impaired mental wellbeing has the most costly impact on business and the economy of any health issue. Misunderstood and feared, the stigma and implications of mental health issues mean that many do not realise they have a health problem or that help can be given; many who do seek help are poorly diagnosed. This can be a particular challenge for men who are significantly less likely to seek support or to receive a diagnosis of stress, anxiety or depression. In such cases the condition and its consequences become significantly worse, with its high levels of associated problems including alcohol, drugs, relationship breakdown, employment issues, self-harm and suicide.

² RFL audience demographics and Repucom market research

³ Tackling Men's Health (DH funded programme evaluated by Leeds Metropolitan University); Premier League Health: A national programme of men's health promotion delivered in/by professional football clubs (White, Pringle, McKenna et al, Leeds Metropolitan University, 2012.) and Football Fans in Training, Social and Public Health Sciences Unit, University of Glasgow/MRC

3.7 The recognition of the scale of the problem, including the prevalence and impact of mental health issues in our communities, means tackling mental wellbeing is a major priority for Rugby League and provides a very good fit with our mission and the opportunities Foundations can create.

4. AIMS OF THE RLC/SPORT RELIEF PROJECT: WHAT IT IS ALL ABOUT AND WHAT IT AIMS TO ACHIEVE

Rugby League Cares and Sport Relief

4.1 In 2012 Rugby League Cares secured a grant from Sport Relief to deliver a two-year, community-focused programme on mental wellbeing with the aim of creating:

- A range of projects aimed at improving mental wellbeing of “at risk” groups within local Rugby League communities
- Greater awareness of the services available and access pathways for those in need
- Cultural change and greater capacity within Clubs through tailored staff training and education, giving staff greater confidence and knowledge about mental wellbeing
- Links between Clubs and communities especially for those in older age groups with which the RLC particularly wishes to engage
- Lasting relationships between Clubs and local partners particularly with the NHS and local expert charities
- New knowledge on what is effective (and less effective) in engaging staff, communities and media

4.2 To achieve these aims, the programme had the following four elements:

Element one: Activities for At Risk groups run by individual Club Foundations

4.3 The Charitable Foundations of 12 Clubs (11 Super League, 1 Championship) agreed to take part in the programme. Each was offered £10k in each of Year One and Year Two (subject to satisfactory progress and reporting) to shape and deliver a project aimed at one or more “at risk” groups on the general theme of “mental wellbeing”. Details of each project including progress and outcomes are set out at Section 5.16 below in summary and attached in detail as a separate document). All of the programmes have proceeded to plan with the exception of London (see below).

4.4 In addition to their local programme, Super League Clubs participated in the public awareness campaign on mental wellbeing during Round 27 (see above and **Annex A**).

4.5 London’s Year One programme started later than planned due to staff changes within London Bronco’s and London Rugby League but has been successfully undertaken in collaboration with an award winning charity (Young Pioneers), which uses technology to promote better understanding of wellbeing in target audiences and which promoted mental wellbeing at a number of major London-based events. The delay gave us the opportunity to use the Year 2 funding to address one of the most significant pieces of feedback from Foundations from Year 1: most worked closely with schools and other groups of young people and reported that their awareness programmes were confirming findings in other research that young people suffer a number of stresses and that it is at this age that a number of mental ill-health issues can start to surface. Having reviewed feedback and consulted head teachers and teaching staff it was decided that this project should focus on cyber-bullying because of the apparent scale of the issue and its importance in the wellbeing of young people. As Young Pioneers is an award-winning organisation and has a particular expertise and commitment to tackling bullying, we

decided to ask them to run this second stage of the London project focusing on cyber-bullying.

Element Two: training and development on mental wellbeing

4.6 Although Foundations have worked on health and wellbeing projects for some years, this was the first major project specifically around mental wellbeing. We recognised the importance of providing training for staff and volunteers. In 2011, the Five Boroughs Partnership NHS Trust developed a bespoke version of the evidence-based Mental Health First Aid programme, which was delivered in 2011 by specialist mental health nurses from the Trust aimed at players and staff. The turn out and positive response rates were very high and the team delivering the programme were awarded the Nursing Standard Mental Health Award 2012. As a result, Five Boroughs extended the programme (including using money from the NHS) to include players in different age groups.

4.7 Set out below are details of the successful collaborations on training with Age UK, Mental Health First Aid and a valuable new link to Dementia Friends (programme promoted by the Department of Health and the Alzheimer's Disease Society).

Element Three: public campaign to raise awareness of mental wellbeing issues

4.8 We ran a mental wellbeing campaign for the general public over Super League Round 27 (7-9 September 2012). The State of Mind programme and its work particularly with players following some tragedies in the sport, had suggested that there was clearly a potential opportunity to use the profile of Rugby League and the willingness of players to talk about their own problems, to promote mental wellbeing more generally. As Rugby League has a family fan base with fans of all ages, many from the more deprived areas of the country where mental wellbeing problems are more prevalent, this seemed particularly appropriate and a strong opportunity to test out how to reach a large number of people and establish how welcome such a campaign would be.

4.9 A summary of what happened and the outcomes is set out below at Section 5 and a detailed report including evaluation is attached at **Annex A**. We are exploring opportunities to continue the work including additional sources of funding and support from the RFL.

Element four: Management, monitoring and evaluation

Project management and support to Foundations

4.10 In order to provide support to Foundations and maximise the learning that could be obtained, RLC recruited an experienced project manager who produced a toolkit of central resources which all Clubs could use, to minimise their workload and avoid repetition, including:

- Details of a range of counselling and support services both on wellbeing and wider issues such as financial management and relationships
- Key lessons and ideas from past projects in several sports (see **Annex B**)
- Material on mental wellbeing from which Foundations could select depending on the audience and include in literature including contacts for different issues⁴

⁴ This included details of where to get more information and help (including GP, NHS Direct, Samaritans, Talk to Frank, counselling services, MIND, Rethink, Sane line, CALM and MENCAP; contacts for carers including Carers Direct and the Carers' Trust; links for young people including

- Step by step guidance on how to carry out an “audit” of the Club’s offer and create a business case for engaging partners
- Advice for Clubs to support them in assessing the impact of their project (including a list of measures and outcome indicators which Foundations could use and adapt for their projects)
- The project manager also provided 1 to 1 support to enable Clubs to link with local NHS bodies so that there were clear onward referral routes; and support to identify and build links with useful partners including at national level, as well as attending meetings with partners and reviewing draft documents
- Included updates, feedback and discussion on the agenda of the regular meetings between Club Foundations and RLC

4.11 In addition, a “Reference Group” of potential sources of advice was set up so that we could access advice, which included:

- The Chief Executive of a Sector Skills Council
- The Chief Executive of a national charity for carers (and former CEO of a Regional Development Agency and a Primary Care Trust)
- The Chief Executive of a national charity for children and young people, and chair of a national mental wellbeing charity
- A senior official in the Department for Work and Pensions
- A senior academic specialising in health promotion and mental wellbeing
- The Chief Executive of a Chamber of Commerce
- A business mentor (and qualified rugby referee)
- A co-chair of a national healthcare charity

4.12 Although Community Foundations are experienced in shaping and delivering programmes, RLC and the Foundation teams recognised the importance both of this specific grant but also of using it to build capacity and learn lessons both for Year 2 and for subsequent programmes. It was therefore very important that each project had a clear project plan with clear plans for evaluation, and that Foundations were supported throughout the process. This meant that all projects started with a clear plan and could more readily engage partners: several Foundations commented that once they could clearly articulate what they were trying to, partners were keen to collaborate.

