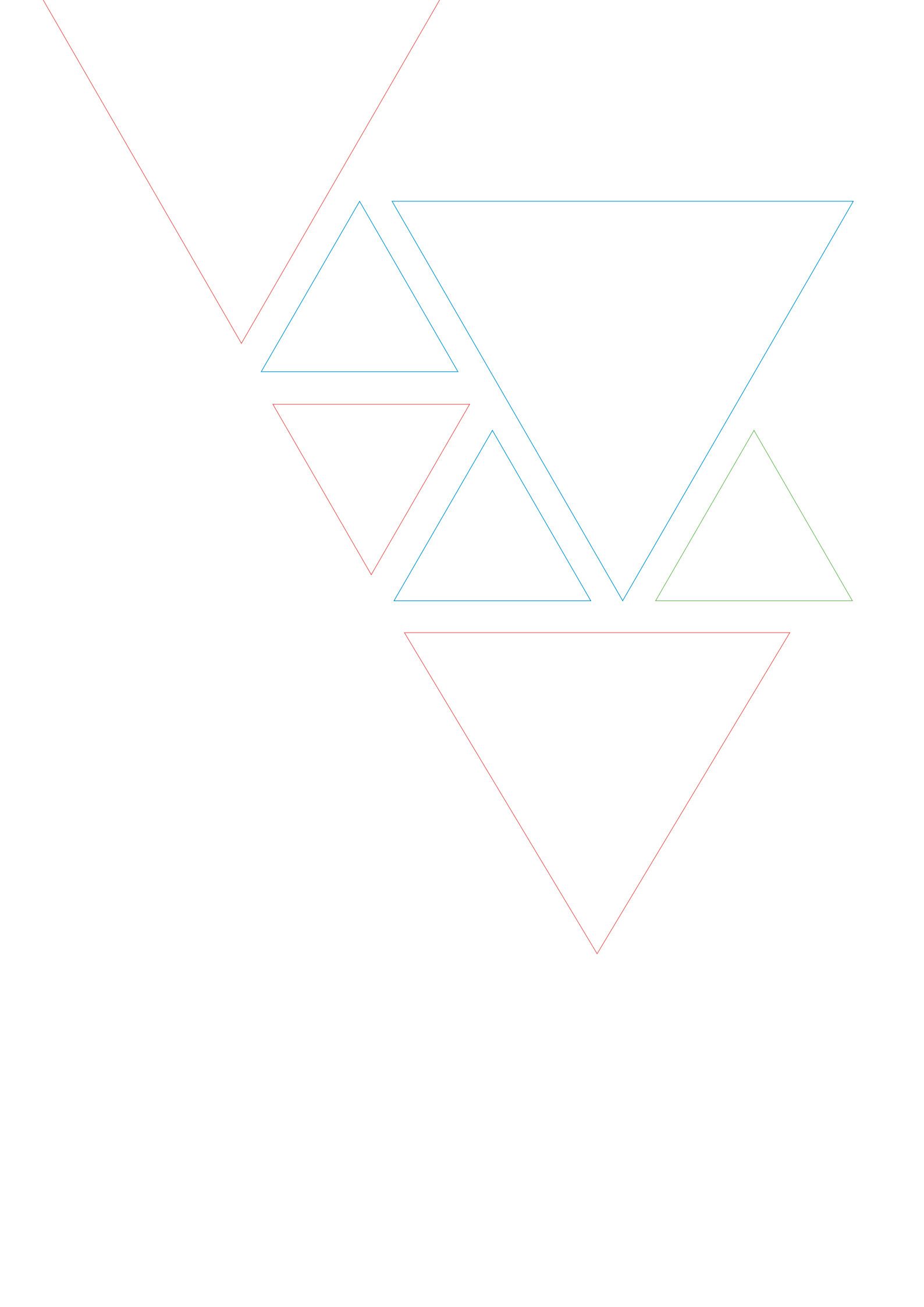


Inclusive, sustainable, welcoming national sports federations

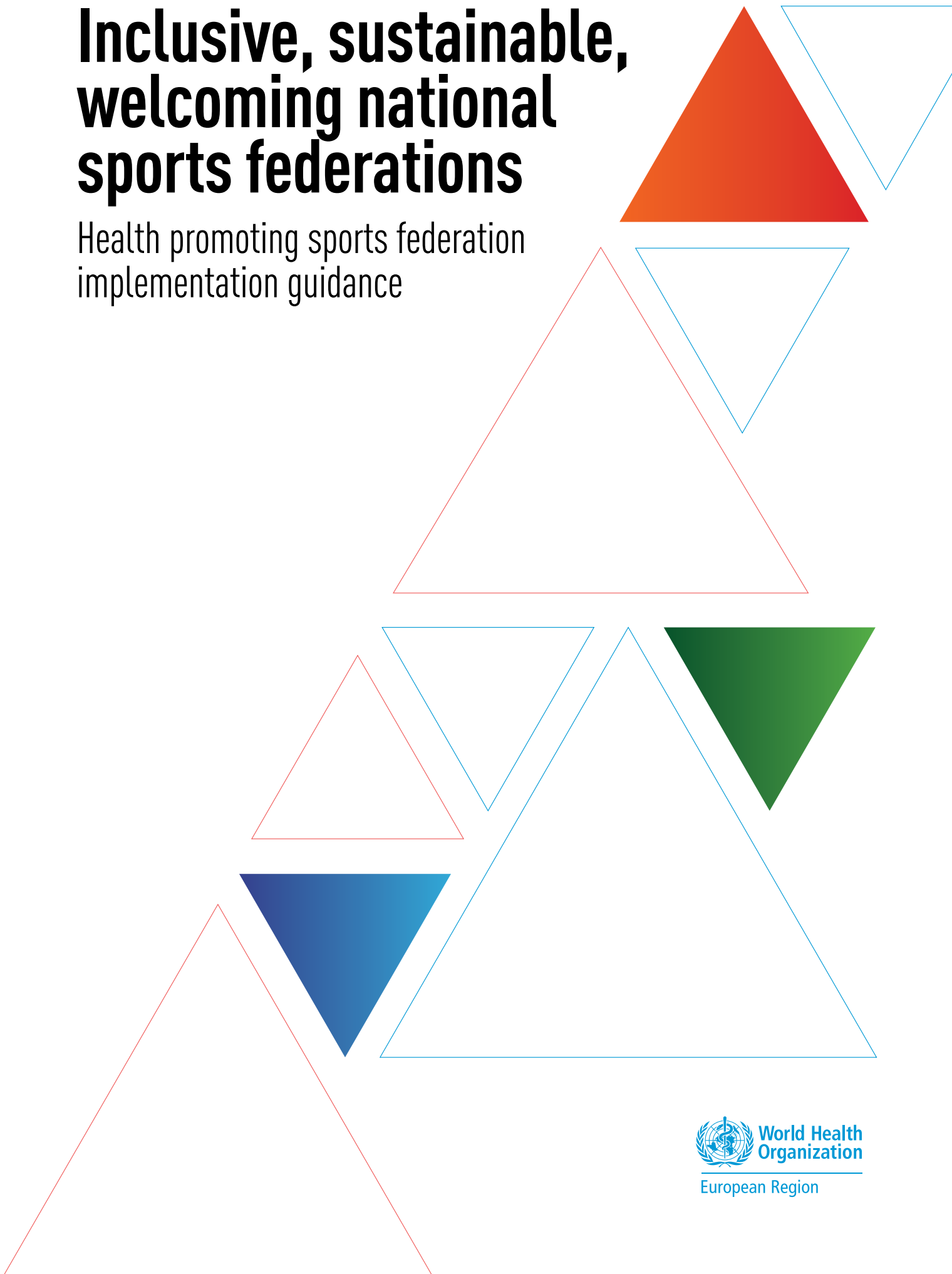
Health promoting sports federation
implementation guidance





Inclusive, sustainable, welcoming national sports federations

Health promoting sports federation
implementation guidance



ABSTRACT

National sports federations (NSFs) are committed to health promotion, supporting the development of sport worldwide and emphasizing its physical, mental and social benefits. They are increasingly present in sport for all, sport for health and health promotion, and sport organizations have called for guidelines. Health can be promoted not only where people play sport but also where they learn, work, play and love. National sport federations therefore play a key role in society by providing conditions whereby their members can control their health and well-being.

The Health Promoting Sports Federation (HPSF) has provided this guidance on health promotion for NSFs and their partners. The first chapter describes the benefits of a health promoting sports federation, the indicators for evaluation and the stages towards becoming an HPSF. The second chapter presents case studies of NSFs and their experiences. The third chapter offers concrete examples of actions and interventions based on the theoretical model of a health promoting sports club. The fourth chapter reviews 28 tools that can be used to promote health in sport with the intervention framework.

These guidance will help NSFs to implement health promotion comprehensively, from policies to action. They propose a process for making health promotion live within both the NSF and affiliated sport clubs. They will catalyse the visibility and recognition of the potential of NSFs for society and for fostering the health and empowerment of sport club members.

Keywords

SOCIAL DETERMINANTS OF HEALTH

SPORT

HEALTH PROMOTION

Document number: WHO/EURO:2023-5216-44980-64040

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Suggested citation. Inclusive, sustainable, welcoming national sports federations: health promoting sports federation implementation guidance. Copenhagen: WHO Regional Office for Europe; 2023. Licence: CC BY-NC-SA 3.0 IGO.

Cataloguing-in-Publication (CIP) data. CIP data are available at <http://apps.who.int/iris>.

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ACKNOWLEDGEMENTS

The Health Promoting Sports Federation implementation guidance was developed by the WHO European Office for the Prevention and Control of Noncommunicable Diseases and members of the Sport Club for Health working group of the WHO European network for the promotion of Health-enhancing Physical Activity (HEPA Europe) under the leadership of the PROSCeSS research group (Santé publique France, the French Ministry for Sport, Olympic and Paralympics games, Université Côte d'Azur and Université de Lorraine).

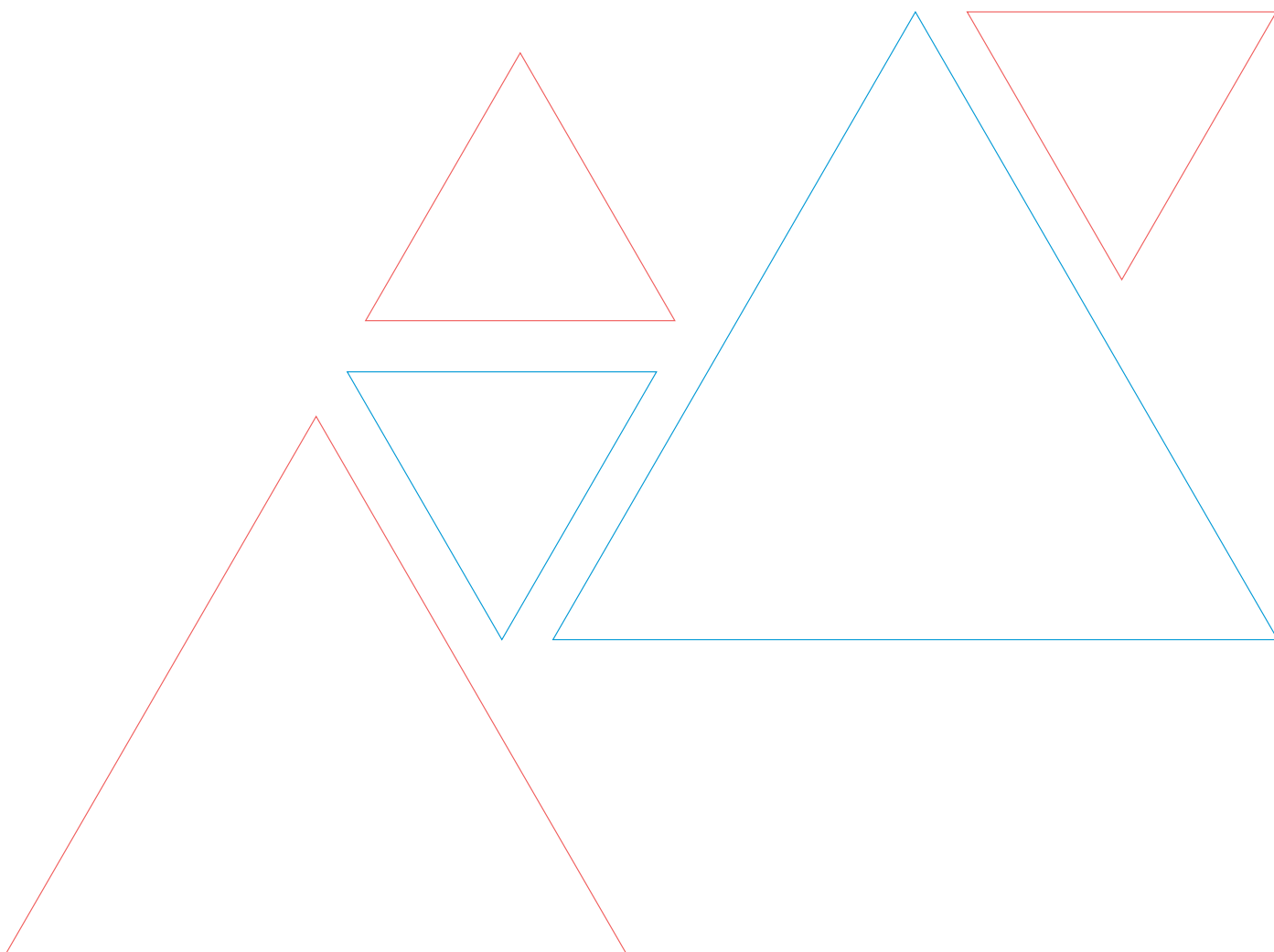
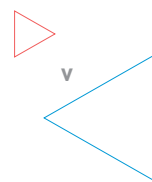
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The team acknowledges the Directorate General for Education, Youth, Sport and Culture of the European Commission for financial support for preparing this publication.



**Co-funded by
the European Union**

This document was produced with the financial assistance of the European Union. The views expressed herein can in no way be taken to reflect the official opinion of the European Union.



GLOSSARY

The following terms are used in the administration and implementation of the HPSF guidance. Some terms are interchangeable in some countries, including “action plan”, “strategy”, “programme” and “project”.

Action or strategic plan: A plan to identify who does what, who is responsible for implementation, when actions are to be completed, how implementation is to be undertaken timing, strategies, approaches and the resources to be used. It should also include plans for monitoring and evaluation. May be a standalone document or part of a broader national policy.

Actor: A stakeholder who can contribute to promoting health in a setting (e.g. member of sports clubs or municipalities, health professionals, government actors, members of private enterprises).

Corporate social responsibility: Context-specific organizational actions and policies that consider stakeholders’ expectations and the triple bottom line of economic, social and environmental performance (1).

Determinant of health: A personal, social, economic or environmental factor that determine the healthy life expectancy of individuals and populations (2).

Governance: “The responsibility for the functioning and overall direction of the organization considered as a necessary and institutionalised component of all sport codes from club level to national bodies, government agencies, sport service organizations and professional teams around the world” (3).

Health: “A state of complete physical, mental and social well-being and not merely the absence of disease or infirmity” (4). Health is regarded by WHO as a fundamental human right. Correspondingly, all people should have access to basic resources for health. In the context of health promotion, health has been considered as a resource that permits individuals to lead socially and economically productive lives (4).

Health-enhancing physical activity: Any form of physical activity that benefits health and functional capacity without undue harm or risk (5).

Health-promoting sports club: An organized sports club of which the core business is to promote more than one health behaviour or topic by involving internal and external partners at various levels (6,7).

Health literacy: Personal knowledge and competence accumulated through daily activities, social interactions and across generations. Personal knowledge and competence are mediated by organizational structures and availability of resources that enable people to access, understand, appraise and use information and services to promote and maintain good health and well-being for themselves and those around them (2).

Health promotion: Process of enabling people to increase control over and to improve their health (2). It is a comprehensive social and political process. It includes actions not only for strengthening individual skills and capabilities but also for changing social, environmental and economic determinants of health to optimize their positive impact on public and personal health. Health promotion enables people, individually and collectively, to increase their control over the determinants of health and thereby improve their health (2).

Health topic: Any topic related to individual or population health, including physical activity, well-being, social justice, inclusivity, sustainability, injury prevention and recovery, nutrition and sleep. In these implementation guidance, ‘public health’ is about promoting and protecting the health and wellbeing of people at a population-level. It’s a very broad agenda covering everything from tobacco to transport,

children's health to climate change, and violence to viruses – pretty much anything, which directly or indirectly impacts on people's health and wellbeing (8).

Mechanism: Method or procedure for coordinating formal development, sharing and distribution of health promotion policies and activities.

Policy: Formal written document, (un)written formal statement, written standard or guideline that defines priorities, goals and objectives, usually issued by an administration (national, regional or local). May include or be accompanied by an action plan or communication strategy.

Programme or project: A set of measures or a single (large-scale) long-term activity (from a few weeks to one sporting season, which could be repeated) that may be related to a specific policy. The programme or project may comprise various actions or activities, such as interventions or initiatives, in sports federations or sports clubs, which may be time-limited or open-ended.

Setting for health: The place or social context in which people engage in daily activities and in which environmental, organizational and personal factors interact to affect health and well-being (2). A setting in which people actively use and shape the environment and thus create or solve problems related to health. It differs from use of a setting to deliver a service or programme. Settings are usually identified as having physical boundaries, people with defined roles and an organizational structure. Action to promote health in different settings may differ, but is often provided through some form of organizational development, including change to the physical environment, the organizational structure, administration and management, to promote health by reaching people directly who live and work in them (2).

Sports clubs: Private, non-profit organization formally independent of the public sector yet potentially supported by public resources, including volunteer members and a democratic structure, with the main objective of providing sport (8).

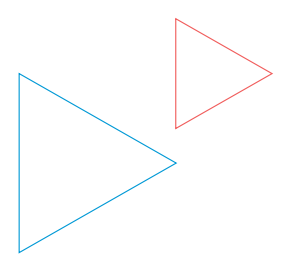
Sports club level: Local sport clubs are organized into internal and external levels. Internal: the general club as an organization, managers, coaches and individuals. External levels are: sport federations, public health actors and government authorities (9).

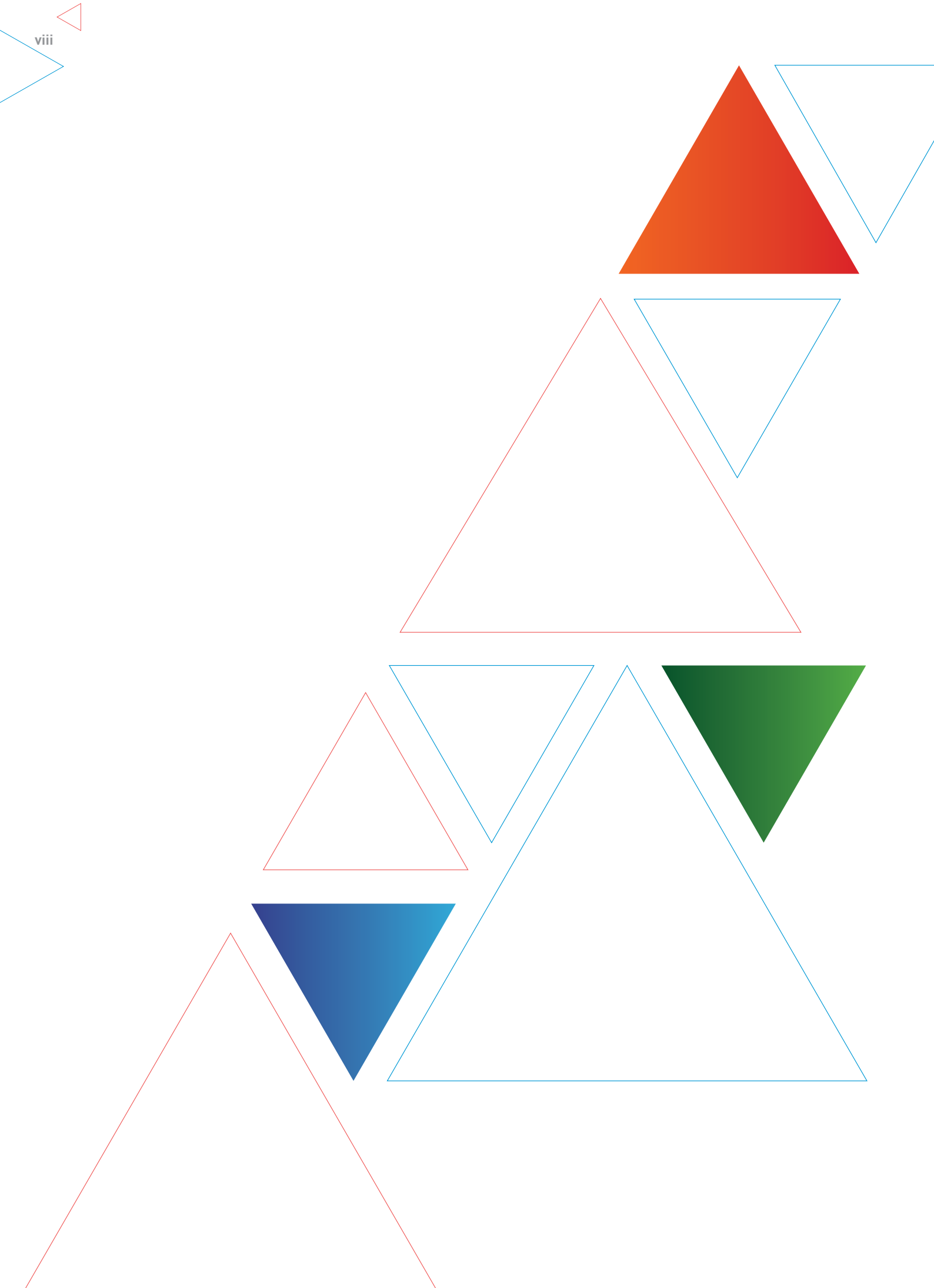
National sports federation: Organization responsible for planning and managing sport at national or regional level, with an organizational structure of membership of affiliated clubs. Organizes and promotes the practice of it(s) discipline(s), from leisure activities to high-level sport, with a key role in supporting its affiliated clubs (10).

Sports club member: Any individual who takes part in a sport club activity, from managers and administrators to volunteers and sport participants, including referees and parents who assist in activities.

Sports club participant: Any individual who practises sport or physical activity in a sport club and pays a membership fee.

Strategy: Long-term plan to achieve (national) goals, in this case, to promote health in the sports federation and affiliated sports clubs)





INTRODUCTION

“ Sport has a potential not only to promote individual health, but likewise community capacity. (11)

The powerful role of sport in society

The role that sport plays in society is important but is often underestimated and underexploited (12). The sport sector and especially national sports federations (NSFs) and their affiliated clubs, with a membership of 12% of the European adult population (approximately 615 120 000 individuals), 6% as volunteers (13), and 59% of children and young people, makes an important contribution to people's lives. It contributes economic, social and cultural capital, health and well-being and progress towards achieving the Sustainable Development Goals. In Europe in 2012, the sport sector made a direct contribution of 2.12% of the gross domestic product, at a value of €280 billion (14). Sport also contributes to the social capital of societies and endorses corporate social responsibility (15). Participants in sport clubs are more physically active than non-participants, are less sedentary, sleep longer (16), are more health literate (17) and have better academic achievement (18). Sport also gives children and young people life skills and ensures holistic development (16). Sport clubs and NSFs also contribute to achievement of at least six of the Sustainable Development Goals: good health and well-being, decent work and economic growth, high-quality education, gender equality, reduced inequalities, peace, justice and strong institutions (19).

“ Offering sport opportunity is not automatically healthy. (20)

Current situation of sport and health

Although sport has positive effects on physical, mental and social health (21,22), it can be damaging for some individuals, due for example to harassment, abuse or injuries. Thus, participation in sport is not automatically healthy. Some research suggests that sports clubs promote active lifestyles but unhealthy diets, such a consumption of sugar sweetened drinks (23), increased risk of injury or burnout and increased alcohol consumption and violence in some sports settings (24,25). Sponsorship and advertising of unhealthy products such as tobacco, alcohol and fast food in sport settings negatively influences health (26). Sport clubs can nevertheless promote health in sport practice and sporting environments (27) by using the educational nature and organizational strategies of sport (26,27).

