European Youth Tackling Obesity

End of project evaluation

Evangeline Amalathas and Katie Rix
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Acknowledgements

We would like to thank the following people for their contribution to this evaluation:

- From Czech Republic: Dagmar Skupová and her colleagues at Komunikujeme.
- From Portugal: Fabiana Gomes and her colleagues at Companhia de Ideias.
- From Spain: Ignasi Papell and his colleagues at CTNS Technology Centre of Nutrition and Health.
- From UK: Amy Davies at National Children’s Bureau (NCB), Health and Social Care team.

Thank you also to our NCB Research Centre colleagues who contributed to the earlier waves and reports of this evaluation including Puja Joshi, Vanessa Greene, Joanna Lea, and Eliza Buckley. Thank you also to Amy Edwards for her support with this report.
Executive Summary

Background

European Youth Tackling Obesity (EYTO) was a youth-led and peer-to-peer project that used social marketing campaigns to tackle obesity among children and young people. It was particularly targeted at children and young people aged 13 to 18 living in disadvantaged communities, who are likely to make more choices by themselves as they make their transition to adulthood. The project was funded by European Union Executive Agency for Health and Consumers in the framework of the Health Programme 2008-2013.

This European project was led by National Children Bureau’s (NCB) Health and Social Care team in the UK, and delivered in partnership with four other organisations in Spain, Portugal and the Czech Republic. There were three main project objectives, which are set out below:

- Young people and practitioners across the four partnerships will have increased skills and confidence in applying participatory social marketing techniques.
- At least 80 per cent of young people who engage in campaigns will have increased their motivation to eat more healthily and be more physically active.
- At least 60 per cent of young people who engage in campaigns will have increased their levels of physical activity and fruit and vegetable consumption.

Although each campaign was tailored for audiences in their own countries, all the campaigns had the following in common:

- They were youth-led, placed young people at the centre of the project, and supported them to plan, develop and deliver activities.
- They used peer-to-peer approaches so that the campaigns were designed by young people for young people. This helped to ensure activities and information were accessible and appealing for peers.
- They used a particular social marketing approach: eight benchmark criteria of social marketing\(^1\), which was a combination of online and face-to-face interactions – that aimed to influence and change behaviours of audiences.

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Evaluation

Following on from the interim evaluation report (February 2015) which included findings at baseline and interim stages of the evaluation, this is the final evaluation stage of the EYTO project led by the NCB Research Centre. It evaluates activities against initial project objectives outlined above and identifies the project impact. This involved:

To identify the impact of the project, data was gathered and reported at the baseline (in August 2014), interim (in January 2015) and final (in July 2015) stages of evaluation. This included a combination of quantitative and qualitative methods to gather and analyse data on the impact of the campaigns. The following was reported at interim and final stages, with the exception of talking with Campaign Creators which was undertaken at all three stages of evaluation:

- Talking with the Campaign Creators, young people who delivered the campaigns.
- Talking with professional stakeholders (e.g. EYTO management teams, youth workers, local and national policymakers)
- Analysis of all the activities and information that were delivered during the campaigns. This was recorded by Campaign Creators and EYTO management teams using impact spreadsheets.
- Analysis of an online survey completed by peers and other audiences who had engaged with the campaigns.

Findings

Impact of activities

The evaluation included an analysis of the impact of the activities that were run with young people, based on information recorded and reported by Campaign Creators and EYTO management teams using impact spreadsheet. Findings showed that:

- The most common type of activity was face-to-face events, followed by website-based and paper-based activities.
- The duration of events ranged from one to 35 hours, and included lectures, workshops and exhibitions.
- The most reported web-based activity by all four countries was Facebook.
- A greater number of events were delivered by all partners than paper-based activities.
- A total number of 9,503 individuals engaged with paper-based activities. This ranged from 350 (Portugal) to 8,175 (UK).
- A total number of 4,336 individuals engaged with events activities. This ranged from 250 (UK) to 3070 (Spain).
- A total number of 2,984 individuals engaged with web-based activities. This ranged from 181 (UK) to 1370 (Portugal).

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2 This online survey was launched in November 2014 and continued until July 2015.
• The most reported audience group that activities were targeted at was children and young people.

**Campaign Creators**

Campaign Creators (the young people who were involved in the campaign delivery) participated in focus groups in their respective countries at baseline, interim and final stages of evaluation. These were used to gather information about their experiences of working on the campaigns, opinions on issues regarding obesity, skills they had improved as a result of the campaigns, and suggestions for taking forward findings from the campaigns.

A summary of key findings collated at baseline and interim stages (presented in the interim report) is followed by key findings from the focus groups undertaken during wave 3, the final evaluation.

**Summary of key findings collated at baseline and interim stages of evaluation**

Campaign Creators' expectations of working on the campaigns were:

- A desire to become healthier and motivate others to do so.
- Create something interesting to share with friends/school peers
- Meet new people and learn new skills

Campaign Creators reported improvements in skills and confidence for using social marketing methods.

The interim evaluation suggested recommendations were for Campaign Creators to receive support with improved understanding of social marketing approaches and how it can be applied within the wider context of health campaign, and how to influence behaviours

**Summary of key findings collated at final stage of evaluation**

**Activities**

- Campaign Creators enjoyed a range of activities, including organisation and delivery of events and communication of information. They also identified activities that they did not enjoy and suggested support in further areas such as website development.
- Campaign Creators reported that they received support from the EYTO management team, but approaches and intensity of support varied between countries.

**Challenges**

- A key challenge for all Campaign Creators related to having limited time to work on the project, as they had to balance their EYTO project commitments with busy schedules of attending classes, preparing for exams, and home and social activities.
Social marketing

- Social marketing was an effective approach for connecting and cascading information and messages directly to their own networks and people that they would not normally meet.
- The most effective messages to communicate were positive and inspirational ones that promoted the benefits of healthy lifestyles. These were considered more likely to motivate individuals to make positive changes in their behaviours.
- Negative habits and behaviours of families and peers were considered to be counter-productive to social marketing that encouraged healthy lifestyles.
- Social marketing provides information, but the decision to take up advice and information that lead to healthy behaviours is the responsibility of each individual.

Impact on Campaign Creators

- Campaign Creators undertook a range of activities during the campaigns, and they were asked about their prior experience. When asked about their interest in the activities - 160 (85.6%) of the total number of responses showed that they had yes a lot of interest in the particular areas of work compared to 21 (11.6%) and 6 (3.2%) who stated yes a bit and no, respectively. The areas of work that they had the most interest in were: worked with people from other countries; organised or helped run an event; carried out a project with people you have never met before; and given a presentation to lots of people.
- Campaign Creators rated their confidence when using seven particular skills - 106 (85%) of the total number of responses were either very confident or confident compared to 18 (14%) and 1 (0.8%) who indicated neither confident or unconfident and unconfident, respectively. The areas of work that they felt very confident about applying skills were: cultural awareness; using information; and communication.
- Campaign Creators were asked about whether they had developed skills and confidence in ten key areas and their responses were compared with ones recorded at baseline, interim periods of the campaigns. They self-reported an overall improvement in skills and confidence over the course of the campaigns. Of the total number of responses - those who had reported no development in skills and confidence had fallen from 28 (12.1%) at baseline to 14 (9.2%) at (wave 3), and those who reported yes a lot had risen from 104 (45%) at baseline to 136 (72.7%) at wave 3.
- There were improvements reported in the following skills: communications; cultural awareness; collaboration; using information; and project management.

Impact on peers and other audiences

- Campaign Creators rated the project impact on their audiences using a Likert scale ranging from 1 (not at all successful) to 10 (very successful). Findings showed that campaigns had the most impact, i.e. rated 8, 9 or 10, with providing information and increasing awareness (11 participants). This was followed by changing attitudes (13) and motivating young people (7).
Limited impact recording and reporting

- There appeared to be limited recording and reporting of impact by Campaign Creators which made it challenging to capture impact on audiences, in particular what and how behaviours have been changed as a result of the campaigns, and which groups have benefited the most from the campaigns.

Survey with children and young people and other audiences who engaged with the campaigns

A survey was conducted with young people in each of the four countries. There were 237 respondents. This survey aimed to find out how audiences had engaged with the campaigns, and their attitudes and behaviours regarding healthy eating and physical activities. The main findings are shown below.

Activities

- Of the 197 respondents who stated that they had engaged with at least one campaign activities, the most indicated response was Facebook (40.8%).
- Answers suggest that web-based activities (Facebook, online video/youtube, Instagram, Twitter) were the most effective approach for engagement as these had combined responses of 232 (60%), when compared with events and paper–based activities.

Impact on behaviours

- Of the 237 respondents, 213 (89.9%) rated campaigns as either somewhat effective or very effective in encouraging them to eat a more healthy diet and be more physically active.
- Respondents were also asked to rate the campaigns’ effectiveness on whether it had engaged, communicated, motivated and demonstrated for audiences to eat a more healthy diet and be more physically active. Across the 237 respondents who answered these questions there were 1,185 responses – of which 605 (51.1%) indicated somewhat effective and 444 (37.5%) indicated very effective.

Current behaviours and attitudes

- Most respondents (165, 69.6%), wanted to make changes to their diet and exercise routine - of which 113 (47.7%) felt that they were already leading a healthy lifestyle and 52 (21.9%) described their lifestyle as being unhealthy.
- In regards to taking forward learning from the campaigns – most respondents indicated that they thought, talked and shared information about the campaigns. For example across the 216 respondents, there were 402 responses – of which 99 (24.6%) respondents thought about eating a healthy diet and being physically active. This was followed by 97 (24.1%) who talked about the campaign with a friend/parent 41 (10.2%) and 72 (17.9%) who shared the link about the campaign or information about the campaign with a parent/friend. In comparison fewer respondents indicated taking actions as a result of the campaigns, for example 42 (10.4%)
stated that they made a change to eat a more healthy diet and be more physically active.

Causes of obesity

- Factors mentioned include 130 (24.1%) respondents who indicated eating too much unhealthy food. This was followed by not doing enough physical activity as indicated by 115 (21.3%).
- Further analysis of responses showed that behaviours associated with eating and physical activity were considered to be the main causes of obesity – 262 (48.6%) of responses were associated with eating i.e. consuming too much food, unhealthy foods or not eating healthy foods, and 178(33%) of responses were associated with not taking enough physical activities.

Factors that help young people to make healthy choices and live healthy lives

- The most important factors mentioned indicated by 101 (19.4%) respondents was support from their parents/carers to get healthy. This was followed by access to opportunities for sports and other physical activities and enjoying physical activity indicated by 70 (13.4%) and 61 (11.8%) of respondents, respectively.
- Further analysis of the responses showed that 194 (37.2%) responses were associated with support, in particular support from personal and social networks. The enjoyment of activities and healthy foods was indicated by 108 (20.5%) respondents, and 100 (19.2%) respondents referred to access to opportunities and resources.

Factors that deter young people from making healthy choices and live healthy lives

- The most important factor as indicated by 69 (16.9%) responses was being with friends who eat unhealthily. This was followed by not enough healthy meals available in schools and lack of discipline indicated by 52 (12.7%) and 51 (12.5%) respondents, respectively.
- Further analysis of responses showed that 233 (42.8%) responses were associated with motivation for making changes and adopting new behaviours. Knowledge and understanding of how to lead a healthier life, such as not knowing how to cook and not knowing enough about calories, were considered to be of value, but only 28 (5.1%) thought they were important factors.

Stakeholders

Interviews were undertaken with stakeholders (e.g. local and national policymakers, youth workers) to explore their views on obesity, the campaigns, social marketing and suggestions for taking forward learnings from the campaigns.

A summary of key findings collated at baseline and interim stages (presented in the interim report) is followed by key findings from interviews undertaken with stakeholders during wave 3, the final evaluation.
Summary of key findings collated at baseline and interim stages of evaluation

EYTO management teams took part in a focus group in October 2014 and suggested the following overarching objectives across all four countries:

- Raise awareness of obesity among children and young people
- Build evidence
- Change behaviours.

EYTO management teams identified early outcomes of the campaigns, including how to use social media to communicate serious messages and not only for exchanging messages with friends about social matters—and the limitations of doing so.

EYTO management teams discussed and suggested approaches for how to use social marketing as a tool for health development work.

EYTO management teams explored and suggested approaches for how to support youth-led social marketing work.

Summary of key findings collated at final stage of evaluation

Obesity and its causes

- According to stakeholders, causes of obesity are multi-dimensional and require a joined-up and collaborative approach between professionals in different sectors and parents at home. A few examples of these include poverty, modern day lifestyle habits, and emotional wellbeing.
- The type of risk experienced by children and young people were thought to be different from adults as parents had greater influence over children and young people’s opportunities to make choices, access to resources, and attitudes to foods and physical activities. Thus their experiences could be better understood within the context of the family model.
- The campaigns were particularly targeted at children and young people aged 13 to 18, as they were becoming more independent and making choices by themselves and thus required support with making healthy choices.

EYTO campaigns

- Stakeholders reported that campaigns added-value to existing initiatives that promoted health and wellbeing in each of the four countries.
- The youth-led and peer-to-peer approach was unique and brought many benefits to the way information and activities were developed and delivered, and the way in which peers had engaged with the campaigns.
- The challenges faced by Campaign Creators included the limited time frame to plan and deliver activities, and no or limited follow-up activities that audiences can access after their engagement with campaign activities.

Social media
• Stakeholders said that social media could be an effective way of communicating with children and young people, but only if it is used with a specific purpose in mind and with appropriate content.
• Social media was ideal for initial engagement and evoking audience’s curiosity, and as a channel for positive exchange of ideas and for interaction. However, social media was not considered to be a replacement for face-to-face interactions.

Impact
• Stakeholders reported that Campaign Creators developed knowledge and a range of skills that enabled them to plan and deliver activities and information for their audiences.
• Children and young people’s choices for making behaviours changes were shaped by factors such as parental influence. This is linked to earlier point about the type of risk was seen to be different from adults and their experiences had to be understood within the context of the family model.
• Stakeholders reported that it was too early to see the impact of the EYTO project on changes in practice, but campaigns had the potential of adding value to existing programmes and policies that support healthy lifestyles and tackle obesity among children and young people.

Conclusions
EYTO campaigns worked towards initial objectives of increased understanding and motivation for healthy eating and undertaking physical activities.

Key aspects of the campaigns that made it effective in engaging with and supporting children and young people on the topic of obesity were:
• A youth-led and peer-to-peer approach that placed young people at the centre of the campaigns and gave them greater control over the provision of reliable, relevant and accessible information.
• Capabilities development of Campaign Creators so that they were better prepared to make decisions and lead on activities.
• Raised awareness of obesity and increased motivation to address unhealthy lifestyles among children and young people and a range of stakeholders.
• Provided experiences or encouraged audiences to experience changes that are different from their daily habits.

However, the use of campaigns alone may not bring about changes in behaviours, in particular long-term sustainable changes. These changes require increased collaborative working with parents and professionals in the community and from different sectors to ensure children and young people have accessible and available options to make healthy choices.

Recommendations
Findings from the focus group with the Campaign Creators, interviews with stakeholders, and survey with children and young people and other audiences who engaged with the campaigns – all have helped to identify recommendations for practitioners and policymakers. These aim to develop
holistic and collaborative approaches for tackling obesity among children and young people, and are as follows:

- Positive and inspirational key messages
- Provision of relevant and reliable information
- Provision of accessible options for healthy choices
- Effective targeting of vulnerable groups
- Youth-led and peer-to-peer approach
- Holistic and collaborative approach
- Family model approach: Capacity building of parents
- Robust and standardised recording tools
1. Introduction

1.1 Background

European Youth Tackling Obesity (EYTO) was a youth-led and peer-to-peer project that used social marketing campaigns to tackle obesity among children and young people. It was particularly targeted at children and young people aged 13 to 18 living in disadvantaged communities, who are likely to make more choices by themselves as they make their transition to adulthood. The project funded by European Union Executive Agency for Health and Consumers in the framework of the Health Programme 2008-2013.

This European project was led by National Children Bureau’s (NCB) Health and Social Care team in the UK, and delivered in partnership with four other organisations in Spain, Portugal and the Czech Republic. Although each campaign was tailored for audiences in their own countries, all the campaigns had the following in common:

- They were youth-led, placed young people at the centre of the project, and supported them to plan, develop and deliver activities.
- They used peer-to-peer approach so that campaigns were designed by young people for young people. This helped to ensure activities and information were accessible and appealing for peers.
- They used a particular social marketing approach: eight benchmark criteria of social marketing\(^3\), which was a combination of online and face-to-face interactions that aimed to influence and change behaviours of audiences.

The organisations involved in each country along with the names and website links to the campaigns are presented in Table 1, below.

Table 1: EYTO management teams and campaigns

<table>
<thead>
<tr>
<th>Country</th>
<th>EYTO management team</th>
<th>Campaign name and website link</th>
</tr>
</thead>
<tbody>
<tr>
<td>Czech Republic</td>
<td>Komunikujeme</td>
<td>Nebuď’ Pecka</td>
</tr>
<tr>
<td></td>
<td></td>
<td><a href="http://www.facebook.com/Eytocz">www.facebook.com/Eytocz</a></td>
</tr>
<tr>
<td>Portugal</td>
<td>Companhia de Ideias</td>
<td>Luta por ti</td>
</tr>
<tr>
<td></td>
<td></td>
<td><a href="http://www.facebook.com/EytoPortugal">www.facebook.com/EytoPortugal</a></td>
</tr>
<tr>
<td>Spain</td>
<td>CTNS Technology Centre of Nutrition and Health</td>
<td>Som la pera</td>
</tr>
<tr>
<td></td>
<td></td>
<td><a href="http://www.facebook.com/somlapera">www.facebook.com/somlapera</a></td>
</tr>
<tr>
<td>UK</td>
<td>National Children’s Bureau</td>
<td>Look Up</td>
</tr>
<tr>
<td></td>
<td></td>
<td><a href="http://www.facebook.com/LookUpIslington">www.facebook.com/LookUpIslington</a></td>
</tr>
</tbody>
</table>

The project involved the following:

- **Recruitment of Campaign Creators** – up to six young people in each country between the ages of 14 to 17 worked together and led the campaign in each of the four countries. These were recruited by the EYTO management teams in each country using specific networks to engage with young people who had an interest in the topic. These young people will be referred to as Campaign Creators throughout this report.

- **Training and support for Campaign Creators** on a variety of topics, such as social marketing. This was delivered by EYTO management teams and other professionals who aimed to up-skill Campaign Creators and give them the confidence to plan, develop and deliver campaign activities.

- **Development and delivery of social marketing activities by Campaign Creators**, which included face-to-face events and online activities using website and social media tools.

- **Delivery of activities and information that promoted healthy eating and physical activities**.

- **Delivery of activities and information targeted at young people in specific localities in each country**, but were open to all including adults and individuals outside each locality.