4.13 To achieve this, we created a Monitoring and Evaluation Framework for the community-focused activities, including:

- (1) Each of the Club’s Foundations **identified one or more groups at risk** from poor mental wellbeing within its local community, and devised a programme to engage and support that group to improve its mental wellbeing. It was recognised that Clubs were likely to do better with a focus and audience of their own choosing, particularly as mental health priorities and opportunities would vary from area to area. Foundations therefore had a choice over the nature and audience for their project, but were asked to take account of the following in making their decisions:
 - Aim to build on Foundation’s existing strengths, particularly their knowledge of and understanding of “at risk” groups
 - Ensure that all programmes and activities were engaging to maximize interest and attendance

Young Minds, Child line, NSPCC and Nightline for students; debt and financial management; consumer support; relationships, Age UK and Lesbian and Gay Switchboard, as well as links to Time to Change and the Mental Health Foundation

- Using the opportunity to use the funding to build more and stronger partnerships with local bodies in the public, private and not for profit sectors
- The value of making the projects better quality and bigger in scale by bringing in outside expertise and resource, largely in the form of “in kind” contributions, which each Club was asked to quantify as far as possible
- Consider the lasting value of building capacity within their teams, so that there would be a more sustainable, better informed and skilled resource within Charitable Foundations which would have an impact for the future
- The importance of ensuring clear “referral routes” so that anyone with concerns about themselves or others could easily find high quality support

(2) All Foundations completed a **project plan** in line with the template produced by RLC (see **Annex C**). These covered:

- Which group(s) had been selected and the rationale
- The aims of the project, its planned impact and how it would be evaluated
- What the project would involve and how it would be delivered
- Plans for recruitment and promotion,
- What partnerships would be used or developed
- Key milestones and proposed use of the funding

All plans were assessed, minor modifications made and RLC approval given prior to the projects starting, including suggestions on potential partners and contacts, ensuring that aims were clear, that the projects were feasible Clubs were able to make changes should the need unfold, provided these were discussed and confirmed with RLC

(3) Ensuring that each individual project included its own **evaluation plan** integral to its project plan. To support this, Foundations were sent a list of potential evaluation measures from which they could choose and adapt as appropriate (see **Annex D**)

(4) Keeping up to date with progress and enable early identification and tackling any emerging issues through regular meetings, contacts and submission of a formal **quarterly monitoring form** focusing on key elements which enabled RLC to monitor progress, identify any issues or emerging opportunities and provide additional support as required, as well as meeting governance requirements (see **Annex E** for template and **Annex F** for collation form). All of these returns were collated into a summary for RLC each quarter. As well as meeting governance requirements, this enabled us to identify issues and potential opportunities as early as possible and take any action as quickly as possible including identifying and approaching potential partners.

(5) Commissioning an **independent process evaluation** to be carried out by the Institute for Health and Wellbeing at Leeds Metropolitan University to help us identify lessons

(6) The production of a **detailed report on Year One**

(7) Holding a “retreat” in January 2014 to go over lessons, **share learning** and plan for the future

(8) The production of a **detailed final report** and

(9) A **standalone document** with lessons and ideas for the future

4.13 In July 2012, RLC sent a paper to Sport Relief setting out the programme in more detail including plans for monitoring and evaluation, and including copies of each of the individual project plans. We have reported progress against these plans regularly.

Budget and funding

4.14 Funding was allocated as follows:

Area	Amount
Foundations (12 @ £10k)	215
Project Management and coordination	28
Publicity campaigns and promotion	20
Training: including sharing key lessons	40
Evaluation working including independent process review by Leeds Metropolitan University	9
Total Year One	312

In addition to this we still require invoices for the following:

- Foundations - £25k
- M&E - £6k
- Sundry Items - £5k

This will take us to a total spend of £348k against a budget of £351k.

4.15 In carrying out the projects, RLC and Foundations:

- Engaged more than 80 external partners
- Worked with at least 10 sectors including health, social care, education, justice, culture and the arts, employment, training bodies and specialist charities
- Reached several thousand people at risk and delivered hundreds of contacts and programmes, and promoted mental wellbeing messages to many thousands more
- Secured significant value in terms of expert input from statutory, not for profit and private sector organisations which enabled Foundations to deliver hundreds of events, workshops and programmes over the two year programme
- Have contributed many thousands of pounds of value by Clubs and Foundations themselves in terms of extra staff time, facilities, tickets and prizes

5. ANALYSIS: WHAT HAVE WE ACHIEVED?

5.1 The following section sets out what happened as a result of the Sport Relief/RLC Mental Wellbeing Programme, under the following elements:

- (1) Local community-focused projects

- (2) Training and capacity building
- (3) Public campaign on mental wellbeing
- (4) Pulling it all together: how well did we perform against our overall objectives?

Outcomes of local community-focused projects

5.2 Attached is a **summary** of each of the individual Foundation projects and their outcomes. Progress in Year One was very good, with RLC and individual Foundations delivering their programmes very much to plan with some exceeding year one targets and most adding in additional activities to reflect the strong relationships which had been formed with partners and further priority needs Foundations identified as a result of the programme. This work was consolidated in Year Two, which focused more on delivery and on looking into future sustainability.

5.3 The section below reports on performance against each of the major objectives of the programme.

Creation and delivery of projects tailored to “at risk” groups within local communities, aimed at improving mental wellbeing

To what extent did Foundations achieve the objective of identifying and engaging marginalised and disadvantaged communities?

5.4 In all cases Foundations successfully identified and engaged at risk groups. Several different groups were reached, including men generally, young people, carers and older people. Partners confirmed Foundations’ decisions, for instance that they correctly identified that there were few services for local carers (Featherstone and Wakefield), and in several cases partners were inspired to join in because they recognised that the Foundation was taking forward an important part of their local agenda and had resource and complementary expertise in engaging target audiences. Many Clubs included a focus on the general population in addition to work with specific groups. This was an important contribution given that at any one time as many as one in four of the population has a mental wellbeing issue, and many of those most at risk are unaware of the facts or the support available or have reduced access to opportunities. Several projects engaged those who already had mental health conditions including two sets of patients in in-patient facilities (Hull, St Helen’s), adults with diagnosed conditions who often find it hard to join in sport (Huddersfield), and those with learning disabilities who have been enabled to attend matches with other fans (Wakefield).

Which audiences did Foundations target?