Barriers to health promotion implementation have, however, been reported, such as the voluntary nature of sports clubs, staff turnover, lack of knowledge, lack of written policies and a focus on performance rather than health (29-31). Recently, sport clubs have called for support from NSFs, particularly in advocacy, financial resources, guidelines, programmes, creation of networks and providing a knowledge-sharing platform (31-33).

“ Sports clubs request support from their national sports federation. (32)





The role of sport federations in sport and health

Studies have highlighted the commitment of NSFs to promoting health (34). Sport federations promote health by providing opportunities for sport and physical activity in their affiliated clubs, which may extend to “sport for all” initiatives (35) and corporate social responsibility programmes on other health topics (15). Nevertheless, research has shown limitations in NSFs investment on broader health agenda than health of elite athletes (34,35). These implementation guidance will support sport federations in investing further to promote health, not only through sport but also in sport, with the powerful role they play in society.

Benefits of health-promoting sports clubs and federations

Promoting health in sport clubs and federations also has benefits for sport stakeholders and not only for participants (Fig. 1). A sport federation and its affiliated clubs that cares about the health of sport people and club members will enhance the performance of high-level athletes, foster the participation and enjoyment of grassroots sport participants and can therefore retain participants, coaches and managers (36). If members consider that their health and well-being are valued and fostered, they will be more eager to invest their personal resources into enhancing the club’s capacity for health promotion, creating a virtuous circle (37).

Fig. 1. Benefits of health-promoting sports clubs (36-39)

 For sport clubs	 For managers	 For coaches	 For sport participants
<ul style="list-style-type: none"> + attraction of different population groups + greater diversity of activities and revenue sources + recognition and value in the community 	<ul style="list-style-type: none"> + satisfaction in managerial role + less drop-out (intentions) of managers 	<ul style="list-style-type: none"> + self-determined motivation + satisfaction in coaching role + less drop out (intentions) of coaches 	<ul style="list-style-type: none"> + better self-rated sport performance + better self-reported quality of life + less drop out (intentions) from sport + greater enjoyment of sport + better self-reported health + greater subjective vitality + less harm to health

THE IMPLEMENTATION GUIDANCE

These implementation guidance are designed to support those who run NSFs, including board members, management groups and employees, who are the individuals or groups responsible for developing strategic plans, directing and writing policies, promoting their sport and developing programmes and toolkits for sport clubs and their members.

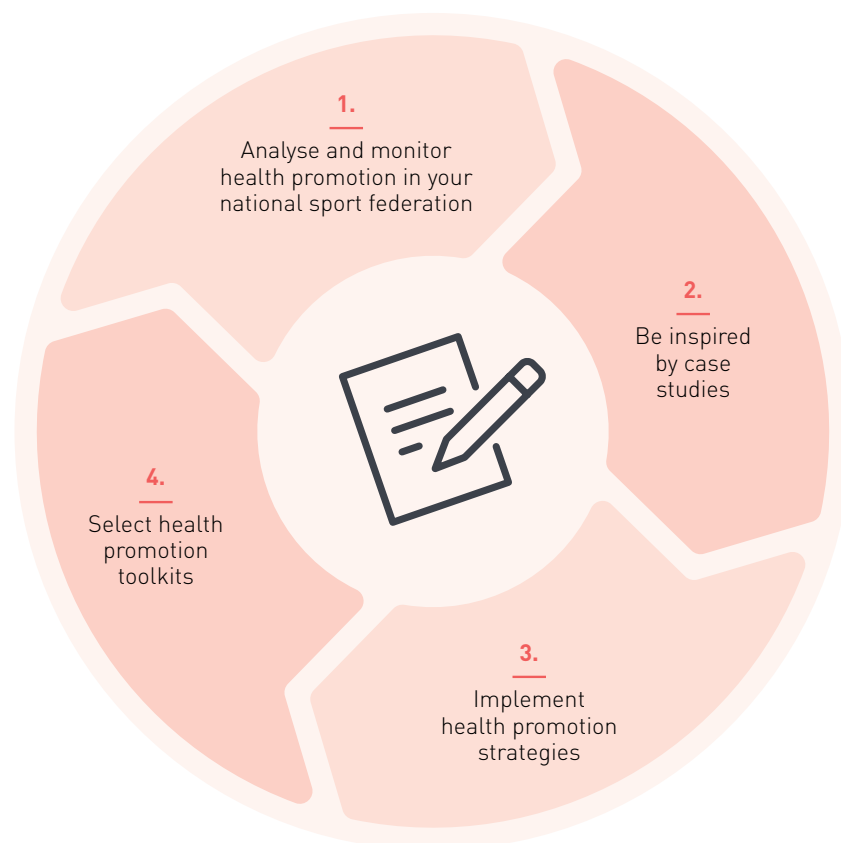
An NSF could use these implementation guidance to promote health, beyond offering sport practice opportunities, hence supporting recognition of the organization's contribution to broader society and, in turn, advancing the vision and ethos and subsequent perception of the organization. Implementing this guidance will help an NSF to:

- establish appropriate governance for health promotion and embed it into policy and practice;
- identify tools and examples to enable affiliated sports clubs to invest in health promotion;
- develop programmes to support health promotion in and through sport; and
- provide evidence that the NSF is playing an important role in society.

The implementation guidance are based on best evidence from research and practice. The document was developed by a group of 15 international researchers and members of national governing organizations in five 2-h meetings. Several drafts were presented, discussed and amended in several countries, and the final version was reviewed by four NSFs in France, Luxembourg and Sweden.

The implementation guidance comprise four main chapters to guide NSFs in promoting health and in supporting their affiliated clubs to promote health (Fig. 2).

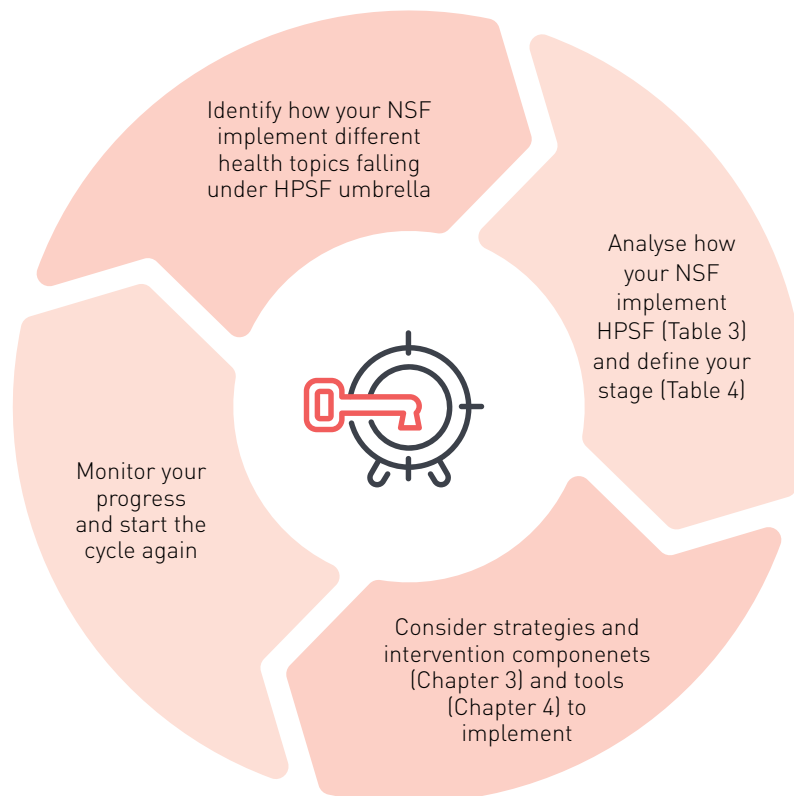
Fig. 2. Chapters of the implementation guidance



The implementation guidance can be read in various ways, depending on the objectives of the sport federation (Fig. 3):

- starting with Chapter 1 to learn more about the theory of health-promoting sports federations;
- starting with Chapter 3 on the components and tools of interventions develop specific strategies, returning to chapter 1 to understand how the strategies foster health-promoting sport clubs and then to chapter 2 to find practical examples; or
- starting with Chapter 4, on tools to promote health, before linking them to Chapter 3 for intervention components and chapter 1 for theoretical background.

Fig. 3. How to use the HPSF implementation guidance



CHAPTER 1.

THEORETICAL BACKGROUND

1.1 Definition of a health-promoting sport federation

The Ottawa Charter (4) defines health promotion as:

the process of enabling people to increase control over and improve their health. To reach a state of complete physical, mental and social well-being, an individual or group must be able to identify and to realize aspirations, to satisfy needs, and to change or cope with the environment.

In this definition, health is seen as a resource for everyday life, not the objective of living. Health is a positive concept, emphasizing social and personal resources as well as physical capacity (4). Good health is perceived as a resource for social, economic and personal development, beyond a healthy lifestyle to well-being, which is not solely the responsibility of the health sector.

The Ottawa Charter defines five main strategies for health promotion in society (Table 1).

Table 1. Strategies for health promotion in sports federations

Strategy	Definition adapted for sports federations
Build healthy public policy.	Place health on the agenda of the sports federation, in all types of practice and at all levels, and alert decision-makers to be aware of the health consequences of their decisions and to accept their responsibilities for health.
Create a supportive environment for health.	The inextricable link between people and their environment is the basis for a health-promoting sports federation. The living and working conditions in sports federations and clubs must be safe, stimulating, satisfying and enjoyable.
Strengthen community action for health.	Community development draws on existing human and material to enhance the ownership and control of sports clubs by providing open access to information, learning opportunities for health, partnership and funding.
Develop personal skills.	Personal and social development of individuals increase their options for greater control over their health by learning throughout life.
Re-orient health services.	Sports clubs are encouraged to consider their members beyond sports participants, each as a whole person and not only an athlete, and to consider that the club is mandated to promote health to support a healthy life for individuals and the community.

Source: (4).

To implement these strategies, the settings-based approach has been promoted by WHO, in which a setting is “a place or social context where people engage in daily activities in which environmental, organizational and personal factors interact to affect health and well-being” (2). This approach encourages an organization to adopt a whole-system approach to health promotion, embedding health in its policies, daily activities and life and making it an explicit opportunity for its members (40,41). The settings-based approach has been used successfully in universities (42), schools (43) and cities (44), where a health-promoting school has been described as “a school that is constantly strengthening its capacity as a healthy setting for living, learning and working” (45). This definition is applied in schools by reviewing eight standards (46):

- The whole of government is committed to and invests in making every school a health-promoting school.
- The school is committed to and invests in a whole-school approach to being a health-promoting school.
- A whole-school model of school governance and leadership supports a health-promoting school.
- The school is engaged and collaborates within the local community for health-promoting schools.
- The school’s curriculum supports physical, social-emotional and psychological aspects of students’ health and well-being.
- The school has a safe, supportive social-emotional environment.
- The school has a healthy, safe, secure, inclusive physical environment.
- All students have access to comprehensive school-based or school-linked health services that meet their physical, emotional, psychosocial and educational health-care needs.

1.2 Health Promotion and Health Topics

The definition of public health and especially health promotion are very broad in terms of targeting different behaviours, their determinants and different topics (i.e. Any topic that relates to individual or population health, including physical activity, well-being, social justice, inclusivity, sustainability, injury prevention and recovery, nutrition and sleep...) (Fig. 4).

An NSF may already have programmes or actions for various health topics. Most NSFs, for example, have mandatory regulations on anti-doping and safety. In addition, programmes may have been designed for a specific public or promote healthy behaviour (healthy eating, hydration, sleep). These actions are all under the health promotion umbrella, using similar mechanisms, and should be recognized as such.

In the settings approach, a health-promoting national sports federation (HPSF) is defined as a “national sports federation that considers health in its values, vision and leadership, as well as in its activities and training”. An NSF promotes health by BEING a health-promoting sports federation and SUPPORTING affiliated clubs in becoming health promoting. To BE a health-promoting sports federation, an NSF should examine its values and vision. An appropriate value reflects a positive definition of health rather than a focus on risk reduction, emphasizing promotion not only of physical or social health but also mental and community health, and offering sport for all, regardless of ethnic or economic background, disability or

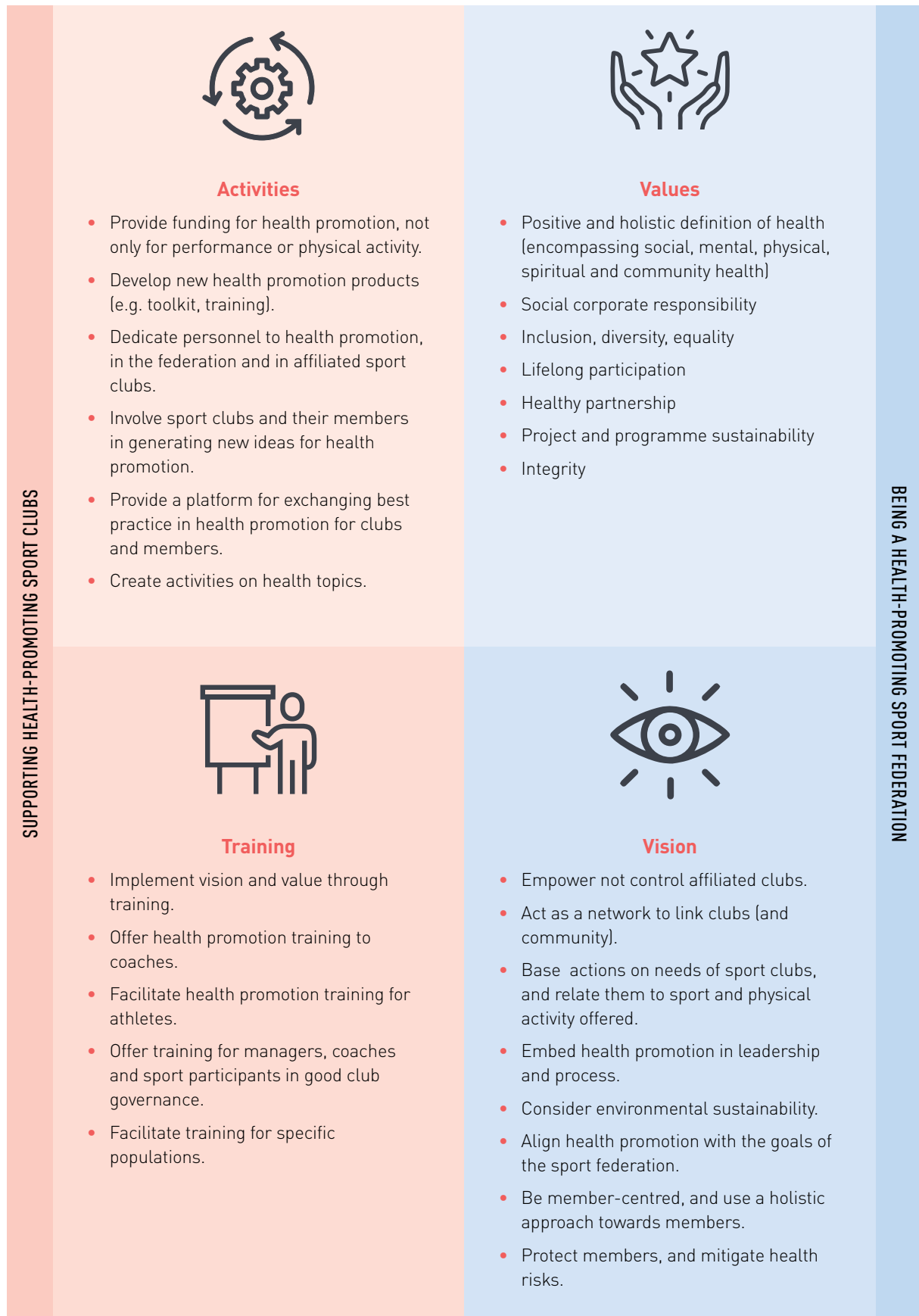
Fig. 4. Diversity of health topics covered by health promotion



functional limitation. The NSF must also consider the principles of good governance, including integrity (strong moral values), programme sustainability (maintenance of health benefits, continuation of a programme and capacity-building so that the recipient community can continue the programme on its own (47)) and avoiding partnerships with organizations that promote unhealthy products in framing policy, making decisions and designing or implementing a programme. The NSF's vision should embed health in decision-making and management structures and align the goals of health promotion with those of the federation (e.g. to increase membership or performance).

An NSF should also be committed to protect its members, mitigate the risks of sports practice, help them flourish through sport. To SUPPORT health-promoting sports clubs, NSFs should develop activities and training to empower affiliated sports clubs to promote health. The activities include funding schemes, developing toolkits and programmes, sharing a platform on health promotion in general and on specific health topics, to reward and resource NSFs for their investment in health promotion. Affiliated clubs can be empowered to create a community network to share experiences, actions, needs and context in a participative approach. Training in health promotion should be provided, for specific health topics, good governance and the needs of population for coaches, managers, participants and club members. Fig. 5 summarizes such activities.

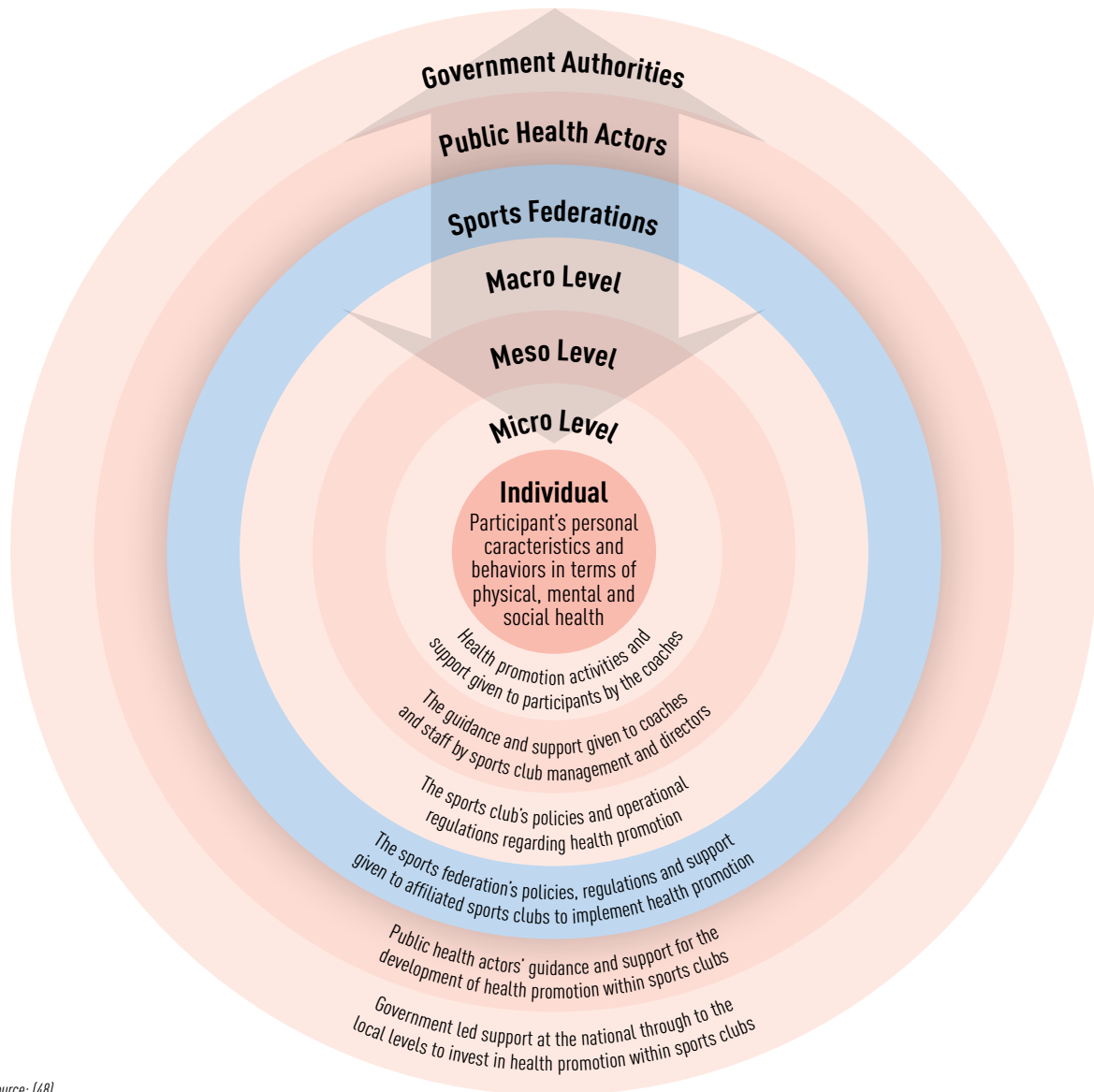
Fig. 5. Being a health-promoting sports federation and supporting health-promoting sports clubs



1.3 Evaluation of health promotion by a national sports federation

Through the health-promoting sports club model and the theoretical framework, NSFs have been identified as key actors in the development of health-promoting sports clubs, with government authorities and public health actors (Fig. 6).

Fig. 6. Model of the health-promoting sports club



Source: [48].

Within the HPSC model, four types of health determinant must be considered at each level to enhance the health of sports club members:

- organizational: guidelines, including policies, rules and regulations provided to affiliated sports clubs about health promotion;
- environmental: support for safe, supportive, sustainable infrastructure, green spaces and playing fields for affiliated sports clubs;
- economic: financial and human resources for affiliated sports clubs for health promotion; and
- social: the vision, values and philosophy related to those of society.

Indicators of these four health determinants have been framed to help an NSF to analyse and monitor the extent to which an NSF promotes health (Table 2).

Table 2. Indicators of a health-promoting sports federation

Indicator	Question	Data sources
Organizational determinants		
Engagement of NSF (importance)	How important is health promotion for the NSF?	Policy document, board discussion, code of conduct
Health promotion policy planning	To what types of health promotion is the NSF committed in the policy documents? How many health promotion activities does the NSF plan per year?	Policy document
Health promotion policy implementation	How many health promotion activities does the NSF undertake per year according to its policy? How many sports clubs and their members take part in the activities? What are the characteristics of the clubs and individual members?	Policy document, annual report
Health promotion monitoring and evaluation	Are health promotion activities monitored? Are their outcomes and impacts evaluated? What are the perceptions of the sports clubs and members of the health promotion activities?	Annual report, strategic monitoring and evaluation plan
Health promotion programmes	Does the NSF have dedicated programmes on health topics or health promotion? How are they implemented?	Website
Training in health promotion	How is health promotion embedded in mandatory training of coaches? Is there specific training on health topics or health promotion for the club or its members?	Website, training documents
Health promotion decision-making	Who in the NSF is responsible for health promotion? Who is involved in making decisions about health promotion activities, and how are decisions made?	Website, policy document, notes of (board) meetings
Participative approach	Can the sports clubs or club members be involved in the sports federation's decision?	Description of the organization or human resources structure
Safeguarding of members	Are there opportunities for sports club members to report misconduct to the NSF?	Code of conduct, critical incident plan
Environmental determinants		
Health promotion or prevention measures for (elite) sports participants	Are specific regulations in place for training and/or competitions?	Website, code of conduct
First aid kit, defibrillator	Are affiliated clubs equipped with a first aid kit and a defibrillator?	Annual report, survey, programme description
Guidelines for a safe, sustainable environment	Are affiliated clubs encouraged to invest in safe, sustainable infrastructure and material?	Annual report, survey, programme description

Economic determinants		
Financial investment (human and material)	How much does the NSF invest in health promotion? Is health promotion a priority for resources?	Budget, annual report, human resources
Investment in corporate social responsibility	Does the NSF have a corporate social responsibility plan or activities?	Strategic plan, annual report
Partnership with organization for health promotion	Is the NSF in partnership with health promotion organizations or health promotion professionals? Or with other organizations that invest in health promotion?	Strategic plan, programme description, website
Social determinants		
Health promotion values	Does the NSF promote health promotion values (Fig. 5)?	Website, policy document, programme description
Communication of health promotion	Is health promotion included in internal (within the NSF and affiliated clubs) and external (public and partners) communication strategies?	Newsletter, website, press release, social media
Visibility of health promotion	Is health promotion explicitly mentioned in the communication and policy document of the NSF?	Social media, website

These criteria provide a theoretical basis for NSF to review their own activities in health promotion. These are applied to three case studies in section 4, with five examples on their application.