### 1.2 Evaluation of EYTO: Aims and methodology

Following on from the interim evaluation report (February 2015) that included findings at baseline and interim stages of the evaluation, this is the final evaluation stage of the EYTO project led by the NCB Research Centre. It evaluates activities against the following initial project objectives:

- Young people and practitioners across the four partnerships have increased skills and confidence in applying participatory social marketing techniques.
- At least 80 per cent of young people who engage in campaigns will have increased their motivation to eat more healthily and be more physically active.
- At least 60 per cent of young people who engage in campaigns will have increased their levels of physical activity and fruit and vegetable consumption.

To identify the impact of the project, data was gathered and reported at the baseline (in August 2014), interim (in January 2015) and final (in July 2015) stages of evaluation. This included a combination of quantitative and qualitative methods to gather and analyse data on the impact of the campaigns. The

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4 Professionals from Komunikujeme (Czech Republic); Companhia de Ideias (Portugal); CTNS Technology Centre of Nutrition and Health (Spain); and National Children’s Bureau (UK).
following was reported at interim and final stages, with the exception of *talking with Campaign Creators* which was undertaken at all three stages of evaluation:

- Talking with the Campaign Creators, young people who delivered the campaigns.
- Talking with professional stakeholders (e.g. EYTO management teams, youth workers, local and national policymakers)
- Analysis of all the activities and information that were delivered during the campaigns. This was recorded by Campaign Creators and EYTO management teams using impact spreadsheets.
- Analysis of an online survey completed by peers and other audiences who had engaged with the campaigns.

### 1.3 Report structure

The final stage of evaluation used a combination of quantitative and qualitative methods to gather and analyse data on the impact of the campaigns. This report has been structured by findings from each different method, as follows:

- Impact spreadsheets with activities and information delivered during campaigns completed by Campaign Creators and EYTO management teams (Section 2).
- Focus groups with Campaign Creators who were the young people who delivered the campaigns (Section 3).
- A survey with young people and other audiences who engaged with the campaigns (Section 4).
- Telephone interviews with stakeholders (Section 5).

The final section (Section 6) includes conclusions and recommendations from Campaign Creators and stakeholders on how to take forward learning and findings from EYTO campaigns.

Data is reported across the EYTO programme rather than by individual countries to illustrate overarching trends, experiences and progress towards achieving aims and objectives. However, comparative differences are reported.

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6 This online survey was launched in November 2014 and continued until July 2015.
2. Findings: Impact of activities

EYTO management teams and Campaign Creators (young people who delivered the campaigns) from each country recorded and reported activities that were delivered and number of people who had engaged with them using an impact spreadsheet. EYTO management team and Campaign Creators in each country recorded their campaign’s face-to-face events, web-based and paper-based activities on a spreadsheet\(^7\).

2.1 Activities

Across the four countries 44 distinct activities were recorded of face-to-face events, web-based and paper-based activities (see Figure 1 below) – of which the most frequently reported activity was 29 events (65.9%). This was followed by 10 website-based (22.7%) and five paper-based activities (11.4%).

Figure 1: Type of activities (Reported by EYTO management teams and Campaign Creators across four countries)

Campaign Creators and EYTO management teams were also asked how many times they had delivered each of the distinct events and paper-based activities. Answers showed that these activities were repeated on more than one occasion.

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\(^7\) This information, including numbers, is presented as reported by EYTO management teams and Campaign Creators. The reporting method used across each country varied and in some cases estimates were provided, rather than exact numbers.
This was the case, in particular, for events as across four countries 29 distinct events (see Figure 1, above) were delivered on 52 different occasions (see Figure 2, below). Each campaign’s descriptions of activities is presented in Table 2, below.

**Figure 2: Frequency of events and paper activities**\(^8\) *(Reported by EYTO management teams and Campaign Creators across four countries)*

8 The UK’s information stand at the youth centre was not included as it was a continuous activity over 10 months. Web-based activities were not included in the analysis as these were continuous activities.
Table 2: Activities delivered *(Reported by EYTO management teams and Campaign Creators across four countries)*

<table>
<thead>
<tr>
<th>Country</th>
<th>Events</th>
<th>Web-based</th>
<th>Paper-based</th>
</tr>
</thead>
<tbody>
<tr>
<td>Czech Republic</td>
<td>• Healthy life style seminars and lectures&lt;br&gt;• Healthy baking&lt;br&gt;• Open sport class</td>
<td>• Facebook&lt;br&gt;• Instagram&lt;br&gt;• Website&lt;br&gt;• Youtube</td>
<td>• EYTO survey</td>
</tr>
<tr>
<td>Portugal</td>
<td>• Picnic&lt;br&gt;• Soup competition&lt;br&gt;• Fitness class&lt;br&gt;• Welcome meeting&lt;br&gt;• Communication workshop</td>
<td>• Facebook&lt;br&gt;• Promotional videos online</td>
<td>• Poster and leaflets</td>
</tr>
<tr>
<td>Spain</td>
<td>• Gymkhana pop-up event&lt;br&gt;• cooking pop-up events&lt;br&gt;• public presentation event&lt;br&gt;• Christmas cooking pop-up event&lt;br&gt;• Photography exhibitions&lt;br&gt;• Science Young Fair of Reus&lt;br&gt;• Sugar beverages workshop&lt;br&gt;• Balanced diet and physical activity workshop&lt;br&gt;• Nutritional Myths contest</td>
<td>• Facebook</td>
<td>• Flyers</td>
</tr>
<tr>
<td>UK</td>
<td>• Pop-up event⁹&lt;br&gt;• Healthy food tasting challenge&lt;br&gt;• Information stand</td>
<td>• Facebook&lt;br&gt;• Twitter&lt;br&gt;• School survey activity¹⁰</td>
<td>• Poster and leaflets</td>
</tr>
</tbody>
</table>

### 2.2 Number of individuals engaged in activities

Across the four countries a total of 9,503 individuals engaged with *paper-based* activities. Further analysis of the data showed that UK had the most individuals who used *paper-based* activities (8,175) as presented in Table 3, below. This was followed by Spain (500), Czech Republic (478), and Portugal (350).

Across the four countries a total of 4,336 individuals engaged with activities which were run as *face-to-face events*. Further analysis of the data showed that Spain had the most individuals who accessed these *events* (3,070). This was followed by Czech Republic (765), Portugal (251), and UK (250).

Across the four countries a total of 2,984 individuals engaged with *web-based* activities. Further analysis of the data showed that Portugal had the most

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⁹ Pop-up events are face-to-face events that are delivered for a limited time, such as a few hours, and can be part of a wider event.
¹⁰ This survey was developed by UK Campaign Creators aimed to find out about pupils’ attitudes to healthy lifestyle. It is different from the EYTO survey circulated by all countries.
participants who used *web-based* activities (1,370). This was followed by Czech Republic (967), Spain (466), and UK (181).

### Table 3: Number of individuals who engaged in activities

<table>
<thead>
<tr>
<th>Country</th>
<th>Events</th>
<th>Web-based</th>
<th>Paper-based</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>UK</td>
<td>8175</td>
<td>181</td>
<td>250</td>
<td>8,606</td>
</tr>
<tr>
<td>Spain</td>
<td>500</td>
<td>466</td>
<td>3070</td>
<td>4,036</td>
</tr>
<tr>
<td>Czech Republic</td>
<td>478</td>
<td>967</td>
<td>765</td>
<td>2,210</td>
</tr>
<tr>
<td>Portugal</td>
<td>350</td>
<td>1370</td>
<td>251</td>
<td>1,971</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>9,503</strong></td>
<td><strong>2,984</strong></td>
<td><strong>4,336</strong></td>
<td><strong>16,823</strong></td>
</tr>
</tbody>
</table>

*Reported by EYTO management teams and Campaign Creators from all four countries*

#### 2.3 Duration of event activities

All countries reported that *events* were the type of activity most frequently delivered by the Campaign Creators compared with *paper-based* or *web-based* activities. Duration of *events* ranged from one to 35 hours across all four countries, and further breakdown of information showed that duration of events:

- in Spain varied from one to 35 hours;
- in Czech Republic ranged from two to eight hours;
- in Portugal, ran between two to four hours;
- in the UK each of the two events were 7 hours.

The average duration of events spanned from 2.4 hours (Portugal) to 7 hours (UK, and is presented in Figure 3, below.)
Figure 3: Average duration of events\textsuperscript{11}

<table>
<thead>
<tr>
<th>Countries</th>
<th>Number of hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>UK</td>
<td>7</td>
</tr>
<tr>
<td>Czech Republic</td>
<td>3.8</td>
</tr>
<tr>
<td>Spain</td>
<td>3.7</td>
</tr>
<tr>
<td>Portugal</td>
<td>2.4</td>
</tr>
</tbody>
</table>

Reported by EYTO management teams and Campaign Creators across four countries

2.4 Target audiences

Activities were targeted at particular audiences (see Figure 4, below) and the most reported audience across four countries was children and young people (27). This was followed by online audience (8), general population (7), parents and families (4), friends (2), and males or females (2).

\textsuperscript{11} This was calculated by dividing total hours of all events by the frequency of events
Figure 4: Target audiences most mentioned (Reported by EYTO management teams and Campaign Creators across four countries)

2.5 Section overview

This section included a description of the different types of activities delivered as part of the campaigns, which were: face-to-face events, paper-based and web-based activities. These along with the numbers of individuals who have engaged with the activities have been recorded by the EYTO management teams and Campaign Creators from each country, and a summary of key findings are included in the box below.

Summary box
- The most common type of activity were face-to-face events, followed by website-based and paper-based activities.
- The duration of events ranged from one to 35 hours, and included lectures, workshops and exhibitions.
- The most reported web-based activity by all four countries was Facebook.
- A greater number of events were delivered by all partners than paper-based activities.
- A total number of 9,503 individuals engaged with paper-based activities. This ranged from 350 (Portugal) to 8,175 (UK).
- A total number of 4,336 individuals engaged with events. This ranged from 250 (UK) to 3070 (Spain).
- A total number of 2,984 individuals engaged with web-based activities. This ranged from 181 (UK) to 1370 (Portugal).
- The most reported audience group that activities were targeted at was children and young people.
The next section (Section 3) will explore the experiences of Campaign Creators, young people who delivered the campaigns. This will include a summary of findings from the interim report (mid-way through EYTO project). In addition, as part of the final evaluation, it will include their experiences of the campaigns, the skills they had developed, and their suggestions for taking forward findings and learnings from the campaigns.
3. Findings: Campaign Creators Focus Groups

Campaign Creators participated in focus groups in their respective countries at the baseline, interim and final stages of evaluation. These focus groups were facilitated by professionals from the EYTO management teams, except for UK’s one which was facilitated by NCB Research Centre staff\(^ {12} \).

Each country organised focus groups with their Campaign Creators and each focus group lasted for 45 to 60 minutes, and each Campaign Creator was asked to complete three self-assessment forms to show any improvements in their skills and knowledge, what they enjoyed most about taking part, and the impact of the campaigns. These responses were collated at the end of the focus group for analysis.

At the baseline and interim stages 21 Campaign Creators participated at each stage across the four countries and a summary of findings from the interim focus groups is presented in section 3.1, below.

For the final evaluation, 18 Campaign Creators participated across four countries: five from Spain; six from Portugal; five from Czech Republic; and two from UK\(^ {13} \). Information collated at each of the four focus groups have been analysed using thematic analysis and presented in sections 3.2 to 3.7, below.

These findings are from the perspective of the Campaign Creators only who reflected on their experiences to identify, explain and evaluate what and how activities were completed; the project impact on themselves, peers and other audiences; and recommendations for taking forward project findings.

3.1 Highlights from the interim report: Campaign Creators

An interim report produced in February 2015 included findings from focus groups with Campaign Creators at baseline and interim stages of evaluation. There was one focus group per country, and across the four countries there were 21 participants at baseline and 21 participants at interim stages of evaluation. The findings from both stages have been analysed and summarised as follows:

Campaign Creators **expectations** of working on the campaigns were:

- A desire to become healthier and motivate others to do so.
- Create something interesting to share with friends/school peers

\(^ {12} \) Due to the busy schedules of UK Campaign Creators, they were asked to participate in a telephone focus group and their completed self-assessment forms were emailed back to the English EYTO management team.

\(^ {13} \) England had three Campaign Creators, but only two attended the focus group.
• Meet new people and learn new skills

Campaign Creators reported improvements in skills and confidence for using social marketing methods as a result of engaging with the campaigns – in particular with communicating messages; graphic design; logo and website design.

The interim evaluation suggested recommendations were for Campaign Creators to receive support in the following areas:

• Improved understanding of social marketing approaches and how it can be applied within the wider context of health campaign
• Improved understanding of how to influence behaviours

The findings from final focus group evaluation, reported in sections 3.2 to 3.7 below, showed that Campaign Creators had improved their understanding of social marketing and as a result were able to identify what they had achieved and the limitations of using social marketing approach. They were able to reflect on their experiences of working on the campaigns, and describe the skills and knowledge they had gained, and what they would have liked to improve further. They reflected on the campaigns in a strategic manner and thus were able to provide examples of changes in behaviours and attitudes that they had observed through their interaction with audiences, and were able to identify what policymakers and practitioners could do to support the campaigns to reach their objectives. However, it seems that further support could have been provided for them to monitor and evaluate their activities and identify changes in audiences’ behaviours. This could have been accompanied by robust and standardised approaches to capture and report changes more effectively and be able to compare findings across the four partner countries.

3.2 Final evaluation focus group with Campaign Creators

3.2.1 Activities completed

Campaign Creators were asked about the experiences of activities they completed throughout the project, including what they enjoyed and did not enjoy. Their responses are noted below.

They reported enjoying the following activities:

• Organising and delivering events. This was seen as a way of making sure that their messages were heard and taken on board, and they enjoyed seeing the direct impact of their activities:

"I think it is to be able to engage with the people and get your message across. I think it is easier to get your message across face-to-face rather than through social media" (Campaign Creator, UK)
Campaign Creators in Spain described their experience of the Pera Chef – activity which was similar to a Master Chef TV show - and expressed how they enjoyed:

"All the crazy rules, for example you had a surprise ingredient, or you had to do all your recipes with the same ingredient, you had time limit, judges had to try your food” (Campaign Creator, Spain)

- **Communication** of information was considered to be an enjoyable experience as it enabled participants to put together information and present it to their peers – giving them control over what and how information was presented:

"Lectures in schools, because we can tell them everything we had been taught. And they reacted well, I think better than if we were teachers." (Campaign Creator, Czech Republic)

- **Creating the project from the start** and watching it evolve was satisfying experience for Campaign Creators who described how they had to think strategically to plan a project.

"I think also when you are in a room and think how we can do something and then you see everything you planned out - it is quite nice to see everything come together" (Campaign Creator, UK)

- **Using social media**, including Facebook and Instagram, and integrating them as part of wider project activities.

Most participants could not think of any activities that they did not enjoy. Spanish participants reflected on all their activities and found one particular activity that they felt could have been better managed by using a different method for gathering responses from audiences during a question and answer activity:

"Last activity where participants used ringing bells to answer questions because they are too competitive and we weren't able to control all the bells and see who wanted to answer and who was just messing around. Activity could be improved by taking away the ringing bells away and ask them to raise their hand instead.” (Campaign Creator, Spain)

### 3.2.2 Support from EYTO management team

Campaign Creators were asked about the experience and views about the support they had received from the EYTO management team – professionals who had worked closely with them. All Campaign Creators valued the support received from their national EYTO team and returned to them for information, advice and guidance as and when required throughout the project.
Engagement approaches and the intensity of support for Campaign Creators varied between countries. Both Portugal and UK EYTO management teams adopted a community-development approach whereby they used youth centres to recruit Campaign Creators and supported them to plan, create and deliver ideas and materials for activities. Whereas Spain and Czech Republic used educational networks for the recruitment of Campaign Creators and provided them with more intensive support that included ready-made materials for activities.

Spanish and Czech Republic Campaign Creators found the support they had received for the delivery of project activities to be ‘essential’ and without which the project could not have been be delivered:

"I think, we could not do it by ourselves. Maybe we could create or invent some ideas, but I guess it would be very difficult to manage it for us.” (Campaign Creator, Czech Republic)

"There were cases where we didn’t know how to make some activities and there was always someone from the university to help.” (Campaign Creator, Spain)

Although they were all happy with the support, some identified additional support they would have preferred to deliver some of the activities, for example two Campaign Creators who wanted support with creating websites would have preferred to shadow a professional to see how websites are developed so that they could apply what they have learned in their own campaigns.

### 3.2.3 Challenges

Campaign Creators were asked about whether they come across any challenges when they developed and delivered the campaigns. The key challenge for all the participants was limited time to work on the project. All of them were full-time students and found it difficult to meet with each other and deliver activities – and generally to balance their campaign commitments with busy schedules of attending classes, preparing for exams, and home and social activities.

Participants had the following recommendations for young people who may be asked to deliver a similar campaigns in the future. These include support with project planning, delivery, and monitoring and evaluation, which are as follows:

- **Project preparation:** Undertake research to identify issues of concerns before delivering activities. The UK Campaign Creators, for example, produced a logo and then undertook a survey to gather feedback on their logo. In hindsight, however, they would have preferred the survey to have preceded and shaped the logo design.
- **More interaction with the audience,** including both online and face-to-face interactions.
- Create a **pool of ideas** for activities that can be used throughout the campaign.
- **Regular meetings and communication with Campaign Creators team members** to discuss ideas, plan and deliver activities.
• **Delegation of tasks** to various team members and keeping a record of it was a valuable lesson learned by one of the Campaign Creators wanted to pass on to possible future participants:

"It’s useful to have written, what had to be done and who had to do it. We had not use it at the start, but it wouldn´t last long to realize, that it´s not good." (Campaign Creator, Czech Republic)

• **Passion and interest for the topic and enjoyment of the experience** was essential for motivating audiences who could sense motivation from their speakers:

"If they all have someday a lecture for their peers, they can be sure, that the peers will immediately recognize if you’re interested or not." (Campaign Creator, Czech Republic)

### 3.4 Social marketing

Campaign Creators were asked to describe their understanding of the term ‘social marketing’ and what social marketing approaches they had used to engage and support audiences. They were able to identify and describe both the benefits and limitations of using such an approach, which are noted below.

#### 3.4.1 Connecting and cascading motivational messages

Social marketing was an effective approach for connecting and cascading information and messages directly to their own networks and people that they would not normally meet.