5.5 Foundations were able to choose one or more audiences within the theme of “mental wellbeing”. Most Foundations used their existing knowledge to identify the groups with which they wished to work. In many cases, this built on existing expertise (for instance, Warrington and Salford which added additional work on mental wellbeing to their existing programmes on employment). Others used local information such as the JSNA to identify needs and gaps (Wakefield, Featherstone).

5.6 The following chart summarises the audiences, numbers of Foundations engaging that audience and examples by Foundation:

Audience	Number of Foundations	Examples
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	engaging this audience	
Children including Key Stage 4 and 6 th Form	8	400 (Bradford) 270 (Hull); 30 (Huddersfield) 140 (Widnes) 105 (Warrington)
Young people aged 18-25	5	St Helen's employment programme with Job Centre Plus and health checks Salford 332 (target 300)
Older people	6	243 health checks (St Helen's) 70 in Wakefield network 54 on Wigan programme 45 Warrington outreach 114 Salford Red Devils 55 Hull nursing homes sport cafes (Alzheimer's) 16 coffee mornings (Widnes)
Adults with mental health issues	4	17 in Huddersfield Good Mood League first event 60 at Huddersfield Fun Day 17 in Hull inpatient-unit project 55 Hull (as above) 87 (Warrington/HMP Risley)
Carers	2	93 at Featherstone event plus 200 in network 20 buddies in training (Wakefield)
Community Clubs	5	49 (Huddersfield) 28 (Leeds Ambassadors) "State of Mind" training 100 juniors from local clubs at Tag Festival (Bradford)
General public	All through Round 27 Campaign in 2012 A number of other matches and public events – examples adjacent:	Salford Advertiser (234,000 readership) Salford Match (7486) (target 5000) London construction workers (500) St Helen's events (700)

Adapting the programmes

5.7 Most Foundations continued to focus on the groups that they had originally identified, although some slightly changed their approach in response to advice from partners. However, most Foundations added **additional** "at risk" groups once they realised that there were opportunities to reach more people especially those which partners advised were at particular risk. For instance, Wigan had originally intended to focus on coaches but as the programme was developed it became clear that it was going to take longer than had been anticipated to carry out the recruitment. During discussions with partners Wigan realised that

there was already a physical-activity based programme in operation that included many people with mental wellbeing needs who would be suitable candidates for the programme, which Wigan was establishing. As a result, Wigan's programme has a dual audience – coaches, as originally planned, and the “graduates” of this “Shape Up Trim Down” programme.

5.8 Saints Foundation set up their programme to focus on seven of the more deprived areas within St Helen's, and carried this element through successfully. However, discussions with partners showed that St Helen's was suffering from a particular issue with young people aged 18-25 who were becoming unemployed and suffering fairly rapidly from depression as a result. Saints recognised that the Club could have a useful role here and as a result developed a very effective partnership with Job Centre Plus. This has been a very good example of where each partner brought their own particular strengths to a project: Job Centre Plus had programmes to support young unemployed people but had sometimes struggled to reach their target audience. Saints had two contributions to make: one was experience in engaging people around health and wellbeing, and the other was the Saints brand and the Langtree Park stadium. St Helen's and its Foundation have a strong reputation and following in the area and the players were very willing to give public support to discussions about mental wellbeing, which attracted local people. The stamp of approval from Saints was fundamental to the success of Job Centre Plus's initiative to support young people in great need.

5.9 Huddersfield made two adaptations to their programmes. Firstly, the original programme for young people had to be delayed due to changes within the key Council partners but then ran very successfully during year 2. The Good Mood League worked well initially but interest dwindled. As a result it was replaced by a Fun Day aimed at those with Learning Disabilities, which has proved highly successful with 60 participants attending the first session.

How were the projects aimed at improving mental wellbeing and with what impact?

5.10 Each individual scheme was evaluated and the attached paper sets out the outcomes of each in detail.

5.11 There is a general lack of understanding and therefore a stigma associated with poor mental health, with many misunderstandings and assumptions about cause and effect. In many cases people do not realise that their mental health is impaired (and in many cases they do not receive a correct diagnosis) or that support is readily available. Whilst people may recognise that they need to look after their physical health, many do not appreciate that they can also take steps to promote their own mental wellbeing, build resilience and increase their levels of satisfaction with life through relatively simple steps, including the NHS's Five Ways to Wellbeing, for instance through being more socially engaged and being more active, both objectives of the Sport Relief projects. Events with schools and clubs have shown increases in understanding and awareness (such as Bradford, Huddersfield and Leeds).

5.12 Foundations agree that the public engagement of players and the Club in talking about mental health and their personal challenges has made an important contribution to engaging audiences and tackling stigma. One former player and current coach was invited to give presentations to other groups as a result of his work with the programme due to his willingness to speak openly about his personal experiences. Stressing that physical injury and poor mental health have many similarities has been a useful analogy in stressing the importance of resilience but also how mental ill health is not the fault of the sufferer. Foundations also found that literature setting out details of local services were popular, with participants asking for additional copies to give to friends and family, suggesting that they were happy to be seen asking for information at these events and to be sharing it with people they knew.

5.13 Targeted work with at risk groups has shown improvements in mental wellbeing. Those attending programmes have reported improvements in their own mental wellbeing (such as Warrington's outreach programme which saw a 16 point rise in the WEMWBS score; 88.2% of participants who completed 18-session programme for those in HMP Risley demonstrated meaningful positive change in mental wellbeing) and Wigan participants reporting progress against their personal goals. Several participants have gone on to other programmes including 6 signing up for a City and Guilds Course following Hull's programme, and a number reporting that they have joined gyms (Wigan) or are maintaining their activity levels through other programmes.

5.14 Young people face many stresses and good mental resilience can support them. For some, conditions will start to emerge at this point and it is important that they can recognise the issues, know what to do and that those around them support them and encourage them to take action. Drug misuse was highlighted as a particular concern and a number of Foundations covered this in their sessions (often by involving external experts) as well as signposting people to local services and to the national Talk to Frank service. Schools-focused programmes and those for younger players all contributed to this increase in understanding. As a result of this work RLC is commissioning a project on Cyber Bullying.

5.15 For others, mental ill health was already present and taking a toll, causing social isolation which was exacerbating their condition. Initiatives that enabled these groups to be physically active and be involved in social networks would strengthen mental wellbeing as well as having physical benefits. Physical activity and other social participation is known to have a beneficial impact on mental wellbeing and all these activities build social capital - another determinant of mental health status: examples include Wakefield, Salford, Warrington and Huddersfield.

5.16 Evaluations have shown the impact of Foundations' work. Participants report increases in their understanding and awareness, including of symptoms, what is "normal", where to obtain support for themselves and others. Foundations agree that the public engagement of players and the Club in talking about mental health and their personal challenges made an important contribution to engaging audiences. In some cases, groups had specifically asked for contributions from specialist charities or from players who had been open about their own mental health challenges.