“ If properly applied, should health promotion efforts be detectable or should they be considered second nature? (49) ”

1.4 Stages of development of a health-promoting sports federation

The settings approach to health promotion includes stages of progression (41) to guide organizations towards health promotion. Whitelaw and colleagues (40) defined the theory of the settings approach to health, which comprises four factors: the nature of the setting (openness, centralization, authority), the position of health in the organization, the support necessary to develop health promotion and the scope of the setting. These define the stages of evolution of the approach in various organizations. The working group used this work to define stages and apply them to NSFs. This resulted in five stages, from a passive model to a comprehensive approach (Table 3).

Table 3. Stages in development of a health-promoting sports federation

Stage	Core perspective	Definition	Action of NSF
0 Null			No communication about legal requirements for health or reducing health risks
1 Passive	The problem and its solution are in the behaviour and actions of individuals.	Safe sport offered by sports federations	Promoting safe, secure sport activities (legal requirements to protect sports participants: doping, warming up). Sports clubs may undertake health promotion initiatives independently.
2 Active	The problem is in the behaviour of individuals; some solutions are in the setting.	Sports federations promoting health	Promotion of the health benefits of sport for sports clubs and participants and signalling of health promotion activities to sports clubs but no active engagement in health promotion programmes
3 Transmissive	The problem is in the setting; the solutions are in learning from individual projects.	Health promotion in sports federations	Sporadic health promotion events organized by the sports federation (event day) on a single health behaviour or topic; encouragement from sports federation to sports clubs to deliver health promotion activities
4 Organic	The problem is in the setting; the solutions are in the actions of individuals.	Sports federation health promotion programmes	Dedicated programmes developed by the sports federation to increase sports club activities for health promotion. The sports federation is actively becoming a platform for sports clubs and external partners to meet for health promotion.
5 Comprehensive approach	The problem and the solutions are in the setting.	Health-promoting sports federation	Health promotion is integrated in the vision, values, activities and training of the sports federation. Health is considered in the organization and decision-making at all levels of the sports federation. The sports federation invests resources in health promotion in the long-term, to promote health beyond health topics. The sports federation collaborates with external partners on health promotion. The sports federation's policies are based on monitoring and evaluating of activities.

CHAPTER 2.

CASE STUDIES AND EXAMPLES OF NATIONAL SPORTS FEDERATIONS' INVESTMENT IN HEALTH PROMOTION

This part of the guidelines is dedicated to presenting results from different research studies which demonstrate how national sports federations promote health. The first part of the chapter focuses on the presentation of three French national sports federations' HP activities. Then, a study, presenting how TO BE AN HPSF analyses the HP visibility of 52 French national sports federation websites. Finally, a study and two renowned projects will be described, providing examples on how to SUPPORT health promoting sports clubs. The study analysed sports clubs' needs in order to promote health in France, and two exemplar projects, one from Ireland and another from Australia, are analysed to provide an overview of program implementation mechanisms and steps.

“ Promoting health is not only about education, it's about where we live, work, learn, play, shop... and practise sport. (50)

2.1 Comparison of three national sports federations

1

The French Triathlon Federation

The French Triathlon Federation (<https://www.fftri.com/>) was founded in 1989 to promote and organize triathlons, duathlons, cycling and running. In 2020, the Federation welcomed 60 113 licensees in 974 sports clubs and organized 1164 competitions in France.

Inclusion of health promotion in the strategic plan and policies

None of the objectives of the French Triathlon Federation includes health promotion, although there is a transversal health promotion goal in its strategic plan and a strong focus on physical activity. One of its objectives is to have more than 200 000 participants and to integrate health transversally into, creating a label for clubs and organized events. A second objective is to have a minimum of 30% female participants to reduce inequity in sports participation. A third objective is to double the number of disabled participants (no numbers provided). No other target is set for implementation, and evaluation and monitoring of health promotion are not planned.

Responsibility for promoting health in the sports federation

One department is responsible for corporate social responsibility and has a corporate social responsibility committee, a medical committee and a funding committee. A committee for health and well-being and another for paratriathlon are in a department for development and services for clubs. No mechanisms for implicating people or for reporting misconduct were identified, although

ethical and medical regulations are mentioned on the NSF website. Relations with various private partners are mentioned, such as for resources and sport nutrition. There is a link with an association to prevent sexual harassment.

How the NSF promotes health

Various programmes are available for sport for health, sport for all, sustainable development, citizenship and prevention of violence and doping. Mixed gender practice is included to sustain gender equality during practice and competition, including regulations, and a label can be obtained by clubs and for events. A similar structure is in place for sustainable development support, with guidelines and labels for sports clubs. Programmes have been organized for participation of people with disabilities (paratriathlon), including training for coaches in sport for health and programmes to incite sedentary people to move. A citizenship programme is based on the creation and initiatives taken by the Ethics and Deontology Committee. The programmes for prevention of doping and violence are based on information, links to other organizations and toolkits on the website. Initial training does not include health promotion, and the only type of training identified was for coaching sedentary or vulnerable populations in sport for health.

Visibility of health promotion in the NSF

A section of the website describes the federation's commitment to "health", youth, doping prevention, mixed gender practice, sustainable development and citizenship. Health is not mentioned as a first priority in the strategic plan, in which increasing the number and diversity of participants is a priority. In the section on health, health is considered in a transversal manner, with no further details.

The French Triathlon Federation is situated at stage 4 of the Sports Federation health promotion programmes, as the NSF is developing a range of programmes to promote health, including tools, training and guidelines. A committee for ethics and deontology has been appointed, and health is mentioned as a transversal principle in the strategic plan. Health promotion is not mentioned per se, there is no participative approach or consideration of health in decisions, no monitoring or evaluation and no indicators of how much the sports federation invests in health promotion and values its actions.

2

The French Football Federation

CASE STUDY

The French Football Federation (www.fff.fr) has existed since 1919. It organizes, supervises and regulates grassroots and elite football, its funding and training of players and coaches in France. The French Football Federation has 1.9 million licentiates and 400 000 volunteers in 15 000 grassroots football clubs.

Inclusion of health promotion in the strategic plan and policies

There is no explicit mention of health promotion in the activities of the French Football Federation, although medical centres and a medical commission are cited. The regulations include anti-

doping regulations and an ethical charter, in addition to technical and administrative regulations. The federal educational programme is a pedagogical tool for grassroots sports clubs to develop six topics: health, citizenship, environment, fair play, games rules, referees and football culture. Thus, health is implicitly promoted in the plan, which targets social, mental and physical health. No indicators of performance, evaluation or monitoring have been reported beyond the numbers of clubs, participants and coaches (with no detail of how they are measured). There is no budget line for health promotion.

Responsibility for promoting health in the sports federation

Several committees include health promotion: a federal committee on citizenship and social actions, a federal committee on women in football and a national council of ethics. For grassroots football, two committees exist for leagues and districts and a third for participants in football, including representation of managers, coaches and referees. The federal education programme has three project managers at league (sub-national) level, with 22 leagues in France, and one at district (local) level (102 districts). A labelling system recognizes health promotion in the form of social inclusion, sustainable development and health, for which a structure, the “Fondation du Football”, is responsible, evaluates applications, approves the label and communicates the results. A number of partners, including unhealthy (e.g. fast food) and financial partners (e.g. a phone company), have been identified. The private telecom company, for example, is associated with social network use by young players.

How the NSF promotes health

The federal education programme is the largest, most comprehensive health promotion programme of the French Football Federation, having reported 10 000 activities in clubs (Table 3). The programme is accessible to all grassroots clubs, and guidelines, case studies and templates can be found on the Federation website. A health promotion event (Fondation du Football) is organized each year, with topics such as education and citizenship, diversity, solidarity and inclusion, health and environment, with a call for applicants; 14 clubs have been rewarded. Training in health and safety is offered to coaches, and training in corporate social responsibility and conflict management is offered to club managers.

Visibility of health promotion in the NSF

Health promotion is not mentioned on the website, but the French Football Federation lists corporate social responsibility engagements and promotes five values: enjoyment, respect, commitment, tolerance and solidarity. The federal education plan is sent to club managers, and examples of good practice examples are posted on the website, with pedagogical tools.

The French Football Federation is situated at stage 4 (Table 3), as the NSF is developing a single coordinated programme for the promotion of health topics, including tools, training and guidelines. A committee has been appointed for its implementation from national to local levels. Nevertheless, health promotion is not mentioned per se; there is no participative approach or consideration of health in decisions; no monitoring or evaluation system and no indicators of how much the federation invests in health promotion, beyond corporate social responsibility.

The French Sport for All Federation

The French Sport for All Federation (<https://www.sportspourtous.org/>), initiated in 1953, offers adapted, diverse physical activity for all. It addresses the physical development of the young, reinforces relationships between parents and children, encourages self-affirmation of adolescents, favours fitness, health and well-being for adults and guards the health capital of the elderly, ensuring well-being and autonomy for dependent elder people. The Federation has more than 130 000 members in 2200 sports clubs, with 5200 qualified coaches and 80 employees.

Inclusion of health promotion in the strategic plan and policies

The mission of the Federation is to “enhance the well-being of everyone through physical activity and leisure sport practice” and “become an unavoidable stakeholder to access sport practice for all”. Health promotion is not mentioned as such, but the health benefits of sports are at the heart of the Federation. Health promotion is reflected in the quality of the proposed practice and in the sports federation ethos and commitment. No specific guidelines or support are provided on health topics, although there are programmes for specific populations. A dedicated page on doping prevention provides guidelines. No indicators of performance, evaluation or monitoring are available on policy implementation. The numbers of participants and affiliated clubs are reported.

Responsibility for promoting health in the sports federation

There is no specific commission or technical direction. The national medical commission develops health promotion programmes, which are implemented by regional and local committees, with support from coaches. There is no participatory approach or decision-making for health promotion, but the Federation plans to include programme co-construction with sports participants; clear programmes and actions have not yet been identified. Partnerships have been developed with various health organizations (e.g. Audika for hearing tests) and for outdoor accommodation. The basis for partnerships is social economy and solidarity.

How the NSF promotes health

Programmes are implemented for people with cardiovascular diseases, older adults and people who are overweight or obese. Various programmes are implemented to mobilize the educational and social dimensions of sport for children, young people, women and prisoners. The Federation’s website provides information on programme implementation, guidelines, tools and examples of practice. Specific training is provided for vulnerable and disabled people, with support by sport for health.

Visibility of health promotion in the NSF

Health promotion is not mentioned explicitly, but the benefits of high-quality sport practice and the educational nature of sport are mentioned. This NSF defines itself as health promoting and mentions the benefits of physical activity in the motto of the sport for all federation. The overall budget is dedicated to promoting health. The website presents 10 principles that show application of the motto: a trained coach, a personalized welcome, accessible financial access, follow-up for fitness, counselling on individual practice, small group sizes, adapted and safe environments, readability of sports activities and access to sports facilities, diversity and valuing actions.

The French Sport for All Federation has reached stage 2 (Table 3) for: the implicit nature of health promotion, the major focus on physical activity and its benefits, without considering other behaviour, despite a large investment in developing physical activity programmes for vulnerable and specific populations. Moreover, there is no training in health promotion, no committee appointed, no objectives in the strategic plan. Thus, the Federation has an implicit vision of health promotion through sport but no implementation of a health-promoting sports federation.

The three NSFs are compared in Table 4.

Table 4. Comparison of investment in health promotion in the three NSFs

Indicator	Triathlon	Football	Sport for all
Organizational determinants			
Engagement of NSF	No explicit mention	No explicit mention	No explicit mention
Health promotion policy planning	Health as a transversal principle	Federal educational programme on six topics	Use of physical activity for educational purpose
Health promotion policy implementation	Not mentioned	Not mentioned	Not mentioned
Health promotion monitoring and evaluation	Not mentioned	Not mentioned	Not mentioned
Health promotion programmes	On health topics	Under federal educational programme on health topics	Centred on offering physical activity to specific populations
Training in health promotion	In sport for health	In diverse health topics	In physical activity for specific populations
Governance structure	Committee on ethics	Various national and local committees	No committee
Participative approach	Not mentioned	Not mentioned	Not mentioned
Environmental determinants			
Health promotion or prevention measures for (elite) sport participants	Ethics charter	Anti-doping regulations	Anti-doping regulations
	Medical regulations	Ethics charter	
Safeguarding of members	Harassment prevention, external hotline for specific mental health services	Guidelines for preventing misconduct available online but no process	Not mentioned
Economic determinants			
Financial investment (human and material)	No specific budget line	No specific budget line	Health promotion considered as the motto of the sport-for-all federation, with dedicated budget
Corporate social responsibility investment	Yes	Yes	No
Partnership with organization that supports health promotion	Yes	Yes	Yes

Social determinants			
Health promotion values	No specific values, health is transversal	Five values: enjoyment, respect, commitment, tolerance and solidarity	10 principles
Communication of health promotion	Specific communication support created for each programme dedicated to a health topic	Communication support for federal educational plan	Events to promote benefits of physical activity and sport
Visibility of health promotion	Health mentioned as transversal in strategic plan	Corporate social responsibility considered	Not visible per se

2.2 To **BE** a health promoting sports federation

Visibility, communication, policy-making and decision-making are indicators of how to BE a health promoting sports federation. These are reflected in the present study, to show how sports federations can promote their health promotion actions.

Van Hoyer et al. (unpublished) analysed the websites of 51 French sports federations, selected because they were affiliated or associated with the French Olympic Committee with regard to sport and health. Of the 51 federations, 8% mentioned health on the main page and 67% in another section; 60% included their strategic plan on the website, but only one mentioned health promotion; 51% had a dedicated health committee that focused on ethics, youth, sport for health, disability, citizenship or sustainable development. Of the health topics mentioned, 33% were social health, 29% social inequality, 9% women in sport and 8% physical health.

The indicators used in the analyses were:

- a link to a health page on the main landing page or in a section of the website,
- a strategic plan on the website and mention of health promotion in the strategic plan and
- health promotion programmes and a specific committee in the sports federation dedicated to health promotion.

Only 11 (22%) of the NSF sites had the three indicators, and only 8 (16%) also had a dedicated programme. Of the 51 websites, 4 (8%) mentioned a page on health on their home page, 34 (67%) made a mention of health on another page, and 13 (25%) had no reference to health or health promotion. A strategic plan was available for 31 federations (60%), but most mentioned health topics and only one mentioned health promotion directly, in relation to one objective: "structure our sport offer to promote seniors' health". The aim, however, was to prevent loss of autonomy and isolation. Only a few federations mentioned use of the potential of sport for educating individuals on their health, and most focused on increasing the participation of diverse groups, including vulnerable populations.

Although health promotion was not mentioned in the strategic plans, 18 NSFs (35%) aimed to increase participation, 17 (33%) to improve social health, 15 (29%) to develop programmes for vulnerable populations, 9 (18%) to develop or stimulate female participation, 8 (17%) to promote physical health, 7 (16%) to stimulate sustainable development, 1 to improve mental health and 1 to improve environmental health. All 51 federations had a medical commission, principally for risk and doping prevention, which is mandatory, but only 26 (51%) had a commission on broader health topics such as ethics and sustainable development or for a specific public (e.g. sport and health, disabled people). At least one course in health promotion topics was embedded in initial training or in a specific session in 20 NSFs (39%).

The analysis of websites showed that, in order to make health promotion visible, an NSF website should:

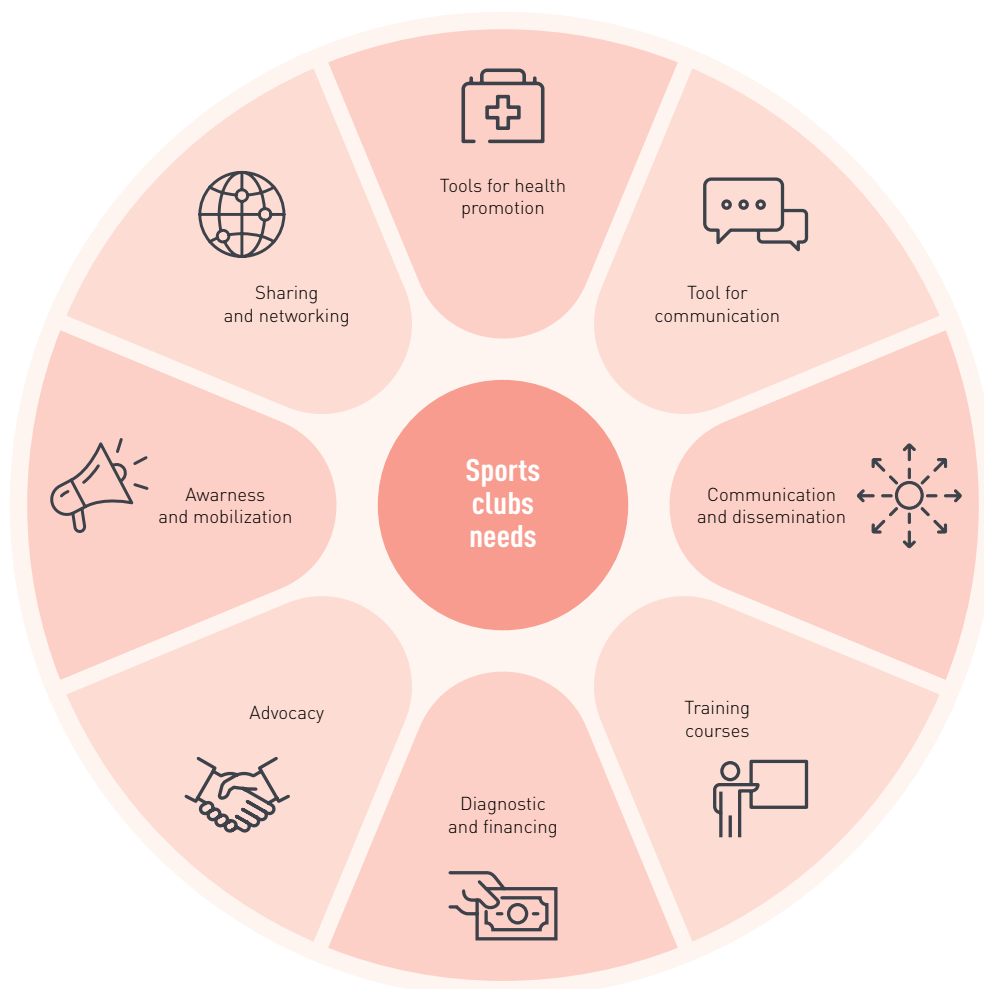
- include health or health promotion on the main page;
- indicate the diversity of health topics covered under health promotion;
- include the strategic plan, with health promotion as a transversal goal;
- appoint a dedicated committee to promote health beyond risk management;
- indicate the investment of the NSF in social, mental, physical and community health; and
- list training courses in health promotion on the health promotion page.

2.3 To **SUPPORT** affiliated club’s investment in health promotion

NSFs not only promote health and embedding health in decisions, daily activities and values but also support affiliated sport clubs in their organization, the quality of sport practice and promoting health. Below, the results of a study of the assistance requested by sport clubs in promoting health and the examples of two sports clubs that received such support from their federations are presented.

Fig. 7 illustrates the expressed need by sports clubs that were rated as the most feasible and important by 45 sports club stakeholders in France, comprising club managers, coaches, sports federation employees and health promotion project managers (32).

Fig. 7. Expressed needs to promote health from French sports clubs



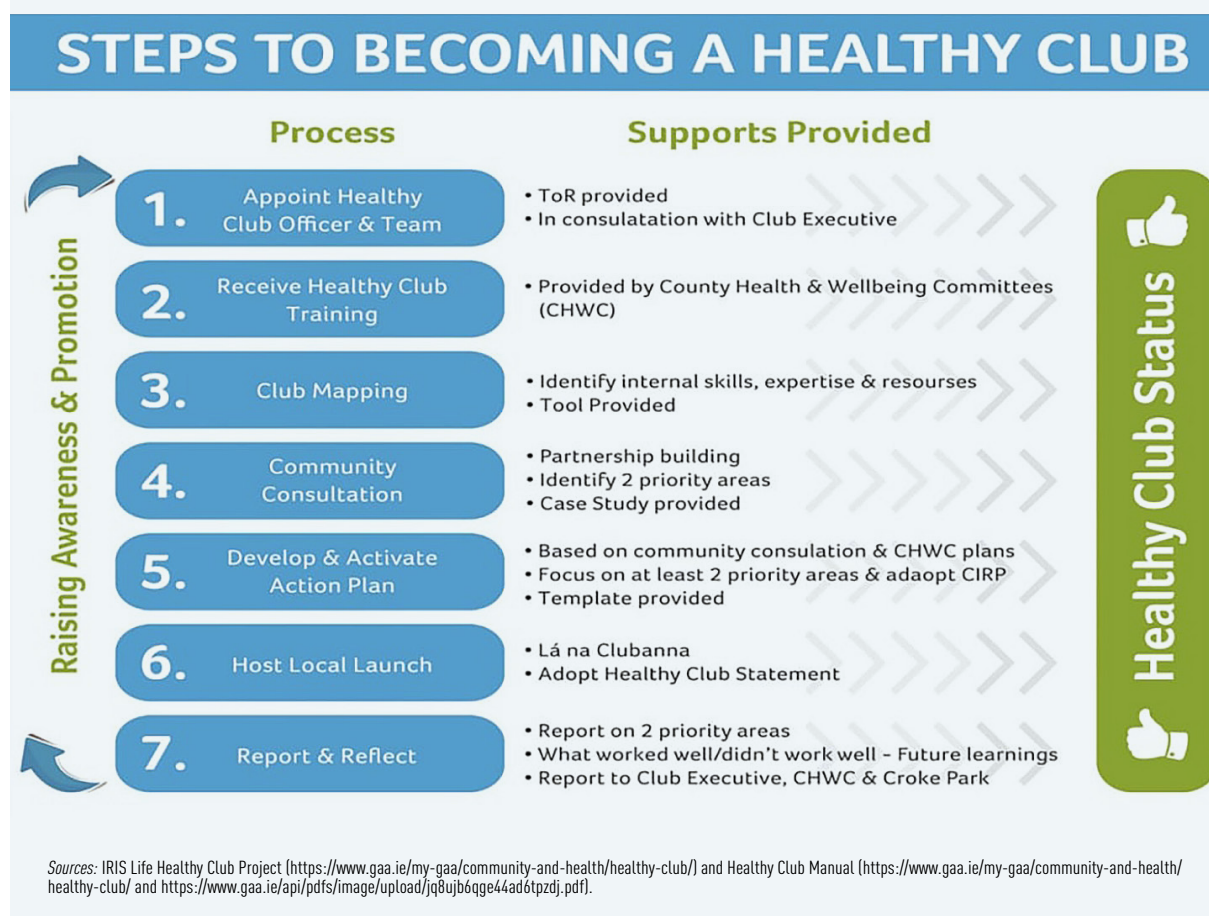
Source: (32)

Although NSFs and sports clubs include some programmes on health, research on the effectiveness of such interventions is rare. Three interventions have been rigorously evaluated and shown their effectiveness against the targeted behaviour (alcohol management, healthy eating) (51,52). Below, two programmes to support sports clubs in promoting health are described, both of which have existed for almost 10 years.

The Irish Life GAA Healthy Club Project, Ireland

The Healthy Club Project is implemented by the Community and Health Department of the Gaelic Athletics Association in Ireland. This project was initiated in 2013 with about 500 sports clubs. The 18-month intervention consists of seven steps for sports clubs to become a health hub (Fig. 8). Clubs that wish to become “healthy clubs” submit an application and are selected. First, a healthy club officer and a team are selected, who receive training. Subsequently, internal skills, expertise and resources are identified, and a needs analysis is performed in the club and the community to identify two priorities. An action plan is then formulated. The planned initiatives must be organized and evaluated within 18 months, and an evaluation report is submitted through a national portal. Clubs that join the project receive a grant of €500 to develop their initiatives and signage and materials for a Healthy Club. The project is funded by the national health department and a health insurance company (Irish Life).

Fig. 8. Steps in becoming a Healthy Club within the Gaelic Athletics Association



The Good Sports Program by the Alcohol and Drug Foundation, Australia

The objective of this programme is to inspire a healthier sporting nation. It is open to all Australian clubs and is currently active in 10 000 sports clubs. The programme was developed by the Alcohol and Drug Foundation and is supported by national and local authorities. The aims of the Program include increasing membership and volunteering, complying with legal requirements, being recognized to address societal issues and maintaining governance at a high standard. The programme covers five areas: alcohol management, smoking regulations, mental health, illegal drugs and safe transport.