"I think it refers to activities design to give common people a knowledge, which at the same time will be transferred to other common people. For example, we did it on people of our age, and we intended to adapt this knowledge to pass it to them." (Campaign Creator, Spain)

The online and face-to-face interactions were useful ways of sending out messages. Finding the right messages to communicate were considered to be ones that motivated individuals to change or adopt positive behaviours and promoted the benefits of doing so. A participant in the UK, for example, described how she sent regular motivational quotes in the morning using Twitter with the aim of instigating change, and another participant described the importance of communicating the benefits of change in messages:

"You have to explain the advantages of the change, what will happen if there will be some change. And to motivate for making in. And I think, it was good, that this part was said by us, not by teachers.” (Campaign Creator, Czech Republic)
3.4.2 Peer-to-peer interaction

Peer-to-peer interaction was considered to be a valuable aspect of social marketing. Apart from a few who found it difficult to communicate with friends who thought it was not serious, most of other participants thought peers were more likely to listen to messages on this topic from them rather than adults:

"I think that is definitely more effective, if something is told by your peer, rather than from somebody older you’re younger because the peer understands you the most. And we heard opinions like this, when we had healthy lifestyles lectures at the Primary Schools." (Campaign Creator, Czech Republic)

3.4.3 Tools

Participants were able to identify the benefits and limitations of different social marketing tools – both online and face-to-face tools - and used the ones that they found to be the most effective for each activity. For example, Facebook and Twitter were used by some campaigns for communicating messages with ease and to a greater number of people. Whereas pop-up events were preferred by some who liked to see the changes in attitudes of peers and the value of their work:

"Easier to advertise maybe on social media but it's harder to get them to change them to change behaviour or anything or relate to them. Easier to do that in person.“(Campaign Creator, UK)

"There is certainly a difference between somebody who will come to make some sport or for a lecture and somebody, who is just reading all the stuff at Facebook page.” (Campaign Creator, Czech Republic)

3.4.4 Limitations for changing behaviour

Limitations of social marketing included negative habits and behaviours of families and peers that had counter-acted the changes that social marketing aimed to achieve, and the short duration of the campaigns that made it difficult to capture the behaviour changes that were thought to be long-term impact.

Social marketing was seen to be ideal for instigating change, raising awareness, and giving audiences ideas and experience of different and positive lifestyle. It was felt that social marketing on its own could not guarantee changes in behaviour as decisions to make lifestyle changes was the responsibility of each individual. A UK Campaign Creator, for example, explained how the campaign had motivated her friend not to eat chips for a week to experience a change in eating habits, but it was her friend’s decision whether to make it a permanent change.

"You can incite an attitude or behaviour change, but they have to make the final step." (Campaign Creator, Spain)
3.5 Findings from self-assessment tasks: Impact on Campaign Creators

Campaign Creators were asked to complete four self-assessment tasks by themselves to identify how they had benefited from working on the campaigns. They were specifically asked about the following points and their responses are noted below:

- Previous experiences of tasks completed (Section 3.5.1)
- Interest in tasks completed (Section 3.5.2)
- Whether their skills and confidence had improved over the duration of the campaign (Section 3.5.3)
- Confidence to apply skills (Section 3.5.4)

3.5.1 Activities and prior experience

Campaign Creators were asked whether they had previous experience of the tasks they had completed as part of the campaigns. Across the four countries and 17\(^{14}\) participants, there were 184 responses (see Figure 5, below) – of which 119 (64.7%) stated yes a lot of experience compared to 37 (20.1%) and 28 (15.2%) stated yes a bit and no, respectively\(^{15}\).

Further analysis of the data showed that participants had limited or no experience prior to the campaigns of the following work areas: carried out research with people you have never met before (10); graphic design (10); designed a poster (10); and carried out research (7) – all of which is presented in Figure 5, over the page.

\(^{14}\) One of the Campaign Creators in Portugal did not complete all the self-assessment tasks, and thus 17 participants have been included in the analysis for tasks in sections 3.5.1, 3.5.2, and 3.5.3

\(^{15}\) These responses do not take in to consideration whether their prior experience included activities that they had completed from the start of the campaigns.
### Figure 5: Prior experience of undertaking activities

<table>
<thead>
<tr>
<th>Activity</th>
<th>Yes a lot</th>
<th>Yes a bit</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Given a presentation to lots of people</td>
<td>17</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Worked with people from other countries</td>
<td>16</td>
<td></td>
<td>1</td>
</tr>
<tr>
<td>Organised or helped run an event</td>
<td>14</td>
<td>3</td>
<td>1</td>
</tr>
<tr>
<td>Used social media to communicate message to a wide range of people</td>
<td>12</td>
<td>4</td>
<td>1</td>
</tr>
<tr>
<td>Drafted written material to get across a key message to lots of people</td>
<td>12</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Designed a logo</td>
<td>11</td>
<td>1</td>
<td>5</td>
</tr>
<tr>
<td>Carried out research</td>
<td>10</td>
<td></td>
<td>7</td>
</tr>
<tr>
<td>Designed a website</td>
<td>8</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Done graphic design</td>
<td>7</td>
<td>7</td>
<td>3</td>
</tr>
<tr>
<td>Carried out a project with people you have never met before</td>
<td>7</td>
<td>5</td>
<td>5</td>
</tr>
<tr>
<td>Designed a poster</td>
<td>5</td>
<td>5</td>
<td>7</td>
</tr>
</tbody>
</table>

**Respondents (N=17)**

An extra response was recorded for *organised or helped run an event* and there were five non-responses for *Designed a website*. One of the Campaign Creators in Portugal did not complete the self-assessment task, and thus 17 participants have been included in the analysis.
3.5.2 Interest in tasks completed

Participants were asked to rate their interest in the activities they participated in, and their responses are presented in Figure 6, on the next page. Across the four countries and 17 participants, there were 187 responses (see Figure 6, below), and of which 160 (85.6%) of the total number of responses stated that they had yes a lot of interest in the particular areas of work compared to 21 (11.6%) and 6 (3.2%) who stated yes a bit and no, respectively.

Further analysis of the data showed that the areas of work that participants had a lot of interest in were: worked with people from other countries (17); organised or helped run an event (17); given a presentation to lots of people (16); and carried out research with people you have never met before (16).
Figure 6: Interest in activities

Respondents (N=17)

17 One of the Campaign Creators in Portugal did not complete the self-assessment task, and thus 17 participants have been included in the analysis.
3.5.3 Skills and confidence development

Campaign Creators were asked about whether they had developed skills and confidence in ten key areas and their responses were compared with ones recorded at baseline and interim periods of the campaigns (see Table 4, over the page).

Responses show an overall improvement in skills and confidence over the course of the campaigns as self-reported by participants. Across the four countries there was a total of 237 responses collated at baseline and total of 153 responses collated at wave 3, final evaluation stage. Of the total number of responses - those who had reported no development in skills and confidence had fallen from 28 (12.1%) at baseline to 14 (9.2%) at wave 3, and those who reported yes a lot had risen from 104 (45%) at baseline to 136 (72.7%) at wave 3. A higher number of Campaign Creators reported no development in their skills and confidence for designed a poster and designed a logo at wave 3 compared to the baseline.
Table 4: Skills and confidence development

<table>
<thead>
<tr>
<th></th>
<th>Yes, a lot</th>
<th>Yes, a little</th>
<th>No</th>
<th>Total (N)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Organised or helped run an event</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Wave 3</td>
<td>16</td>
<td>1</td>
<td>0</td>
<td>17</td>
</tr>
<tr>
<td>Wave 2</td>
<td>18</td>
<td>3</td>
<td>0</td>
<td>21</td>
</tr>
<tr>
<td>Baseline</td>
<td>15</td>
<td>6</td>
<td>0</td>
<td>21</td>
</tr>
<tr>
<td><strong>Carried out research</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Wave 3</td>
<td>17</td>
<td>0</td>
<td>0</td>
<td>17</td>
</tr>
<tr>
<td>Wave 2</td>
<td>15</td>
<td>5</td>
<td>1</td>
<td>21</td>
</tr>
<tr>
<td>Baseline</td>
<td>13</td>
<td>6</td>
<td>2</td>
<td>21</td>
</tr>
<tr>
<td><strong>Designed a poster</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Wave 3</td>
<td>8</td>
<td>5</td>
<td>4</td>
<td>17</td>
</tr>
<tr>
<td>Wave 2</td>
<td>13</td>
<td>7</td>
<td>1</td>
<td>21</td>
</tr>
<tr>
<td>Baseline</td>
<td>12</td>
<td>8</td>
<td>1</td>
<td>21</td>
</tr>
<tr>
<td><strong>Designed a website</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Wave 3</td>
<td>10</td>
<td>5</td>
<td>2</td>
<td>17</td>
</tr>
<tr>
<td>Wave 2</td>
<td>8</td>
<td>8</td>
<td>5</td>
<td>21</td>
</tr>
<tr>
<td>Baseline</td>
<td>5</td>
<td>13</td>
<td>3</td>
<td>21</td>
</tr>
<tr>
<td><strong>Designed a logo</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Wave 3</td>
<td>11</td>
<td>2</td>
<td>5</td>
<td>18</td>
</tr>
<tr>
<td>Wave 2</td>
<td>13</td>
<td>7</td>
<td>1</td>
<td>21</td>
</tr>
<tr>
<td>Baseline</td>
<td>7</td>
<td>11</td>
<td>3</td>
<td>21</td>
</tr>
<tr>
<td><strong>Done graphic design</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Wave 3</td>
<td>5</td>
<td>11</td>
<td>1</td>
<td>17</td>
</tr>
<tr>
<td>Wave 2</td>
<td>8</td>
<td>7</td>
<td>6</td>
<td>21</td>
</tr>
<tr>
<td>Baseline</td>
<td>1</td>
<td>8</td>
<td>12</td>
<td>21</td>
</tr>
<tr>
<td>Drafted written material to get across a key message to lots of people in a snappy or powerful way</td>
<td>Yes, a lot</td>
<td>Yes, a little</td>
<td>No</td>
<td>Total (N)</td>
</tr>
<tr>
<td>---------------------------------------------------------------------------------------------</td>
<td>-----------</td>
<td>--------------</td>
<td>----</td>
<td>-----------</td>
</tr>
<tr>
<td>Wave 3</td>
<td>10</td>
<td>6</td>
<td>1</td>
<td>17</td>
</tr>
<tr>
<td>Wave 2</td>
<td>13</td>
<td>8</td>
<td>0</td>
<td>21</td>
</tr>
<tr>
<td>Baseline</td>
<td>7</td>
<td>14</td>
<td>0</td>
<td>21</td>
</tr>
<tr>
<td><strong>Total (N)</strong></td>
<td><strong>392</strong></td>
<td><strong>199</strong></td>
<td><strong>58</strong></td>
<td><strong>649</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Given a presentation to lots of people</th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Wave 3</td>
<td>14</td>
<td>2</td>
<td>1</td>
<td>17</td>
</tr>
<tr>
<td>Wave 2</td>
<td>14</td>
<td>7</td>
<td>0</td>
<td>21</td>
</tr>
<tr>
<td>Baseline</td>
<td>9</td>
<td>6</td>
<td>6</td>
<td>21</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Used social media to communicate message to a wide range of people</th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Wave 3</td>
<td>12</td>
<td>5</td>
<td>0</td>
<td>17</td>
</tr>
<tr>
<td>Wave 2</td>
<td>16</td>
<td>4</td>
<td>1</td>
<td>21</td>
</tr>
<tr>
<td>Baseline</td>
<td>7</td>
<td>13</td>
<td>1</td>
<td>21</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Carried out a project with people you have never met before</th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Wave 3</td>
<td>16</td>
<td>0</td>
<td>0</td>
<td>16</td>
</tr>
<tr>
<td>Wave 2</td>
<td>16</td>
<td>4</td>
<td>1</td>
<td>21</td>
</tr>
<tr>
<td>Baseline</td>
<td>15</td>
<td>6</td>
<td>0</td>
<td>21</td>
</tr>
</tbody>
</table>

<table>
<thead>
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</tbody>
</table>

Respondents (Baseline N=21, Wave 2 N=21, Wave 3 N=17)
3.5.4 Confidence to apply skills

Participants were asked to rate their confidence when using seven particular skills, as presented in Figure 7, below. Across the four countries and 17 participants, there were 125 total responses – of which 106 (85%) were either very confident or confident, compared to 18 (14%) and 1 (0.8%) who indicated either confident or unconfident or unconfident, respectively.

Further analysis of the data showed that the skills participants felt very confident about were: cultural awareness (reported by 10 participants), using information (10) and communication (9). When they were asked to explain their responses, they mentioned that these skills were developed when they were given opportunities to do activities that they would not normally do, and suggested that their confidence could have been developed further if they were given more opportunities to complete similar activities.

Figure 7: Confidence to apply skills

Respondents (N=18)\textsuperscript{18}

\textsuperscript{18} One non-response for Communication (17)
3.5.5 How skills were developed and applied

The self-assessment tasks had helped Campaign Creators to reflect on a range of skills that they had developed as part of the campaigns, and to talk about how these skills were used outside their campaigns – at home, school and in the community. One UK participant, for example, described how she used project management skills to help her mother organise a charity fundraising activity and was able to do this with confidence.

They also talked about how particular skills had helped them to deliver campaign work. These skills were: communication; collaboration; cultural awareness; using information; and project management – and all are described in more detail as follows:

**Communication**

Most participants (15) rated their confidence in communication skills as confident, and talked about completing a broad range of activities:

- They gathered information and created tailored key messages for their audiences - peers and professionals – through social media tools and face-to-face interactions. One Campaign Creator described how they thought about making the messages interesting or humorous to attract the attention of their audiences more effectively:

  "When we made it for our peers, it was quite simple to communicate like we normally do it with each other. But if we have to prepare something similar, for example for small kids, it would be different. Maybe we have to use more pictures. It’s important to know all this at the very beginning." (Campaign Creator, Czech Republic)

- They talked and engaged in face-to-face discussions with other Campaign Creators and audiences. Native English speakers, for example, reviewed the way they spoke English so it was clearer for other European partners and non-native English speakers practised and improved their English language skills.

- They spoke in front of a large group of people, both peers and professionals with confidence, as one participant explained:

  "I never had problems with communication and now I had the possibility to try a presentation in English and I really, really enjoyed it.” (Campaign Creator, Czech Republic)
Collaboration and cultural awareness

Most participants rated their confidence for collaboration (17) and cultural awareness (15) as either confident or very confident. Exposure to different ways of life and people gave participants better understanding of different cultures and were able to identify similarities between them, such as eating habits, interests and perspectives.

"You get to realise that in Europe people live more or less equally. We learned that our peers from other countries have the same interests as us. “ (Campaign Creator, Spain)

For many participants an improved understanding of different cultures helped them work collaboratively with their European partners during and outside exchange weekends when they discussed and shared approaches, such as how to engage with audiences in their respective countries. This collaborative working skill was also used by Campaign Creators in their own country teams along with skills for negotiation and compromise, as explained by a participant:

"What was new for me even if people don’t agree with each other in everything, there is always compromise, so everybody should be at least satisfied. Well, I don’t know, what else could be done." (Campaign Creator, Czech Republic)

Using information

Most participants (16) rated their confidence with using information as either confident or very confident. Participants described how they had read, reviewed and prepared a lot of information, and presented it in a way that could be understood by peers - a skill that some participants have limited experience of prior to the project.

"The campaign gave us skills that we may had not used. We got a lot of information that we got from school. There is a lot of information about childhood obesity at the moment. “ (Campaign Creator, Portugal)

UK participants, however, suggested that their confidence in this area could have been improved if they had an expert, such as dietician, to work with and help them decipher medical or technical information and how it can be applied in the daily lives of individuals.

Project management

Most participants (12) rated their confidence in project management as being either confident or very confident. They talked about how they had learned to
do different elements of project design and management, delegate tasks, and discuss ideas and take them forward.

"This in itself was a whole project. I mean the girls had to kind of discuss where were going, where we wanted it to go, and what we want the product to show or to do. More you do the better you become at it." (Campaign Creator, UK)

One participant suggested that they would have preferred support with how project impact could be identified so that they could monitor and evaluate activities.

3.5.6 Changes in behaviours and attitudes

Apart from the development of skills, Campaign Creators were asked to describe the impact of the campaigns on their own behaviours and attitudes. Participants reported improved understanding of why and how to lead healthier lifestyles, and the impact of unhealthy choices on their bodies, which had influenced their decisions and behaviours. They mentioned how delivering their own campaign activities made them more conscious of their choices of food, drinks and how much physical activities they undertook in their daily lives.

"Yes. For example, before performing the sugar activity I didn't realize that an energy drink could contain so much sugar. I used to drink some - now I don't, but I know people that drink lots of it. At the same time I have changed while trying to make people change. On the weekends I used to drink a couple cans of Coke, but now I avoid it." (Campaign Creator, Spain)

Participants reported changes in behaviours including undertaking more physical activities and consuming more healthy foods such as fruit and vegetables, reading food nutritional labels while shopping to avoid purchasing food with excessive amount of sugar, and replacing high calorie snacks with healthier alternatives such as fruit.

Participants also reported thinking about the future impact of unhealthy lifestyle, as one participant explained his rationale for wanting to sleep more was to reduce the long-term negative impact on his health and not just the immediate consequences of poor sleeping patterns:

"I have started to sleep more, because I have got the information, how harmful it’s in my age. And I recommend it also to other.” (Campaign Creator, Czech Republic).

One participant talked about how she had greater awareness of emotions – her own and other people’s emotions, and how emotions had an impact on individual’s attitudes and decisions about their health. This insight helped her to
understand how to motivate herself and others to make positive changes in their lives that would help them feel better about themselves.

"I want it to make me feel better. I am more conscious of that. But more than anything it is how I feel." (Campaign Creator, UK).

3.6 Impact on peers and other audiences

Campaign Creators were asked to rate and talk about the impact of their campaigns on their peers and other audiences, and their rating and responses are noted below.

3.6.1 Rating impact

Campaign Creators were asked to rate the impact of the campaigns on their audiences on a Likert scale ranging from 1 to 10, with 10 as an indication of very successful. The findings as presented in Figure 8, below, shows that the campaigns were thought to have had the most impact, i.e. rated 8, 9 or 10, with providing information and increasing awareness (chosen by 11 respondents). This was followed by changing attitudes (13) and motivating young people (7). There was a higher rating for change behaviour – increased physical activity (12) compared to change behaviour – eating habits (11), which could be explained by either more activities delivered to increase physical activity or more of its impact was noted by the Campaign Creators.
3.6.2 Impact reporting and its limitations

Aside from the estimate number of attendees at events or numbers who accessed online tools, Campaign Creators were unable to provide detailed description of audience profile, such as gender, socio-economic backgrounds, and age range. They made general observations about who they had reached and groups they would like to have reached. Examples include UK participants who reached disproportionate number of female users and would have liked to have engaged with both genders, Spanish participants who wished they engaged with students from more institutes, and Czech Republic participants who wanted to reach people from different areas and age groups.

Campaign Creators made general observations about the impact of their activities, such as questions on Facebook pages that suggested interest in their campaigns, and observations about changes in behaviour and attitudes of friends and family members.

Overall, there appeared to be limited recording and reporting of impact that were designed and undertaken by Campaign Creators, which made it difficult
for them to say how activities had benefited audiences and how they could be improved. In hindsight, some participants mentioned that they should have undertaken focus groups or surveys with their audiences to find out more about them and how they had benefited from campaign activities and information. Their intention was to make the project inclusive for all, but a few considered targeting particular groups to be detrimental to the idea of inclusivity.

3.7 Key findings from each country

The wave 3, final evaluation focus groups from all four countries have so far been analysed together. A summary of key findings from each country has been included below, which helps to draw upon any unique findings that were specific to each participating country.