5.17 As one example, here are the perspectives of a member of staff and one of the participants from the HMP Risley project:

"the impact that the Club brand and profile has on engaging, enthusing and inspiring the local community to initiate and sustain positive lifestyle changes is immeasurable"
(Warrington Wolves Foundation member of staff)

"Since taking part in the sessions, I decided to become a well-being mentor to help others who may be struggling and would like to come back and help at the next one"
(Craig, participant in Warrington collaboration with HMP Risley and Pathways to Recovery Team)

Greater awareness of the services available and access pathways for those in need

5.18 RLC stressed to Foundations that all projects had to include clear signposting to relevant services. Foundations were given a set of links but were also encouraged to work with local bodies so that they could promote local contacts. We recognised that mental wellbeing is a complex issue and that Foundations were likely to encounter issues that were

not within their areas of expertise, so the important thing was to know who was the expert and have effective ways of guiding people to them. The NHS Confederation's Mental Health Network offered to provide support by contacting any local mental health body as required. In the event, all Foundations achieved these contacts through direct approaches or through existing partnerships but we welcomed this offer.

5.19 Many people were unaware that confidential, free, expert services exist both through the statutory and not for profit sectors, covering prevention, treatment of all kinds as well as providing support for those in challenging circumstances and whose mental wellbeing is at risk, such as carers or those who are unemployed. Awareness rose as a result of the Sport Relief projects (see below for details – one example is Hull's programme for young people where 100% reported that they know felt confident about where to go for help should they need it).

5.20 By creating partnerships with specialists in the NHS and not for profit sectors, Foundations were able to get advice on how best to present their programmes and importantly to ensure that they could signpost all participants to appropriate further information and support. There were several examples where signposting and bridging contacts worked well through the creation of partnerships with specialists in the NHS and not for profit sectors. Foundations were able to signpost all participants to appropriate further information and support. Specific feedback includes:

- One of the most positive and commonly expressed pieces of feedback from participants was that as a result of the programme they now knew where to get help
- Many events had GPs and mental health specialists in attendance who were able to deal with issues that arose, as well as colleagues from housing, employment and training carrying out a similar positive role
- Some programmes such as Wakefield brought in specialists in response to requests from participants to ensure that expert information was given that met their priorities
- Hull in particular found that they were able to identify people on their programmes who were in need of specialist support but who were not currently under the care of their mental health trust, and were able to make this important link
- Foundations found that literature setting out details of local services were popular, with participants asking for more copies to give to friends and family.

5.21 The Round 27 campaign (see **Annex A**) promoted a web-link on NHS Choices with material about the Five Ways to Wellbeing, a self-assessment tool and links to a comprehensive range of advice, information and signposting. NHS Choices reported significant traffic to the web-link and a very significant amount of time being spent by individuals once on the site, suggesting that they used the material. Foundations were also given a set of contacts to use in literature, which was included in match programmes, websites and press releases.

5.22 We have little information on how many people followed through on information they were given: some partners said that this would breach patient confidentiality. As a result, we used proxy measures of numbers of interactions, numbers seeking information, people's feedback on the value of mental wellbeing and local initiatives and the views of programme partners on the likelihood of people taking action as a result. One finding from Year One was that many people are very willing to share their personal stories with others, and a number of Foundations were able to use this to good effect during Year Two.

Lasting relationships between Foundations and local communities (particularly older people), and with local partners particularly NHS and expert charities

How did Foundations use the resources?

5.23 Without the resource from Sport Relief, none of these projects would have been developed. Foundations generally have very small numbers of staff and depend on grant funding to enable them to carry out their work. However, Foundations were able to use the existence of the Sport Relief funding to lever in very major additional benefits. Having some funds to bring to the table meant Foundations were able to attract the attention - and then the contribution of both statutory and charitable bodies. These organisations reported that because it was clear “something” was feasible, they were able to prioritise their own time and resources to supporting the Sport Relief project. Some Foundations have quantified partners’ input (see below).

5.24 As Programmes have varied, Foundations have tended to use the funding from Sport Relief in different ways. Typical uses include:

- Some staff time (although Foundations contributed a significant amount of this from within their own resources)
- Travel and subsistence for coaches and participants
- Facilities, including catering (often provided free – particularly by Clubs and Foundations – or at reduced rates, by partners)
- Laptops and projectors in order to make better quality presentations off-site
- Materials for events including tailoring existing materials for a new audience
- Carrying out health checks (including costs of testing kits)

5.25 Although Foundations have a number of strong local connections, these projects enabled them to identify and collaborate with a new range of partners, particularly mental health NHS trusts, specialist charities supporting carers, older people, young people at risk and mental wellbeing.

Who did Foundations work with?

5.26 It was clear from feedback from partners that statutory and charitable bodies wanted to work with Rugby League Community Foundations because they recognised that the Club and Foundation’s position in their local communities meant they could attract local people from those organisations’ target groups – in effect making the “hard to reach” much easier to reach and support. In addition, the fact that Foundations had funds and a clear project idea made it more likely that partners would prioritise their own contributions to support the project.

5.27 In total, Foundations reported working with 64 partners in Year one, and a further 20 or so in Year two, making well over 80 external partners contributing to the Programme. Foundations have engaged with a wide range of sectors, as shown in the table below

Type of partner	Number Partners	of	Partners’ Contributions
NHS Public Health (moved to LA from April 2013)	7		Providing health checks; advice on audience and support in recruitment
NHS Mental Health Trusts (some trusts cover more than one Club’s area but also have several elements so one trust is involved in several types of initiatives such as wellbeing promotion, community outreach services and in-patient care)	10		Expert advice, attendance to signpost and provide on-site support; recruitment and delivery of some elements

Other Health including primary care providers and commissioners	10	Attending events to give advice; input to programmes
Local Authority including housing, older people's services, children and young people's services	6	Advice, attendance at events to signpost and offer 1 to 1 support; collaboration on programmes particularly for older and young people
Specialist charities (including Age UK and individual local charities)	12	Advice and significant amounts of delivery and input, such as for carers and schools; recruitment and training (e.g. Age UK)
Carers' organisations	1	Advice, publicity and significant amounts of delivery at events; administering Carer's Card
Education Sector: schools and higher education	8	Collaborations on activities for schools and young people
Job Centre Plus	4	Contributing to and leading some events; attendance at activities to provide advice
Community Rugby League clubs and past players' associations	9	Recruitment, support for events
Justice	5	Recruitment support; provision of programme to HMP Risley
Arts and culture bodies	4	Specialist support to those with mental health issues
Business	5	Mostly private sector fitness bodies plus one private sector body providing business mentoring
Media	2	Several local papers provided coverage: one ran radio campaign for carers, one ran major campaign (Salford)

What contributions did Partners make?