Sports clubs join in seven steps: registration, questionnaire to identify the club, drawing up an action plan according to the answers to the questionnaire, creating a policy to be signed by the club committee members, implementing policy, receiving “gold medal” accreditation, and annual follow-up to reflect on past and future actions. More information can be found at: https://d34xl0lpaj2mps.cloudfront.net/media/documents/What_to_expect_when_you_join_Good_Sport.pdf, <https://goodsports.com.au/> and <https://goodsports.com.au/resources/>.

Lessons learnt on SUPPORTING health-promoting sports clubs

Analysis of the Irish and Australian projects provided lessons that could inspire NSF to launch health promotion programmes:

- Support appointment of a dedicated volunteer or employee in each sport club who has the will and resources to promote health.
- Let sports clubs build their programme according to their needs analysis and priorities.
- Limit the number of steps to five or seven, and help people understand what they have to do and when.
- Guide clubs through each step of the programme, including online forms and templates.
- Use an accreditation system, and label sports clubs so that they are recognized in their communities.
- Ensure that sports clubs have sufficient time and space to build their health promotion policy and initiatives for changes in health promotion.

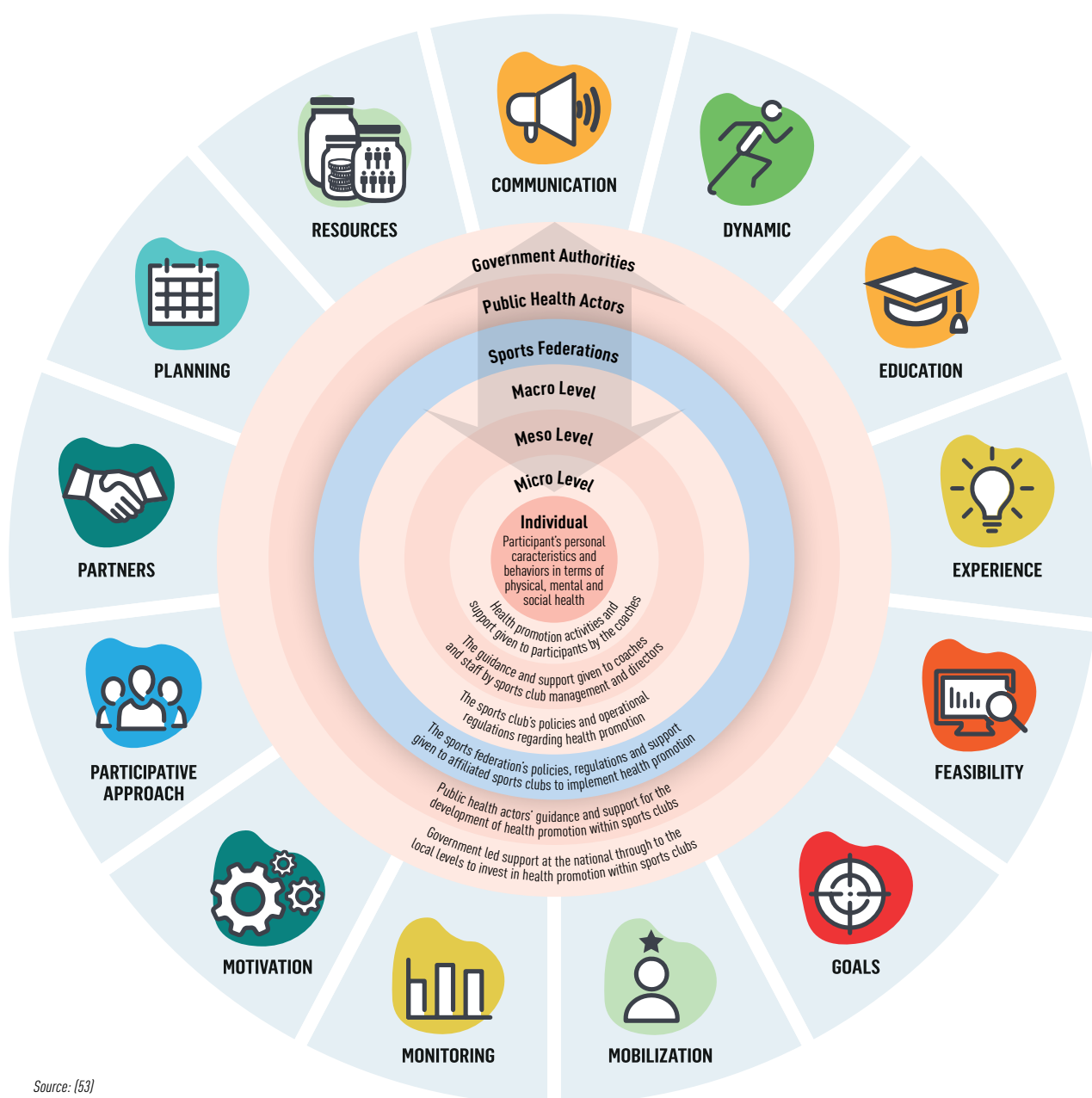
CHAPTER 3.

IMPLEMENTING THE HEALTH-PROMOTING SPORTS CLUBS INTERVENTION FRAMEWORK

3.1 Framework strategies

The health promoting sports club (HPSC) framework (7) summarizes integration of health promotion in sport in 13 strategies and 69 interventions derived from evidence-based guidelines used by sports clubs and reported in the published scientific literature (51). Fig. 9 illustrates the components of the framework.

Fig. 9. Components of health-promoting sports clubs



3.2 Strategies of the Health Promoting Sports Federation

Of the 69 interventions in the HPSC framework, 27 have been classified by 65 sports club stakeholders as actionable by affiliated NSF, in collaboration with others. Two strategies, for the internal dynamics of sports clubs and for assessing the feasibility of action in sports clubs, have no intervention components. Table 5 illustrates how the intervention components target the economic, environmental, organizational and social health determinants. Thus, according to the review of HPSF indicators in Table 3, the strategies and associated intervention components can be used to reinforce the actions of an NSF to support affiliated sports clubs.

Table 5. Intervention components under the responsibility of NSF

Strategy	Economic	Environmental	Organizational	Social
Communication	3, 4		3, 4	
Dynamics				
Education	1, 2, 3, 4, 5		1, 2, 4, 5	
Experience	5, 7		5, 7	7
Feasibility				
Goals			1	
Mobilization	1, 5		1, 5	1, 5
Monitoring			5	
Motivation	3, 4	3, 4	3, 4	3, 4
Participative approach	3	3	3	1, 3
Partners			1	
Planning	6, 8		6, 8	
Resources	3, 4		4, 5, 6, 7, 8	5, 6, 7, 8

For each of the intervention component listed, a section below describes how to implement it, links with existing practice, the benefits of implementation, implementation in relation to the HPSF stage and examples of actions by each stakeholder.

The logo indicates the type of strategy in the HPSC intervention framework. Four sections support its implementation:

- how the intervention component is linked to the experience of NSFs, to explain how to link the actions with established practice;
- why an NSF should use this intervention component, explaining the benefits of its implementation;
- how the intervention component is to be implemented at different stages, with examples of the progression of actions; and
- the role that stakeholders play in implementing the intervention component, with each actor’s role and actions for developing the component.



COMMUNICATION

DEVELOP AND IMPLEMENT COMMUNICATION TO RAISE AWARENESS OF THE ACTIONS TAKEN TO PROMOTE HEALTH WITHIN THE SPORTS CLUB.



ENSURE INTERNAL CLUB COMMUNICATION ON HEALTH PROMOTION



How is this intervention component linked to the experience of NSFs?

- NSFs are used to disseminating materials to sports clubs for signposting or signage.
- NSFs may have a dedicated communication strategy and plan.



Why should an NSF use this intervention component?

- to respond to sports clubs, call on support for health promotion advocacy in sport;
- to take advantage of the sports clubs' network to raise awareness of health promotion and to show that health and well-being are goals of the club and its members; and
- to enhance sport performance and/or participation by disseminating messages on health and well-being to sports clubs' members.



How should this intervention component be implemented?

STAGE 1 Safe sport offer fostered by sports federations	STAGE 2 Sports federations promoting health	STAGE 3 Health promotion in sports federations	STAGE 4 Sports federation health promotion programs	STAGE 5 Health promoting sports federation
Inform sports clubs about legal requirements, and let them communicate them.	Propose specific signage or messages to communicate health promotion in sports clubs.	Organize an event to disseminate information on health topics and encourage clubs to post messages on health topics.	Propose guidelines for creating a communication plan on health promotion, and communicate regularly on club health promotion activities.	Disseminate examples on the sports federation website; use a specific hashtag in sports federation communication and a platform to share experience and collect input from affiliated sports clubs.

This intervention component contributes to **SUPPORTING** health-promoting sports clubs.



What role do stakeholders play in implementing this intervention components?

STAKEHOLDER	ACTION
Policy-maker or elected representative	Providing clear messages and relaying media campaign.
NSF employee	Proposing campaigns and guidelines for sports clubs to promote their health promotion activities.
Subnational sports federation employee	Creating and relaying a media campaign and the club's messages.
Sports club manager	Working on social networks and signage in the club.
Coaches	Using signposts and disseminating messages.
Sports participants	Providing inputs on communication activities.
Sports club members and volunteers	Disseminating message and suggesting activities to be communicated.





COMMUNICATION

DEVELOP AND IMPLEMENT COMMUNICATION TO RAISE AWARENESS OF THE ACTIONS TAKEN TO PROMOTE HEALTH IN THE SPORTS CLUB.



ENSURE THAT THE CLUB COMMUNICATES WITH THE COMMUNITY ON HEALTH PROMOTION



How is this intervention component linked to the experience of NSFs?

- NSSs are used to communicating their activities to various partners and stakeholders.
- NSFs have a dedicated communication strategy and officers.



Why should an NSF use this intervention component?

- to show stakeholders that sports federations and their affiliated clubs go beyond competition and that specific attention is paid to participants' health and well-being;
- to attract partners or stakeholders who could provide resources for health promotion; and
- to increase their legitimacy and those of its affiliated clubs as ethical, health-promoting organizations.



How should this intervention component be implemented?

STAGE 1 Safe sport offer fostered by sports federations	STAGE 2 Sports federations promoting health	STAGE 3 Health promotion in sports federations	STAGE 4 Sports federation health promotion programs	STAGE 5 Health promoting sports federation
Inform the community about legal requirements when entering sports facilities.	Propose specific signage or messages to communicate health promotion.	Offer a health promotion projects in the sports federation.	Propose guidelines to support sport clubs in developing their external communication strategy.	Disseminate examples of practice on the sports federation website; use a specific hashtag in sports federation communication and a platform and strategy to share information.

This intervention component contributes to **BEING** a health-promoting sports federation and **SUPPORTING** health-promoting sports clubs.



What role do stakeholders play in implementing this intervention components?

STAKEHOLDER	ACTION
Policy-maker or elected representative	Providing clear messages and relaying media campaigns.
NSF employee	Proposing template and guidelines.
Subnational sports federation employee	Promoting sport clubs' message to their stakeholders.
Sports club manager	Working on social network, press and media communication.
Coaches	Making members aware of the message to disseminate to their relatives.
Sports participants	Talking about sport clubs' activities in their community.
Sports club members and volunteers	Talking about sports clubs' activities in their community and neighbourhood.





EDUCATION

SUPPORT THE SPORTS CLUB, MANAGEMENT AND COACHES BY VARYING THE TYPE OF EDUCATION THEY RECEIVE, AND TAKE INTO ACCOUNT DIFFERENCES IN THE SPORTS PARTICIPANTS THEY COACH.

SUPPORT MANAGERS AND COACHES ACTIVELY ENGAGE IN GAINING KNOWLEDGE AND SKILLS TO PROMOTE HEALTH



How is this intervention component linked to the experience of NSFs?

- NSFs have experience in reviewing the skills and knowledge of their managers and coaches.
- NSFs partner with the social and health sectors, which could help to increase the knowledge and skills of their coaches and managers.



Why should an NSF use this intervention component?

- to solicit external resources to enhance knowledge and skills in its workforce;
- to enhance the quality of sport or health activities provided by affiliated clubs; and
- to facilitate implementation of national health promotion programmes and events.



How should this intervention component be implemented?

STAGE 1 Safe sport offer fostered by sports federations	STAGE 2 Sports federations promoting health	STAGE 3 Health promotion in sports federations	STAGE 4 Sports federation health promotion programs	STAGE 5 Health promoting sports federation
Remind managers and coaches of regulations on coaching certification.	Provide a list of reading and training to enhance the skills and knowledge of coaches and managers in health promotion.	Encourage coaches and managers to participate in training in health promotion, and propose a list of reading, online resources and a platform for exchange.	Propose training in delivering specific health promotion programmes to ensure the quality of delivery.	Accredit coaches and managers in public health training, support certification, and provide funding as an incentive.

This intervention component contributes to **SUPPORTING** health-promoting sports clubs.



What role do stakeholders play in implementing this intervention components?

STAKEHOLDER	ACTION
Policy-maker or elected representative	Support close relation between sport and health sectors.
NSF employee	Liaise with health promotion sectors, and foster national partnerships.
Subnational sports federation employee	Liaise with health promotion sectors, and foster local partnerships.
Sports club manager	Share experience, resources and knowledge in the club, and encourage others.
Coaches	Share experience, resources and knowledge in the club, and encourage others.
Sports participants	Share experience, resources and knowledge in the club, and encourage others.
Sports club members and volunteers	Share experience, resources and knowledge in the club, and encourage others.





EDUCATION

SUPPORT SPORTS CLUB MANAGERS AND COACHES BY VARYING THE TYPE OF EDUCATION THEY RECEIVE, AND TAKE INTO ACCOUNT DIFFERENCES IN THE SPORTS PARTICIPANTS THEY COACH.

TAILOR THE SUPPORT TO MANAGERS AND COACHES INDIVIDUALLY ACCORDING TO THE SPORTS PARTICIPANTS THEY COACH (MENTORING, COURSES, ONLINE TOOLS)



How is this intervention component linked to the experience of NSFs?

- A NSF often already provides training for coaches, with certification systems.
- A NSF may already have training programmes on health topics to support their affiliated clubs.



Why should a NSF use this intervention component?

- to build the capacity of the sports club workforce by training in health promotion;
- to recognize the diversity of sports clubs and their members; and
- to offer training to all contributors in sports clubs, including coaches, management and volunteers.



How should this intervention component be implemented?

STAGE 1 Safe sport offer fostered by sports federations	STAGE 2 Sports federations promoting health	STAGE 3 Health promotion in sports federations	STAGE 4 Sports federation health promotion programs	STAGE 5 Health promoting sports federation
Inform coaches of legal requirements.	Provide information (e.g. leaflets) for coaches or managers for increasing their knowledge in specific health topics.	Organize events or conferences on promoting specific health areas.	Promote programmes for health topics, including different educational options (e.g. online tools, leaflets, games).	Include specific programmes in sports federation policy. Offer a platform to share experience, online courses, mentoring for coaches and managers.

This intervention component contributes to **BEING** a health-promoting sports federation.



What role do stakeholders play in implementing this intervention components?

STAKEHOLDER	ACTION
Policy-maker or elected representative	Provide dedicated funding for sports federations and clubs to build their capacity to welcome a diverse range of members and players.
NSF employee	Create various forms of support to help sports clubs welcome diverse range of members and players.
Subnational sports federation employee	Disseminate the various forms of training, and provide mentoring for sports clubs to welcome a diverse range of members and players.
Sports club manager	Implement a mentoring and internal training system for managers and coaches to welcome a diverse range of members and players.
Coaches	Participate in training to welcome a diverse range of members and players.
Sports participants	Provide feedback on experience in practising sport.
Sports club members and volunteers	Support coaches' involvement in training, and suggest improvements in coaching practice.





EDUCATION

SUPPORT THE SPORTS CLUB, MANAGERS AND COACHES BY VARYING THE TYPE OF EDUCATION THEY RECEIVE, AND TAKE INTO ACCOUNT DIFFERENCES IN THE SPORTS PARTICIPANTS THEY COACH.

ENCOURAGE MANAGERS AND COACHES TO SUPPORT EACH OTHER IN PROMOTING HEALTH



How is this intervention component linked to the experience of NSFs?

- NSFs have developed platforms or support for their affiliated clubs at various meetings.
- NSFs provide guidance on good governance and project management in sports clubs.



Why should an NSF use this intervention component?

- to foster dissemination of health promotion skills and activities in clubs;
- to encourage new coaches and participants to share their experiences and to sensitize them on health promotion and its importance for sport performance and participation; and
- to work towards consideration of health promotion in sports clubs' policies.



How should this intervention component be implemented?

STAGE 1 Safe sport offer fostered by sports federations	STAGE 2 Sports federations promoting health	STAGE 3 Health promotion in sports federations	STAGE 4 Sports federation health promotion programs	STAGE 5 Health promoting sports federation
No action.	Provide information on consultations and advantages.	Organize events in sports clubs and locally to support collective dynamic on health promotion.	Offer support and programmes for development of participative approach and experience sharing in sports clubs.	Request sport clubs to form a health promotion commission, and have a representative on the executive board.

This intervention component contributes to **BEING** a health-promoting sports federation and **SUPPORTING** health-promoting sports clubs.



What role do stakeholders play in implementing this intervention components?

STAKEHOLDER	ACTION
Policy-maker or elected representative	Put health promotion on the agenda of sports clubs and federations.
NSF employee	Propose good practice and organizational structure to support exchange of practice among sports clubs.
Subnational sports federation employee	Propose local group of practice, and foster a specific commission on health promotion.
Sports club manager	Form a committee or group to share experience and support for health promotion.
Coaches	Form a committee or group to share experience and support for health promotion.
Sports participants	Offer expertise or experience to support health promotion in their sports clubs.
Sports club members and volunteers	Participate in sharing experience of health promotion, and support adhesion of others members.





EDUCATION

SUPPORT THE SPORTS CLUB, MANAGEMENT AND COACHES BY VARYING THE TYPE OF EDUCATION THEY RECEIVE AND TAKE INTO ACCOUNT DIFFERENCES IN THE SPORTS PARTICIPANTS THEY COACH.

PROPOSE A VARIETY OF WAYS FOR THE SPORTS CLUB TO RAISE AWARENESS ABOUT HEALTH PROMOTION



How is this intervention component linked to the experience of NSFs?

- NSFs can communicate the benefits of sport participation and sport for health and have experience in presenting their activities.
- NSFs provide support for their programme and have established strategies for disseminating information to their affiliated clubs.



Why should an NSF use this intervention component?

- to embed health promotion in sports federation communication and make it visible;
- to increase the audience and reach multiple stakeholders in different sectors; and
- to help affiliated sports clubs to adopt a clear, consistent message on health promotion.



How should this intervention component be implemented?

STAGE 1 Safe sport offer fostered by sports federations	STAGE 2 Sports federations promoting health	STAGE 3 Health promotion in sports federations	STAGE 4 Sports federation health promotion programs	STAGE 5 Health promoting sports federation
Propose signage and posts on legal requirements for sports practice.	Propose ready-to-use signage, posts on social network and press releases on health promotion.	Propose events to raise awareness on health promotion.	Propose recognition for health promotion programmes and promotion materials.	Propose a labelling system for health promotion, including events, signage and community of practice.

This intervention component contributes to **BEING** a health-promoting sports federation.



What role do stakeholders play in implementing this intervention components?

STAKEHOLDER	ACTION
Policy-maker or elected representative	Provide a clear message on health promotion in sport.
NSF employee	Create support for dedicated activities on health promotion.
Subnational sports federation employee	Propose events, disseminate activities and toolkits, advocate for health promotion at local level.
Sports club manager	Signpost support, and organize events.
Coaches	Signpost support, and organize events.
Sports participants	Volunteer at events and share with relatives.
Sports club members and volunteers	Signpost support. and organize events.





EDUCATION

SUPPORT THE SPORTS CLUB, ITS MANAGERS AND COACHES BY VARYING THE TYPE OF EDUCATION THEY RECEIVE, AND TAKE INTO ACCOUNT DIFFERENCES IN THE SPORTS PARTICIPANTS THEY COACH.



CREATE TOOLS AND TRAINING COURSES TO SUPPORT HEALTH PROMOTION IN SPORT CLUBS



How is this intervention component linked to the experience of NSFs?

- Coaches are trained by the NSF, with a certification system.
- NSF has education programmes on health topics to support their affiliated sports clubs.



Why should an NSF use this intervention component?

- to enhance capacity-building and ensure that the workforce is trained in health promotion;
- to facilitate implementation of sport federation health promotion programmes and report to NSF about the delivery of programmes; and
- to establish a common culture of health promotion and foster both national and local partnerships with public health institutions and other relevant sectors.



How should this intervention component be implemented?

STAGE 1 Safe sport offer fostered by sports federations	STAGE 2 Sports federations promoting health	STAGE 3 Health promotion in sports federations	STAGE 4 Sports federation health promotion programs	STAGE 5 Health promoting sports federation
Propose training in legal requirements for sport delivery.	Provide specific training on health topics (managers, coaches, volunteers).	Provide lifelong training in health promotion (managers, coaches, volunteers).	Propose specific training in health promotion programme delivery.	Integrate health promotion training into all mandatory sports federation training, and add a certification system for managers, coaches and volunteers.

This intervention component contributes to **BEING** a health-promoting sports federation and **SUPPORTING** health-promoting sports clubs.



What role do stakeholders play in implementing this intervention components?

STAKEHOLDER	ACTION
Policy-maker or elected representative	Advocate for health-promoting sports clubs, and include training in health promotion on the political agenda.
NSF employee	In collaboration with partners, develop health promotion education programmes, and deliver training and education in sports clubs.
Subnational sports federation employee	Deliver and advertise the content of training.
Sports club manager	Undergo training, apply it to managing practice, and advertise it in the club.
Coaches	Undergo training, apply it in coaching practice, and advertise it in the club.
Sports participants	Provide feedback on coaches' behaviour and expectations.
Sports club members and volunteers	Encourage managers and coaches to be trained and to apply their training in daily practice.





EXPERIENCE

IDENTIFY PAST CLUB EXPERIENCES, ORGANIZATIONAL READINESS AND THE REASONS AND QUALITY OF THE CLUB'S COMMITMENT TO PROMOTE HEALTH.

RELY ON EXISTING, EVIDENCE-BASED HEALTH PROMOTION TOOLS



How is this intervention component linked to the experience of NSFs?

- NSFs have links with partners, including academics and researchers.
- NSFs are used to finding updated information on the topics to be developed or used.



Why should an NSF use this intervention component?

- to build on best practice and foster innovation;
- to enhance the quality of sport practice and club members' experience; and
- to enhance capacity for health promotion, without creating new tools.



How should this intervention component be implemented?

STAGE 1 Safe sport offer fostered by sports federations	STAGE 2 Sports federations promoting health	STAGE 3 Health promotion in sports federations	STAGE 4 Sports federation health promotion programs	STAGE 5 Health promoting sports federation
No action.	Communicate existing evidence-based tools.	Provide a database of evidence-based tools and guidance on their use.	Base health promotion programme on evidence-based practices and tools.	Form partnerships with academics for evidence-based research on sports federation strategic plan, and remain informed of the latest evidence.

This intervention component contributes to **BEING** a health-promoting sports federation.



What role do stakeholders play in implementing this intervention components?

STAKEHOLDER	ACTION
Policy-maker or elected representative	Encourage development of evidence on health promotion in sports clubs, and create evidence-based tools.
NSF employee	Form partnerships with academics for evidence-based research on the sports federation strategic plan, and remain informed about the latest evidence.
Subnational sports federation employee	Disseminate evidence-based tools to sports clubs, and guide them in their implementation.
Sports club manager	Implement the tools, and disseminate evidence to sports club members.
Coaches	Implement the tools, and disseminate evidence to sports club members.
Sports participants	Implement the tools, and disseminate evidence to sports club members.
Sports club members and volunteers	Implement the tools, and disseminate evidence to sports club members.





EXPERIENCE

IDENTIFY PAST SPORTS CLUB EXPERIENCES, ORGANIZATIONAL READINESS AND THE REASONS AND QUALITY OF THE CLUB'S COMMITMENT TO PROMOTE HEALTH.