3.7.1 Portugal: Key findings

- **Social marketing:** They described social marketing as a useful and powerful approach when used with purpose, and felt that they had developed knowledge in this particular area.

- **Development of knowledge and skills:** There were six participants in the final evaluation focus group, but only five completed the self-assessment task on the development of knowledge and skills. When the five participants were asked whether they had skills and confidence in a range of work areas—most (five participants) stated that *yes a lot* of confidence and skills in the following five areas: *organised or helped run an event; carried out research; designed a logo; carried out a project with people you have never met before; and worked with people from other countries.* Most (four or five participants) had relatively less confidence and skills in the following three work areas: *designed a website; drafted written material to get across a key message to lots of people in a snappy or powerful way; and used social media to communicate message to a wide range of people.*

- **Confidence in the application of skills:** When the six participants in the final evaluation focus group were asked to rate their confidence in seven key skill areas, most (five or six participants) felt *confident* or very confident about using the following six skills: *creativity; collaboration; using information; communication; cultural awareness; and managing projects.*

- **Impact of the campaigns on their audiences:** When the six participants in the final evaluation focus group were asked to rate the

19 Participants were asked to rate their confidence using a scale of: very confident; confident; neither confident or unconfident; unconfident; and very unconfident.
impact of the campaigns according to various statements – most (six participants) gave a very successful\textsuperscript{20} rating of 9 or 10 for motivating young people and change behaviour increased physical activity.

- **Observations:** They self-reported taking up better eating habits and more exercise, and saw changes in the family and friends with whom they had regular contact with. They felt they had increased their confidence by getting in to contact with other people including ones from other countries and cultures – the process of listening to their views and giving their own opinions.

- **Learning:** In hindsight they would have preferred to have disseminated the campaign to more people and outside of their targeted school.

- **Suggestions for policymakers and practitioners:** To change behaviours of children and young people, they suggested schools should change their food offer; ensure grades for physical education classes is as important as academic classes; and wider promotion of sports that will motivate young students to participate.

### 3.7.2 Czech Republic: Key findings

- **Social marketing:** They described social marketing as an effective way to deliver useful and meaningful information to a large audience, and prompted them to think about how to prepare information in a funny and interesting way so that it was accessible for their peers of different ages.

- **Development of knowledge and skills:** There were five participants in the final evaluation focus group. When they were asked whether they had skills and confidence in a range of work areas, most (five participants) stated that yes a lot of confidence and skills in the following three areas: carried out research; carried out a project with people you have never met before and worked with people from other countries. Most (three participants) had relatively less confidence and skills in the following two areas of work: designed a logo and done graphic design.

- **Confidence in the application of skills:** When five participants in the final evaluation focus group were asked to rate their confidence in seven key skill areas, most (four to five participants) felt confident or very confident about using the following four skills: problem solving; creativity; collaboration; and using information.

- **Impact of the campaigns on their audiences:** When the five participants in the final evaluation focus group were asked to rate the impact of the campaigns according to various statements – most (four to five participants) gave a very successful rating of 9 or 10 for the following:

\textsuperscript{20} Using a scale of 1 to 10 where 1 is not at all successful and 10 is very successful.
providing information and increasing awareness and motivating young people.

- **Observations**: They described the difference of using face-to-face and online interactions – and thought the former was a more effective method for communicating messages as they were able to see and experience the interaction with audiences. They talked about how their own self-confidence had improved when delivering activities, including ones that involved public speaking, and had learned how to work together in a team.

- **Suggestion for policymakers and practitioners**: To change behaviours of children and young people, they suggested that families should provide greater support for healthy lifestyles at home, along with provision of more physical activity in schools, greater availability of healthy foods, and more playgrounds or opportunities for activities.

- **Learning**: Motivation was thought to be the most important step for changing of behaviours. This involved finding ways to spark motivation among children and young people, such as popular role models, interesting activities, and working more closely with schools. It was also important for campaign designers and professionals who delivered information and spoke to audiences to have real motivation and passion for the topic of obesity as audiences could sense this and it influence their decision to take up information and advice.

### 3.7.3 Spain: Key findings

- **Social marketing**: They described social marketing as an efficient way to communicate messages directly to audiences and encourage audiences to interact with the campaign designers that was more than simply explaining terms and issues.

- **Development of knowledge and skills**: There were five participants in the final evaluation focus group. When they were asked whether they had skills and confidence in a range of work areas – most (five participants) stated that they had **yes a lot** of confidence and skills in the following eight work areas: organised or helped run an event; carried out research; designed a website; drafted written material to get across a key message to lots of people in a snappy or powerful way; given a presentation to lots of people; used social media to communicate message to a wide range of people; carried out a project with people you have never met before; and worked with people from other countries. Most (four participants) reported relatively less confidence and skills in the following three work areas: designed a poster; designed a logo, and done graphic design.

- **Confidence in the application of skills**: When five participants in the final evaluation focus group were asked to rate their confidence in seven key skill areas, and most (four or five participants) felt **confident** or very
confident about using the following six skills: creativity; problem solving; communication; collaboration; using information; and cultural awareness.

- **Impact of the campaigns on their audiences:** When the five participants in the final evaluation focus group were asked to rate the impact of the campaigns according to various statements – most (four or five participants) gave a very successful rating of 9 or 10 in providing information.

- **Observations:** They talked about developing greater confidence and skills for communicating technical information to audiences, such as nutrition values and its importance to younger children. They also reported improving their English language skills – all of which helped them to reflect and refine their key messages for their audiences and when they interacted with Campaign Creators from other countries.

- **Suggestion for policymakers and practitioners:** To change behaviours of children and young people, they suggested more resources and time had to be invested in initiatives for more impact. Although they had good support, resources and materials, but everything has limits. They required more time to perform activities and resources to put all this ideas in few time.

- **Learning:** Campaigns provide information and ideas, but it is the individual who has to make the final decision to change their attitudes and behaviours and take up a more healthy way of living.

### 3.7.4 UK: Key findings

- **Social marketing:** They described it as an effective way to raise awareness of issues and start discussions about the topic of obesity among children and young people, parents, and professionals. This was considered to be an important part of the process of changing behaviours.

- **Development of knowledge and skills:** There were two participants in the final evaluation focus group. When they were asked whether they had skills and confidence in a range of work areas – both participants stated that they had yes a lot of confidence and skills in the following eight work areas: organised or helped run an event; carried out research; designed a poster; designed a logo; drafted written material to get across a key message to lots of people in a snappy or powerful way; given a presentation to lots of people; used social media to communicate message to a wide range of people; and worked with people from other countries.
  
  Both participants reported relatively less confidence and skills in the following three work areas: designed a website; done graphic design; and carried out a project with people you have never met before.

- **Confidence in the application of skills:** When two participants in the final evaluation focus group were asked to rate their confidence in seven
key skill areas, and both participants felt confident or very confident about using the seven skills.

- **Impact of the campaigns on their audiences:** When the two participants in the final evaluation focus group were asked to rate the impact of the campaigns according to various statements – both participants gave a successful rating of 8 in changing behaviour – increased physical activity.

- **Observations:** They talked about particular behaviours and habits of female and male audiences. They, in particular, noticed that girls and young women were less likely to participate in physical activities, unlike boys and young men. It was seen to be important to understand why girls and young women were less motivated to participate in sports, and how to increase their participation in such activities.

- **Suggestion for policymakers and practitioners:** Campaigns should be accompanied by the provision of resources and places for children and young people to participate in activities so that they can change their behaviours.

- **Learning:** A key aspect of changing behaviours and habits is tapping in to the emotions of audiences, as positive emotions were more likely to motivate and encourage individuals to take action. Positive and inspirational messages communicated by the campaigns were considered to bring better engagement and lead to positive actions of audiences.

### 3.8 Suggestions for practitioners and policymakers

Campaign Creators were asked whether they had any suggestions or recommendations for practitioners and policymakers on how the campaigns could be improved and how to ensure permanent changes to obesity rates. Their responses are noted below.

#### 3.8.1 Motivation and practical information for change

There was general agreement among participants that change in behaviours could only occur if individuals have a personal commitment and motivation for change. Motivation was seen to be the key for encouraging individuals to take action towards tackling obesity and leading healthy lifestyles. Participants worked on activities with the aim of sparking motivation in audiences, which involved firstly creating messages and activities that would capture the attention of people and connect with them in an emotional way. This was followed by practical information on how to create changes in their daily lives – changes to certain aspects of their lives rather than changing everything.
"If they don’t get interested and you don’t make the message attractive then there’s no motivation neither of them nor of you. For example, if you go to perform an activity and you do it with motivation and they feel your energy, they will feel motivated as well. It’s nice to learn something like that and maybe they do it.” (Campaign Creator, Spain)

3.8.2 Provision of reliable and accessible information

The provision of accurate and reliable information was crucial and many Campaign Creators participants mentioned how they valued working with professionals to find appropriate and correct information. However, what made information accessible and user-friendly information for peers was the personal touch Campaign Creators added to it, such as information with commentary and advice on how best to make changes in lifestyle, and events that included demonstrations and thought-provoking discussions. Examples of these include fun pop-up events with taste testing activities and social pages that monitored exercise challenges of Campaign Creators.

3.8.3 Resources and opportunities to make healthy choices

Provision of information and advice on its own was not considered to be enough to create permanent changes in obesity rates. Participants suggested information had to be accompanied with access to resources such as healthier foods and spaces for free physical activities, so that people can start making real changes in their lives and have the places and support to do so.

3.8.4 Support from various sources

Children and young people were thought to require support and encouragement from family, schools and professionals in various settings so that they have access to support in their lives to make healthy choices whether it is at home, school or community. People in the home and community who were leading healthy lifestyle were considered to be role models who were showing others how to lead a healthy lifestyle and the benefits of doing so. This was seen as a good way of motivating children and young people to make choices similar.

One participant, for example, explained that as result of the campaign her mother replaced white with brown rice, pasta and bread and reduced take away meals which made it easier for her to make healthy choices. Another participant reported that her family took more walks in countryside which encouraged her to do the same.
3.9 Section overview

This section included Campaign Creators’, young people who delivered the campaigns, experiences of working on the campaigns, opinions on issues regarding obesity, skills they had improved as a result of the campaigns, and suggestions for taking forward findings from the campaigns. It also included a summary of findings from interim report and key findings from each country. A summary of key findings are included in the box below.

Summary box

Activities

- Campaign Creators enjoyed a range of activities, including organisation and delivery of events and communication of information. They also identified activities that they did not enjoy and suggested support in further areas such as website development.

- Campaign Creators reported that they received support from the EYTO management team, but approaches and intensity of support varied between countries.

Challenges

- A key challenge for all Campaign Creators related to having limited time to work on the project, as they had to balance their EYTO project commitments with busy schedules of attending classes, preparing for exams, and home and social activities.

Social marketing

- Social marketing was an effective approach for connecting and cascading information and messages directly to their own networks and people that they would not normally meet.

- The most effective messages to communicate were positive and inspirational ones that promoted the benefits of healthy lifestyles. These were considered more likely to motivate individuals to make positive changes in their behaviours.

- Negative habits and behaviours of families and peers were considered to be counter-productive to social marketing that encouraged healthy lifestyles.

- Social marketing provides information, but the decision to take up advice and information that lead to healthy behaviours is the responsibility of each individual.

Impact on Campaign Creators

- Campaign Creators undertook a range of activities during the campaigns, and they were asked about their prior experience. When asked about their interest in the activities - 160 (85.6%) of the total number of responses
showed that they had yes a lot of interest in the particular areas of work compared to 21 (11.6%) and 6 (3.2%) who stated yes a bit and no, respectively. The areas of work that they had the most interest in were: worked with people from other countries; organised or helped run an event; carried out a project with people you have never met before; and given a presentation to lots of people.

- Campaign Creators rated their confidence when using seven particular skills - 106 (85%) of the total number of responses were either very confident or confident compared to 18 (14%) and 1 (0.8%) who indicated neither confident or unconfident and unconfident, respectively. The areas of work that they felt very confident about applying skills were: cultural awareness; using information; and communication.

- Campaign Creators were asked about whether they had developed skills and confidence in ten key areas and their responses were compared with ones recorded at baseline, interim periods of the campaigns. They self-reported an overall improvement in skills and confidence over the course of the campaigns. Of the total number of responses - those who had reported no development in skills and confidence had fallen from 28 (12.1%) at baseline to 14 (9.2%) at (wave 3), and those who reported yes a lot had risen from 104 (45%) at baseline to 136 (72.7%) at wave 3. There were improvements reported in the following skills: communications; cultural awareness; collaboration; using information; and project management.

**Impact on peers and other audiences**

- Campaign Creators rated the project impact on their audiences using a Likert scale ranging from 1 (not at all successful) to 10 (very successful). Findings showed that campaigns had the most impact, i.e. rated 8, 9 or 10, with providing information and increasing awareness (chosen by 11 respondents). This was followed by changing attitudes (13) and motivating young people (7).

**Limited impact recording and reporting**

- There appeared to be limited recording and reporting of impact by Campaign Creators which made it challenging to capture impact on audiences, in particular what and how behaviours have been changed as a result of the campaigns, and which groups have benefited the most from the campaigns.

The next section (Section 4) will explore the experiences of children and young people and other audiences who have engaged with the campaigns, and their attitudes and behaviours regarding healthy eating and physical activities.
4. Findings: Survey with children and young people and other audiences

4.1 Introduction to survey

Audiences who engaged with campaigns in their respective countries were asked to complete an online survey that aimed to find out about their views and experiences on obesity, healthy eating and physical exercise.

The survey was launched and uploaded online in November 2014 at the start of the campaigns by EYTO management teams in their own languages for audiences to complete in their own time, and it was closed in July 2015. This survey aimed to gather views on the causes of obesity; barriers and enablers for healthy lifestyles; and effectiveness and impact of the campaign. Audiences who had engaged with campaigns either online or at face-to-face events were asked to complete the online survey. Paper-based surveys were also used by some teams to increase the response rate.

Findings from the survey are included in this section and wherever percentages are reported – these have been calculated from valid answers from respondents who answered the questions and excluded non-substantive responses, e.g. I don’t know.

4.2 Survey respondents

This survey was completed by 237 respondents across four countries: Spain, Portugal, Czech Republic and UK. The number of respondents who completed the survey in each country are as follows: Czech Republic (88); Spain (71); Portugal (53); and UK (25).

Of the 237 total respondents – 168 (71%) of them were female (see Figure 9, below), and 136 (58%) were between the ages of 14-19 years and 59 (25%) were over the age of 25 (see Table 5, below).
Figure 9: Gender of respondents

Respondents (N=237)

Table 5: Age of respondents

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Czech Republic</th>
<th>Portugal</th>
<th>Spain</th>
<th>UK</th>
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<td>7</td>
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<td>9</td>
<td>4</td>
<td>7</td>
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<td>9</td>
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<td>23-25</td>
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<td>2</td>
<td>0</td>
<td>4</td>
</tr>
<tr>
<td>Over 25 years old</td>
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<td>21</td>
<td>12</td>
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</tr>
<tr>
<td>Total</td>
<td>88</td>
<td>53</td>
<td>71</td>
<td>25</td>
<td>237</td>
</tr>
</tbody>
</table>

Respondents (N=237)

Of 237 total respondents, 178 (75%) reported that they were in education (either school or university), as presented in Figure 10, below. Of the 74 (31.2%) in employment – 43 (18.1%) and (13.1%) were in full-time and part-time employment, respectively.
### 4.3 Respondents engagement with activities

The survey aimed to find out which campaign activities respondents had engaged with to identify most effective engagement approaches. Their responses are noted below.

Respondents were asked whether they had engaged with any campaign activities or received any information (see Table 6, below). Across the 197 respondents who answered this question, there were 387 responses – of which Facebook was the most common answer by 158 (40.8%) respondents. This was followed by 64 (16.5%) who used pop-up events, 46 (11.9%) who used online video/youtube, and 41 (10.6%) who used leaflets.

Further analysis of the data suggests that aimed to find out what activities audiences engaged with found that web-based activities (*Facebook, online video/youtube, Instagram, Twitter*) were the most effective approach for engagement as these had combined responses of 232 (59.9%), when compared with events (*pop-up events*) which had 158 (40.8%) responses and paper-
based activities (*leaflet, posters, newspaper advert, and postcard*) which had combined responses of 91 (23.5%)\(^1\).

**Table 6: Respondents engagement in activities**

<table>
<thead>
<tr>
<th>Activities</th>
<th>Czech Republic</th>
<th>Portugal</th>
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<th>UK</th>
<th>Total</th>
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<td>31</td>
<td>52</td>
<td>5</td>
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<tr>
<td>Pop up event</td>
<td>19</td>
<td>8</td>
<td>29</td>
<td>8</td>
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</tr>
<tr>
<td>Online video / YouTube</td>
<td>12</td>
<td>13</td>
<td>19</td>
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<td>Leaflet</td>
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<td>4</td>
<td>24</td>
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<tr>
<td>Posters</td>
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<td>6</td>
<td>7</td>
<td>4</td>
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<tr>
<td>Newspaper advert</td>
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<td>1</td>
<td>19</td>
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<td>Postcard</td>
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<td>1</td>
<td>6</td>
<td>1</td>
<td>8</td>
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<tr>
<td>Twitter feed</td>
<td>3</td>
<td>0</td>
<td>1</td>
<td>0</td>
<td>4</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>150</strong></td>
<td><strong>67</strong></td>
<td><strong>141</strong></td>
<td><strong>29</strong></td>
<td><strong>387</strong></td>
</tr>
</tbody>
</table>

Respondents (*N*=197). Respondents could choose more than one response.

**4.4 Impact on behaviours**

The survey aimed to find out the impact of the campaigns on audiences’ behaviours regarding eating and undertaking physical activities, and their responses are noted below.

Respondents were asked questions about the impact of the campaigns on their habits and behaviours associated with eating and physical activity.

Of the 237 respondents, 213 (89.9%) rated campaigns as either *somewhat effective* or *very effective* in encouraging them to eat a more healthy diet and be more physically active, and findings are presented in Table 7, below.

---

\(^1\) Of the 40 who did not select any answers, 9 stated *I can’t remember*, 9 stated *I don’t know*, and 31 stated *none of these*. In a small number of cases, respondents who selected answers activities also selected *I can’t remember* (2) and *none of these* (3). Their reported activities were included in the analysis.
Table 7: Effectiveness for encouraging young people to eat a more healthy diet and be more physically active

<table>
<thead>
<tr>
<th></th>
<th>Czech Republic</th>
<th>Portugal</th>
<th>Spain</th>
<th>UK</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Very effective</td>
<td>28</td>
<td>23</td>
<td>25</td>
<td>10</td>
<td>86</td>
</tr>
<tr>
<td>Somewhat effective</td>
<td>49</td>
<td>27</td>
<td>38</td>
<td>13</td>
<td>127</td>
</tr>
<tr>
<td>Not very effective</td>
<td>7</td>
<td>3</td>
<td>6</td>
<td>0</td>
<td>16</td>
</tr>
<tr>
<td>Not at all effective</td>
<td>4</td>
<td>0</td>
<td>2</td>
<td>2</td>
<td>8</td>
</tr>
<tr>
<td>Total</td>
<td>88</td>
<td>53</td>
<td>71</td>
<td>25</td>
<td>237</td>
</tr>
</tbody>
</table>

Respondents (N=237). Respondents could choose more than one response.