5.28 Foundations engaged external partners from a range of sectors. All partners made in kind contributions. Partners' most significant contributions included:

- Advice on which groups to target (in most cases, partners endorsed Foundations' original choices but some slight changes were made and in some cases additional groups were added)
- Expert knowledge about at risk groups and how programmes could be adjusted to make their impact more successful
- Taking part in initiatives: in some cases, the partner took a significant role in providing the programme: one mental health NHS Trust ran a touch rugby programme with Huddersfield Giants providing the activity and the Trust providing expert support to participants; Job Centre Plus ran the employability element of a programme with Saints Foundation providing sessions on mental wellbeing; Carers Wakefield's support workers ran sessions for carers which had been organised and badged by Featherstone Rovers Foundation
- Recruitment on to programmes and initiatives: most partners had databases and contacts that they made available, or actively recruited on behalf of Foundations. In some cases, such as Wigan, the partner used the Foundation's programme as a follow on from their programme
- Signposting and the provision of follow up services: partners provided information so that participants knew where to go for help, and often attended programmes so that they were on hand

- Contributing to or providing training free, including State of Mind (including securing NHS funding) and Age UK which provided training to two Foundations (Wakefield and St Helen's)

5.29 Each of these contributions meant a significant amount of time and expert knowledge was levered in by the Sport Relief funds. Although not all partners kept a record of the time they spent, some were able to put some costings on the contributions from partners:

- Carers Wakefield put their input at £2,580 through their time organising and running events in partnership with Featherstone Rovers and £600 to Wakefield Wildcats Disabled Companion's Card scheme
- Age UK provided £900 of training to St Helen's and trained 14 staff at Wakefield Wildcats
- Job Centre Plus put in 112 hours at £1680; St Helen's Council and public health team put in £1800 of contribution to St Helen's programme
- Barnardo's and Bradford District Care Trust contributed £1500 of their time to the schools programme run by Bradford Bulls
- ABL healthcare provided two hours a week to the Wigan programme
- NHS Resource Centre Leeds provided £100 of printed materials

5.30 Foundations themselves all contributed staff time, particularly project management. Several Foundations noted that the programmes took up more of their time than they had anticipated, particularly in building up partnerships. This was a learning point for the future – but was universally welcomed by Foundations because it was a mark of the scale of response from partners and improved the quality of the services Foundations could offer and strengthened capacity. In many cases, new schemes and partners joined the programme once it got going, and in others partners had involved Foundations in new ideas which Foundations had not previously considered, such as working with young people making the transition from inpatient mental health accommodation or young people suffering from the consequences of unemployment (both St Helen's) and prisoners (Warrington).

5.31 All Foundations and their Clubs put in additional resources in kind although they generally did not keep a detailed measure of these contributions. A conservative estimate is that it was at least £1,000 each and in most cases it was considerably more. In most cases, players and coaches attended events, which was useful in attracting an audience and the media. Foundations felt that having prominent and successful sports people talking openly about mental health, including their own experiences, made a significant contribution to breaking down stigma, changing people's attitudes and getting people's attention so that misunderstandings could be tackled. Specific examples of Club and Foundation contributions include:

- Salford Red Devils contributed £18,500 in kind through players and Club staff, website space and professional communications support and 250 family tickets for programme participants (40 @ £250)
- Salford Red Devils Foundation provided £3,100 in staff time
- Wakefield Wildcats' chaplain provided 50 hours (£900)
- Bradford Bulls provided venues free and volunteer time for Tag Festival
- Wigan Warriors provided materials, video filming and editing and the time of current and past players
- All Foundations reported putting in additional time, such as Huddersfield and St Helen's for partnership building and Wakefield, Featherstone and Leeds for additional project management support
- Warrington Wolves contributed tickets, facilities and player time (£6,000)

Older people

5.32 Older people (over 50) are one of the target groups for Rugby League Cares. We hoped through this initiative that we would engage a number of older people, recognising that Foundations have strengths in a number of areas including:

- * Social inclusion
- * An attractive brand and positive associations
- * Readily accessible facilities including for those with disabilities and mobility problems
- * Employment and training support
- * Experience in running physical activity programmes designed for older people
- * An infrastructure of past players' associations

5.33 Seven Foundations engaged with Older People including:

- Creation of two sets of Older People's Champions through training provided free by Age UK (St Helen's and Wakefield)
- St Helen's over 50s health checks
- Reminiscences workshops run by Bradford and Hull
- Widnes: "Invisible Vulnerables" – with Mid Mersey Age Concern/Age UK, creating activities aimed at older people to reduce social isolation and a "lose a shirt size" campaign with Age UK (16 coffee mornings and regular visits to Housing Trust)
- Wakefield: Over 50s social activities (70)
- Many carers are over 50 (Wakefield and Featherstone Rovers)

5.34 An additional link was made with the **Alzheimer's Disease Society (ADS)**: Foundations run reminiscences programmes, have provided programmes for carers and physical activity programmes for older people which can be valuable in protecting and improving vascular health which has a positive impact on the condition.

Cultural change and greater capacity within Clubs through tailored staff training and education, giving staff greater confidence and knowledge about mental wellbeing

5.35 RLC and Foundations identified mental wellbeing as a priority area due to the higher than average prevalence in Rugby League communities. In addition, an added impetus came from a spate of high profile suicides and public revelations about the mental struggles of a number of professional and amateur players both in rugby league and sport more generally. Rugby league recognised that it had a role to play in promoting better mental health, particularly with an audience that could find it particularly hard to recognise and engage with mental health services: many people do not realise that they have symptoms of mental health issues and many more feel there is a stigma attached to mental problems. All Foundations had experience in working in health and wellbeing, but relatively few had experience of dealing directly with mental health issues. Sensibly, all Foundations sought support from specialist charities and statutory bodies.

5.36 One of the most often repeated and stressed comments by Foundations was the contribution which the programme has made to their own understanding, confidence and capacity. Key examples included:

- All Foundations had to consider how they could become involved, and how to make the case to local partners to get them to engage successfully

- Staff learnt how to shape programmes taking into account the specific needs of their audiences, including young people (who tend to want a lot of facts), older people (who can find it difficult to overcome isolation) and carers (who have to fit with others' needs)
- Most ran training sessions for staff, coaches and players of all ages
- Some staff have been trained such as to be Older People's Champions (by Age UK)
- Five players from Salford Red Devils First team undertaking Mental Health First Aid course to enable them to recognise signs of mental health issues and provide support to their colleagues

5.37 We asked Foundations what was best and what was worst. Quotes included:

[The best thing:] "The sense of camaraderie and self-sustaining support network which organically develops between people who may never have spoken to or even met prior to the project" (Warrington)

[The worst thing:] "starting initial conversations with people immediately after the local amateur player took his own life as I initially felt like it was too little too late. I later realised that we could be potentially preventing it from happening again.....the project gave me a lot of confidence to be able to speak openly with people about mental health and this will hopefully prevent such tragedies happening again" (Salford Red Devils)

"Seeing the look of absolute joy on the mentally disabled fans when they were given the opportunity to come to games watch from the hospitality boxes. Being able to facilitate this is amazing. I still have the mental picture of 25 fans with learning/mental difficulties cheering for Wakefield with a local Councillor in the next box looking on with a smile and shedding a tear that we had done this for them" (Wakefield)

"the impact that the Club brand and profile has on engaging, enthusing and inspiring the local community to initiate and sustain positive lifestyle changes is immeasurable" (Warrington)

"Overall, we wouldn't change very much. We were proud as a Foundation to work with more people in the community, particularly those in need of support" (St Helen's)

"By running an event for Sport Relief we gained tremendous pride in supporting others and acknowledge that sport is a key pillar for change" (Bradford Bulls)

5.38 Foundations also further developed generic skills such as planning, design and project management, partnership building and knowledge of the how different elements of the statutory and not for profit sectors relate and collaborate.