RELY ON THE EXPERIENCE OF OTHER CLUBS IN DEVELOPING HEALTH PROMOTION ACTIONS



How is this intervention component linked to the experience of NSFs?

- NSFs have various working groups and direct contact with their affiliated clubs in training and support programmes.
- NSF have different label or recognition awards for sports clubs to obtain recognition or access to funding streams.



Why should an NSF use this intervention component?

- to build on real-life experience and share good practice;
- to create a support network in the federation for peer learning; and
- to increase the capacity of the workforce in health promotion.



How should this intervention component be implemented?

STAGE 1 Safe sport offer fostered by sports federations	STAGE 2 Sports federations promoting health	STAGE 3 Health promotion in sports federations	STAGE 4 Sports federation health promotion programs	STAGE 5 Health promoting sports federation
No action	Provide examples of good practice on the sports federation website.	Create an open working group and committee to share experience (i.e. an online platform).	Co-construct programmes with sports clubs, pilot-test them before implementation and share results.	Initiate a label programme that values the sports club's investment, and participation in a mentoring system with other clubs and a library of projects.

This intervention component contributes to **BEING** a health-promoting sports federation.



What role do stakeholders play in implementing this intervention components?

STAKEHOLDER	ACTION
Policy-maker or elected representative	Inscribe health promotion on the agenda of the sports federation, and offer a policy for intersectoral shared practice.
NSF employee	Create a group of practice, offer a library of examples, a label and mentoring.
Subnational sports federation employee	Create a group of practice, offer a library of examples, a label and mentoring.
Sports club manager	Seek other examples, or share health promotion activities.
Coaches	Seek other examples, or share health promotion activities.
Sports participants	Seek other examples, or share health promotion activities.
Sports club members and volunteers	Seek other examples, or share health promotion activities.





GOALS

WRITE DOWN THE SPORTS CLUBS HEALTH PROMOTION GOALS, USING POSITIVE MESSAGES, ADAPTED TO SPORTS LANGUAGE, CULTURE AND THE PLACEMENT OF HEALTH PROMOTION WITHIN THE CLUB, TAKING SOCIAL INEQUITIES INTO ACCOUNT

DEFINE THE GOALS OF HEALTH PROMOTION



How is this intervention component linked to the experience of NSFs?

- NSFs have strategic or development plans and are used to setting both short- and long-term goals.
- NSFs probably already have goals for health (e.g. social, mental or physical health of participants) that could be included in a general health promotion goal.



Why should an NSF use this intervention component?

- to set clear objectives for developing health promotion in the federation and to support health promotion in affiliated clubs;
- to ensure financial resources for health promotion activities and communicate them within and outside the federation (e.g. clubs, stakeholders); and
- to be more open to new policy development, whereby new health topics introduced by policy-makers are considered by the federation and affiliated clubs.



How should this intervention component be implemented?

STAGE 1 Safe sport offer fostered by sports federations	STAGE 2 Sports federations promoting health	STAGE 3 Health promotion in sports federations	STAGE 4 Sports federation health promotion programs	STAGE 5 Health promoting sports federation
Ensure that goals meet legal requirements.	Include goals on specific health topics (citizenship, injury prevention, doping) in the strategic plan of the sports federation.	Guide sports clubs in defining their goals for health promotion.	Consider health promotion as a goal that covers several health topics and programmes under one umbrella concept.	Consider health promotion as a transversal goal in policy development, and have goals of integrating health into every decision-making process

This intervention component contributes to **BEING** a health-promoting sports federation and **SUPPORTING** health-promoting sports clubs.



What role do stakeholders play in implementing this intervention components?

STAKEHOLDER	ACTION
Policy-maker or elected representative	Provide guidelines and goals for health promotion in a sports federation.
NSF employee	Set health promotion goals for the sports federation and its affiliated clubs.
Subnational sports federation employee	Disseminate and implement the health promotion goals in the sports federation and its affiliated clubs.
Sports club manager	Disseminate and implement the health promotion goals.
Coaches	Disseminate and implement the health promotion goals.
Sports participants	Be aware of and implement the health promotion goals.
Sports club members and volunteers	Disseminate and implement the health promotion goals.



GOALS



MOBILIZATION

MOBILIZE PEOPLE TO MANAGE THE DEVELOPMENT OF HEALTH PROMOTION.

MOBILIZE SPORTS CHAMPIONS TO SUPPORT THE DEVELOPMENT OF HEALTH PROMOTION WITHIN YOUR CLUB



How is this intervention component linked to the experience of NSFs?

- NSFs have close relationships with high-level athletes through organizing competitions and funding programmes.
- NSFs encourage sports clubs to implement national programmes or actions at grassroots level.



Why should an NSF use this intervention component?

- to inspire and motivate clubs through sports champions;
- to enhance the visibility of health promotion in the federation and in clubs;
- to generate collective commitment and support through the involvement of an athlete; and
- to deliver messages from a sport star on their personal experiences, background or qualifications.



How should this intervention component be implemented?

STAGE 1 Safe sport offer fostered by sports federations	STAGE 2 Sports federations promoting health	STAGE 3 Health promotion in sports federations	STAGE 4 Sports federation health promotion programs	STAGE 5 Health promoting sports federation
No action	Health promotion actions by a high-level athlete or sports club	Recruit an appropriate ambassador for each health topic or project, and associate its image with the programme. Educate and support the champion in the health topic.	Involve the champion in health promotion and dissemination, including at events.	Encourage and support each champion to develop health promotion actions or programmes in their clubs, by engaging them in programme design, implementation and dissemination.

This intervention component contributes to **SUPPORTING** health-promoting sports clubs.



What role do stakeholders play in implementing this intervention components?

STAKEHOLDER	ACTION
Policy-maker or elected representative	Encourage recognition of health promotion by a high-level athlete.
NSF employee	<p>Identify appropriate champions for specific programmes.</p> <p>Involve champions in national health promotion initiatives.</p> <p>Support subnational clubs in involving champions in health promotion.</p>
Subnational sports federation employee	<p>Identify appropriate champions for specific programmes.</p> <p>Encourage and support each champion in health promotion actions or programmes in and with their clubs.</p>
Sports club manager	Contact champions at their clubs, and ask them to contribute.
Coaches	Contact champions at their clubs, and ask them to contribute.
Sports participants	Benefit from programmes and activities supported by the champion.
Sports club members and volunteers	Encourage champions to take part as ambassadors and support club activities.



MOBILIZATION

MOBILIZE PEOPLE TO MANAGE THE DEVELOPMENT OF HEALTH PROMOTION.

MOBILIZE LOCAL DECISION-MAKERS AND ELECTED OFFICIALS TO PROMOTE HEALTH WITHIN THE SPORTS CLUB



How is this intervention component linked to the experience of NSFs?

- Regional sports federations have relations with policy-makers and municipalities to foster their activities.
- NSFs are used to signing partnership with both private and public organizations.



Why should an NSF use this intervention component?

- to enhance the visibility of and work on health promotion in the federation and in clubs;
- to generate collective commitment and support through partnerships with local authorities; and
- to learn and share experiences with local stakeholders, especially policy-makers.



How should this intervention component be implemented?

STAGE 1 Safe sport offer fostered by sports federations	STAGE 2 Sports federations promoting health	STAGE 3 Health promotion in sports federations	STAGE 4 Sports federation health promotion programs	STAGE 5 Health promoting sports federation
No action.	Communicate sports clubs' activities in health promotion to local decision-makers.	Organize events on health promotion with local decision-makers.	Form a partnership with local municipality and policy-makers for commitment to and implementation of health promotion.	Through the partnership, include sports club's health promotion activities in local decision-makers' policies and actions, and become members of local interest groups.

This intervention component contributes to **SUPPORTING** health-promoting sports clubs.



What role do stakeholders play in implementing this intervention components?

STAKEHOLDER	ACTION
Policy-maker or elected representative	Offer partnership and policy on health promotion with sports clubs.
NSF employee	Foster and provide guidance on partnerships with local authorities, and communicate with national organization of municipalities and networks.
Subnational sports federation employee	Foster and provide guidance on partnerships with local authorities.
Sports club manager	Identify local policies and individuals that support health promotion seek partnerships.
Coaches	Mobilize resources for training and other activities in the partnership.
Sports participants	Mobilize resources for training and other activities in the partnership.
Sports club members and volunteers	Mobilize resources for sports clubs' daily activities from partnership.



MONITOR HEALTH PROMOTION ACTIVITIES IN DAILY PRACTICE USING A “SMALL STEPS” PHYLOSOPHY, AND REVIEW ANY CHANGES.



REVIEW THE HEALTH PROMOTION POLICIES OF THE SPORTS CLUB



How is this intervention component linked to the experience of NSFs?

- NSFs issue annual reports and are used to evaluating their programmes.
- NSFs can help sport clubs to define their objectives and make a development plan.



Why should an NSF use this intervention component?

- to learn from sports clubs' policies and their implementation;
- to ensure that sports clubs have included their commitment to health promotion in their club development plan; and
- to share good practices in terms of health promotion.



How should this intervention component be implemented?

STAGE 1 Safe sport offer fostered by sports federations	STAGE 2 Sports federations promoting health	STAGE 3 Health promotion in sports federations	STAGE 4 Sports federation health promotion programs	STAGE 5 Health promoting sports federation
Ensure sports clubs policy meets legal requirements.	Communicate the importance of reviewing health promotion policies of sports clubs.	Encourage sports clubs to review their health promotion policies, and provide guidelines.	Institute a reporting system on which sports clubs can upload their development plan, including health promotion.	Provide guidance on reviewing health promotion policies, good examples, with a reporting and accreditation system to acknowledge the sports club's health promotion policies.

This intervention component contributes to **BEING** a health-promoting sports federation and **SUPPORTING** health-promoting sports clubs.



What role do stakeholders play in implementing this intervention components?

STAKEHOLDER	ACTION
Policy-maker or elected representative	Provide clear indicators of policy implementation and evaluation of health promotion.
NSF employee	Provide guidance on reviewing health promotion policies, with examples; institute a report and accreditation system to acknowledge the health promotion policies of sports clubs.
Subnational sports federation employee	Provide guidance on reviewing health promotion policies, with examples, and support use of a reporting and accreditation system.
Sports club manager	Define, report and evaluate the sports club's health promotion policies.
Coaches	Participate in reviewing the health promotion policies of the sports club.
Sports participants	Participate in reviewing the health promotion policies of the sports club.
Sports club members and volunteers	Participate in reviewing the health promotion policies of the sports club.





MOTIVATION

UNDERSTAND WHAT MOTIVATES COACHES TO IMPLEMENT HEALTH PROMOTION, AND EMPOWER THEM.

TAKE COACHES' MOTIVATION FOR COACHING AND THEIR FUTURE EXPECTATIONS INTO ACCOUNT



How is this intervention component linked to the experience of NSFs?

- NSFs provide dedicated guidance and training for coaches, which could include their retention and how training affects the evolution of their perspective.
- NSFs set expectations for clubs on coach training and qualifications, which could include examining and acknowledging coaches' expectations and motivations.



Why should an NSF use this intervention component?

- to consider coaches' well-being and working conditions as part of health promotion;
- to retain a trained workforce in the clubs and avoid turnover of coaches; and
- to support individual progress within the organization.



How should this intervention component be implemented?

STAGE 1 Safe sport offer fostered by sports federations	STAGE 2 Sports federations promoting health	STAGE 3 Health promotion in sports federations	STAGE 4 Sports federation health promotion programs	STAGE 5 Health promoting sports federation
No action.	Communicate regulations for coaches' qualifications and training.	Encourage clubs to balance the groups to be coached, taking coaches' expectations into account.	Provide guidance on retaining volunteer coaches; establish good working conditions for coaches and in training.	Establish a template for a coach career plan and a mentoring system for coaches.

This intervention component contributes to **SUPPORTING** health-promoting sports clubs.



What role do stakeholders play in implementing this intervention components?

STAKEHOLDER	ACTION
Policy-maker or elected representative	Establish guidelines for volunteering in sport to ensure the well-being of coaches and managers.
NSF employee	Provide guidance on retaining volunteer coaches, and establish good working conditions and training for coaches.
Subnational sports federation employee	Propose training and support for coach retention to meet coaches' expectations.
Sports club manager	Establish regular formal and informal discussions on coaches' expectations and motivation and advice on training.
Coaches	Clearly communicate motivation, expectations and training perspectives.
Sports participants	Support the retention of coaches by acknowledging their activities.
Sports club members and volunteers	Support the retention of coaches by acknowledging their activities.



MOTIVATION



MOTIVATION

UNDERSTAND WHAT MOTIVATES COACHES TO IMPLEMENT HEALTH PROMOTION, AND EMPOWER THEM.



STRENGTHEN COACHES' AUTONOMY TO PROMOTE HEALTH



How is this intervention component linked to the experience of NSFs?

- NSFs provide guidance and training for coaches, which could include health promotion.
- NSFs set expectations for clubs on training and qualifications of coaches, which could be linked to health promotion.



Why should an NSF use this intervention component?

- to consider coaches' knowledge and willingness to promote health;
- to retain a workforce trained in health promotion in clubs; and
- to enhance the quality of the sports club's activities in training, competition, events and programmes.



How should this intervention component be implemented?

STAGE 1 Safe sport offer fostered by sports federations	STAGE 2 Sports federations promoting health	STAGE 3 Health promotion in sports federations	STAGE 4 Sports federation health promotion programs	STAGE 5 Health promoting sports federation
Inform coaches of the legal requirements.	Communicate the health promotion policies and activities of NSFs.	Organize events that demonstrate coaches' role in health promotion.	Provide guidance, training and programmes to support coaches' investment in health promotion.	Encourage peer learning, working groups and a platform with resources for coaches to promote health.

This intervention component contributes to **BEING** a health-promoting sports federation.



What role do stakeholders play in implementing this intervention components?

STAKEHOLDER	ACTION
Policy-maker or elected representative	Reward coaches' investment in health promotion financially and non-financially, and set regulations to recognize their expertise.
NSF employee	Generate (peer-) learning through a working group and platform with resources for coaches to promote health.
Subnational sports federation employee	Encourage peer learning through working groups and a platform with resources for coaches to promote health.
Sports club manager	Allow coaches to offer specific projects and expertise in health promotion.
Coaches	Define and develop the health promotion skills of coaches to enhance the quality of their coaching.
Sports participants	Define and recognize coaches' skills in health promotion.
Sports club members and volunteers	Define and develop the health promotion skills of coaches to enhance the quality of their coaching.





PARTICIPATIVE APPROACH

VALUE A PARTICIPATIVE APPROACH TO PROMOTE HEALTH THROUGHOUT THE NSF, CLUBS AND BEYOND.

IDENTIFY AND CALL ATTENTION TO THE HEALTH PROMOTION ACTIONS OF INDIVIDUALS



How is this intervention component linked to the experience of NSFs?

- NSFs are used to a “good practice” communication strategy.
- NSFs issue reports (e.g. annual reports) that could be used to monitor and review good practices of sports clubs.



Why should an NSF use this intervention component?

- to share examples of successful individual health promotion actions;
- to learn from stories, experiences and skills development in health promotion; and
- to increase the visibility of health promotion at all levels of the sports federation.



How should this intervention component be implemented?

STAGE 1 Safe sport offer fostered by sports federations	STAGE 2 Sports federations promoting health	STAGE 3 Health promotion in sports federations	STAGE 4 Sports federation health promotion programs	STAGE 5 Health promoting sports federation
No action.	Communicate on health promotion activities to sports participants.	Organize events to recognize good practices in individual health promotion.	Propose an empowerment programme for sports participants, and advertise them in sports clubs.	Establish a system for reporting exemplary action, and offer accreditation for exceptional individual contributions to health promotion.

This intervention component contributes to **BEING** a health-promoting sports federation and **SUPPORTING** health-promoting sports clubs.



What role do stakeholders play in implementing this intervention components?

STAKEHOLDER	ACTION
Policy-maker or elected representative	Encourage the sports federation to recognize health promotion actions.
NSF employee	Provide a system for reporting exemplary action and a reward for exceptional individual contributions to health promotion.
Subnational sports federation employee	Encourage clubs to report and disseminate individual good practices in health promotion.
Sports club manager	Encourage coaches and participants to report and disseminate individual good practices in health promotion.
Coaches	Disseminate health promotion good practices by coaches and participants internally and in the community.
Sports participants	Communicate on individual health promotion good practices to other sports participants, coaches, club managers.
Sports club members and volunteers	Communicate on individual health promotion good practices to other sports participants, coaches, club managers.





PARTICIPATIVE APPROACH

VALUE A PARTICIPATIVE APPROACH TO PROMOTE HEALTH THROUGHOUT THE NSF, CLUBS AND BEYOND.

IDENTIFY AND CALL ATTENTION TO MANAGEMENT HEALTH PROMOTION ACTIONS



How is this intervention component linked to the experience of NSFs?

- NSFs have a “good practice” communication strategy.
- NSFs report practice (e.g. in annual reports), which could help to share good practices in health promotion with managers.



Why should an NSF use this intervention component?

- to share exemplary actions in sports clubs;
- to learn club stories, project implementation and skills development in health promotion; and
- to increase the visibility of health promotion at all levels of the sports federation.



How should this intervention component be implemented?

STAGE 1 Safe sport offer fostered by sports federations	STAGE 2 Sports federations promoting health	STAGE 3 Health promotion in sports federations	STAGE 4 Sports federation health promotion programs	STAGE 5 Health promoting sports federation
No action.	Communicate on health topics.	Organize events to recognize good practices in health promotion.	Ensure that managers recognize and value health promotion actions, and train them in empowerment.	Establish a system to report exemplary programmes, and recognize exceptional contributions to health promotion.

This intervention component contributes to **BEING** a health-promoting sports federation.



What role do stakeholders play in implementing this intervention components?

STAKEHOLDER	ACTION
Policy-maker or elected representative	Encourage sports federations to recognize the importance of participation in developing and implementing health promotion actions.
NSF employee	Establish a system for reporting exemplary actions, and offer recognition of exceptional contributions to health promotion.
Subnational sports federation employee	Encourage clubs to share good practices, and organize events to evaluate and disseminate them.
Sports club manager	Disseminate good practice in health promotion internally and in the community.
Coaches	Disseminate good practice in health promotion internally and in the community.
Sports participants	Communicate good practice in health promotion by the club.
Sport club members and volunteers	Disseminate good practice in health promotion internally and in the community.





PARTNERS

PARTNER WITH OTHER ORGANIZATIONS TO CREATE A COMMON CULTURE AND COLLABORATIVE PROCESS TO PROMOTE HEALTH.



IDENTIFY PARTNERS FOR HEALTH PROMOTION (CLUBS, AGENCIES, REGIONAL AUTHORITIES, HEALTH PROFESSIONALS)



How is this intervention component linked to the experience of NSFs?

- NSFs have experience in creating partnerships with both the public and the private sector.
- NSFs already have an interdisciplinary panel of experts in health promotion, who could solicit their networks or organizations for partnerships.



Why should an NSF use this intervention component?

- to increase the number of people working in health promotion;
- to gain knowledge, skills and expertise in health promotion; and
- to help sports clubs to form local partnerships to integrate their action into the community.



How should this intervention component be implemented?

STAGE 1 Safe sport offer fostered by sports federations	STAGE 2 Sports federations promoting health	STAGE 3 Health promotion in sports federations	STAGE 4 Sports federation health promotion programs	STAGE 5 Health promoting sports federation
No action.	Communication on health promotion organization and mission.	Propose guidelines on developing partnerships for promoting health topics.	Propose a national partnership with health promotion actors for developing specific programmes.	Include national partners and their local representatives in developing and implementing a health-in-all policy to foster health promotion.

This intervention component contributes to **BEING** a health-promoting sports federation.



What role do stakeholders play in implementing this intervention components?

STAKEHOLDER	ACTION
Policy-maker or elected representative	Set the scene for health-in-all-policies and intersectoral practice between sport and health stakeholders.
NSF employee	Include national partners and their local representatives in development and implementation of a health-in-all policy to foster health promotion.
Subnational sports federation employee	Match health promotion partners with sports clubs to foster health promotion.
Sports club manager	Seek and identify partners for health promotion in their community.
Coaches	Use partners' resources and skills in coaching practice.
Sports participants	Use personal networks to foster partnership in the community.
Sports club members and volunteers	Use partners' resources and skills in volunteering.



MOTIVATION



PLANNING

CREATE AN IMPLEMENTATION PLAN TO ACHIEVE THE WRITTEN HEALTH PROMOTION GOALS.

ENCOURAGE SUSTAINABLE HEALTH PROMOTION ACTIONS



How is this intervention component linked to the experience of NSFs?

- NSFs have experience in supporting long-term actions and long-term planning, and not only short-term events.
- NSFs have experience in establishing the feasibility and planning of their actions.



Why should an NSF use this intervention component?

- to consider long-term implementation of health promotion practice;
- to decrease the long-term financial and human resource costs in health promotion development;
- to support sports clubs in thinking and planning beyond one sporting season.



How should this intervention component be implemented?

STAGE 1 Safe sport offer fostered by sports federations	STAGE 2 Sports federations promoting health	STAGE 3 Health promotion in sports federations	STAGE 4 Sports federation health promotion programs	STAGE 5 Health promoting sports federation
No action.	Communicate criteria for sustainable health promotion actions.	Propose guidelines and support for applying sustainable health promotion criteria to programme implementation.	Ensure that each health promotion programme includes a section on sustainability and monitoring.	Encourage clubs to include sustainable health promotion criteria in their actions and strategies for scaling up their development plan. Include a section in sports federation policy and indicators to evaluate the sustainability of policy evaluation.

This intervention component contributes to **BEING** a health-promoting sports federation.



What role do stakeholders play in implementing this intervention components?

STAKEHOLDER	ACTION
Policy-maker or elected representative	Encourage sports federations to include sustainable health promotion policies in their charters.
NSF employee	Encourage clubs to provide input on use of sustainable health promotion criteria in their actions and in strategies for scaling up their programmes.
Subnational sports federation employee	Propose guidelines and support for applying sustainable health promotion criteria to proposed actions.
Sports club manager	Use criteria for sustainable health promotion when developing actions.
Coaches	Use criteria for sustainable health promotion when developing actions.
Sports participants	Share experience and expectations for the sustainability of health promotion actions.
Sports club members and volunteers	Share experience and expectations for the sustainability of health promotion actions.





PLANNING

CREATE AN IMPLEMENTATION PLAN TO ACHIEVE WRITTEN HEALTH PROMOTION GOALS.

PLAN FUTURE ACTIONS FROM AN EVALUATION OF CURRENT ACTIONS



How is this intervention component linked to the experience of NSFs?

- NSFs have experience in creating and developing multi-annual plans and programmes, in evaluating their work and in issuing an annual report.
- NSFs already conduct multi-annual events and activities, which are evaluated and improved from one year to the next.



Why should an NSF use this intervention component?

- to avoid replicating unsuccessful or ineffective actions;
- to encourage continuity in action planning and foster the transferability of national programmes from one club to others; and
- to use learnt experience and consider previous achievements.



How should this intervention component be implemented?

STAGE 1 Safe sport offer fostered by sports federations	STAGE 2 Sports federations promoting health	STAGE 3 Health promotion in sports federations	STAGE 4 Sports federation health promotion programs	STAGE 5 Health promoting sports federation
No action.	Identify and communicate to sports club members previous actions and programmes that could be used by other sports federations or clubs.	Propose guidelines on action planning for specific health topics.	Propose systematic evaluation and reporting of sports club's health promotion actions, with success indicators for programme implementation.	Establish a monitoring system of sports club health promotion actions, with an open access data base, where sports federation clubs can be inspired by previous actions and find guidance on scaling up specific actions.

This intervention component contributes to **BEING** a health-promoting sports federation.



What role do stakeholders play in implementing this intervention components?

STAKEHOLDER	ACTION
Policy-maker or elected representative	Require a report of previous action in the sports federation funding report.
NSF employee	Monitor the sport club's health promotion actions, and use an open access database, from which sports federations and clubs can be inspired by previous actions, with guidance on scaling up specific actions.
Subnational sports federation employee	Disseminate good practice on basing health promotion actions on previous actions.
Sports club manager	Consider evaluating and reporting actions to frame future actions.
Coaches	Participate in evaluation of actions to plan future actions.
Sports participants	Participate in evaluation of actions to plan future actions.
Sports club members and volunteers	Participate in evaluation of actions to plan future actions.