Respondents were also asked to rate the campaigns’ effectiveness on whether it had engaged, communicated, motivated and demonstrated for audiences to eat a more healthy diet and be more physically active. Responses (see Table 8, below) showed that most respondents considered the campaigns to be either very effective or somewhat effective in all the following areas:

- Encouraging young people to eat a more healthy diet and be more physically active
- Encouraging young people in eating a healthy diet and becoming physically active
- Communicating why it is important to eat a healthy diet and be physically active
- Motivating young people to eat a healthy diet and be physically active
- Showing young people how to eat a healthy diet and be physically active through practical suggestions for their day-to-day life

Across the 237 respondents who answered these questions there were 1,185 responses – of which 605 (51.1%) indicated somewhat effective and 444 (37.5%) indicated very effective.
Table 8: Campaign Effectiveness

<table>
<thead>
<tr>
<th></th>
<th>Czech Republic</th>
<th>Spain</th>
<th>Portugal</th>
<th>UK</th>
<th>Totals</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Very effective</td>
<td>Somewhat effective</td>
<td>Not very effective</td>
<td>Very effective</td>
<td>Somewhat effective</td>
</tr>
<tr>
<td>Encouraging young people to eat a more healthy diet and be more physically active</td>
<td>28</td>
<td>49</td>
<td>7</td>
<td>4</td>
<td>25</td>
</tr>
<tr>
<td>Engaging young people in eating a healthy diet and becoming physically active</td>
<td>28</td>
<td>47</td>
<td>10</td>
<td>3</td>
<td>18</td>
</tr>
<tr>
<td>Communicating why it is important to eat a healthy diet and be physically active</td>
<td>28</td>
<td>49</td>
<td>9</td>
<td>2</td>
<td>24</td>
</tr>
<tr>
<td>Motivating young people to eat a healthy diet and be physically active</td>
<td>39</td>
<td>39</td>
<td>7</td>
<td>3</td>
<td>25</td>
</tr>
<tr>
<td>Showing young people how to eat a healthy diet and be physically active through practical suggestions for their day-to-day life</td>
<td>36</td>
<td>36</td>
<td>13</td>
<td>3</td>
<td>22</td>
</tr>
</tbody>
</table>

Respondents (N= 237)
4.5 Current behaviours and attitudes

The survey aimed to find out about respondents’ current behaviours and whether they wanted to make positive changes to their lifestyles. Their responses are noted below.

Respondents were asked to choose a statement that best described their behaviours and intentions for making any changes at the time they completed the survey. The findings (see Table 9, below) showed that 165 (69.6%) wanted to make changes in their diet and exercise routine – of which 113 (47.7%) felt that they were already leading healthy lifestyle and 52 (21.9%) who described their lifestyle as being unhealthy.

Table 9: Self-description of respondents

<table>
<thead>
<tr>
<th></th>
<th>Czech Republic</th>
<th>Portugal</th>
<th>Spain</th>
<th>UK</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>I live in healthy lifestyle but I still want to make some changes to my diet and exercise routine</td>
<td>34</td>
<td>26</td>
<td>40</td>
<td>13</td>
<td>113</td>
</tr>
<tr>
<td>I don’t live a very healthy lifestyle at all and I want to make some changes to my diet and exercise routine</td>
<td>24</td>
<td>17</td>
<td>7</td>
<td>4</td>
<td>52</td>
</tr>
<tr>
<td>I live a healthy lifestyle and I don’t need to make any changes to my diet and exercise routine</td>
<td>14</td>
<td>8</td>
<td>21</td>
<td>7</td>
<td>50</td>
</tr>
<tr>
<td>I don’t know</td>
<td>8</td>
<td>1</td>
<td>2</td>
<td>1</td>
<td>12</td>
</tr>
<tr>
<td>I don’t live a very healthy lifestyle and I don’t want to make any changes to my diet and exercise routine</td>
<td>8</td>
<td>1</td>
<td>1</td>
<td>0</td>
<td>10</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>88</strong></td>
<td><strong>53</strong></td>
<td><strong>71</strong></td>
<td><strong>25</strong></td>
<td><strong>237</strong></td>
</tr>
</tbody>
</table>

Respondents (N=237)

4.6 Taking forward learning from the campaigns

The survey aimed to find out how respondents had used the information and learnings from the campaigns and whether they applied them in their everyday lives. Their responses are noted below.

Most respondents indicated that they thought, talked and shared information about the campaigns. Across the 216 respondents, there were 402 responses (see Figure 11, below) – of which 99 (24.6%) respondents thought about eating a healthy diet and being physically active. This was followed by 97 (24.1%) who talked about the campaign with a friend/parent 41 (10.2%) and 72 (17.9%) 22

---

22 This a combination of the two statements: I live in healthy lifestyle but I still want to make some changes to my diet and exercise routine and I don’t live a very healthy lifestyle at all and I want to make some changes to my diet and exercise routine
who shared the link about the campaign or information about the campaign with a parent/friend.

Fewer respondents indicated taking actions as a result of the campaigns, for example 42 (10.4%) stated that they made a change to eat a more healthy diet and be more physically active and 57 (14.2%) tried to find out more about healthy eating or being physical active.\textsuperscript{23}

\textsuperscript{23} Apart from the 21 respondents who did not answer this question - 14 respondents indicated none of the above and 8 stated I don’t know. Of the respondents who reported I don’t know, one also chose nothing yet- maybe later which suggests that the respondent may not have understood the question.
Figure 11: How the respondents have taken forward the campaigns

- Thought about eating a healthy diet and being physically active: 99 respondents (N=216)
  - Czech Republic: 41
  - Portugal: 19
  - Spain: 31
  - UK: 8

- Talked about the campaign with a friend/parent: 97 respondents
  - Czech Republic: 33
  - Portugal: 15
  - Spain: 42
  - UK: 7

- Shared the link about the campaign or information about the campaign with a parent/friend: 72 respondents
  - Czech Republic: 31
  - Portugal: 17
  - Spain: 22
  - UK: 2

- Tried to find out more about healthy eating or being physically active: 57 respondents
  - Czech Republic: 23
  - Portugal: 6
  - Spain: 23
  - UK: 5

- Made a change to eat a more healthy diet and be more physically active: 42 respondents
  - Czech Republic: 16
  - Portugal: 3
  - Spain: 19
  - UK: 4

- Nothing yet - maybe later: 35 respondents
  - Czech Republic: 14
  - Portugal: 13
  - Spain: 5
  - UK: 3

Respondents (N=216)
4.7 Views on obesity and healthy lifestyles

The survey aimed to find out about respondents’ views on what they thought were the causes of obesity, and factors that can help and deter children and young people from leading healthy lifestyles. They were given various factors to choose from and their responses are noted below.

4.7.1 Causes of obesity

Across the 237 respondents, there were 1,330 responses – of which the most indicated answer by 188 (14.1%) respondents was eating too much unhealthy food. This was followed by not doing enough physical activity and being lazy indicated by 168 (12.6%) and 130 (9.8%) of respondents, respectively.

This question was followed by one that asked respondents to choose factors that they thought were the most important. Across the 237 respondents there were 539 responses – of which the most indicated answers by 130 (24.1%) respondents was still eating too much unhealthy food and not doing enough physical activity by 115 (21.3%).

Further analysis of the responses (see Table 10) showed that behaviours associated with eating and physical activity were considered to be the main causes of obesity. Of the 539 total number of responses – 262 (48.6%) were associated with eating i.e. consuming too much food, unhealthy foods or not eating healthy foods24, and 178(33%) of responses were associated with not taking enough physical activities25.

Fewer respondents considered causes associated with poor health, disability and genetics as contributing to obesity, as having a medical condition, having a disability and genetics were indicated by 16 (3%) of respondents. This suggests that causes of obesity – in particular eating and physical activity - were thought to be in the control of individuals rather than external factors that were beyond their the influence and control.

24 This refers to the following answers in Figure 10: eating too much unhealthy food; not eating enough fruits and vegetables; other people eating unhealthily around them; eating too much generally; and parents/carers only providing unhealthy food

25 This refers to the following answers in Figure 10: not doing enough physical activity; being lazy; and sitting down a lot.
Table 10: Most important causes of obesity

<table>
<thead>
<tr>
<th>Cause</th>
<th>Czech Republic</th>
<th>Portugal</th>
<th>Spain</th>
<th>UK</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Eating too much unhealthy food</td>
<td>42</td>
<td>29</td>
<td>45</td>
<td>14</td>
<td>130</td>
</tr>
<tr>
<td>Not doing enough physical activity</td>
<td>46</td>
<td>25</td>
<td>40</td>
<td>4</td>
<td>115</td>
</tr>
<tr>
<td>Not eating enough fruits and vegetables</td>
<td>16</td>
<td>11</td>
<td>16</td>
<td>1</td>
<td>44</td>
</tr>
<tr>
<td>Being lazy</td>
<td>24</td>
<td>8</td>
<td>6</td>
<td>4</td>
<td>42</td>
</tr>
<tr>
<td>Other people eating unhealthily around them</td>
<td>18</td>
<td>16</td>
<td>6</td>
<td>0</td>
<td>40</td>
</tr>
<tr>
<td>Eating too much generally</td>
<td>7</td>
<td>4</td>
<td>10</td>
<td>5</td>
<td>26</td>
</tr>
<tr>
<td>Boredom</td>
<td>11</td>
<td>3</td>
<td>5</td>
<td>6</td>
<td>25</td>
</tr>
<tr>
<td>Parents/carers only providing unhealthy food</td>
<td>3</td>
<td>9</td>
<td>9</td>
<td>1</td>
<td>22</td>
</tr>
<tr>
<td>Sitting down a lot</td>
<td>7</td>
<td>8</td>
<td>5</td>
<td>1</td>
<td>21</td>
</tr>
<tr>
<td>Feeling down</td>
<td>5</td>
<td>6</td>
<td>4</td>
<td>3</td>
<td>18</td>
</tr>
<tr>
<td>Being lonely</td>
<td>5</td>
<td>6</td>
<td>4</td>
<td>0</td>
<td>15</td>
</tr>
<tr>
<td>Healthy food is expensive</td>
<td>4</td>
<td>7</td>
<td>0</td>
<td>3</td>
<td>14</td>
</tr>
<tr>
<td>Genetics</td>
<td>7</td>
<td>2</td>
<td>5</td>
<td>0</td>
<td>14</td>
</tr>
<tr>
<td>Being unlucky</td>
<td>5</td>
<td>1</td>
<td>0</td>
<td>0</td>
<td>6</td>
</tr>
<tr>
<td>Lack of information about how to lose weight</td>
<td>1</td>
<td>1</td>
<td>2</td>
<td>1</td>
<td>5</td>
</tr>
<tr>
<td>Having a disability</td>
<td>1</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>Result of a medical condition</td>
<td>0</td>
<td>0</td>
<td>1</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>202</strong></td>
<td><strong>136</strong></td>
<td><strong>158</strong></td>
<td><strong>43</strong></td>
<td><strong>539</strong></td>
</tr>
</tbody>
</table>

Respondents (N=237). Respondents could choose more than one response.
4.7.2 Factors that help young people make healthy choices and live a healthy lifestyle

Respondents were asked what factors help children and young people make healthy choices and live a healthy lifestyle. Across the 237 respondents – there were 1,248 responses – of which the most indicated answer by 158 (12.7%) respondents was support from their parents/carers to get healthy. This was followed by access to opportunities for sports and other physical activities and enjoying physical activity indicated by 153 (12.3%) and 129 (10.3%) respondents, respectively.

This question was followed by one that asked out of all the factors mentioned, which ones they thought were the most important. Across the 237 respondents there were 521 responses – of which the most indicated answer by 101 (19.4%) respondents was support from their parents/carers to get healthy. This was followed by access to opportunities for sports and other physical activities and enjoying physical activity indicated by 70 (13.4%) and 61 (11.8%) of respondents, respectively.

Further analysis of the responses (in Table 11, below) showed that out of the 521 total responses – 194 (37.2%) was associated with support, in particular support from personal and social networks, such as parents and friends. The enjoyment of activities and healthy foods were also considered to be important as 108 (20.5%) of total number of responses were linked to enjoying physical activity and enjoying healthy eating, and 100 (19.2%) of responses referred to access to opportunities and resources, i.e. access to opportunities for sports and other physical activities and access to healthy food.

---

26 This refers to the following answers in Table 12: support from their parents/carers to get healthy; having someone to exercise with; support from their friends to get healthy; and support from school to get healthy.
Table 11: Most important factors that help young people make healthy choices and live a healthy lifestyle

<table>
<thead>
<tr>
<th>Factor</th>
<th>Czech</th>
<th>Portugal</th>
<th>Spain</th>
<th>UK</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Support from their parents/carers to get healthy</td>
<td>35</td>
<td>29</td>
<td>28</td>
<td>9</td>
<td>101</td>
</tr>
<tr>
<td>Access to opportunities for sports and other physical activities</td>
<td>31</td>
<td>14</td>
<td>20</td>
<td>5</td>
<td>70</td>
</tr>
<tr>
<td>Enjoying physical activity</td>
<td>25</td>
<td>15</td>
<td>19</td>
<td>2</td>
<td>61</td>
</tr>
<tr>
<td>Caring about the way they look</td>
<td>22</td>
<td>14</td>
<td>11</td>
<td>3</td>
<td>50</td>
</tr>
<tr>
<td>Enjoying healthy eating</td>
<td>6</td>
<td>16</td>
<td>20</td>
<td>5</td>
<td>47</td>
</tr>
<tr>
<td>Having someone to exercise with</td>
<td>20</td>
<td>4</td>
<td>11</td>
<td>4</td>
<td>39</td>
</tr>
<tr>
<td>Seeing the benefits from making healthy choices</td>
<td>8</td>
<td>13</td>
<td>12</td>
<td>4</td>
<td>37</td>
</tr>
<tr>
<td>Support from their friends to get healthy</td>
<td>18</td>
<td>10</td>
<td>5</td>
<td>0</td>
<td>33</td>
</tr>
<tr>
<td>Access to healthy food</td>
<td>7</td>
<td>8</td>
<td>11</td>
<td>4</td>
<td>30</td>
</tr>
<tr>
<td>Knowledge and understanding of how to be healthy</td>
<td>10</td>
<td>5</td>
<td>10</td>
<td>2</td>
<td>27</td>
</tr>
<tr>
<td>Support from school to get healthy</td>
<td>8</td>
<td>6</td>
<td>5</td>
<td>2</td>
<td>21</td>
</tr>
<tr>
<td>Having time to think about being healthy</td>
<td>3</td>
<td>1</td>
<td>1</td>
<td>0</td>
<td>5</td>
</tr>
<tr>
<td>Total</td>
<td>193</td>
<td>135</td>
<td>153</td>
<td>40</td>
<td>521</td>
</tr>
</tbody>
</table>

Respondents (N=237). Respondents could choose more than one response.

4.7.3 Factors that deter children and young people from making healthy choices and living a healthy lifestyle

Respondents were asked what factors deterred children and young people from making healthy choices and living healthy lifestyle. Across the 237 respondents, there were 1,446 responses – of which the most indicated answer by 139 (9.6%) of respondents was *not getting enough exercise*. This was followed by *lacking motivation to change* and *lack of will power* indicated by 127 (8.9%) and 119 (8.2%) of respondents, respectively.

This question was followed by one that asked which of the factors mentioned, were considered to be the most important. Across the 237 respondents there was 544 responses – of which the most indicated answer by 69 (16.9%) was *being with friends who eat unhealthily*. This was followed by *not enough healthy meals available in schools* and *lack of discipline* indicated by 52 (12.7%) and 51 (12.5%) of respondents, respectively.
Further analysis of responses (in Table 12) showed that out of the 544 total responses – 233 (42.8%) was associated with motivation for making changes and adopting new behaviours\textsuperscript{27}. Knowledge and understanding of how to lead a healthier life, such as not knowing how to cook, not knowing enough about calories, and hidden sugar and salt in food, were considered to be of value, but only 28 (5.1%) thought they were important factors that deter children and young people from making healthy choices.

\textsuperscript{27} This refers to the following answers in Figures 14a and 14b: lacking motivation to change; lack of will power; not liking working out; not being able to break bad eating habits; temptation; and lack of discipline.
Table 12: Most important factors that deter children and young people from making healthy choices and living a healthy lifestyle

<table>
<thead>
<tr>
<th>Factor</th>
<th>Czech Republic</th>
<th>Portugal</th>
<th>Spain</th>
<th>UK</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lacking motivation to change</td>
<td>27</td>
<td>11</td>
<td>24</td>
<td>1</td>
<td>63</td>
</tr>
<tr>
<td>Not getting enough exercise</td>
<td>19</td>
<td>14</td>
<td>19</td>
<td>6</td>
<td>58</td>
</tr>
<tr>
<td>Lack of will power</td>
<td>17</td>
<td>10</td>
<td>15</td>
<td>0</td>
<td>42</td>
</tr>
<tr>
<td>More unhealthy than healthy food in the house</td>
<td>19</td>
<td>13</td>
<td>9</td>
<td>0</td>
<td>41</td>
</tr>
<tr>
<td>Not liking working out</td>
<td>12</td>
<td>14</td>
<td>13</td>
<td>1</td>
<td>40</td>
</tr>
<tr>
<td>Lack of support friends/family to make changes</td>
<td>10</td>
<td>14</td>
<td>16</td>
<td>1</td>
<td>38</td>
</tr>
<tr>
<td>Not being able to break bad eating habits</td>
<td>15</td>
<td>4</td>
<td>16</td>
<td>1</td>
<td>36</td>
</tr>
<tr>
<td>Unhealthy foods are cheaper than healthy foods</td>
<td>13</td>
<td>7</td>
<td>8</td>
<td>7</td>
<td>35</td>
</tr>
<tr>
<td>Enjoying unhealthy foods more than healthy foods</td>
<td>7</td>
<td>12</td>
<td>7</td>
<td>8</td>
<td>34</td>
</tr>
<tr>
<td>Temptation</td>
<td>4</td>
<td>10</td>
<td>13</td>
<td>5</td>
<td>32</td>
</tr>
<tr>
<td>Being with friends who eat unhealthily</td>
<td>6</td>
<td>15</td>
<td>5</td>
<td>2</td>
<td>28</td>
</tr>
<tr>
<td>Not knowing enough about calories</td>
<td>3</td>
<td>0</td>
<td>1</td>
<td>4</td>
<td>8</td>
</tr>
<tr>
<td>Lack of discipline</td>
<td>13</td>
<td>4</td>
<td>3</td>
<td>0</td>
<td>20</td>
</tr>
<tr>
<td>Not enough healthy meals available in schools</td>
<td>6</td>
<td>4</td>
<td>1</td>
<td>0</td>
<td>11</td>
</tr>
<tr>
<td>Not knowing how to cook</td>
<td>3</td>
<td>3</td>
<td>4</td>
<td>1</td>
<td>11</td>
</tr>
<tr>
<td>Being too busy</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>2</td>
<td>11</td>
</tr>
<tr>
<td>Not having access to a place to work out</td>
<td>4</td>
<td>2</td>
<td>2</td>
<td>2</td>
<td>10</td>
</tr>
<tr>
<td>Medical condition</td>
<td>4</td>
<td>0</td>
<td>5</td>
<td>0</td>
<td>9</td>
</tr>
<tr>
<td>Hidden salt and sugar in foods</td>
<td>2</td>
<td>2</td>
<td>3</td>
<td>2</td>
<td>9</td>
</tr>
<tr>
<td>Not having the time to make changes</td>
<td>6</td>
<td>0</td>
<td>1</td>
<td>1</td>
<td>8</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>194</strong></td>
<td><strong>139</strong></td>
<td><strong>167</strong></td>
<td><strong>44</strong></td>
<td><strong>544</strong></td>
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Respondents (N=237). Respondents could choose more than one response.