Public campaign on mental wellbeing

5.39 Two elements of the programme focused on raising awareness of the importance of mental wellbeing, encouraging people to talk about the issues and to seek support where appropriate. One focused on testing out a campaign at one match in September 2012 to gain feedback and was wholly funded through Sport Relief and RLC resources; the other ("State of Mind") focused more on players of all ages in professional and amateur clubs and used funding from Sport Relief as well as from other sources.

Round 27 Campaign and Survey

5.40 Although Rugby League had run successful health campaigns with high levels of fan uptake and positive feedback, we were keen to find out how the public would react to a programme specifically on mental wellbeing to inform plans for future campaigns.

5.41 Over the summer of 2012 we drew up a plan for a campaign on mental wellbeing and an evaluation. We secured the support of the NHS Confederation Chief Executive and through him the Confederation's Mental Health Network. We also gained the active engagement of NHS Choices, the on-line presence of the NHS and recruited Leeds Metropolitan University's Institute for Health and Wellbeing to support the evaluation.

5.42 Packs of standard material were produced and sent out to Clubs including material for websites, programmes and editorials which Clubs could then badge and put their own names on. Branded t-shirts were sent to all Clubs for use in match warm up and photo opportunities. The tight timescale meant that very little pre-match publicity could be organised. NHS Choices produced a bespoke webpage about mental wellbeing with links to an assessment tool and further information. With Leeds Metropolitan University, we also carried out a survey of fans at one match to find out what they thought of us running activities around mental wellbeing, including at a match day.

5.43 We were very pleased indeed with the results of this initiative: all of our objectives were achieved:

- (1) a national public health campaign to promote mental wellbeing was run as planned with engagement from all of the partners (Rugby League Cares, Super League Clubs, two national elements of the NHS (the NHS Confederation and NHS Choices), Sport Relief and Leeds Metropolitan University)
- (2) The successful setting up of www.nhs.uk/rugbyleaguecares - a bespoke web page on **NHS Choices**. NHS Choices consider that this has been very successful:

*“there have been 104 visits to the RLC page so far. On first glance this might sound a little disappointing, [but] that is above average for the time period involved. It should also be looked at in the context of the length of time people spent on the page (208 seconds) - this is **significantly above average** and would suggest (as it's a fairly short page) that people are taking the time to read it and, perhaps, use the wellbeing assessment on that page. The majority people coming to this page are likely to have come directly to the site after seeing the URL on the various forms of marketing”.*

- (3) The establishment of a national and local links with NHS bodies through the joining of the partnership by the **NHS Confederation**, its Chief Executive being quoted in the press release and its bringing in of its national Mental Health Network and individual NHS bodies; some NHS bodies were able to attend and others built new links
- (4) **Clubs** were able to promote the messages and their local Sport Relief/Rugby League Cares mental wellbeing initiative through tee shirts, leaflets, programmes, press releases, websites and press coverage. Websites and press releases were used to good effect, and there are several examples of the media (both paper and on-line) covering the story
- (5) the **survey of fans** was carried out at the Giants v Rhinos match on 9th September: this aimed to assess whether fans were comfortable with mental wellbeing being promoted by Rugby League and specifically at match days. Key findings were:

In response to statement 1 “**The sport of Rugby League has a role in promoting mental wellbeing**”, 91% agreed to some extent with the statement, with the largest proportion (58%) agreeing strongly. Only 2% expressed any degree of disagreement

In response to statement 2 “***It is a good idea to use a Rugby League match day for promoting mental wellbeing***”, a very large proportion of respondents (95%) expressed agreement with this statement, with most (66%) agreeing strongly. Less than 2% expressed any degree of disagreement and no one strongly disagreed.

We found very little difference between the sexes and the different age groups.

No one who initially expressed willingness to complete the survey subsequently declined on finding out that it was about mental wellbeing. Although there was no plan to collect qualitative information from fans, a number of fans commented spontaneously – and all favourably - on the importance of mental wellbeing being covered. Several talked about their own issues with mental health and how important it was that it was being talked about.

- (6) It showed that RLC and Foundations can take key messages, build partnerships and deliver the messages effectively in ways that have meaning for fans - even in a very short space of time and with limited resources
- (7) As a side finding, many people commented favourably on finding that the survey was being run by Rugby League Cares, showing that awareness of the charity was already high – and very positive – a few days after its official launch.

State of Mind

5.44 A group comprising some of those closely involved with Rugby League and with NHS mental health services came together in response to concerns about the mental wellbeing of players, and inspired by the suicide of a leading player, which had had resonance throughout the game. The group established an entity called “State of Mind” to run a campaign asking: “State of Mind – What’s Yours?” to promote awareness about mental wellbeing more widely. The campaign was targeted to the public through events at major matches, and directly through tailored workshops for professional and leading amateur players and top junior squads and promotes the message about mental wellbeing more widely. Funding was raised through a number of routes including Sport Relief funding allocated to them by RLC, along with additional funds from the NHS. As well as a number of activities at major matches, the programme focuses on providing a version of mental health first aid, delivered by mental health professionals from Five Boroughs Partnership NHS Trust. A key element is using players to get across the message about the importance of mental as well as physical wellbeing, to help to overcome the stigma and reluctance many people (particularly professional and aspiring sports people) have about talking about the issue of mental health concerns, to share experiences about how to deal with the pressures, issues around substance abuse and how to build mental resilience.

5.45 Funding from Sport Relief was used for a portable stand, DVD, leaflets, t-shirts and media packs, and to support the training which were used as follows:

- 8 volunteers at the Championship, Championship One and National Conference Grand Finals handed out over 1000 leaflets and talked to fans
- 15 volunteers handed out 5000 leaflets and 400 car stickers (with Sport Relief logo) at Super League Grand Final; played DVD to 74,000 fans before match; ball boys wore branded t-shirts (match televised); media packs sent to 40 journalists
- Training sessions for 1900 professional and amateur players

5.46 – In year two State of Mind continued with their awareness campaign across a round of the Super League fixtures including the Super League Grand Final at Old Trafford in October.

They extended the programme further with the development of a new campaign video which targeted the whole sport working under a title of the State of Mind Family.

New ideas presented to RL Cares included a “Fanbassador” project developed in partnership with Warrington Wolves Foundation, which link fans as volunteers into the programme extending its reach and connection with communities in the sport.