RESOURCES

IDENTIFY, DEVELOP OR REVIEW FINANCIAL, HUMAN, MATERIAL AND CAPACITY-BUILDING RESOURCES FOR INVESTING IN HEALTH PROMOTION.

REVIEW CURRENT SKILLS AND KNOWLEDGE AVAILABLE TO PROMOTE HEALTH



How is this intervention component linked to the experience of NSFs?

- NSFs have experience in recognizing the benefits of sport practice and also in developing programmes or actions on health topics.
- NSFs already have training courses and toolkits that could be used to promote health.



Why should an NSF use this intervention component?

- to evaluate and use material and to recognize individual expertise;
- to ensure that actions are based on existing resources and knowledge; and
- to merge actions or programmes on specific health topics under health promotion.



How should this intervention component be implemented?

STAGE 1 Safe sport offer fostered by sports federations	STAGE 2 Sports federations promoting health	STAGE 3 Health promotion in sports federations	STAGE 4 Sports federation health promotion programs	STAGE 5 Health promoting sports federation
No action.	Communicate a list of programmes and courses on health topics or health promotion.	Provide guidance and a checklist on the skills required to organize health promotion events.	Identify sport federation employee profiles, skills and knowledge for investing in health promotion.	Establish a directory of sports federation employees and volunteers in sports clubs who could support health promotion.

This intervention component contributes to **BEING** a health-promoting sports federation.



What role do stakeholders play in implementing this intervention components?

STAKEHOLDER	ACTION
Policy-maker or elected representative	Advocate and encourage sports organizations to provide health promotion.
NSF employee	Draw up a directory of sports federation employees and volunteers in sports clubs who could support health promotion.
Subnational sports federation employee	Draw up a directory of sports federation employees and volunteers in sports clubs who could support health promotion.
Sports club manager	Identify sports club members with relevant skills and knowledge.
Coaches	Identify sports club members with skills and knowledge that could be shared.
Sports participants	Share skills and knowledge in health promotion with coaches and sports club managers.
Sports club members and volunteers	Identify skills and knowledge that could be shared with coaches and sport club managers.





RESOURCES

IDENTIFY, DEVELOP OR REVIEW FINANCIAL, HUMAN, MATERIAL AND CAPACITY-BUILDING RESOURCES AVAILABLE TO INVEST IN HEALTH PROMOTION.

IDENTIFY AND MOBILIZE TOOLS FOR HEALTH PROMOTION DEVELOPMENT WITHIN SPORTS CLUBS



How is this intervention component linked to the experience of NSFs?

- NSFs are experienced in recognizing the benefits of sport practice, as well as developing programmes or actions on health topics.
- NSFs already have links with partners and organize training and toolkits that could be used to promote health.



Why should an NSF use this intervention component?

- to use existing material and build on it;
- to ensure that actions are built on existing resources and knowledge; and
- to merge actions or programmes on health topics under the health promotion umbrella and avoid duplication of tools.



How should this intervention component be implemented?

STAGE 1 Safe sport offer fostered by sports federations	STAGE 2 Sports federations promoting health	STAGE 3 Health promotion in sports federations	STAGE 4 Sports federation health promotion programs	STAGE 5 Health promoting sports federation
No action.	Publish tools to promote health in sports clubs.	Propose guidance and tools to promote specific health topics.	Provide a database of tools for health promotion, and disseminate them to guide sports clubs in implementing them.	Evaluate the quality and transferability of tools, provide guidance on implementation and training in their use.

This intervention component contributes to **SUPPORTING** health-promoting sports clubs.



What role do stakeholders play in implementing this intervention components?

STAKEHOLDER	ACTION
Policy-maker or elected representative	Encourage development of tools and good practice for health promotion in sport.
NSF employee	Disseminate evidence-based tools to sports clubs, and guide them in their use.
Subnational sports federation employee	Disseminate evidence-based tools to sports clubs, and guide them in their use
Sports club manager	Use the tools, and disseminate evidence to sports club members.
Coaches	Use the tools, and disseminate evidence to sports club members.
Sports participants	Use the tools, and disseminate evidence to sports club members.
Sports club members and volunteers	Use the tools, and disseminate evidence to sports club members.





RESOURCES

IDENTIFY, DEVELOP OR REVIEW FINANCIAL, HUMAN, MATERIAL AND CAPACITY-BUILDING RESOURCES AVAILABLE TO INVEST IN HEALTH PROMOTION.

IDENTIFY FUNDING FOR HEALTH PROMOTION ACTIONS



How is this intervention component linked to the experience of NSFs?

- NSFs have experience in identifying and monitoring funding calls of interest to them or to sport clubs.
- NSFs are skilled in answering funding calls and producing reports.



Why should an NSF use this intervention component?

- to increase the resources available for health promotion;
- to showcase the achievements of sports federations and clubs by recognition in funding calls; and
- to support development of sports clubs by answering a funding call.



How should this intervention component be implemented?

STAGE 1 Safe sport offer fostered by sports federations	STAGE 2 Sports federations promoting health	STAGE 3 Health promotion in sports federations	STAGE 4 Sports federation health promotion programs	STAGE 5 Health promoting sports federation
No action.	Communicate funding streams available from various organizations.	Guide sports clubs in identifying funding for specific health topics.	Provide a database of funding and deadlines, and guide sports clubs in drafting funding application.	Evaluate the relevance of funding, and provide guidance and training on use.

This intervention component contributes to **BEING** a health-promoting sports federation.



What role do stakeholders play in implementing this intervention components?

STAKEHOLDER	ACTION
Policy-maker or elected representative	Offer funding streams to sports organizations to promote health.
NSF employee	Evaluate the relevance of funding, and provide guidance and training on use.
Subnational sports federation employee	Evaluate the relevance of funding, and provide guidance and training on use.
Sports club manager	Mobilize resources and knowledge to answer funding calls.
Coaches	List requirements for funding and resources, and help in framing applications.
Sports participants	List requirements for funding and resources, and help in framing applications.
Sports club members and volunteers	List requirements for funding and resources, and help in framing applications.





RESOURCES

IDENTIFY, DEVELOP OR REVIEW FINANCIAL, HUMAN, MATERIAL AND CAPACITY-BUILDING RESOURCES AVAILABLE TO INVEST IN HEALTH PROMOTION.

ESTABLISH A NATIONAL RESOURCE SITE FOR HEALTH PROMOTION WITHIN SPORTS CLUBS



How is this intervention component linked to the experience of NSFs?

- NSFs already have websites, some of which include health topics or health promotion.
- NSFs often have resources, tools and training that could be shared on a national website.



Why should an NSF use this intervention component?

- to enable and facilitate access to evidence-based material; and
- to combine health promoting actions or programmes under a single health promotion umbrella.



How should this intervention component be implemented?

STAGE 1 Safe sport offer fostered by sports federations	STAGE 2 Sports federations promoting health	STAGE 3 Health promotion in sports federations	STAGE 4 Sports federation health promotion programs	STAGE 5 Health promoting sports federation
No action.	Dedicate a page on the sports federation website to health promotion.	Dedicate a section on the sports federation website that includes case studies of good practice.	Dedicate a section on the sports federation website to promote national health promotion programmes.	Dedicate a section on the sports federation website providing case studies of good practice, tools, evidence, links to external websites, and a discussion forum.

This intervention component contributes to **BEING** a health-promoting sports federation.



What role do stakeholders play in implementing this intervention components?

STAKEHOLDER	ACTION
Policy-maker or elected representative	Communicate clear messages on health promotion in sports that could be promoted by the NSF.
NSF employee	Dedicate a section on its website giving case studies of good practice, tools, evidence, links to other websites and a discussion forum.
Subnational sports federation employee	Promote the national website and its resources.
Sports club manager	Access the national website and its resources.
Coaches	Access the national website and its resources.
Sports participants	Access the national website and its resources.
Sports club members and volunteers	Access the national website and its resources.





RESOURCES

IDENTIFY, DEVELOP OR REVIEW FINANCIAL, HUMAN, MATERIAL AND CAPACITY-BUILDING RESOURCES FOR INVESTMENT IN HEALTH PROMOTION.

ESTABLISH A NATIONAL SPOKESPERSON FOR HEALTH PROMOTION IN SPORTS CLUBS



How is this intervention component linked to the experience of NSFs?

- NSFs have appointed people to address various health topics.
- NSFs often have a medical committee, in which health promotion could be discussed.



Why should an NSF use this intervention component?

- to ensure that a single individual is clearly identified as the contact for health promotion;
- to provide an ambassador who can bring people together to discuss health topics; and
- to clearly define the roles and missions for a health-promoting sports federation.



How should this intervention component be implemented?

STAGE 1 Safe sport offer fostered by sports federations	STAGE 2 Sports federations promoting health	STAGE 3 Health promotion in sports federations	STAGE 4 Sports federation health promotion programs	STAGE 5 Health promoting sports federation
No action.	Communicate a list of employees and their functions in the sports federation.	Appoint different employees to work on specific health topics.	Appoint a specific employee for health promotion to link people and programmes to the health promotion concept.	Appoint a board representative and a specific commission for health promotion in the NSF.

This intervention component contributes to **BEING** a health-promoting sports federation.



What role do stakeholders play in implementing this intervention components?

STAKEHOLDER	ACTION
Policy-maker or elected representative	Express expectations and support for a network responsible for a health-promoting sports federation.
NSF employee	Support creation of a specific commission for health promotion in the NSF.
Subnational sports federation employee	Provide the name, contact details and role of the person and committee appointed for health promotion in sports clubs.
Sports club manager	Communicate the name, contact details and role of the person and committee appointed for health promotion to sports club members.
Coaches	Communicate the name, contact details and role of the person and committee appointed for health promotion to sports club members.
Sports participants	Communicate the name, contact details and role of the person and committee appointed for health promotion to sports club members.
Sports club members and volunteers	Communicate the name, contact details and role of the person and committee appointed for health promotion to sports club members.





RESOURCES

IDENTIFY, DEVELOP OR REVIEW FINANCIAL, HUMAN, MATERIAL AND CAPACITY-BUILDING RESOURCES FOR INVESTMENT IN HEALTH PROMOTION.

CREATE AND HOST A REGIONAL AND A LOCAL NETWORK OF HEALTH PROMOTION MENTORS IN SPORTS CLUBS



How is this intervention component linked to the experience of NSFs?

- NSFs already meet with regional stakeholders and attribute networking tasks at that level.
- NSFs already provide training in health topics or health promotion, into which mentoring could be incorporated.



Why should an NSF use this intervention component?

- to capitalize on local experience, skills and knowledge on health promotion;
- to use the resources in sports federation networks and ensure programme implementation and transferability; and
- to provide a community of practice that supports the input of sports clubs managers, coaches and volunteers and feedback from sports clubs on implementing health promotion.



How should this intervention component be implemented?

STAGE 1 Safe sport offer fostered by sports federations	STAGE 2 Sports federations promoting health	STAGE 3 Health promotion in sports federations	STAGE 4 Sports federation health promotion programs	STAGE 5 Health promoting sports federation
No action.	Share details of club managers who propose health promotion actions in other clubs.	Appoint employees to play roles in specific health topics.	Share the profiles of sports club managers who volunteer to support other sports clubs, and propose an annual meeting.	Meet with mentors every 3–6 months, provide training in health promotion, update evidence and liaise with national employees to create a community of practice.

This intervention component contributes to **BEING** a health-promoting sports federation.



What role do stakeholders play in implementing this intervention components?

STAKEHOLDER	ACTION
Policy-maker or elected representative	Appoint regional and local authorities to support a network of mentors in health promotion.
NSF employee	Encourage recognition of a regional health promotion mentor, and link with national employees.
Subnational sports federation employee	Meet with the mentor every 3–6 months, provide training in health promotion, update evidence, and link with national employees
Sports club manager	Offer to serve as health promotion mentors, or request support from mentors.
Coaches	Offer to serve as health promotion mentors, or request support from mentors.
Sports participants	Make sports club members aware of the mentoring system.
Sports club members and volunteers	Make sports club members aware of the mentoring system.











CHAPTER 4.






IDENTIFY TOOLS TO SUPPORT HEALTH PROMOTION IN A SPORT FEDERATION AND SPORT CLUBS






Sports club stakeholders have called for tools for health promotion in order to implement their actions and vision based on evidence. In drafting these guidelines, the team searched for tools to promote health in the sport sector through a systematic search of Erasmus+ collaborative projects over the past 5 years (2017–2022) and on knowledge of members of the team. One or several tools can be used in planning and implementing health promotion in your sport federation. Each tool in Table 6 is a summary of each tool analysis, before presenting the objectives, content, population targeted, type of tool, how this tool addresses the strategies of health-promoting sport clubs and of the Ottawa Charter, which is the basis document for health promotion, published by WHO in 1986 (4).








Table 6. Tools for planning and implementing health promotion in a sport federation





TOOL	HEALTH TOPIC	TYPE	TYPE OF EVIDENCE	OTTAWA CHARTER STRATEGIES ADDRESSED	INTERVENTION STRATEGIES
Stepping in: A bystander action toolkit to support equality and respect at work	Social health: gender equity	Leaflet and website 	Based on practice	Create supportive environment Develop personal skills Re-orient health services	Planning Education Resources Feasibility Goals Mobilization Monitoring Motivation Participative approach Partners Communication
European Union Guidelines on Dual Careers of Athletes	Dual career (elite athletes)	Leaflet 	Based on research and practice	Build healthy public policy Create a supportive environment for health Develop personal skills	Planning Education Resources Monitoring
Gaelic Athletics Association Healthy Club Manual	Health-promoting setting	Leaflet 	Based on practice	Build healthy public policy Create a supportive environment for health Strengthen community action for health Develop personal skills Re-orient health services	Planning Education Resources Dynamic Experience Feasibility Goals Mobilization Monitoring Motivation Participative approach Partners Communication

TOOL	HEALTH TOPIC	TYPE	TYPE OF EVIDENCE	OTTAWA CHARTER STRATEGIES ADDRESSED	INTERVENTION STRATEGIES
Good Governance Game	Good governance	Game and online training 	Based on research and practice Using a participative building approach	Create supportive environment for health Develop personal skills	Dynamic Mobilization Participative approach Communication
Sport diplomacy course	Sport diplomacy	Online training 	Based on practice	Create supportive environment for health Strengthen community action for health Develop personal skills	Planning Education Resources Feasibility Goals Mobilization Monitoring Motivation Participative approach Partners Communication
International safeguards for children in sport	Child protection	Leaflet 	Based on research and practice	Build healthy public policy Create a supportive environment for health Strengthen community action for health	Planning Resources Monitoring Motivation Partners Communication
Mental health charter for physical activity and sport	Mental health	Leaflet 	Participative approach	Build healthy public policy Create a supportive environment for health Strengthen community action for health	Planning Education Resources Goals Mobilization Partners Communication
Sport coaching for mental well-being	Mental well-being	Leaflet, online training and website 	Based on research and practice Participative approach	Create supportive environment for health Strengthen community action for health Develop personal skills Re-orient health services	Education Resources Dynamic Experience Motivation Participative approach Partners Communication

TOOL	HEALTH TOPIC	TYPE	TYPE OF EVIDENCE	OTTAWA CHARTER STRATEGIES ADDRESSED	INTERVENTION STRATEGIES
Outsport tool	Inclusion and diversity in sport	Leaflet and game 	Based on practice	Create supportive environment for health Develop personal skills	Planning Education Mobilization Motivation
Pro Safe Sport+ Training Kit	Prevention of sexual violence in sport	Leaflet, video clip, online resources centre 	Based on research and practice	Create supportive environment for health Strengthen community action for health Develop personal skills	Planning Education Mobilization Motivation
Sport for active citizenship toolkit	Participative approaches, active citizenship	Leaflet 	Based on practice Using a participative approach	Create supportive environment for health Strengthen community action for health Develop personal skills	Resources Dynamic Mobilization Participative approach
Sport for protection tool	Social inclusion, social cohesion	Leaflet 	Based on research and practice Using a participative approach	Create supportive environment for health Strengthen community action for health Develop personal skills	Planning Education Resources Dynamic Feasibility Goals Monitoring Motivation Participative approach Partners
Staying inside: how to stop match-fixing	Match fixing	Leaflet 	Based on practice	Create supportive environment for health	Resources Partners Communication

TOOL	HEALTH TOPIC	TYPE	TYPE OF EVIDENCE	OTTAWA CHARTER STRATEGIES ADDRESSED	INTERVENTION STRATEGIES
The Good Sport programme	Health Promotion	Website 	Based on research and practice	Build healthy public policy Create a supportive environment for health Strengthen community action for health Develop personal skills	Planning Education Resources Dynamic Experience Feasibility Goals Mobilization Monitoring Motivation Participative approach Partners Communication
Community sport for children and youth planning toolkit	Sport and physical activity	Leaflet 	Based on practice	Create a supportive environment for health Strengthen community action for health	Planning Resources Experience Feasibility Goals Monitoring
Everyone Wins Community sporting clubs	Gender equality, diversity and inclusion	Leaflet 	Based on practice	Build healthy public policy Create a supportive environment for health Strengthen community action for health Develop personal skills Re-orient health services	Planning Education Resources Dynamic Experience Feasibility Goals Mobilization Monitoring Motivation Participative approach Partners Communication
The Gender Equality Tool for Generation Z	Gender equality	Online training 	Based on research and practice	Create a supportive environment for health Develop personal skills Re-orient health services	Resources Experience Mobilization Motivation Partners Communication
How to select mental health programme providers for sport clubs	Mental health programme	Leaflet 	Based on research	Strengthen community action for health	Mobilization Partners

TOOL	HEALTH TOPIC	TYPE	TYPE OF EVIDENCE	OTTAWA CHARTER STRATEGIES ADDRESSED	INTERVENTION STRATEGIES
Integration of Refugees through Sport	Refugee integration through sport	Online training 	Based on research practice	Create a supportive environment for health Strengthen community action for health Develop personal skills Re-orient health services	Education Mobilization Participative approach Partners
IOC Mental Health in elite athletes tool	Mental health	Leaflet 	Based on research and practice	Create a supportive environment for health Develop personal skills Re-orient health services	Education Dynamic Motivation Partners
Keep youngster involved	Youth sport drop out	Game 	Based on research and practice	Create a supportive environment for health Strengthen community action for health	Mobilization Motivation Participative approach Communication
STOP Sport Injuries	Injury prevention	Website 	Based on research and practice	Create a supportive environment for health Strengthen community action for health Develop personal skills	Education Resources Dynamic Experience Feasibility Goals Mobilization Monitoring Motivation Participative approach Partners Communication
Sport Clubs for Health (SCforH)	Sports participation	Leaflet, online training and website   	Based on research and practice	Build healthy public policy Create a supportive environment for health Develop personal skills	Planning Feasibility Goals Motivation Communication

TOOL	HEALTH TOPIC	TYPE	TYPE OF EVIDENCE	OTTAWA CHARTER STRATEGIES ADDRESSED	INTERVENTION STRATEGIES
SUGAPAS	Health behaviour	Online training 	Based on research and practice	Develop personal skills	Education Resources
Supporting mental wellbeing in community sport	Mental health	Leaflet, video and checklist   	Based on research	Create a supportive environment for health Develop personal skills	Education Dynamic Feasibility Mobilization Participative approach Partners Communication



STEPPING IN: A BYSTANDER ACTION TOOLKIT TO SUPPORT EQUALITY AND RESPECT AT WORK



Presentation of the tool

Weblink to access: <https://www.vichealth.vic.gov.au/sites/default/files/Bystander-action-toolkit-resource.pdf>

Link to health promotion: Gender equity and respect for women is an important piece of social health, to fight against inequalities and foster diversity and inclusion

Health topic covered: gender equity and respect for women

Released in 2014



Use of the tool

Objective of the tool (51)

This toolkit aims to help sports federation:

- develop policies, procedures and culture that support staff taking constructive bystander action against sexist language, sexual harassment and sex discrimination
- increase staff awareness and knowledge of sexist language, sexual harassment, sex discrimination and victimization and the impact these can have on the prevalence of violence against women
- increase the capacity of staff to take constructive bystander action around sexist language, sexual harassment and sex discrimination.

The tool explains:

- Why is it important to act on this topic?
- How to act on this topic?
- What other actors have already implemented (case study)?

The tool helps to develop NSF to the following stage:

Health Promoting Sports Federation **(stage 5)**


This tool contributes to BEING a health promoting sports federation.



Content of toolkit: Each section supports a key component:

1) Committed organizations, 2) Motivated leaders, 3) United teams, 4) Confident individuals.





Person using the tool:

-  Sports federation employees

Person (s) targeted:

-   Club Managers
-   Coaches
-   Parents
-   Sports participants
-   Members

Type of toolkit:

-   Leaflet or guidelines
-   Website



Estimated time

Estimated time to complete: 126 minutes (63 pages)

Estimated time to implement: 3-6 months



Production and evidence of tool

This toolkit was created through following process: The tool has been created by VicHealth and partners: Victorian Equal Opportunity and Human Rights Commission and different Sports Federation

This tool is based on:

- Practice based evidence

























Link to health promotion approach and theoretical framework

Strategy of Ottawa Charter:

- Create supportive environment for health
- Develop personal skills
- Re-orient health services

Strategy of HPSC model:

-   Planning
-   Education
-   Resources
-   Feasibility
-   Goals
-   Mobilization
-   Monitoring
-   Motivation
-   Participative approach
-   Partners
-   Communication

EU GUIDELINES ON DUAL CAREERS OF ATHLETES



Presentation of the tool

Weblink to access: <https://op.europa.eu/en/publication-detail/-/publication/3648359d-61c4-4132-b247-3438ee828450>

Language availability (in addition to English): French and German

Link to health promotion: Personal development and holistic approach of individual elite athletes are both part of health promotion.

Health topic covered: Managing a dual career in elite sport and professional development

Released in 2013



Use of the tool

Objective of the tool *[52]*

The guidelines are an inspiration for the formulation and adoption of action-oriented national dual career guidelines and to raise awareness at the national level about the concept of dual careers for elite athletes. They aspire to sensitize governments, sport governing bodies, educational institutes and employers to create the right environment for dual careers of elite athletes, including an appropriate legal and financial framework and a tailor-made approach respecting differences between sports.

The tool explains:

- Why is it important to act on this topic?
- How to act on this topic?
- What other actors have already implemented (case study)?
- Provide further information on how to generate partnerships and resources

The tool helps to develop NSF to the following stage:

Health Promoting Sports Federation **(stage 5)**

This tool contributes to BEING a health promoting sports federation.

5



Content of toolkit: Four main chapters are entailed in this document:

- 1) an introduction chapter about the aims of the guidelines and why these guidelines are necessary;
- 2) a chapter about involved policy areas and stakeholders;
- 3) a chapter about the European dimension of dual careers in sport, and finally
- 4) a chapter about dissemination, monitoring and evaluation of the concept of dual careers.

Person using the tool:

Club Managers

Policy makers,
representatives
of NSFs and
educational
institutes and
employers**Person (s) targeted:**

Sports participants

Type of toolkit:

Leaflet or guidelines

**Estimated time****Estimated time to complete:** 88 minutes (44 pages)**Estimated time to implement:** six months to a year**Production and evidence of tool**

This toolkit was created through the following process: The guidelines were drafted by an expert group from different European countries.

This tool is based on:

- Research based evidence
- Practice based evidence

**Link to health promotion approach and theoretical framework****Strategy of Ottawa Charter:**

- Build healthy public policy
- Create supportive environment for health
- Develop personal skills

Strategy of HPSC model:

Planning



Education



Resources



Monitoring



IRISH LIFE GAA HEALTHY CLUB PROJECT



Presentation of the tool

Weblink to access: <https://www.gaa.ie/api/pdfs/image/upload/jq8ujb6qge44ad6tpzdj.pdf>

Link to health promotion: Global health promotion using the settings-based approach

Health topic covered: Based on sports clubs needs

Released in 2018



Use of the tool

Objective of the tool (53)

The tool provides guidelines for sports clubs to become healthy club, which are described as having following characteristics:

- Recognise health and wellbeing as a core value; one that is everyone's responsibility with everyone having a role to play.
- View health as something holistic that involves physical, mental, social and spiritual wellbeing.
- Seek to make their club setting /environment as healthy as possible and set a good example through their practices, policies, and partnerships.
- Are community clubs that aim to extend their positive influence beyond their membership.
- Are inclusive clubs that aim to offer people of all abilities and backgrounds the opportunity to participate in the club in a meaningful way, throughout their lifespan.
- Are not expected to do everything themselves, but instead work in partnership to build stronger, more connected communities.