4.8 Section overview

This section presented the responses of 237 peers and other audiences who have engaged with the campaigns. It shows their experiences and attitudes regarding healthy eating and physical activities, and what they thought were the factors that could help and deter children and young people from leading healthy lifestyles. A summary of key findings are included in the box over the page.
Summary box

Activities

- Of the 197 respondents who stated that they had engaged with at least one campaign activities, the most indicated response was Facebook (40.8%).

- Answers suggest that web-based activities Facebook, online video/youtube, Instagram, Twitter) were the most effective approach for engagement as these had combined responses of 232 (60%), when compared with events and paper-based activities.

Impact on behaviours

- Of the 237 respondents, 213 (89.9%) rated campaigns as either somewhat effective or very effective in encouraging them to eat a more healthy diet and be more physically active.

- Respondents were also asked to rate the campaigns’ effectiveness on whether it had engaged, communicated, motivated and demonstrated for audiences to eat a more healthy diet and be more physically active. Across the 237 respondents who answered these questions there were 1,185 responses – of which 605 (51.1%) indicated somewhat effective and 444 (37.5%) indicated very effective.

Current behaviours and attitudes

- Most respondents (165, 69.6%), wanted to make changes to their diet and exercise routine - of which 113 (47.7%) felt that they were already leading a healthy lifestyle and 52 (21.9%) described their lifestyle as being unhealthy.

- In regards to taking forward learning from the campaigns – most respondents indicated that they thought, talked and shared information about the campaigns. For example across the 216 respondents, there were 402 responses – of which 99 (24.6%) respondents thought about eating a healthy diet and being physically active. This was followed by 97 (24.1%) who talked about the campaign with a friend/parent 41 (10.2%) and 72 (17.9%) who shared the link about the campaign or information about the campaign with a parent/friend. In comparison fewer respondents indicated taking actions as a result of the campaigns, for example 42 (10.4%) stated that they made a change to eat a more healthy diet and be more physically active.

Causes of obesity

- Factors mentioned include 130 (24.1%) respondents who indicated eating too much unhealthy food. This was followed by not doing enough physical activity as indicated by 115 (21.3%).

- Further analysis of responses showed that behaviours associated with eating and physical activity were considered to be the main causes of obesity – 262 (48.6%) of responses were associated with eating i.e.
consuming too much food, unhealthy foods or not eating healthy foods, and 178 (33%) of responses were associated with not taking enough physical activities.

Factors that help young people to make healthy choices and live healthy lives

- The most important factors mentioned indicated by 101 (19.4%) respondents was support from their parents/carers to get healthy. This was followed by access to opportunities for sports and other physical activities and enjoying physical activity indicated by 70 (13.4%) and 61 (11.8%) of respondents, respectively.

- Further analysis of the responses showed that 194 (37.2%) responses were associated with support, in particular support from personal and social networks. The enjoyment of activities and healthy foods was indicated by 108 (20.5%) respondents, and 100 (19.2%) respondents referred to access to opportunities and resources.

Factors that deter young people from making healthy choices and live healthy lives

- The most important factor as indicated by 69 (16.9%) responses was being with friends who eat unhealthily. This was followed by not enough healthy meals available in schools and lack of discipline indicated by 52 (12.7%) and 51 (12.5%) respondents, respectively.

- Further analysis of responses showed that 233 (42.8%) responses were associated with motivation for making changes and adopting new behaviours. Knowledge and understanding of how to lead a healthier life, such as not knowing how to cook and not knowing enough about calories, were considered to be of value, but only 28 (5.1%) thought they were important factors.

The next section (Section 5) will explore the experiences and views of stakeholders on their understanding of obesity, use of social marketing as a tool for tackling obesity, and suggestions on how to support children and young people to lead healthy lives. It also includes a summary of key findings from a focus group with EYTO management teams across four countries, which featured in the interim report.
5. Findings: Stakeholders

Comments and suggestions from stakeholders (e.g. local and national policymakers, youth workers) were collated and analysed at interim and final stages of evaluation.

At the interim stage, EYTO management staff - professionals who supported Campaign Creators – from all four countries participated in one focus group, and a summary of key findings is included in section 5.1, below.

At wave 3, the final evaluation 22 stakeholders were interviewed across the four countries: six in England; six in Spain; five in Portugal and five in Czech Republic. Each of the four countries interviewed stakeholders who showed an interest in the EYTO project because they either worked on issues regarding the health of children and young people, or were involved in the development and delivery of the project. Stakeholders included professionals who work in the voluntary and community sector, such as youth workers; education sector, such as university and school staff; communications sector; and local and national health strategic bodies. These were telephone interviews organised and undertaken by EYTO management teams in each country, except in the UK where interviews were undertaken by the NCB Research team.

Interviews aimed to gather stakeholders’ views on the issue of obesity, EYTO project and its impact, use of social media, social marketing as a tool for addressing obesity, and suggestions for how to take forward learning from the campaigns. The findings from these interviews are analysed in sections 5.2 to 5.9, below.

5.1 Highlights from the interim report: EYTO management teams

The interim report produced in February 2015 included findings from a focus group with stakeholders – four members of staff from the EYTO management teams across four countries. This focus group took place at the interim stage of evaluation in October 2014 in London, and a summary of issues discussed by the group are as follows:

EYTO management teams had the following overarching objectives across all four countries:

- Raise awareness of obesity among children and young people
- Build evidence
- Change behaviours.

EYTO management teams discussed and identified the following early outcomes of the campaigns:
• How to use social media to communicate serious messages and not only for exchanging messages with friends about social matters—and the limitations of doing so.
• How to develop content for social media
• The context of the issues at the national and European levels

EYTO management teams discussed how to use social marketing as a tool for health development work. Suggested approaches were to:

• Provide or connect with existing tangible services that underpin campaign activities so that audiences could access services and other support that will enable them to change their behaviours.
• Understand children and young people's access to social media and how it is used by them. The assumption that all children and young people have access to and use social media was not considered to be correct. They also found supporting Campaign Creators to be challenging as they were often users rather than content creators and thus required a different set of skills and way of thinking to develop content for their peers.
• Find ways to bring together the interests and concerns of different stakeholders, including children and young people, policymakers and health experts, so that information and activities produced will motivate and encourage them to interact and participate with the campaigns.

EYTO management teams explored how to support youth-led social marketing work, and their way forward included the following:

• Develop a bespoke approach for engaging with and involving Campaign Creators across different countries that took into consideration their circumstances and backgrounds
• Actively manage content creation to ensure information was relevant and timely.
• Bring people together, which included exchange weekends that brought together Campaign Creators, or activities that brought together stakeholders such as parents, practitioners and policymakers. This was seen to foster discussion on how to address the issue of obesity among children and young people that involved a range of people from different sectors and at the community, national and European levels.
• Balancing youth-led approaches with the need to achieve project outcomes so that Campaign Creators were encouraged to be creative and innovative, but they also understood the outcomes of the project and what the activities should aim to achieve.

The issues raised by EYTO management teams are discussed in more detail by a range of stakeholders in the final stage of evaluation in sections 5.2 to 5.9, below. This includes discussions on social, cultural and economic issues that have contributed to poor diets and limited physical activities among children and young people, and what interventions are required to promote healthy lifestyles.
5.2 Obesity: Populations most at risk

Stakeholders were asked what groups were most at risk in society and why they thought this, and their responses are noted below.

5.2.1 Populations most at risk of obesity

Stakeholders thought that individuals at greater risk of obesity were ones who had experienced one or more of the following factors:

- Poverty
- Negative health behaviours, such as smoking and excessive consumption of alcohol
- Sedentary lives with no or limited physical activities
- Limited interactions with health professionals

Two stakeholders thought that the issue of obesity was a national issue that could affect anyone in their country and not just certain communities or groups. They explained that over-eating and consistent consumption of unhealthy foods could affect anyone regardless of socio-economic background, and thus required different approaches to reach all groups in society - including those from wealthier backgrounds who have access to the right foods, information and opportunities but make unhealthy decisions.

5.2.2 Children and young people at risk of obesity: Choice and parental influence

Level of risk faced by children and young people were considered to be either greater or on par with adults. However, the type of risk experienced by children and young people were thought to be different from adults as parents had a greater influence over children and young people's opportunities to make choices, access to resources, and attitudes to foods and physical activities. Thus their behaviours could be better understood within the context of the family model. It was also recognised that the particular age range of children and young people targeted by the campaigns, 13 to 18 years, were making the transition to adulthood, and thus becoming more independent and making choices by themselves.

Control and autonomy to make choices was associated with purchasing power, i.e. access to financial resources. Children and young people with no or limited money for their own expenses were considered to be limited in their choices. Whereas those with purchasing power were considered to have choices, but may not have the relevant information or motivation to make healthy choices.
"Children and young people have purchasing power and buy rubbish breakfast. They seem to buy a lot of fizzy drinks and a lot of them say they do not drink water." (National Policymaker - patient experience, UK)

5.3 Causes of obesity

Stakeholders were asked about what they thought were the causes of obesity, and how these factors affected children and young people. Their responses are noted below.

5.3.1 Multi-dimensional causes

All stakeholders described the causes of obesity as being multi-dimensional and an individual’s choices was shaped by multiple factors that influenced their decisions for leading healthier lives. Home, school and community are all thought to shape children and young people’s environments that could either support or hinder healthy lifestyles. These multi-dimensional factors include:

- Poverty
- Food manufacturing
- Access to opportunities for exercise
- Poor diet, including over-eating and eating unhealthy foods
- Parental influence
- Peer influence
- Emotional wellbeing
- Medical conditions

5.3.2 Emotional wellbeing

The emotional wellbeing of individuals, such as unhappiness and anxiety, was considered to be an important factor that could hinder or instigate children and young people to adopt healthier lifestyles. One stakeholder reflected on her own experience of working with children and young people, and found unhappiness and anxiety to one of the root causes of obesity that influenced how individuals saw themselves and the kind of lives they wanted to lead. She also described how raising the confidence and motivation were often the first steps for changing emotions and making positive changes.

"Obesity is accompanied by other issues such as unhappiness, anxiety and worry about a lot of aspects with growing up. I have been working with children and young people for the last 27 years and have seen an increase in mental health issues in the last 3 or 4 years so there is a lot more going on that we do not understand." (Local Practitioner - youth work, UK)
Other stakeholders thought unhealthy behaviours were driven by emotions, and described how individuals undertook emotional eating, i.e. eating to feel better, of unhealthy foods with excessive sugar and salt when they felt unhappy or anxious. This behaviour was thought to affect all groups in society, regardless of demographics such as socio-economic backgrounds.

5.3.3 Modern day lifestyle habits

Modern day lifestyle habits included a combination of eating the wrong types of food and drinks along with limited exercise was thought to be fuelling excessive weight gain, and as young people become less active they no longer required the energy content of the all foods and drinks they consumed. Other habits, such as the consumption of snacks with excessive sugar or salt outside meal times and replacement of water with drinks that contain an excessive amount of sugar, were all thought to be the norm in society.

5.3.4 Modern housing and living spaces

Opportunities for regular physical activities were limited by space and places where children and young people lived. This included, for example, those who live in urban areas with limited access to green places, households with small or no garden, or in communities with a high crime rate – all of which made it difficult to play or do outside activities. Organised activities were often paid for ones that were too expensive for families on low-incomes, or did not attract the interest or spark the motivation of children and young people.

5.3.5 Motivation for change: Body image versus health

A few stakeholders shared a perception that young people’s, in particular adolescents, motivation for change was different from adults. Young people were thought to be more concerned about body image, rather than health and the impact of current behaviours on their long-term health. They were thought to be motivated mostly by the need to look good rather than for improving health and tackling long-term consequences of unhealthy lifestyles, such as diabetes and cardiovascular conditions which were associated as being health concerns for adults only.

"When they start to grow up and be more adults, they start to get worried more for health than for physical appearance, but before the birthday 18, nothing of this." (Quality Evaluator for a university, Spain)
5.3.6 Culture

Stakeholders also spoke about culture – perceptions, attitudes and values – and identified what aspects of culture could ensure healthy lifestyles and what aspects were detrimental for healthy living and thus needed to be changed.

**Culture: home cooked meals versus processed foods**

Stakeholders raised concerns about a change in expectations of food in society with greater preference for quick, simple and convenient solutions to food, and less attention paid to taking time to think about and prepare foods that are nutritious. Working parents with limited time or parents with limited cooking skills were examples of modern day culture where daily cooked meals and packed lunches were no longer the norm in some households. This was seen to have contributed to increased consumption of processed foods with negative consequences to individuals’ health, and limited transfer of valuable cooking skills to the next generation.

"Eat processed food for speed and convenience and to guarantee that children will eat such food. Cooking food from scratch requires skill, cooking facilities, and motivation, and time, and preference- now can see how powerful marketing is encouraging people to eat processed food." (Communications professional, UK)

**Culture: Attitudes about body weight**

Stakeholders raised concerns about some cultural attitudes of over-weight children and young people as being a proxy for good health compared to very slim individuals. As one participant described attitudes of some groups who saw being "chubby" as a sign of good health – an attitude that needed to be changed.

5.3.7 Poverty and its impact on behaviour and attitudes

Poverty and its prevalence had influenced behaviours when individuals make decisions based on prices or financial costs rather than factors such as nutrition. Increased poverty in many European countries had led to more families and individuals to seek low-priced foods and may have compromised quality for ‘good value’ deals and foods that make individuals feel fuller for longer. This included the increased consumption of convenient, cheap and widely available foods, such as bollicao (processed pastry), by school pupils in Spain as a substitute for healthy packed lunches despite a strong traditional culture of a nutritious Mediterranean diet:

"We are the main contributors of the Mediterranean diet, but the problem is that nowadays the social crisis due to economic reasons makes, for example, that children don’t go always to school with a proper lunch.....at junior high
school, when the mother is supposed to make lunch, we found out that children don’t always bring it. Thus they opt to buy candy and other type of junk food.” (Commercial Manager for a market, Spain)

5.3.8 Parental and peer influence

Children and young people’s attitudes and behaviours are shaped by people in their households, notably their parents, and their peers, and for many stakeholders parental and peer influences were seen to be strong factors that shaped children and young people’s choices.

**Parental influences**

Parents or carers are recognised to have purchasing power and control over what food and drinks were brought and available in the home for their children. This along with parents’ cooking skills and their attitudes and behaviour concerning food, drink and physical activities – all shape children and young people’s attitudes and behaviours for foods and drink and the level of physical activities they undertake.

**Peer influence: Socialising with peers**

It was perceived by a few stakeholders that as children and young people grow older, peer influence become stronger over the choices they make. Eating unhealthy foods and drinks becomes part of socialising for many young people, and as they gain greater access to money – how they spend it is often influenced by their peers’ opinions and lifestyles. The lure of poor quality and high calorie food is further heightened when it is easily accessible and cheaper than good quality foods. A stakeholder in England, for example, mentioned how shops selling fried chicken near schools had encouraged young people to develop negative habits of spending time together after school eating fried chicken along with consuming drinks with excessive amount of sugar.

Another aspect of socialising that influences the amount of physical activities undertaken by children and young people was the growth in the use of social media. This was seen to have influenced how children and young people socialise – mostly of it being online – with limited opportunities for face-to-face interaction and activities, and for younger children, play.

5.4 EYTO Campaign

Stakeholders were asked about their views and experiences of the campaigns, including approaches used to engage and support peers, what worked well, and the impact on policy and practice so far. Their responses are noted below.
5.4.1 EYTO: Similarities with other projects

Some participants thought that the EYTO project complemented existing national, local and European projects that support healthy lifestyles, in particular ones that promoted healthy eating and exercise – and used a more inspirational messages and positives images. An example of this from England was the Change4Life social marketing programme – childhood obesity prevention strategy - launched in 2009.

5.4.2 EYTO: Unique selling point

What made EYTO different from other projects was the youth-led and peer-to-peer approach that placed young people at the centre of project development and delivery, and in charge of decision-making and direction of the project. It gave young people involved in the project, Campaign Creators, to meet, learn from, and work with professionals for the purpose of shaping project activities and outcomes.

5.4.3 Project engagement with Campaign Creators

In regards to the recruitment and support of Campaign Creators, experiences of stakeholders varied according to the networks that they had used to recruit Campaign Creators. The English participants reported that their recruitment was challenging as it was conducted through only one youth centre and a smaller pool of potential candidates compared to the other partners. Both the Spanish and Czech Republic partners recruited through schools networks with a greater number of children and young people, and thus were able to recruit at a quicker rate.

All stakeholders mentioned the importance of parental and family support and its impact on Campaign Creators. Families who understood and valued the purpose of the campaign and the role of Campaign Creators were seen to be better able to provide encouragement and support.

5.4.4 Project engagement with peers – children and young people

One of the key challenges of engaging with children and young people during the project was the term ‘obesity.’ It was not considered to be motivational for campaign audiences to take an interest or see it as being relevant for them due to reasons such as they may not consider themselves to be obese or embarrassed to admit that they are. This was explained by one stakeholder who found that the use of positive language and an aspirational approach made a big difference when engaging with children and young people and motivating them to find out and do more.
"At the start it was difficult because children and young people tend to run away from issues of obesity - this is why it is important to use the right language and approach when raising awareness of this particular issue." (Youth Worker, England)

EYTO was seen not only as a reactive strategy that tackles obesity, but was also a preventative one that promotes healthy lifestyles of all children and young people. This had opened up the campaign to engage with more groups of children and young people, and not only those who are obese, some stakeholders thought more could have been done to engage but with a greater number of audiences.

"To involve children and young people is always problematic because many children is fundamentally passive and today they have a lot of things, which attracts them, they are oversaturated." (Psychologist, Czech Republic)

5.4.5 EYTO successes

Youth-led and peer-to-peer support

Placing young people at the centre of project development and delivery had added value to the project as they had a better understanding, compared to adults, of what motivates their peers and how to make information relevant and of interest. Campaign Creators drew on their own experiences and interests to shape what and how information should be presented and what activities should be delivered, including having their ideas converted to straplines and images for logos and marketing products.