Training and capacity building

5.47 A number of Clubs organised formal training initiatives including the following:

Bradford Bulls	Training on mental health awareness and building resilience and wellbeing for staff, coaches, volunteers and players at amateur clubs, both adults and young people
Huddersfield Giants	49 adults and young people in Giants’ professional and youth squads (staff, coaches, volunteers and players) provided by State of Mind
Leeds Rhinos	Trained 28 Ambassadors through monthly sessions and 17 attended a day event on Mental Health First Aid
Salford Red Devils	“Player Pathways”: delivering mental health awareness and discussions on actions/wellbeing to players in all of the age groups/levels within Club. 5 First Team Players now undertaking Mental Health First Aid training
Saints (St Helen’s)	6 days of training provided free by Age UK to community clubs
Wakefield Wildcats	14 people trained as Older People’s Champions by Age UK 20 volunteers being trained as “buddies”

5.48 Most Foundations have received informal advice and support from the NHS, local authority and specialist charities that has developed their understanding and skills, including from MIND and Time to Change. Most of the programmes focused on giving participants a greater understanding of issues around mental wellbeing, enabling people to talk about the issues and complexities of mental wellbeing, how to raise the issues, what to do in key circumstances, where to access support and how to signpost people where issues were raised. Feedback from participants has shown increases in the numbers of people being aware of the issues and understanding what to do. Giving staff confidence that they were doing “the right thing” was one of the most important benefits.

5.49 Foundations agree that once the professional players including the aspiring academy players have undertaken the training, this effectively **takes down much of the barrier** of stigma, and makes it much more likely that those in community clubs (both adults and younger people) will be interested in and willing to undertake the training and participate in any activities around mental wellbeing. Anecdotal evidence is that these sessions did encourage people to come forward either about themselves or someone close to them. Having the training means that people within Rugby League now know what to do, and the links we have built with local service providers means that they know how and where to signpost them for appropriate support.

5.50 As a result of the Sport Relief work, a number of our projects have come to recognise the value of engaging with the agenda on preventing dementia and providing tailored support

to those with the condition. As a result, we have engaged with the Department of Health and the Alzheimer's Disease Society (ADS) over their "**Dementia Friends**" programme: we anticipate representatives from each of our Clubs coming forward for ADS training to become "dementia friends" and then pass the messages on to their colleagues. This training is provided free to Clubs by ADS, using Department of Health funding. [Ask Chris if anything has or may come of this connection] "We are currently considering how we can participate in this initiative"

Contributing new knowledge to understanding of how sport and sports clubs can reach and positively influence local communities

5.51 We identified learning from Year One of the project through the following routes:

- On-going contact between project manager, RLC general manager and Foundation staff; through quarterly monitoring (which has specifically asked about issues, lessons and ideas to share, see **Annex E** for the proforma) and the regular meetings between RLC and Foundations
- Project manager putting Foundations in touch with one another when a specific issue has arisen or ideas could be shared
- End of year one feedback from Foundations
- Evaluation reports which included lessons
- RLC's experience of working with Foundations and from other studies
- An independent evaluation of the process, with a focus on how things had gone from the perspective of Foundations, carried out by Leeds Metropolitan University (see below and **Annex G**)

5.52 RLC commissioned the Institute for Health and Wellbeing at Leeds Metropolitan University to carry out a process evaluation of the first year of the programme so that we had some independent perspective particularly about what could be improved about the process so that RLC could share lessons, and support Foundations better in future both on this project and in future programmes more generally. This evaluation was led by Professor Alan's White, one of the world's foremost authorities on men's health and who has carried out a number of studies on sport, health and mental wellbeing.

5.53 This process evaluation used a qualitative design to conduct a process evaluation of the Foundations' programmes. This had two elements:

- (i) A **focus group** with representatives from a number of the Foundations to gain insight into the key themes around delivery, uptake of services, retention, media coverage and elicit perceptions on the barriers and facilitators to delivery of the intervention, and
- (ii) **1 to 1 telephone interviews** conducted with representatives of each Foundation at the end of the first year period to gain information about how the intervention was delivered; whether the Foundation was able to engage the target group in the intervention, the barriers and facilitators to delivery and what more support would help

5.54 The Report from Leeds Metropolitan University is at **Annex G**. Points from this as well as the other sources listed above were collated (see summary below and more detail at **Annex H**). These both reinforced and confirmed existing understanding and generated new knowledge about what is effective (and less effective) in engaging key groups, how to carry out surveys and evaluations, and what support Foundations find particularly helpful.

5.55 Some of the most important learning points included:

- One of the most effective facilitators is access to funding: the projects would not have happened and the contribution from partners would not have been made, without **Sport Relief's** funding
- Fans are very interested in mental health issues and **will respond** to programmes set up and promoted by Rugby League Clubs and Foundations; although there is still some stigma, the brand and the reputations of Foundations has encouraged many people to participate, and feedback at public events has been strongly that fans support the involvement of Rugby League in this important area
- To some extent, **stigma** can be reduced by the public involvement of Foundations and players, and through techniques that enable people to engage without being seen publically to be expressing concern about mental wellbeing: for instance, general discussions stressing how common mental health issues are, having lots of people talking about the issues, using health checks and health fairs including broader issues and using fun and social activities
- Many people's main concern is "doing the wrong thing": relatively straightforward training is effective in dealing with this, does not take up much time and can often be secured at very minimal cost through partnerships with the NHS and specialist charities: this is a valuable symbiotic relationship with Foundations and staff growing their skills and charities and the NHS securing their objectives of tackling stigma, increasing numbers of "**lay practitioners**"
- Biggest challenges include reaching those most in need: Foundations have overcome this by correctly **identifying at risk groups** and building constructive relationships with partners who have been able to support Foundations with advice, recruitment and communications. Using established bodies' contact lists works well in terms of recruitment as statutory and charitable bodies are usually already in contact with those at risk or have mechanisms for reaching them such as newsletters, events and other schemes from which they can refer on. Some older people are not comfortable on-line but respond well to other media including radio
- Partners offer many **valuable benefits** because they have expertise (particularly a strong understanding of how complex issues around mental health can be) and contacts both within their own organisations and elsewhere; explaining the programme to them at an early stage worked well for all Foundations because it maximised partners' opportunities to apply their knowledge and to get closely involved, improving the quality of projects, aiding recruitment and ensuring there was good signposting and onward referral routes
- This has worked both ways: for instance Hull found that they were able to identify participants who were in need of support from specialist mental wellbeing providers but who were not currently "in the system" and were therefore able to **refer** them on
- Foundations and Clubs are very valuable partners because people are attracted by the **brand**, interested in what the Club and players say, and feel comfortable engaging with the Club – particularly at its own facilities – even about very sensitive issues
- Mental wellbeing and ill-health can be tackled through many different routes and Foundations can make a contribution across **a range of issues** related to mental health. These include promoting messages to the general public, to engaging with groups most at risk of developing problems (young people, carers, unemployed, socially isolated) and those who are already diagnosed (adults, in-patients, people with learning disabilities)
- People want **more information** so it is important to ensure that robust information including signposting is always available; people like to have written material which they can take away to share with others

5.56 Specific examples of learning include:

- Using feedback from participants and staff and the results of evaluations of Year 1 to revise programmes so that they are improved for Year 2 using the learning from experience so far (for instance, the schools programmes will include more hard information and shorter, more interactive sessions;
- Some programmes will now be rolled out more widely, particularly where professional and academy squads have now received mental wellbeing training and the programmes are being shared more widely among community clubs; schools programmes and initiatives with at risk groups will be extended to other schools and groups
- Some programmes will continue with their existing groups, for instance with carers, buddies and ambassadors: having created the groups, the focus is now on increasing their skills and ensuring services meet participants' needs and preferences