The tool explains:

- Why is it important to act on this topic?
- How to act on this topic?
- What other actors have already implemented (case study)?
- Provide further information on how to generate partnerships and resources

The tool helps to develop NSF up to the following stage:

Health Promoting Sports Federation (stage 5)

This tool contributes to SUPPORTING health promoting sports clubs.



5



Content of tool: The tool includes 7 different sections:

1) introduction, 2) steps to becoming a healthy club, 3) the building blocks of a healthy club, 4) healthy club priority areas and case studies, 5) critical incidence response plan, 6) communication and 7) insurance


Person using the tool:

-  Club Managers
-  Members

Person (s) targeted:

-  Club Managers
-  Coaches
-  Parents
-  Members

Type of toolkit:

-  Leaflet or guidelines

**Estimated time**

Estimated time to complete: 366 minutes (183 pages)

Estimated time to implement: 18 months

Competencies of trained person: Specific training is provided to clubs by the GAA, through a registration process

**Production and evidence of tool**

This tool was created through following process: The tool was created by the GAA Community and Health department, with the help of the GAA healthy club steering committee and individual clubs experience of the Healthy Club Project.














This tool is based on:

- Practice based evidence

**Link to health promotion approach and theoretical framework****Strategy of Ottawa Charter:**

- Build healthy public policy
- Create supportive environment for health
- Strengthen community action for health
- Develop personal skills
- Re-orient health services

Strategy of HPSC model:

-  Planning
-  Education
-  Resources
-  Dynamic
-  Experience
-  Feasibility
-  Goals
-  Mobilization
-  Monitoring
-  Motivation
-  Participative approach
-  Partners
-  Communication



SPORT GOOD GOVERNANCE GAME



Presentation of the tool

Weblink to access: <https://www.sg3.eu/>

Language availability (in addition to English): French, Dutch, Norwegian, German

Link to health promotion: Good governance and ethics are pillar of health promotion, to provide equitable and transparent decision-making process.

Health topic covered: Good Governance, ethical issue, integrity in sport
Released in 2022



Use of the tool

Objective of the tool *(54)*

Raise awareness on the importance of good governance for the success of sports organizations (SG3-Game)

The tool explains:

- Why is it important to act on this topic?
- How to act on this topic?

The tool helps to develop NSF to the following stage:

Sports Federation Health Promotion Programs **(stage 4)**

This tool contributes to BEING a health promoting sports federation





Content of tool:

Game, workshop and action plan



Person using the tool:

-  Club Managers
-  Coaches
-  Sport students
NSFs employees

Person (s) targeted:

-  Club Managers
-  Sports participants
-  Members

Type of toolkit:

-  Game
-  Online training

**Estimated time**

Estimated time to complete: 2 to 3 hours

Estimated time to implement: 3 to 6 months

Competencies of trained person: Knowledge of Governance and Ethics, videos are created with the tool to facilitate the its implementation.

**Production and evidence of tool**

This tool was created through following process: The tool has been created as a production of a co-funded Erasmus+ programme of the European Union, involving different partners across Europe.



This tool is based on:

- Research-based evidence
- Practice-based evidence
- Participative building approach

**Link to health promotion approach and theoretical framework****Strategy of Ottawa Charter:**

- Create supportive environment for health
- Develop personal skills

Strategy of HPSC model:

-  Dynamic
-  Mobilization
-  Participative approach
-  Communication



GRASSROOTS SPORTS DIPLOMACY COURSE



Presentation of the tool

Weblink to access: <https://learn.isca.org/courses/grassroots-sport-diplomacy/>

Link to health promotion: Sport Diplomacy, cultural diplomacy are key aspect to empower sports clubs members and is deeply related to social health development

Health topic covered: Sports Diplomacy

No date of release

ATTENTION: a login is requested (free) to take part in the online course



Use of the tool

Objective of the tool (55)

You will be able to describe Grassroots Sport Diplomacy and be able distinguish it from sport diplomacy, cultural diplomacy and other related concepts. We will guide you in identifying key actors who carry out Grassroots Sport Diplomacy, and you will also learn how to approach relevant stakeholders who can work with you on Grassroots Sport Diplomacy actions.

The tool explains:

- Why is it important to act on this topic?
- How to act on this topic?
- What other actors have already implemented (case study)?
- Provide further information on how to generate partnerships and resources

The tool helps to develop NSF to the following stage:

Sports Federation Health Promotion Programs (**stage 4**)


This tool contributes to BEING a health promoting sports federation




Content of tool: Four modules:

- 1) Introduction,
- 2) the potential of grassroots sport diplomacy in society,
- 3) examples and in-depth case studies of grassroots sport diplomacy in practice,
- 4) learning by doing, grassroots sport diplomacy step by step guideline.


Person using the tool:

 Club Managers

Person (s) targeted:

 Club Managers

Type of toolkit:

 Online training



Estimated time

Estimated time to complete: 2 to 3 hours

Estimated time to implement: days to a few months



Production and evidence of tool

This tool was created through following process: The course was created by ISCA and different partners organization internationally.

This tool is based on:

- Practice-based evidence














Link to health promotion approach and theoretical framework

Strategy of Ottawa Charter:

- Create supportive environment for health
- Strengthen community action for health
- Develop personal skills

Strategy of HPSC model:

-  Planning
-  Education
-  Resources
-  Feasibility
-  Goals
-  Mobilization
-  Monitoring
-  Motivation
-  Participative approach
-  Partners
-  Communication



INTERNATIONAL SAFEGUARDS
FOR CHILDREN IN SPORT

INTERNATIONAL SAFEGUARDS FOR CHILDREN IN SPORT



Presentation of the tool

Weblink to access: <https://safeinsport.org/resources/#eight-safeguards>

Language availability (in addition to English): Arabic, Bengali, Chinese, French, German, Hindi, Japanese, Portuguese, Russian, Spanish, Swahili

Link to health promotion: Children's mental and social health are part of health promotion as the development of youth empowerment

Health topic covered: Child protection and Safeguarding in sport
Released in 2016



Use of the tool

Objective of the tool (56):

strengthening sport organization's approach to making sport safer for children

The tool explains:

- Why is it important to act on this topic?
- How to act on this topic?
- What other actors have already implemented (case study)?

The tool helps to develop NSF to the following stage:

Sports Federation Health Promotion Programs **(stage 4)**

This tool contributes to BEING a health promoting sports federation.


4



Content of the tool:

The tool covers 8 safeguards to be implemented by sports organizations, based on a 5-step guide to raise awareness, reflect on current situation, develop, implement and embed the safeguards

Person using the tool:

-  Club Managers
-  Coaches
-  Volunteers

Person (s) targeted:

-  Sports participants

Type of toolkit:

-  Leaflet or guidelines

**Estimated time**

Estimated time to complete: 40 minutes

Estimated time to implement: a few month to years

**Production and evidence of tool**

This tool was created through following process: The tool was designed by the founding members of the international safeguarding children in sport working group. It was a joint initiative at the Beyond Sport Summit in 2012. Research and pilot testing was conducted by Brunel University.







This tool is based on:

- Research-based evidence
- Practice-based evidence

**Link to health promotion approach and theoretical framework****Strategy of Ottawa Charter:**

- Build healthy public policy
- Create supportive environment for health
- Strengthen community action for health
- Develop personal skills

Strategy of HPSC model:

-  Planning
-  Resources
-  Monitoring
-  Motivation
-  Partners
-  Communication

MENTAL HEALTH CHARTER FOR PHYSICAL ACTIVITY AND SPORT



Presentation of the tool

Weblink to access: <https://www.samh.org.uk/get-involved/physical-activity-and-sport/our-projects/mental-health-charter>

Link to health promotion: Mental health is an important component of health promotion, to ensure sports clubs member well being

Health topic covered: Mental health

Released in 2018



Use of the tool

Objective of the tool (57)

Scotland's Mental Health Charter for Physical Activity and Sport aims to empower physical activity and sport communities to improve equality and reduce discrimination, ensuring mental health and wellbeing is not a barrier to engaging, participating and achieving in physical activity and sport.

The tool explains:

- Why is it important to act on this topic?
- How to act on this topic?

The tool helps to develop NSF to the following stage:

Health Promotion in sports federation **(stage 3)**




This tool contributes to BEING a health promoting sports federation.



Content of the tool:

The tool entails network access, guidance on action plans and promotion of commitment


Person using the tool:

-  Club Managers
-  Coaches
-  Members

Person (s) targeted:

-  Club Managers
-  Coaches
-  Parents
-  Sports participants

Type of toolkit:

-  Leaflet or guidelines



Estimated time

Estimated time to complete: 2 hours

Estimated time to implement: a week to a month



Production and evidence of tool

This tool was created through following process: The Charter was informed by over 300 people who took part in online and offline people’s panels. The people’s panels gave those with lived experience of mental health problems and professionals from the physical activity and sport communities the opportunity to share their feedback. Following this consultation, PACE produced a baseline report in December 2016 which highlighted findings. A copy of this can be found on the SAMH website.

This tool is based on:

- Participative building approach










Link to health promotion approach and theoretical framework

Strategy of Ottawa Charter:

- Build healthy public policy
- Create supportive environment for health
- Strengthen community action for health

Strategy of HPSC model:

-  Planning
-  Education
-  Resources
-  Goals
-  Mobilization
-  Partners
-  Communication



SPORT COACHING FOR MENTAL WELL-BEING



Presentation of the tool

Weblink to access: <https://www.engso-education.eu/projects/spirit/>

Link to health promotion: Sport coaching on mental well-being is part of the positive human relationship developed in sports clubs, covering mental and social health

Health topic covered: Mental well-being

Released in 2022



Use of the tool

Objective of the tool (58)

The aim of the project SPIRIT is to develop a framework for humane, inclusive and empowering coaching and sports clubs that nurture mental wellbeing. The implementation of the concept of positively humane coaching can decrease drop-out levels in sport, thus increasing physical activity and improving public health. Moreover, vibrant and welcoming sports clubs result in more cohesive communities and societies, enhancing social inclusion.

The tool explains:

- Why is it important to act on this topic?
- How to act on this topic?
- Provide further information on how to generate partnerships and resources

The tool helps to develop NSF to the following stage:

Sports Federation Health Promotion Programs **(stage 4)**



This tool contributes to SUPPORTING health promoting sports clubs



Content of tool: The tool entails 7 modules:

- 1) concepts and definitions, 2) coach behavior, 3) coach-athlete relationship, 4) managing threats to well-being, 5) health skills and coaching during times of crisis, 6) inclusion, 7) supportive environment for the coach


Person using the tool:

-  Club Managers
-  Coaches

Person (s) targeted:

-  Sports participants

Type of toolkit:

-  Leaflet or guidelines

**Estimated time**

Estimated time to complete: 6 to 7 hours

Estimated time to implement: a day to a week

**Production and evidence of tool**

This tool was created through following process:

- 1) Collecting and compiling relevant research review and useful best practice examples in the field of sport and mental well-being.
- 2) Developing key recommendations for educating coaches that advance the mental well-being of their sports participants. These recommendations for coaches' education, are based on the research review and mapping study on best practices.
- 3) Creating a coaching framework that presents the academic case (based on research review) for sports and mental health in an accessible manner and utilizes best practice examples to guide the learner through an educational path.
- 4) Producing an accessible online learning course, facilitating the skills development of coaches in a flexible way.


This tool is based on:

- Research-based evidence
- Practice-based evidence
- Participative building approach

**Link to health promotion approach and theoretical framework****Strategy of Ottawa Charter:**

- Create supportive environment for health
- Strengthen community action for health
- Develop personal skills
- Re-orient health services

Strategy of HPSC model:

-  Education
-  Resources
-  Dynamic
-  Experience
-  Motivation
-  Participative approach
-  Partners
-  Communication



OUTSPORT TOOLKIT



Presentation of the tool

Weblink to access: <https://www.out-sport.eu/wp-content/uploads/2019/11/OUTSPORT-TOOLKIT-EDUCATION-THROUGH-SPORT.pdf>

Link to health promotion: Inclusion and diversity are major topics related to social health and well-being

Health topic covered: Inclusion and diversity in sport

Released in 2019



Use of the tool

Objective of the tool (59)

This Tool aims to enable the sport operators to promote an innovative approach to prevent hate crime and discrimination based on sexual orientation and gender identity in sport. The tool is based on Education THROUGH Sport, a non-formal educational approach that works with sport and physical activity towards the development of the social key competencies of individuals and groups, in order to contribute to transferable personal development and sustainable social transformation (from sport to other real-life situations).

The tool explains:

- Why is it important to act on this topic?
- How to act on this topic?
- What other actors have already implemented (case study)?
- Provide further information on how to generate partnerships and resources

The tool helps to develop NSF to the following stage:

Sport Federation Health Promotion Programs **(stage 4)**



This tool contributes to BEING a health promoting sports federation.



Content of toolkit:

The Tool consists of 5 thematic sections, including a chapter presenting the main findings of the European research into the experiences of LGBTI people in sport; a chapter on specific empowering pedagogic approach with high potentials; a collection of concrete educational tools that support coaches and teachers in the creation of SOGI inclusive sport communities; and a collection of existing examples of non-discriminative organizational best practices.



Person using the tool:

-  Club Managers
-  Coaches

Person (s) targeted:

-  Sports participants

Type of toolkit:

-  Leaflet or guidelines
-  Game

**Estimated time**

Estimated time to complete: 60 minutes to read the leaflet and 60 minutes to play the game

Estimated time to implement: a day to a week

**Production and evidence of tool**

This tool was created through following process: The tool has been developed through the Outsport Erasmus+ project (2017-2019), with the involvement of 12 experts from different organizations across Europe (Italy, Scotland, Germany, Austria and Hungary).





This tool is based on:

- Practice-based evidence

**Link to health promotion approach and theoretical framework****Strategy of Ottawa Charter:**

- Create supportive environment for health
- Develop personal skills

Strategy of HPSC model:

-  Planning
-  Education
-  Mobilization
-  Motivation

PRO SAFE SPORT+ TRAINING KIT



Presentation of the tool

Weblink to access: <https://pjp-eu.coe.int/en/web/pss/training-kit>

Language availability (in addition to English): Portuguese, Greek – the “Template versions” of the tool is available in French and English.

Link to health promotion: A safe social sport environment is part of health promotion

Health topic covered: Prevention of sexual violence in sport
Released in 2017



Use of the tool

Objective of the tool (60)

- This training kit, developed as part of the PSS+ project, provides information and training content to help those in positions of influence in the field of sport to prevent and react to situations of potential sexual violence in sport.
- The tool aims at helping trainers / instructors, sport leaders, coaches, physical education teachers, etc. to:
 - Understand what sexual violence is in the field of sport so as to prevent it from happening
 - React appropriately in cases of sexual violence or suspicion of sexual violence
 - Provide information on the existing support services and / or helplines
 - Implement preventive measures – avoid / reduce risk situation

The tool explains:

- Why is it important to act on this topic?
- How to act on this topic?
- What other actors have already implemented (case study)?
- Provide further information on how to generate partnerships and resources

The tool helps to develop NSF to the following stage:

Health Promotion in Sports Federations (**stage 3**)



This tool contributes to BEING a health promoting sports federation.






Content of tool:

- 1) Facts and figures - sexual violence against children and young people in sport
- 2) Legal and regulatory frameworks - which legislation, conventions, regulatory frameworks, standards and good practice guidelines help us to prevent and respond to sexual violence against children and young people?
- 3) Protecting victims - how to identify sexual violence
- 4) Protecting victims - responding to concerns or allegations about sexual violence
- 5) Preventing sexual violence - preventing sexual violence against children and young people in and through sport
- 6) Education and raising awareness - how to raise awareness about sexual violence in sport and how to introduce the subject for discussion



Person using the tool:

-  Club Managers
-  Coaches
-  Physical education teachers

Person (s) targeted:

-  Club Managers
-  Coaches
-  Physical education teachers

Type of toolkit:

-  Leaflet or guidelines
-  Video clip and expert panel; online resource centre

**Estimated time**

Estimated time to complete: 30 minutes

Estimated time to implement: a day to a week

**Production and evidence of tool**

This tool was created through following process: This training kit has been developed as part of the European Union (EU) and Council of Europe (COE) joint project




This tool is based on:

- Research-based evidence
- Practice-based evidence

**Link to health promotion approach and theoretical framework****Strategy of Ottawa Charter:**

- Create supportive environment for health
- Strengthen community action for health
- Develop personal skills

Strategy of HPSC model:

-  Education
-  Resources
-  Motivation



SPORT FOR ACTIVE CITIZENSHIP TOOLKIT



Presentation of the tool

Weblink to access: <https://www.engso-education.eu/projects/spirit/>

Link to health promotion: Active participation, especially of youth, is an important pillar in terms of empowerment and community health

Health topic covered: Active Citizenship, participative approaches
Released in 2020



Use of the tool

Objective of the tool (61)

To help youth workers and other people working with youth (e.g. coaches, teachers) teach young people about the value and importance of active participation and citizenship through using sport.

The tool explains:

- Why is it important to act on this topic?
- How to act on this topic?
- What other actors have already implemented (case study)?

The tool helps to develop NSF to the following stage:


Sports Federations Health Promotion Programs **(stage 4)**

This tool contributes to BEING a health promoting sports federation.




Content of tool: The tool is composed of 7 chapters:

- 1) introduction,
- 2) education for active citizenship and democratic participation in and through sport,
- 3) inclusion in and through sport,
- 4) youth participation and active citizenship,
- 5) Let's see the reality! Meet the ENGSO Youth Young Delegates' initiatives in the local communities,
- 6) Activities and pedagogical exercises,
- 7) Memories from the meeting

Person using the tool:

 Club Managers


 Coaches


 Parents


 Youth workers
Person (s) targeted:

 Sports participants


 Members
Type of toolkit:

 Leaflet or guidelines
**Estimated time****Estimated time to complete:** 78 minutes**Estimated time to implement:** a day to a month**Production and evidence of tool**

This tool was created through following process: Thirty-five young leaders were introduced to the Council of Europe's 'Have Your Say!' manual, and through participatory workshop they revised and piloted its adaptation to the sporting context. This Toolkit is a result of their collaborative work.

This tool is based on:

- Practice-based evidence
- Participative building approach

**Link to health promotion approach and theoretical framework****Strategy of Ottawa Charter:**

- Create supportive environment for health
- Strengthen community action for health
- Develop personal skills

Strategy of HPSC model:

- 
 Resources
- 
 Dynamic
- 
 Mobilization
- 
 Participative approach



International
Olympic Committee

SPORT FOR PROTECTION TOOLKIT



Presentation of the tool

Weblink to access: <https://www.unhcr.org/media/sport-protection-toolkit>

Link to health promotion: Social inclusion, child protection, youth empowerment are health topics that sports federation and affiliated can target to promote health

Health topic covered: social inclusion, social cohesion and psycho social well-being
Released in 2018



Use of the tool

Objective of the tool *(62)*

This Sport for Protection Tool will guide the work of the Olympic Refuge Foundation and will be used by a broad cross-section of organizations and stakeholders to better understand and implement effective Sport for Protection programming.

The tool explains:

- Why is it important to act on this topic?
- How to act on this topic?
- What other actors have already implemented (case study)?
- Provide links to generate partnerships and resources

The tool helps to develop NSF to the following stage:

Health Promoting Sports Federations **(stage 5)**



This tool contributes to BEING a health promoting sports federation.



Content of tool: Four sections are included:

- 1) warm up (introduction),
- 2) method of scoring (theory of change, outcomes of programs),
- 3) court or play space (theoretical foundation and applications),
- 4) the game plan (practical tool for project management)


Person using the tool:

-  Club Managers
-  NGOs and Sports federations

Person (s) targeted:

-  Migrants

Type of toolkit:

-  Leaflet or guidelines

**Estimated time**

Estimated time to complete: 5 hours

Estimated time to implement: a month to a year

**Production and evidence of tool**

This tool was created through following process: The tool was created by a technical reference group of different interventional organizations, based on a technical scientific reports, as well as the consultation of 144 humanitarian practitioners for insights on good practice.











This tool is based on:

- Research-based evidence
- Practice-based evidence
- Participative building approach

**Link to health promotion approach and theoretical framework****Strategy of Ottawa Charter:**

- Create supportive environment for health
- Strengthen community action for health
- Develop personal skills

Strategy of HPSC model:

-  Planning
-  Education
-  Resources
-  Dynamic
-  Feasibility
-  Goals
-  Monitoring
-  Motivation
-  Participative approach
-  Partners

STAYING ON SIDE HOW TO STOP MATCH-FIXING



Presentation of the tool

Weblink to access: https://images.transparencycdn.org/images/2014_Stop_MatchFixing_EN.pdf

Link to health promotion: Health Promotion also support social health, including equity and integrity

Health topic covered: Match Fixing

Released in 2014



Use of the tool

Objective of the tool (63)

The goal of the project Staying on Side was to advance the fight against match-fixing by helping protect the values of fair play, integrity and good sportsmanship in football. It gathered experts to discuss key issues facing football, including sports betting and gambling, and possible solutions to those problems.

The tool explains:

- Why is it important to act on this topic?
- What other actors have already implemented (case study)?
- Provide further information on how to generate partnerships and resources

The tool helps to develop NSF to the following stage:

Health Promotion in Sports Federation **(stage 3)**

This tool contributes to BEING a health promoting sports federation



Content of tool: The tool includes four chapters:

- 1) definition of match fixing,
- 2) prevention and education,
- 3) what needs to change,
- 4) want to find more


Person using the tool:

-  Club Managers
-  Coaches
-  Members
-  Referees

Person (s) targeted:

-  Club Managers
-  Coaches
-  Parents
-  Sports participants
-  Members

Type of toolkit:

-  Leaflet or guidelines

**Estimated time**

Estimated time to complete: 48 minutes

Estimated time to implement: a day to a week

**Production and evidence of tool**

This tool was created through following process: Transparency International, the Association of European Professional Football Leagues (EPFL) and the German Football League (DFL) came together to share experiences, through a co-funded project by the European Commission. This project included representatives from Transparency International, professional football leagues in Germany, Greece, Italy, Lithuania, Portugal and the United Kingdom, and participation by leagues in Norway and Poland.


This tool is based on:

- Practice-based evidence

**Link to health promotion approach and theoretical framework****Strategy of Ottawa Charter:**

- Create supportive environment for health

Strategy of HPSC model:

-  Resources
-  Partners
-  Communication



THE GOOD SPORTS PROGRAM



Presentation of the tool

Weblink to access: <https://goodsports.com.au>

Link to health promotion: Applying a settings-based approach to different health topics

Health topic covered: Holistic health approach, including alcohol, smoking, drugs, mental health, and safe transport.

Released in 2000



Use of the tool

Objective of the tool *(64)*

Good Sports is a free Australia-wide programme building stronger community sporting clubs that are safe, welcoming and family friendly environments.

The tool explains:

- Why is it important to act on this topic?
- How to act on this topic?
- What other actors have already implemented (case study)?
- Provide further information on how to generate partnerships and resources

The tool helps to develop NSF to the following stage:

Health Promoting Sports Federation **(stage 5)**




This tool contributes to SUPPORTING health promoting sports clubs.



Content of tool:

Different resources on the website, such as policy templates, posters, guidelines, links to training programmes, merchandise, social media resources, and case studies


Person using the tool:

-  Club Managers
-  Coaches
-  Members

Person (s) targeted:

-  Club Managers
-  Coaches
-  Parents
-  Sports participants
-  Members

Type of toolkit:

-  Website that includes templates, guidelines, merchandise, links to training



Estimated time

Estimated time to complete: 5 to 6 hours
Estimated time to implement: months to years



Production and evidence of tool

This tool was created through following process: The Good Sport Program has been created in Australia based on research evidence and input from policy and practice stakeholders.