"EYTO, it’s a great idea that young people transferring knowledge to their peers, and they show them how to eat and what to do to have a healthier life." (Teacher 2 for a secondary school, Spain)

Starting conversations and changing perceptions

According to stakeholders, obesity was seen to be a difficult or controversial topic to engage audiences with. One of the successes of the EYTO campaign was that it instigated conversations and thinking about issues related to healthy lifestyles and the challenges of leading one. One stakeholder explained how the project had changed campaign audiences’ perception of their health being their own rather than someone else’s responsibility, and thus they had the capability to make changes:

"I think one of the ways obesity problem will be solved is by getting everyone involved with it so public see it as their problem rather than NHS telling them
that they have a problem and they need to do something about it. It needs a national conversation. I think this project shows that's possible and it is one way of approaching things.” (Communications professional, UK)

Involvement of other countries

Stakeholders reported that interaction and discussion between Campaign Creators and EYTO management teams from different countries brought many benefits, including sharing of ideas, how to overcome challenges, opportunities to reflect on their own progress, and learning from others. It added particular value to Campaign Creators’ experience as it provided them the opportunity to learn and experience different lifestyle and attitudes to food and living – and take on ideas for their own Campaign.

Creatively

Creativity was one of the skills used by the Campaign Creators when they developed and delivered a range of fun and interactive activities. It was noted by stakeholders that Campaign Creators thought of ways to engage and inspire their audiences, such as blind food tasting of healthy food; demonstrations on how to make healthy cupcakes; pop-event at a sports show; lectures; and quiz/game show on healthy habits. These activities were considered by stakeholders to actively engage with activities rather than be passive in-takers of information.

Key messages embedded in activities

Key messages about healthy living were embedded in face-to-face events so that audiences could enjoy the activities and remember messages. A Spanish stakeholder, for example, described how the healthy tapas workshop was a success as it was presented as a fashionable and popular activity with demonstrations on how to make healthy foods.

"They learned how to use the basic products like salt, olive oil, vinegar... Things that are so simple and so common, but they are not used to use them at meal time.” (Teacher 1 for a secondary school, Spain)

Working with professionals

Working with professionals to co-produce reliable and accurate information that is also accessible was described by stakeholders as an asset. The project supported the transmission of information from professionals to Campaign Creators and then from Campaign Creators to peers. This ensured that technical information, such as nutritional concepts, was shaped and tailored to meet the needs of peers. English stakeholder, who delivered communications support, described the process undertook by Campaign Creators when they developed the brand and logo. This included a session delivered by professionals on social
marketing to find out what they liked to do and what communication channels they have used. This was followed by a second session led by a psychologist on health, healthy living and activities - all of which was visualised through art and brainstorming. Discussions from these sessions helped Campaign Creators to tell designers about their brand ideas, key messages and images for logo and poster design.

5.4.6 Challenges of the Campaign

**Limited time of Campaign Creators**

Stakeholders who had supported Campaign Creators with the planning and delivery of activities found that Campaign Creators sometimes did not have enough time to work on their campaigns as they had to balance their school, social and home commitments.

**Engagement of audiences from different backgrounds**

Stakeholders found that the campaigns had not engaged with audiences from more diverse backgrounds. A UK stakeholder, for example, noted that there were more females than males who engaged with the campaign, and a Spanish stakeholder noted that there was scope to involve audiences from different institutions. Targeting audiences from more diverse backgrounds was thought to bring benefits to groups, in particular ones who would not normally engage with such campaigns.

**Parental influence**

Parental influence was considered to be a greater influence than the impact of social marketing, and thus support at home was essential to develop positive changes in habits and behaviours. If parents purchase unhealthy foods, do not cook, and lead inactive lives – the power of social marketing approaches will not be as effective. A couple of participants suggested that family model approach should be adopted that ensures parents are reached and able to provide the appropriate environment and support for their children to make healthy choices.

**Limited or no follow-up activities**

It was mentioned that there were not enough follow-up activities that audiences could participate in following on from the engagement activities or information. Participation in follow-up activities and services were seen to be important for incentivising behaviour changes in eating and physical activities, as audiences required resources and opportunities to start making changes in their lives.
One stakeholder explained how messages were not enough to change behaviour, but had to be attached to programme of activities to ensure that the certain behaviours were being encouraged even after the campaigns had come to an end.

"In the future would like to see greater link between the campaign and signposting young people to actual activities where they will taking exercise. I think that will make it a lot more successful." (National Policymaker - children, young people and families, UK)

For this approach to be effective, however, the activities and services that audiences follow on from the campaigns had to be appealing so that it motivate individuals to attend, as well as ideally free and delivered in accessible places and times.

5.5 Social media

Stakeholders were asked about how social media was used by the campaigns, and whether they thought it was an effective tool. Their responses are noted below.

5.5.1 How social media was used

Harnessing the benefits of social media

Stakeholders thought it was important to understand the benefits of social media and learn how to use it in a positive way for specific purposes, other than for talking with friends and other personal contacts. It was seen as tools for initial engagement and evoking audience’s curiosity and as a channel for exchanging positive ideas. It described as a creative way of sharing information, and tools for reaching individuals that Campaign Creators would not normally meet and for interacting with a large numbers of individuals in a short space of time.

Finding appropriate tools

Stakeholders understood the diverse range of tools available and the importance of finding the right ones for specific purposes. One Youth Worker who worked with UK Campaign Creators explained how different social media tools were tried and tested before it was narrowed down to Facebook and Twitter.
Writing appropriate content

Social media was considered to be channels for sending out messages, but content and messages were seen to be just as important. One participant described how the professionals working on the campaign with the Campaign Creators ensured that quality information was shared with audiences.

"The social tools depend of whom is controlling them. Projects or campaigns as EYTO, has people with a lot of knowledge in nutrition, sport, communication. The cool thing is that they "taught "our students, and the used the Facebook to transmit what they learned. So behind the young people, there where experts. So in this case it’s very important who is controlling these networks."

(Commercial Manager for a market, Spain)

5.5.2 Benefits and limitations

Modern communication tools

Social media was seen as the norm form of communication in modern society especially among children and young people, and thus something that needed to be harnessed and used.

"Now days, they do not conceive a world without social networks. There are adolescents, that when the day finishes, they have to check all their social networks. And in some way this media is a channel of communication, a channel to share material. It’s part of their life."

(Commercial Manager for a market, Spain)

Limitations

Although social media was described on many occasions as being effective, one participant stated that it is not entirely possible to explain its impact and another mentioned that Campaign Creators had to do their own research to find the most appropriate tools for their campaigns.

Other limitations included challenges of how to encourage online users to use off-line activities and services, and how to encourage off-line users to use online materials. It was not seen as a replacement for face-to-face communications which was a more personal contact that had greater potential for changing behaviours, especially if it was face-to-face contact with individuals they could trust.

"Young people use social media to contact each other but it is no replacement for face-to-face communication with trusted adults or young people."

(National Policymaker - children, young people and families, UK)
Participants who supported Campaign Creators to deliver campaigns found social media to be time consuming as it required a lot of time and effort to manage social networks, think of new ideas and activities, and find different ways to attract online users and to keep them interested. This was seen to be difficult for Campaign Creators who were in full-time education and had limited time to work on their campaigns.

5.5.3 Tool for tackling obesity and changing behaviours

Social media helped to make the first and initial contact with individuals:

"Make initial connection with young people. EYTO campaign used the Social Media not as a way to inform the kids, but as an encouragement to take them outside and learn how to tackle obesity." (Local Policymaker - sport, Portugal)

It was, however, seen to be limited it is capacity to change behaviours that lead to obesity. For some, social media by itself was not seen to be powerful enough to lead to such changes. For others, social media had the potential to lead to positive changes in behaviours, only if it was used with the aim of achieving specific positive objectives. One example is of UK Campaign Creators who used social media to set exercise challenges for themselves and monitor their progress online, which was seen to provide audiences with ideas of how take steps towards a more active life. Other observations that suggest attitudes and behaviours of individuals were changing were of individuals who signed up to social networks, gave positive feedback and asked questions online:

"It is not only about content itself, but calls for doing some action and reaction." (Psychologist, Czech Republic)

5.5.4 How to improve the use of social media in the future

Participants suggested ways to improve how social media could be used in future campaigns. This included better targeting of parents, in addition to children and young people, as parental influence was considered to be an important aspect of ensuring positive environment at home.

It was also suggested that Campaign Creators required further support and training on how to use social media effectively, including what tools to use, for what purpose and how.
5.6 Impact

Stakeholders were asked about the impact of the campaigns on Campaign Creators, young people who worked on the campaigns, and their peers and other audiences who engaged with the campaigns. They were also asked to talk about the limitations of the campaigns and whether it had any impact on policy and practice so far.

5.6.1 Impact on Campaign Creators

Knowledge and understanding

Stakeholders reported that Campaign Creators’ knowledge and understanding of obesity and how to lead and support others to adopt particular healthy habits and behaviours. Working with other countries had added value to Campaign Creators' understanding of the topic of obesity and about themselves, as they were able to share experiences with young people from the other four countries and reflect on their own lifestyles and attitudes towards food and physical activities. One UK Youth Worker, for example, described how after a project exchange meeting with other European partners in Spain, a UK Campaign Creator tried salad for the first time and started to prepare salads at home. Working with people from other countries had given Campaign Creators more insight and motivation for supporting other young people to do the same and try new foods and activities.

Skills development

Campaign Creators were seen to have developed a range of skills as a result of working on their campaigns. These included:

- Communication skills, such as presentation of information online and face-to-face presentations.
- Social media skills, such as development of online materials including video, taking photos and posting them online.
- Social marketing skills, such as marketing and branding.
- Leadership skills – for driving forward ideas.

One stakeholder described how Campaign Creators had grown in confidence during the campaigns:

"They (Campaign Creators) have just blossomed. From meeting them at the beginning of the programme to seeing them to how they presented in a room full of 40 adults at NCB workshop in March." (National Policymaker - children, young people and families, UK)
**Attitudes and behaviours**

A general observation among stakeholders was that Campaign Creators had changed their attitudes about food and physical exercise and had greater desire to make healthy choices. They noticed that they had become more open to new ideas and different lifestyles that they may not have considered prior to the campaigns. This was seen to have developed their ability to influence and shape other people’s attitudes, as they were able to decipher technical concepts such as nutrition, gather information and present messages in an accessible way to peers – including younger and older peers. One stakeholder described how the process of putting together and delivering information and activities to their peers also had an impact on Campaign Creators’ own attitudes and behaviours as: "by helping others, they help themselves." (Teacher for a primary school Czech Republic)

5.6.2 Changes in behaviours of peers and other audiences who engaged with the campaigns

There were only a few general observations from stakeholders about the impact of the campaigns on peers and other audiences include increased interest for eating healthier foods and doing more physical activities. One local education policymaker in Spain, for example, found that a school reported reduced purchases of sweets and chocolates on school premises compared to previous years.

Most stakeholders could not describe what and how the behaviours of peers and other audiences had changed as a result of the campaigns, and ones that provided general observation found it challenging to verify outcomes were as a result of the campaigns. One stakeholder mentioned that changes in behaviours were challenging to capture due to the short duration of the campaigns. He explained that campaigns had to be delivered over a longer period of time for changes to take place.

"I’m not sure that they changed habits. The surveys will tell. But at least to create awareness it work perfectly. This kind of projects have to have continuity... since pre-school until university." (Commercial manager for a market, Spain)

One of the successes of the campaigns was making issues related to healthier lifestyles more relevant for children and young people who may not previously thought about their health and consequences of negative habits and behaviours. It gave peers practical examples of what they could do to make positive changes in their daily lives:
"I think the campaign showed that even children in elementary school can be active and seek for a change with a broader social significance." (Psychologist, Czech Republic)

The motivation and enthusiasm of Campaign Creators was considered to be contagious as it encouraged audiences including stakeholders to reflect on their own lifestyle habits and see what improvements could be made. One participant described how the campaign changed her attitudes: "For me, as someone who helped a bit, I can say that it certainly had a big impact. Children got me with the enthusiasm, which they went into with and I was a little forced to think about my own lifestyle." (Social Media professional, Czech Republic)

5.6.3 Limitations: Parental influence

Parents were thought to influence children and young people’s opportunities to make choices, access to resources, and attitudes to foods and physical activities. As explained by one Portuguese participant: "the homes where most of the young people still eat" (Journalist, Portugal). This is linked to earlier point\textsuperscript{28} that children and young people’s experiences and choices could be better understood within the context of the family model.

"The key is to influence eating habits in families, not only children" (Teacher for a primary school teacher, Czech Republic).

These campaigns, however, were not designed to targeted parents as well as their children despite the positive or negative role parental influence could have on the behaviours of their children.

5.6.4 Impact on practice and policy

Many felt that it was too early to see the impact of the campaigns on practices and policies. There were, however, examples of dissemination events delivered by Campaign Creators and EYTO management teams that have targeted policymakers and practitioners. These include UK Campaign Creators who delivered presentation for policymakers and practitioners, such as representatives from Department of Health, Public Health, Youth Forum, voluntary sector organisations, teachers and other professionals.

General observations from stakeholders who have had conversations with policymakers and practitioners about the EYTO campaigns found that the campaigns could add value to existing programmes and policies that support healthy lifestyles and tackle obesity among children and young people, such as the Rise Above and Change4life health and wellbeing initiatives in the UK. One

\textsuperscript{28} See 5.2.2
Portuguese participant mentioned that the campaign had helped them to raise awareness among policymakers of a new and emerging issue that requires greater attention and action:

"Right now the Health Ministry is finally realising how important these campaigns are and the EYTO project can be a plus for the already existing projects, most of them, for children or adults." (Communications professional, Portugal)

5.7 Suggestions for practitioners and policymakers

Stakeholders were asked whether they had any suggestions or recommendations for practitioners and policymakers on how the campaigns could be improved and how permanent changes can be made to obesity rates. Their responses are noted below.

5.7.1 Collaborative working

Holistic and collaborative approach

Tackling obesity among children and young people required a holistic approach whereby all agents – communities, food manufacturing and retail businesses, schools and colleges, parents and policymakers – must work collaboratively to bring about a wide range of changes to what foods, drinks, places and opportunities are available and whether individuals have the knowledge and skills to make healthier choices. It was believed that all actors in children and young people’s lives – at school, home and community – could support positive behaviours and attitudes for healthy living. Thus a joined-up approach was required for addressing the issue, so that an appropriate environment could be developed that supports health and wellbeing at home, school and in community.

"As a market worker, everyone has an important work on how to promote fresh food, how to transmit the message to all population, how to include the persons. Everything is important." Here at the market we organise a 'tapa' (snack) fairy, where each stand prepared their own tapa in a healthy weight. We tried to make it as natural and as healthy as possible." (Commercial manager for a market, Spain)

Working with food manufacturers

Food manufacturers was one of the professionals that stakeholders mentioned should be involved in a collaborative approach for tackling obesity. Stakeholders raised concerns about excessive availability of manufactured and processed
foods with limited nutrition content, but at low costs and increasingly seem as alternatives to meals prepared with fresh ingredients. This was seen to be an issue that could be addressed by policymakers so that healthier alternatives, such as fruit and vegetables, were available at similar low costs and processed foods were not widely available in places such as in or near schools. Other suggestions included clear labelling of foods and drinks to show sugar, salt and fat content for consumers to make informed decisions. This was seen to be a particular issue for foods and drinks that are marketed and appear to be nutritious, but are in fact processed and have excessive amount of sugar or salt.

5.7.2 Review and strengthen social media approach

Stakeholders were aware of excessive amount of information being transmitted by social media that it was challenging for EYTO campaigns to compete with existing information and attract the attention of audiences. Thus they suggested social media should be reviewed to make it more targeted and effective so that information will be accessed and read by more audiences:

"This campaign needed a national approach, for instance through TV, because Facebook and Instagram end up reaching a limited group of people. I think that the media end up having a double face, because at the same time they 'sell' healthy lifestyle, they also 'sell' unhealthy lifestyle. They end up promoting some wrong attitudes and behaviours.” (Coordinator for youth group, Portugal)

5.7.3 Provision of ideas and products

One of the successes of the campaigns was the information and ideas on how individuals can make small changes in their daily lives. A UK stakeholder, for example, spoke about one aspect of the UK campaign that aimed to increase fruit intake for breakfast, and the Spanish stakeholder spoke of how the campaign looked at how individuals could incorporate exercise in their everyday lives.

The creation of tangible products by Campaign Creators such as events and online information provided audiences with ideas and motivation to try new foods, drinks and activities. It was, however, mentioned that this could have been expanded further to include services and activities following on from the campaign activities.

5.7.4 Review key messages

For some stakeholders to make obesity a pertinent issue was to re-frame key messages and expand its scope from a campaign about tackling obesity to one
about healthy lifestyle and wellbeing. The term word 'obesity' was thought to have deterred audiences from engaging with the campaign as they may not consider themselves to be obese or may be embarrassed to associate themselves with such a campaign. Positive and inspirational messages, however, were preferred as they promoted enjoyment and benefits of healthier lifestyles and more likely to evoke motivation to take action – rather than messages that focus on the negative consequences of obesity.

Messages also had to be targeted at children and young people with appropriate use of language so that they have a better understanding of how obesity can affect them – including the long-term impact of the current choices.

"All the information that they get is too formal. When they feel something is mandatory they retract, and this is what happen with the young people when they are lectured about the adoption of a healthier life style.” (Local Policymaker – sport, Portugal)

### 5.7.5 Targeting vulnerable groups

**Better understanding of vulnerable groups**

Although a national campaigns were considered to be beneficial, some stakeholders also recognised that vulnerable groups had to be better targeted – i.e. groups that are most likely to have poorer health outcomes and higher risk of obesity, as these were groups that were often more challenging to engage with and less likely to access campaigns. These groups included communities with higher incidence of substance misuse and other unhealthy practices, and those with higher prevalence of health conditions such as diabetes and cardiovascular problems. These groups were thought to require a detailed review and better understanding of how to engage and support them.

**Low-income groups**

For many stakeholders, individuals’ ability to lead healthy lifestyles was associated with incomes and ability to pay for healthier foods, access to activities and resources. Those on low incomes were seen to be at a greater risk of leading unhealthy lifestyles that lead to obesity. Appropriate policies were considered to be ones that addressed the limited resources and opportunities available for low-income groups, which limits their ability to make choices about what they consume and what activities they have access to.
5.7.6 Developing capacity

*Developing capacity of young people to make healthy choices*

Stakeholders made many references to developing the capacity – knowledge and skills – of children and young people so that they could make their own choices, and take responsibility for their lives. Self-management of health and resilience were key attributes that should be fostered in children and young people so that they could make healthy choices despite living in an environment that is not conducive to healthy lifestyles. Communications professional in the UK, for example, described children and young people as consumers and thought it was important for them to have knowledge about food and skills for cooking so that they have greater control over what they purchase, prepare and consume.