5.57 Feedback from the independent survey from Year One carried out for RLC by Leeds Metropolitan University (detailed report at **Annex G**) about capacity and training includes:

- How to engage with Health particularly now public health responsibility has shifted to Local Authorities
- Getting feedback and evaluation forms back from participants
- Best practice information about mental health promotion
- Value of more external training, e.g. Time to Change
- Possibly training up individuals within Foundations so that they can deliver their own in-house training at the required standard

5.58 All of the projects continued into Year Two, using the lessons and connections already gained. We continued to monitor progress and shared connections and emerging ideas across Foundations. We shared learning from Year One across Foundations both at quarterly meetings and at our two-day event in January 2014, which was specifically aimed at sharing information and lessons. All Clubs report an increased their capacity to understand, draw up and deliver initiatives which are specifically focused on mental wellbeing, including the specific issues for each Club's target audiences.

6. Conclusions and Next Steps

6.1 RLC and Foundations have achieved the objectives of the Programme.

Objective	Outcomes
<i>creation and delivery of a range of projects, tailored to "at risk" groups within local communities, aimed at improving mental wellbeing</i>	<p>Foundations have shown that they can successfully create and deliver programmes which engage a wide range of at risk groups and have positive impacts on participants</p> <p>Demonstrated ability to work in partnership effectively including statutory partners in NHS and Councils</p> <p>Evaluations carried out which showed positive results on engagement, awareness raising and improving mental wellbeing</p> <p>Feedback is that the Foundation and Club's brand and position in the community have been fundamental in engaging their target populations, e.g. Job Centre Plus; men (St Helen's, Wigan, Featherstone)</p>
<i>greater awareness of the services available and access pathways for those in need</i>	All projects included focus on raising awareness and signposting, largely through partnerships with NHS and charities, many of which were closely involved in projects

	<p>Evaluations of individual schemes show increases in awareness such as Bradford and Hull schools, Warrington outreach programmes</p> <p>Also linked to other sectors including employment, housing and social care</p> <p>Collaboration on Round 27 with NHS Confederation and NHS Choices demonstrated value of a Rugby League campaign</p>
<p><i>cultural change and greater capacity within Foundations and Clubs through tailored staff training and education, giving staff greater confidence and knowledge about mental wellbeing</i></p>	<p>Foundations and Clubs have undertaken training including for younger players, coaches and those in community clubs</p> <p>Foundation staff now have experience in mental wellbeing work and several have also undertaken additional training in-house or with Age UK</p> <p>All report that being involved has had a significant impact on knowledge, confidence and capacity</p>
<p><i>links between Clubs and communities especially for those in older age groups with which Rugby League Cares particularly wishes to engage</i></p>	<p>All Foundations made new links to their communities, engaging thousands of people through awareness and information programmes for the general public, and through a wide range of targeted activities for at risk groups from young people, older people, those with mental health issues and those who are isolated</p> <p>Several projects successfully targeting older people. Seven Foundations have created schemes engaging those aged 50 and over. Reminiscences programmes proving popular with charity partners and participants alike</p>
<p><i>lasting relationships between Clubs and local partners particularly with the NHS and local expert charities</i></p>	<p>Statutory and charitable bodies want to work with RL Foundations because they have recognised that the Club's brand and the position of the Foundations in their local communities mean that they can attract local people from those organisations' target groups – in effect making the “hard to reach” much easier to reach and support</p> <p>All Foundations have established successful partnerships with local bodies including NHS, local authorities, Job Centre Plus and charities with specialist skills in mental health, young people and older people. Partners have all made significant contributions: expertise to strengthen programmes, contacts and active support to recruit, significant time commitments to support the delivery of programmes themselves</p> <p>64 partners engaged in Year One, over 80 over the two years, including health, council and charitable bodies; contributing to events and activities and making a consider contribution in kind. So far, partners are all indicating an interest in continuing the programmes and looking to future sustainability and expansion</p>
<p><i>new knowledge on what is effective (and less effective) in engaging staff, communities and media</i></p>	<p>Feedback from Trusts and independent process evaluation by Leeds Met have generated new learning and case studies/examples which can be shared more widely, including about the value of partnerships with statutory and non-statutory bodies; how to engage different populations (Radio for Carers, through specialist partners for those with mental health problems), the value of using the Club's ground (St Helen's)</p>

	and the success of Foundations in engaging with target populations
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6.2 RLC and Foundations have successfully delivered the objectives of the Sport Relief/Rugby League Cares Mental Wellbeing Programme. In addition to this, RLC and Foundations have been able to lever in considerable value from partners as well as contributing significant sums themselves and from their Clubs, which has had the very positive benefit of making the Sport Relief funding go very much further.

Sustainability

6.3 From the start of Year Two, Foundations began to look ahead to the end of Sport Relief's generous funding to consider (a) whether the project was worth continuing, (b) how it could be funded, and (c) what should be the role of the Foundation (continue to lead, pass the project lead to someone else, or work to have it mainstreamed in another programme).

6.4 All Foundations believe in the value of what they are achieving and are keen to see their projects continue. As one of the biggest lessons from Year 1 is that it is the involvement of the Club and Foundation that has been fundamental in engaging communities, Foundations consider that they should continue to lead, wherever possible. Discussions with partners so far have been positive, in that partners also wish to see the programmes continue.

6.5 Some projects are now self-sustaining. A number have secured additional funding or are able to take programmes forward through partnership working: in most cases, the Sport Relief funding was essential to designing and setting up a programme, and to running "pilots": now that programmes have been established and refined they require much less resource to maintain, and the fact that an evidence base has been created has made local partners more likely to engage and invest themselves as they can see the tangible benefits of participation and support. Others are bidding for additional funds, usually in partnership with other local bodies.

Learning

6.6 In terms of the learning, in addition to this detailed evaluation report we will produce a more concise and practical report focusing on what we have learnt and how it can be used in future. Ideas include material on how to build partnerships and create business cases for change, communications and the value of training and collaboration.

Next Steps

6.7 As a result of the two-day learning session in January 2014, RLC and Foundations were able to put a proposal to the RFL and discussions are on going about future programmes.

6.8 We hope to use the evidence base we have created to bid for other funds either through RLC or locally on a Foundation by Foundation basis, although feedback from Foundations has been that they feel that a coordinated bid by RLC on behalf of a group of Foundations is likely to be much more successful because it can demonstrate more effective project management, sharing of roles and a bigger evidence base.

Jane Riley, Consultant

ANNEXES

- A: Round 27: evaluation of mental wellbeing campaign with NHS, September 2012
- B: Key Lessons from past projects
- C: Project Plan template
- D: Paper on Evaluation
- E: Monitoring proforma and collation form (Annex F)
- G: Process evaluation by Leeds Metropolitan University
- H: Learning Points from the Programme
- I: Governance Framework