"Need to invest in children and young people - not just money but time and support. Need to involve and understand children and young people better so that we can tackle the obesity issue better. They need to be involved, make decisions and be part of the decision-making process. They need to be in it.” (Communications professional, UK)

One suggested approach for capacity development is through education – in schools and colleges, as one Spanish stakeholder recommended pupils should learn how to lead healthy lives throughout their school years:

"Start in very young ages, primary school, and continue it through high-school, baccalaureate, and also it could arrive until universities. Use different approaches....It would be interesting that some talks and workshops were implemented in all periods.” (Commercial Manager for a market, Spain)

For this approach to be effective, it requires a robust curriculum, trained teachers and professionals, nutritious school meals, and physical activities embedded as part of the curriculum. Schools were generally seen as a good place to strengthen children and young people’s understanding and knowledge for making informed decisions.

*Developing capacity of parents*

Developing the capacity of parents to making healthy choices was considered to be as important as developing capacity of children and young people. This included providing them with the knowledge and skills to purchase, prepare and cook prepare nutritious meals at home and packed lunches.

Interventions should be delivered with the aim of changing mindsets of both parents and their children so that they think of long-term consequences of unhealthy diets and lack of exercise on their bodies, future health and financial expenses.
"Appreciating that the reward later will be larger. Teach children to greater vision for the future and postpone a reward later on. It is actually the most important part of education, which the virtual reality makes difficult."
(Psychologist, Czech Republic)

School and community approach

Upskilling professionals in schools and other community settings where children and young people have regular contact with were considered to be crucial as professionals based in these settings have the potential to transmit positive messages on how to lead healthy lives. These professionals could ensure the availability of healthy foods on premises, provision of physical activities, lessons or activities on health – all of which could provide a supportive environment for children and young people to develop healthy behaviours.

5.7.7 Information provision

Provision of reliable and relevant information

Provision of reliable and relevant information could develop the capacity of children and young people to make healthy choices.

"Need to be read themselves and need to have more info and need to take part in projects so they can make the right choices. It is important that they are making choices themselves and choices are not being made for them." (Local Practitioner – health, UK)

Excessive information, however, was considered to be a challenge as children and young people would find it difficult to decipher what is reliable:

"Sometimes children are over-informed and they don´t know, what´s true, little discussion on this topic in the family and at school." (Social media professional, Czech Republic)

Provision of information from trustworthy sources was considered more likely to be accepted as being reliable. Participants stressed the importance of the information giver building relationships based on trust so that information leads to action.

Apart from reliability, participants placed emphasis on the provision of relevant information that could be applied in the everyday lives of individuals. To make information relevant – it was suggested that it should be broken down in to accessible parts, decipher medical or technical concepts, and include practical examples and guidance on how to make changes in their daily lives. One stakeholder who worked with the Campaign Creators described how an explanation of obesity measurement, body measurement index (BMI), gave
project participants a better understanding of the measure and impact of obesity on the body – all of which shaped how information was presented to other young people.

"Mostly when you talk to young people they have understood the basics of it but how this translates to everyday life and things like whether skipping breakfast is going to make you slimmer or if exercise will make a difference to your weight" (Youth worker, UK)

Information that is both reliable and relevant is thought to bring long-term improvements to health, and was hoped to counteract the current trend among young people to take on drastic diets that bring dramatic weight loss in a short period of time with limited long-term gains to health.

Sources of information

Stakeholders talked about who is best placed to provide information for children and young people. This included parents, schools or both. Parents were seen as the catalyst for change as they had the potential to provide a more supportive environment at home that could foster appropriate attitudes and behaviours from birth.

The education sector was also considered to have great potential for motivating their pupils to develop life skills and behaviours through a robust curriculum and with trained teaching staff to deliver reliable and relevant information needed to make healthy choices. Some participants felt that schools already played a strong role in supporting positive health behaviours and attitudes. Others felt that the role of schools could be strengthened and the value of good health on academic achievement could be promoted more widely which could counteract any misperceptions, such as ones among some parents who think children who spend time playing sports were compromising their academic achievement.

Role models in the community and at home were seen to be living examples of how to lead healthy lifestyles who could talk about the benefits of it and inspire children and young people to adopt positive habits and behaviours. Concerns were raised about professionals in information-giving roles who were obese, such as those in health sector, as not being appropriate for such roles.

5.7.8 Availability and opportunities for healthy choices

Some stakeholders raised concerns about the excessive availability of unhealthy foods in many places and the limited nutritious alternatives. This coupled with limited opportunities for physical activities that are fun, appealing, free and specifically targeted at children and young people – all have made it difficult to provide children and young people with options for changing their behaviours.
Encouraging more physical activities, for example was considered to be a challenge for a variety of reasons, including limited space or limited free activities.

Another explanation for the low take up of healthier alternatives is that they are not widely promoted or appealing enough for individuals to take up the offers. A stakeholder in Czech Republic, for example, mentioned that there are opportunities for bike rides, swimming and free playgrounds, and stakeholders in other countries mentioned that healthy foods are available. However, these options may not be chosen by individuals for reasons such as they may not know them or may not have the time or skills to prepare healthy meals.

Participants suggested more needs to be done to ensure the provision of accessible, free and appealing activities that will motivate children and young people to participate in physical activities. This coupled with low-cost, widely available and appealing healthy foods and drinks will encourage children and young people to choose healthier alternatives.

5.7.9 Role of policymakers

All stakeholders mentioned that policy-makers understood obesity and its impact on society. However, there were differences of opinions about whether and how much of a role policymakers should have on addressing this issue. Some felt that it was not a priority, some stated that it was complex issue that policymakers are finding difficult to address despite their efforts, and one thought it was not the responsibility of policymakers to address such an issue which required a more community-based approach that worked with and developed the capacity of individuals to make healthy choices.

"There is certainly awareness at policy level but it is practically on the ground how we address these challenges that we are often all struggling with and certainly in terms of evidence base of what has the greatest impact in actually working with and seeing significant results for young people and their families generally." (Local Policymaker – health, UK)

Most participants were aware that policy changes on its own could not resolve the issue of obesity due to the following limitations:

- **Conflicting political and economic interests**, as policymakers legislate and work with food manufacturers of unhealthy foods and food retailers who are also employers and contributors to the national economy. This often makes it difficult to restrict their activities.
- **Limited understanding of the challenges facing children and young people.** One participant expressed concerns that policymakers did not fully understand these challenges and had not interacted with children and young people in a meaningful way to find out more.
- Greater political gains associated with meeting immediate needs rather preventative measures.

5.8 Section overview

This section included the experiences and views of stakeholders on their understanding of obesity, how social marketing was used to tackle obesity, and suggestions for taking forward findings. It also included summary of finding from the focus group with EYTO management team across the four countries that featured in the interim report. A summary of key findings from the interviews with stakeholders as part of the final evaluation are included below.

Summary box

Obesity and its causes
- According to stakeholders, causes of obesity are multi-dimensional and require a joined-up and collaborative approach between professionals in different sectors and parents at home. A few examples of these include poverty, modern day lifestyle habits, and emotional wellbeing.
- The type of risk experienced by children and young people were thought to be different from adults as parents had greater influence over children and young people’s opportunities to make choices, access to resources, and attitudes to foods and physical activities. Thus their experiences could be better understood within the context of the family model.
- The campaigns were particularly targeted at children and young people aged 13 to 18, as they were becoming more independent and making choices by themselves and thus required support with making healthy choices.

EYTO campaigns
- Stakeholders reported that campaigns added-value to existing initiatives that promoted health and wellbeing in each of the four countries.
- The youth-led and peer-to-peer approach was unique and brought many benefits to the way information and activities were developed and delivered, and the way in which peers had engaged with the campaigns.
- The challenges faced by Campaign Creators included the limited time frame to plan and deliver activities, and no or limited follow-up activities that audiences can access after their engagement with campaign activities.

Social media
• Stakeholders said that social media could be an effective way of communicating with children and young people, but only if it is used with a specific purpose in mind and with appropriate content.

• Social media was ideal for initial engagement and evoking audience’s curiosity, and as a channel for positive exchange of ideas and for interaction. However, social media was not considered to be a replacement for face-to-face interactions.

Impact

• Stakeholders reported that Campaign Creators developed knowledge and a range of skills that enabled them to plan and deliver activities and information for their audiences.

• Children and young people’s choices for making behaviours changes were shaped by factors such as parental influence. This is linked to earlier point about the type of risk was seen to be different from adults and their experiences had to be understood within the context of the family model.

• Stakeholders reported that it was too early to see the impact of the EYTO project on changes in practice, but campaigns had the potential of adding value to existing programmes and policies that support healthy lifestyles and tackle obesity among children and young people.

The next section (Section 6) will summarise key issues identified from the findings and draw together suggestions and recommendations made by Campaign Creators and stakeholders.
6. Conclusions and recommendations

This section draws together the findings from the report to see how far the initial EYTO project objectives were met, successes, and challenges of the campaigns. It also brings together suggestions made by the Campaign Creators and stakeholders on how the campaigns could be improved for the purpose of tackling obesity among children and young people, and the challenges of doing so.

6.1 Conclusions

6.1.1 Achievements

A youth-led and peer-to-peer approach was a valuable aspect of the campaigns as it placed young people at the centre of the campaigns and gave them greater control over what information is produced and how it was communicated to peers i.e. children and young people. This brought many benefits, including:

- Campaign Creators, with the support of professionals, were able to ensure the provision of reliable, relevant and accessible information. They gathered information from various sources, reviewed it and medical terms deciphered so that it could be understood and applied in the everyday lives of peers. This process ensured information was shaped and re-reproduced for children and young people.

- The capabilities of Campaign Creators were tapped into and developed, which helped to ensure that they had the confidence and skills to work on the campaigns, and were better prepared to make decisions and lead on activities.

- The campaigns raised awareness of obesity and increased motivation to address unhealthy lifestyles among children and young people and a range of stakeholders. The campaigns placed the issue in to context and it made it relevant for their audiences in each of the participating countries and cultures. This helped to ensure effective messages were developed and sent for audiences.

- The campaign activities provided audiences with experiences or encouraged audiences to experience changes that are different from their daily habits. This included the provision of activities, such as taster sessions, opportunity to try sports, setting online exercise challenges, which gave audiences opportunities to try something different and make changes in their lifestyles.
6.1.2 Other achievements: Initial project objectives

The findings from the evaluation suggest that the campaigns have worked towards achieving the initial three objectives29 as outlined below:

- During focus groups, Campaign Creators reported that they had developed a broad range of skills and increased confidence to apply these skills as a result of opportunities to complete activities on the campaigns that they would not normally do in their daily lives.

- During interviews, stakeholders talked about how their involvement in the campaigns had shaped their understanding of the topic of obesity among children and young people and had identified the challenges of tackling it at local and national levels. Few of them reported that they had reflected on their own lifestyles to see how to lead healthier lifestyles and what they could more of to promote healthy living for communities they work with and for.

- The survey findings showed that of the 237 respondents, most (208 or 87%) reported that the campaigns were either very effective or somewhat effective at improving motivation to eat a more healthy diet and be more physically active, and most (89.9%) reported that the campaigns were either very effective or somewhat effective at encouraging young people to eat a more healthy diet and be more physically active.

6.1.3 Challenges

One of the key challenges identified by the evaluation was the limited recording and reporting of impact on the behaviours of children and young people who engaged with the campaigns. Whilst there was some evidence from analysis, and observations made by Campaign Creators and stakeholders – analysis also

29 Initial project objectives:
1. Campaign Creators, i.e. young people who delivered the campaign, and professionals who supported Campaign Creators across the four partnerships will have increased skills and confidence in applying participatory social marketing techniques.
2. At least 80 per cent of young people who engage in campaigns will have increased their motivation to eat more healthily and be more physically active.
3. At least 60 per cent of young people who engage in campaigns will have increased their levels of physical activity and fruit and vegetable consumption.
highlighted that Campaign Creators undertook limited recording and reporting of changed behaviours and increased motivation, and how the campaigns had helped audiences make such changes, including increased levels of physical activity and fruit and vegetable consumption.

The objective to change behaviours was not considered to be a realistic for some Campaign Creators and stakeholders. They saw the campaigns as an effective approach to inform, raise awareness, encourage discussion, and change attitudes – all of which was believed to instigate and motivate changes in behaviours. They, however, thought that campaigns by themselves could not change behaviours of children and young people and other audiences.

Behaviour can be described to be the product of interaction between motivation, a psychological state, and constraints that include availability of time and resources. Campaign Creators and stakeholders also found motivation to be an important aspect of changing behaviours and identified a range of constraints associated with:

- Limited accessible resources and opportunities
- Limited moral support or guidance from parents, friends or peers, and practitioners such as school staff
- Limited information and ideas on how to lead healthy lives.

Motivation, knowledge, skills, resources, opportunities and moral support – these were all thought to shape children and young people’s agency for making healthy choices and choosing healthy behaviours.

Provision of support had to be accessible so that would meet the diverse needs of children and young people and address diverse constraints faced by particular groups or individuals in society who are likely to experience greater healthy inequalities, such as those living in low-income households or individuals with disabilities.

The multi-dimensional causes of obesity was thought to require a collaborative and cross-disciplinary approach between different professionals and parents so that they could deliver more and appropriate support and resources, and complement the work of the campaigns.

6.2 Recommendations

Findings from the focus group with the Campaign Creators, interviews with stakeholders and survey with peers and other audiences have helped to identify the following recommendations for practitioners and policymakers. Some of these are more practical and others are more strategic recommendations, but all of them interlink with each other and support the development of holistic and collaborative approaches for tackling obesity among children and young people.

Findings from the focus group with the Campaign Creators, interviews with stakeholders and survey with audiences who engaged with EYTO have helped to identify the following recommendations for practitioners and policymakers. Some of these are more practical and others are more strategic recommendations, but all interlink with each other and support the development of holistic and collaborative approaches for tackling obesity among children and young people.

6.2.1 Youth-led and peer-to-peer approach

The campaigns demonstrated that youth-led approach that placed young people at the centre of planning and delivery of the campaigns ensured that information and activities were accessible and appealing for their peers. It was considered to be an effective way of engaging with children and young people, and its benefits have been highlighted in this report. More similar approaches should be delivered where young people are at the centre and lead future projects and campaigns for their peers.

6.2.2 Provision of relevant and reliable information

One of the strengths of the campaigns was the provision of reliable and relevant information that was produced by Campaign Creators, for other children and young people, with the support of professionals. This showed that the pre-existing information was not as user-friendly for children and young people or as effective as information that had been shaped and re-produced by young people so that it could be understood and applied in the daily lives of their peers.

6.2.3 Family model approach: Capacity building of parents

Parents were thought to have strong influence on their children’s behaviours, attitudes and access to resources, in particular of younger children. Thus interventions that develop children and young people’s capacity should be
accompanied by ones that support their parents so that they have similar knowledge, understanding and motivation for making positive changes and creating an environment that is conducive for healthy living.

### 6.2.4 Positive and inspirational key messages

Respondents – both Campaign Creators and stakeholders – mentioned the importance of promoting positive and aspirational messages along with promoting positive impact of making changes in lifestyle behaviours. These should have an emotional connection and motivate children and young people to read, participate, reflect on their own lifestyles, and take action.

Closely linked to this point, is the suggestion to change the terminology from obesity to one that is more generic and positive, and one that focuses more on healthy living. The term obesity was considered to deter individuals from interacting with the campaigns as some may be embarrassed to associate themselves with that term and others may not consider themselves to be obese. The campaigns were considered to be interventions for the prevention of negative health outcomes associated with unhealthy behaviours – and not only about looking slimmer. They aimed to promote the wider benefits of healthy lifestyles and future healthy implications of present unhealthy behaviours.

Most initiatives that tackle obesity are targeted at either young children, in particular early years, or adults. The EYTO campaigns were thus developed to inform and embed healthy behaviours in children and young people before they reached adulthood. This was a particular cohort who were growing older and starting to make more decisions by themselves – and thus would benefit from positive and aspirational messages on healthy lifestyles to help them make healthy choices.

### 6.2.5 Provision of accessible options for healthy choices

‘Healthy choices’ were mentioned frequently in particular by stakeholders during interviews. Choices require options of a range of accessible resources and support. This could include physical activities and healthy foods that can be purchased within limited budgets. Accessible options need to be made available that meet the needs and interests of individuals.

### 6.2.6 Effective targeting of vulnerable groups

Closely linked to the recommendation on provision of accessible options for healthy choices, above, is importance of ensuring that campaign activities are targeted at particular groups who are at a greater risk of experiencing obesity but are less likely to engage with campaign activities, such as those living in low-income households. Although the campaigns should be open to everyone,
there are particular groups in society that are more vulnerable to obesity and poor health outcomes, and may require more targeted engagement and interventions strategies.

6.2.7 Holistic and collaborative approach

Campaign Creators, peers and stakeholders all identified a range of factors that contribute to obesity and unhealthy lifestyles among children and young people. Addressing factors required a holistic and collaborative approach between professionals and parents to ensure that children and young people had the knowledge, understanding, resources and opportunities to make healthy decisions for themselves. Suggestions have included: working with food manufactures; developing the capacity of parents; working with schools to ensure provision of healthy lunches, physical activities and curriculum that supported health-related subjects; and encouraging policymakers to develop policies that support more physical activities and consumption of healthy food and drinks.

6.2.8 Robust and standardised recording tools

With the exception of attendee numbers at events and a few observations about profile of audiences and changes in their behaviours and attitudes reported by - there was limited recording and reporting of impact, in particular, what and how behaviours have been changed as a result of the campaigns and what groups had benefited the most from the activities.

More robust impact recording tools and approaches would have helped to identify and evaluate the most effective tools for engaging children and young people with and the campaigns’ overall impact on audiences’ behaviours and how they have benefited or learned from the campaigns. This would help to shape policy and practice for similar future projects or approaches.

Standardised data collection practices are required to ensure that the data used for monitoring and evaluation purposes are reliable and comparable across settings and over time. It should ideally capture both quantitative and qualitative data to see how behaviours and habits have been changed and challenges of doing so. Data should also be captured on the dimensions of inequality, such as socio-economic background and disability to help identify whether particular vulnerable groups have been able to access the campaigns.
Final conclusions

EYTO campaigns worked towards initial objectives of increased understanding and motivation for healthy eating and undertaking physical activities.

Key aspects of the campaigns that made it effective in engaging with and supporting children and young people on the topic of obesity were:

- A youth-led and peer-to-peer approach that placed young people at the centre of the campaigns and gave them greater control over the provision of reliable, relevant and accessible information.

- Capabilities development of Campaign Creators so that they were better prepared to make decisions and lead on activities.

- Raised awareness of obesity and increased motivation to address unhealthy lifestyles among children and young people and a range of stakeholders.

- Provided experiences or encouraged audiences to experience changes that are different from their daily habits.

However, the use of campaigns alone may not bring about changes in behaviours, in particular long-term sustainable changes. These changes require increased collaborative working with parents and professionals in the community and from different sectors to ensure children and young people have accessible and available options to make healthy choices.