This tool is based on:

- Research-based evidence
- Practice-based evidence




Link to health promotion approach and theoretical framework

Strategy of Ottawa Charter:

- Build healthy public policy
- Create supportive environment for health
- Strengthen community action for health
- Develop personal skills

Strategy of HPSC model:

-  Planning
-  Education
-  Resources
-  Dynamic
-  Experience
-  Feasibility
-  Goals
-  Mobilization
-  Monitoring
-  Motivation
-  Participative approach
-  Partners
-  Communication

COMMUNITY SPORT FOR CHILDREN AND YOUTH PLANNING TOOLKIT



Presentation of the tool

Weblink to access: <https://www.sasksport.ca/wp-content/uploads/2020/12/Community-Sport-for-Children-and-Youth-Planning-Toolkit.pdf>

Link to health promotion: Providing access to physical activity and sport for all, especially children and youth is a way to address social inequalities.

Health topic covered: Sport and physical activity development for community

No date of release



Use of the tool

Objective of the tool *(65)*

Community Sport for Children and Youth Planning Toolkit is a resource to help communities build and maintain active sport programmes for children and youth. Sport can be a significant part of community unity and provides benefits such as healthy lifestyles, self-discipline, and positive self-esteem for individuals. The toolkit is designed to help communities determine, develop, provide, and evaluate their sport programme needs so that more children and youth are active in sport for life.

The tool explains:

- Why is it important to act on this topic?
- How to act on this topic?
- Provide further information on how to generate partnerships and resources

The tool helps to develop NSF to the following stage:

Sports Federation Health Promoting Programmes **(stage 4)**


This tool contributes to SUPPORTING health promoting sports clubs.




Content of tool: The tool includes tables and guidelines to undertake in 4 steps:

1) understanding needs and determining priorities, 2) designing youth sport programme(s), 3) delivering youth sport programme(s), 4) evaluating, celebrating and sustaining youth sport programme(s)


Person using the tool:

-  Club Managers
-  Coaches

Person (s) targeted:

-  Sports participants

Type of toolkit:

-  Leaflet or guidelines



Estimated time

Estimated time to complete: 1-2 hours

Estimated time to implement: a day to a week



Production and evidence of tool

This toolkit was created through following process: The toolkit was created by Sask Sport and Saskatchewan in motion, with the support of different organizations

This tool is based on:

- Practice-based evidence









Link to health promotion approach and theoretical framework

Strategy of Ottawa Charter:

- Create supportive environment for health
- Strengthen community action for health

Strategy of HPSC model:

-  Planning
-  Resources
-  Experience
-  Feasibility
-  Goals
-  Monitoring

EVERYONE WINS COMMUNITY SPORTS CLUBS



Presentation of the tool

Weblink to access: https://www.vichealth.vic.gov.au/media-and-resources/publications/everyone-wins_clubs

Link to health promotion: Gender and diversity are important in regard to sports participants social health

Health topic covered: gender equality, diversity and inclusion

No date of release



Use of the tool

The tool explains (66):

- Why is it important to act on this topic?
 - How to act on this topic?
 - Provide further information on how to generate partnerships and resources
-

The tool helps to develop NSF to the following stage:

Health Promoting Sports Federation **(stage 5)**


This tool contributes to SUPPORTING health promoting sports clubs.




Content of tool: Four resources compose this tool:

- 1) an action guide,
- 2) how to use the tool,
- 3) overview, purpose and benefits,
- 4) glossary

Person using the tool:


 Club Managers

Person (s) targeted:

 Club Managers

 Coaches

 Parents

 Sports participants

Type of toolkit:

 Leaflet or guidelines

**Estimated time**

Estimated time to complete: 3-4 hours

Estimated time to implement: months to year

**Production and evidence of tool**

This tool was created through following process: The tool was created through the healthy sporting environments programme, especially by Vlchealth.














This tool is based on:

- Practice-based evidence

**Link to health promotion approach and theoretical framework****Strategy of Ottawa Charter:**

- Build healthy public policy
- Create supportive environment for health
- Strengthen community action for health
- Develop personal skills
- Re-orient health services

Strategy of HPSC model:

-  Planning
-  Education
-  Resources
-  Dynamic
-  Experience
-  Feasibility
-  Goals
-  Mobilization
-  Monitoring
-  Motivation
-  Participative approach
-  Partners
-  Communication

THE GENDER EQUALITY TOOL FOR GENERATION Z (GETZ)



Presentation of the tool

Weblink to access: <https://getzproject.eu/>

Language availability (in addition to English): Swedish, Norwegian, Flemish, Croatian, Dutch, Slovenian

Link to health promotion: Gender Equality is an important pillar of social health

Health topic covered: Gender Equality

Released in 2022



Use of the tool

Objective of the tool (67)

The focus of the project and the MOOC is to address the issues around the lack of women involved in leadership and management across the broad and diverse sector of sport, from competitive and recreational sport, sports organizations such as national governing bodies, national government sports agencies and federations, to sport business, coaching, marketing, and media.

The tool explains:

- Why is it important to act on this topic?
- How to act on this topic?
- What other actors have already implemented (case study)?
- Provide further information on how to generate partnerships and resources

The tool helps to develop NSF to the following stage:

Sports Federation Health Promotion Programmes (**stage 4**)

This tool contributes to BEING a health promoting sports federation.



Content of the tool: The website presents the GETZ project, the involved partners and presents the online course. The online course is structured in 7 modules:

1) Culture and Society, 2) Governance and Law, 3) Commerce, 4) Media, 5) Participation, 6) Events, 7) Reflections of learning


Person using the tool:

	✓	Club Managers
	✓	Coaches
	✓	Parents
	✓	Sports participants
	✓	Members

Person (s) targeted:

	✓	Club Managers
	✓	Coaches
	✓	Parents
	✓	Sports participants
	✓	Members

Type of toolkit:

	✓	Online training
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**Estimated time**

Estimated time to complete: 16-24 hours

Estimated time to implement: a day to months

**Production and evidence of tool**

This tool was created through following process: The online course was created through a co-funded Erasmus+ programme, involving different universities and sports organization across Europe.

This tool is based on:

- Research-based evidence
- Practice-based evidence

**Link to health promotion approach and theoretical framework****Strategy of Ottawa Charter:**

- Create supportive environment for health
- Develop personal skills
- Re-orient health services

Strategy of HPSC model:

	✓	Resources
	✓	Experience
	✓	Mobilization
	✓	Motivation
	✓	Partners
	✓	Communication

HOW TO SELECT MENTAL HEALTH PROGRAM PROVIDERS FOR SPORTS CLUBS



Presentation of the tool

Weblink to access: <https://www.vichealth.vic.gov.au/news-publications/research-publications/how-select-mental-health-program-providers-sports-clubs>

Link to health promotion: Mental health is an important component of health promotion, to ensure sport clubs contributes to members well being

Health topic covered: Mental health programme provision

Released in 2021



Use of the tool

Objective of the tool (68)

To help sports organizations select the right provider and deliver the best possible mental health and wellbeing programme to participants.

The tool explains:

- Why is it important to act on this topic?
- How to act on this topic?
- Provide further information on how to generate partnerships and resources

The tool helps to develop NSF to the following stage:

Sports Federation Health Promotion Programmes **(stage 4)**



This tool contributes to SUPPORTING health promoting sports clubs.





Content of tool:

3-page document containing 7 criteria for programme selection and further resources


Person using the tool:

-  Club Managers
-  Coaches

Person (s) targeted:

-  Parents
-  Sports participants

Type of toolkit:

-  Leaflet or guidelines

**Estimated time**

Estimated time to complete: 1 hour

Estimated time to implement: a day to few weeks

**Production and evidence of tool**

This tool was created through following process: The tool was created by Vichealth and a research group of different academic from Monash University



This tool is based on:

- Research-based evidence

**Link to health promotion approach and theoretical framework****Strategy of Ottawa Charter:**

- Strengthen community action for health

Strategy of HPSC model:

-  Mobilization
-  Partners



INTEGRATION OF REFUGEES THROUGH SPORT



Presentation of the tool

Weblink to access: <https://learn.isca.org/courses/irts/>

Link to health promotion: Refugees integration and inclusion are important part of social health

Health topic covered: Refugee integration through sport

Released in 2016

ATTENTION: a login is requested (free) to take part to the online course)



Use of the tool

Objective of the tool (69)

This course is one of the solutions we are offering to you – individual, representative of grassroots sports organization, local communities or social services. To you who would like to learn more about how to implement sport and physical activities for refugees, understand the different principles of integration and to learn or improve skills and competences working with refugees

The tool explains:

- Why is it important to act on this topic?
- What other actors have already implemented (case study)?
- Provide further information on how to generate partnerships and resources

The tool helps to develop NSF to the following stage:

Sports Federation Health Promotion Programmes (**stage 4**)


This tool contributes to BEING a health promoting sports federation.




Content of tool: Five chapters are included:

1) a refugee story, 2) how to start, 3) target group and intercultural understanding, 4) partnership and development, 5) move beyond -sport and non-sport organizations cooperating


Person using the tool:

-  Club Managers
-  Coaches
-  Sport organisation employees

Person (s) targeted:

-  Club Managers
-  Coaches

Type of toolkit:

-  Online training

**Estimated time**

Estimated time to complete: 1-2 hours

Estimated time to implement: days to a few month

**Production and evidence of tool**

This tool was created through following process: The tool was created by the Nordplus and Erasmus+ programme, which are two projects addressing a sensitive topic and vulnerable target group that has been the subject of great debate in Europe this decade: integration of refugees. The projects are bringing together experts from the Nordic countries, the UK, Italy and Germany to map and explore ways of integrating refugees into European societies through sport and physical activity.

This tool is based on:

- Practice-based evidence

**Link to health promotion approach and theoretical framework****Strategy of Ottawa Charter:**

- Create supportive environment for health
- Strengthen community action for health
- Develop personal skills
- Re-orient health services

Strategy of HPSC model:

-  Education
-  Mobilization
-  Participative approach
-  Partners
-  Communication



International
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IOC MENTAL HEALTH IN ELITE ATHLETES' TOOL



Presentation of the tool

Weblink to access: <https://olympics.com/athlete365/mentally-fit/mentallyfit-toolkit-resources/>

Link to health promotion: Mental health is an important area of health promotion, to ensure athletes well-being and positive sports experience

Health topic covered: Mental Health

Released in 2021



Use of the tool

Objective of the tool (70)

This tool is aimed at assisting Olympic Movement stakeholders, including International Federations (IFs), National Olympic Committees (NOCs), National Paralympic Committees (NPCs), athletes' entourage members, healthcare professionals and other stakeholders such as National Federations (NFs), clubs and teams, to develop and implement initiatives related to the protection and promotion of mental health and well-being in elite athletes.

The tool explains:

- Why is it important to act on this topic?
- How to act on this topic?
- What other actors have already implemented (case study)?
- Provide further information on how to generate partnerships and resources

The tool helps to develop NSF to the following stage:


Sports Federation Health Promotion Programmes (**stage 4**)

This tool contributes to BEING a health promoting sports federation.




Content of the tool:

A 100-page booklet with roles and responsibilities of different stakeholders, as well as resources

Person using the tool:

 Club Managers


 Coaches


 Parents
Person (s) targeted:

 Sports participants
Type of toolkit:

 Leaflet or guidelines
**Estimated time****Estimated time to complete:** 3-4 hours**Estimated time to implement:** weeks to months**Production and evidence of tool**

The tool was created by the IOC Mental Health Working Group and a virtual taskforce (see composition on page 98-99)





This tool is based on:

- Research-based evidence
- Practice-based evidence

**Link to health promotion approach and theoretical framework****Strategy of Ottawa Charter:**

- Create supportive environment for health
- Develop personal skills
- Re-orient health services

Strategy of HPSC model:

- 
 Education
- 
 Dynamic
- 
 Motivation
- 
 Partners



International
Olympic
Committee

List of organisation involved on page 98

KEEP YOUNGSTER INVOLVED



Presentation of the tool

Weblink to access: <https://tools.kenniscentrumsportenbewegen.nl/keep-youngsters-involved/tool/keep-youngsters-involved/>

Language availability (in addition to English): French, Dutch, Portuguese, Romanian, Swedish

Link to health promotion: This tool opens the discussion on youth drop out in sport and could be support for action for youth implications and retention in sports clubs

Health topic covered: Drop out of sport

Released in 2016



Use of the tool

Objective of the tool (71)

These card games help you to get to know more about how to implement actions in the sports club to keep youngsters (12-19 year) involved and prevent them from dropout.

The tool explains:

- Why is it important to act on this topic?
- How to act on this topic?

The tool helps to develop NSF to the following stage:

Health Promotion in sports federation **(stage 3)**

This tool contributes to SUPPORTING health promoting sports clubs.




Content of the tool:

169 cards, rules of the game

Person using the tool:

-  Club Managers
-  Coaches
-  Parents
-  Sports participants
-  Members

Person (s) targeted:

-  Sports participants

Type of toolkit:

-  Game

**Estimated time**

Estimated time to complete: 1-2 hours

Estimated time to implement: days to months

**Production and evidence of tool**

This tool was created through following process: The tool has been created as a production of an co-funded Erasmus+ programme of the European Union, implicating different partners across Europe.





This tool is based on:

- Research-based evidence
- Practice-based evidence

**Link to health promotion approach and theoretical framework****Strategy of Ottawa Charter:**

- Create supportive environment for health
- Strengthen community action for health

Strategy of HPSC model:

-  Mobilization
-  Motivation
-  Participative approach
-  Communication

STOP SPORTS INJURIES



Presentation of the tool

Weblink to access: <https://www.ncys.org/safety/stop-sports-injuries/>

Link to health promotion: Preventing injuries is part of sports participants physical health

Health topic covered: Injury prevention

Released in 2022



Use of the tool

Objective of the tool (72)

NCYS seeks to train and educate coaches, educators and family members to ensure that young people participate in a safe environment so they get all of the benefits associated with youth sports.

The tool explains:

- Why is it important to act on this topic?
- How to act on this topic?
- What other actors have already implemented (case study)?
- Provide further information on how to generate partnerships and resources

The tool helps to develop NSF to the following stage:

Health Promoting Sports Federations (stage 5)

This tool contributes to BEING a health promoting sports federation.



Content of tool: Website including 4 parts:

1) sport specific resources, 2) injury specific resources, 3) general resources, 4) join out movement

Person using the tool:

	✓	Club Managers
	✓	Coaches
	✓	Parents
	✓	Sports participants
	✓	Members
	✓	Sports federation employees

Person (s) targeted:

	✓	Sports participants
	✓	Members

Type of toolkit:

	✓	Website
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Estimated time

Estimated time to complete and implement: Depending on the type of resources consulted



Production and evidence of tool

This tool was created through following process: STOP Sports Injuries educational materials were developed by AOSSM, with support from the American Academy of Orthopaedic Surgeons, the American Academy of Pediatrics, the National Athletic Trainers' Association, the American Medical Society for Sports Medicine, SAFE Kids USA, the Pediatric Orthopaedic Society of North America and the Sports Physical Therapy Section.

This tool is based on:

- Research-based evidence
- Practice-based evidence



Link to health promotion approach and theoretical framework

Strategy of Ottawa Charter:

- Create supportive environment for health
- Strengthen community action for health
- Develop personal skills

Strategy of HPSC model:

- | | | |
|--|---|------------------------|
| | ✓ | Planning |
| | ✓ | Education |
| | ✓ | Resources |
| | ✓ | Dynamic |
| | ✓ | Experience |
| | ✓ | Feasibility |
| | ✓ | Goals |
| | ✓ | Mobilization |
| | ✓ | Monitoring |
| | ✓ | Motivation |
| | ✓ | Participative approach |
| | ✓ | Partners |
| | ✓ | Communication |

SPORTS CLUBS FOR HEALTH



Presentation of the tool

Weblink to access: <https://www.scforh.info/>

Language availability (in addition to English): Website in English, online course in 25 languages

Link to health promotion: Physical activity is an important determinant of health, and its levels in the population can be increased by improving the availability and quality of health-enhancing sports activities offered through sports clubs and federations

Health topic covered: Participation in health-enhancing sports activities
Released in 2021



Use of the tool

Objective of the toolkit *(73)*

The primary aim of applying the Sports Club for Health approach is to improve the availability and quality of health-enhancing sports activities. By adopting the Sports Club for Health approach, sports organizations can recognise the health potential of their sports disciplines and organise and provide health-enhancing sports activities in the sports club setting.

The tool explains:

- Why is it important to act on this topic?
- How to act on this topic?
- What other actors have already implemented (case study)?
- Provide further information on how to generate partnerships and resources

The tool helps to develop NSF to the following stage:

Sports federations promoting health **(stage 2)**

This tool contributes to SUPPORTING health promoting sports clubs.




Content of toolkit:

Website, online course and leaflet, as well as references



Person using the tool:

	✓	Club Managers
	✓	Coaches
	✓	Sports federation employees
	✓	Policymakers
	✓	Higher education teachers
	✓	Higher education students
	✓	Health promoters
	✓	Physical educators

Person (s) targeted:

	✓	Sports participants
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Type of toolkit:

	✓	Leaflet or guidelines
	✓	Online training

**Estimated time**

Estimated time to complete: 30 minutes for the online course, 1 hour for the guidelines

Estimated time to implement: week to months

**Production and evidence of tool**

This toolkit was created through following process: The toolkit was created with the participation of 40 experts in different European country, as product of three Erasmus+ project.






This tool is based on:

- Research-based evidence
- Practice-based evidence

**Link to health promotion approach and theoretical framework****Strategy of Ottawa Charter:**

- Build healthy public policy
- Create supportive environment for health
- Develop personal skills

Strategy of HPSC model:

	✓	Planning
	✓	Feasibility
	✓	Goals
	✓	Motivation
	✓	Communication

SUGAPAS



Presentation of the tool

Weblink to access: <https://sugapas.csd.auth.gr/mooc/> OR
<https://www.facebook.com/SugaPas/>

Link to health promotion: Different knowledge on health behavior (physical activity, healthy eating, healthy lifestyle) are offered

Health topic covered: different health behavior
Released in 2020



Use of the tool

Objective of the toolkit (74)

SUGAPAS focuses on the exploitation of school oriented, safe and online communities focused on better health and adopting physical activity. SUGAPAS will build its community of practice as a European school physical activity community for students and teachers, in order to achieve as much higher impact as possible.

The tool explains:

- Why is it important to act on this topic?
- How to act on this topic?

The tool helps to develop NSF to the following stage:

Health Promotion in Sports Federation **(stage 3)**





This tool contributes to SUPPORTING health promoting sports clubs.



Content of toolkit:

Different MOOC are offered to participants: Four courses are offered: one on questionnaires and certification, one of physical activity and fitness, one on healthy diet and one on healthy lifestyle


Person using the tool:

-  Coaches
-  Parents
-  Sports participants
-  Members

Person (s) targeted:

-  Parents
-  Sports participants
-  Members

Type of toolkit:

-  Online training

**Estimated time**

Estimated time to complete: 0-40 minutes per subsections; 2,5-3,5 hours per course, 8-10 hours for the whole MOOC (including the questionnaires)

Estimated time to implement: a few days to several months

**Production and evidence of tool**

This toolkit was created through following process: The tool was created as part of an Erasmus+ project including partners from eight countries.



This tool is based on:

- Research-based evidence
- Practice-based evidence

**Link to health promotion approach and theoretical framework****Strategy of Ottawa Charter:**

- Develop personal skills

Strategy of HPSC model:

-  Education
-  Resources

SUPPORTING MENTAL WELLBEING IN COMMUNITY SPORT



Presentation of the tool

Weblink to access: <https://www.orygen.org.au/Training/Resources/Physical-and-sexual-health/Toolkits/Supporting-mental-wellbeing-in-community-sport>

Link to health promotion: Mental health is an important part of health promotion, in close relationship with physical and social health

Health topic covered: mental health

Released in 2019



Use of the tool

Objective of the tool *(75)*

This suite of resources has been designed to help sporting organizations support the mental wellbeing of young people aged 12-24 years.

The tool explains:

- Why is it important to act on this topic?
- How to act on this topic?
- What other actors have already implemented (case study)?
- Provide further information on how to generate partnerships and resources

The tool helps to develop NSF to the following stage:

National Sports Federation Health Promotion Programmes **(stage 4)**

This tool contributes to BEING a health promoting sports federation.




Content of the tool: Four types of tools are provided:

a guide, a tool, a checklist and a video, to present the framework and some practical tool to ensure young people's mental health



Person using the tool:

-  Club Managers
-  Coaches
-  Parents

Person (s) targeted:

-  Sports participants

Type of toolkit:

-  Leaflet or guidelines
-  Video and checklist



Estimated time

Estimated time to complete: 20 hours

Estimated time to implement: days to months



Production and evidence of tool

This tool was created through following process: The tool was created by Dr Elon Gersh and a group of consultants, as well as students from a master of writing and publishing student at RMIT University.

This tool is based on:

- Research-based evidence










Link to health promotion approach and theoretical framework

Strategy of Ottawa Charter:

- Create supportive environment for health
- Develop personal skills

Strategy of HPSC model:

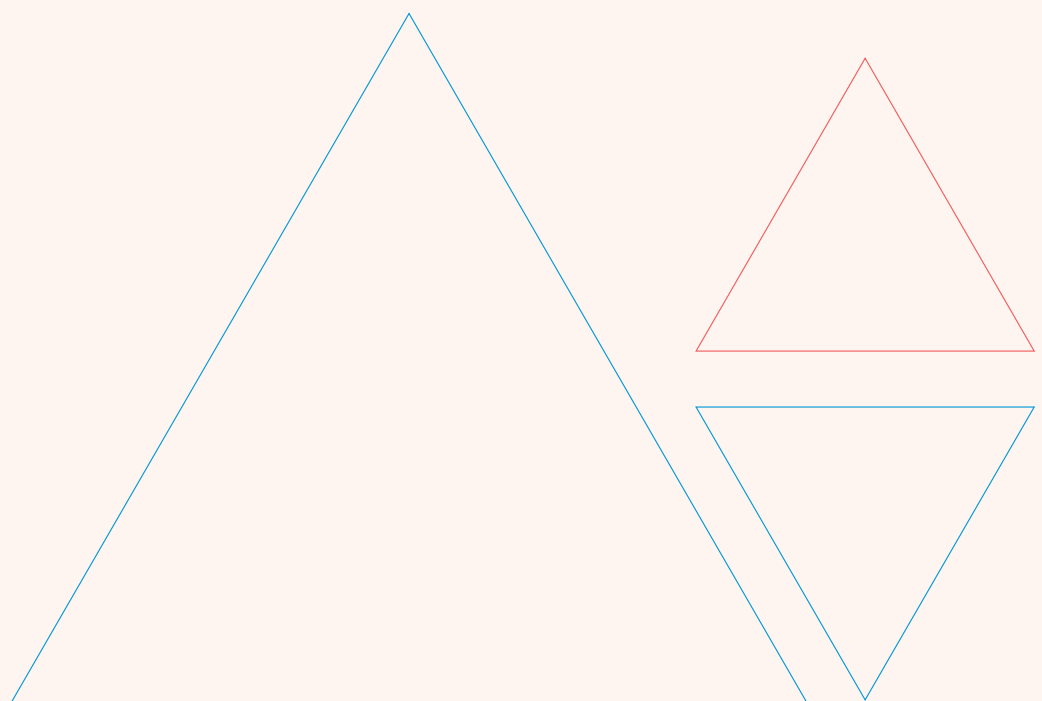
-  Education
-  Dynamic
-  Feasibility
-  Mobilization
-  Participative approach
-  Partners
-  Communication

CONCLUSION

This document is intended to support investment by NSFs in health promotion, by providing the theoretical background to health-promoting sports federations, examples of good programmes, a list of concrete strategies and interventions, and 28 tools. These implementation guidelines should help NSFs to play their role in society by fostering sports practice, enhancing its quality and making their commitment to health promotion live on the field. NSFs promote various health topics through programmes, training and dissemination. Consideration of health promotion as an umbrella covering diverse NSF activities will ensure a more comprehensive, coordinated, integrated vision of how much these activities contribute to the social and health capital of our society. Moreover, such integration will enhance the visibility of NSF activities in a single concept – health promotion – which will attract parents interested in the development of children and young people and will attract funders interested in the social and health responsibilities of NSFs.

NSFs will not become health promotion experts or specialists, but, as Dooris (49,50) mentioned, health is lived in every setting, including sports clubs, where millions of European citizens practice, where children and young people develop themselves through sports and where coaches and managers can be seen as role models. Therefore, it is of primary importance for NSFs to partner with health promotion organizations, from national to local authorities, as well as private partners, to mobilize their health promotion potential.

This work is grounded in the theory of health-promoting sports clubs and based on the best available current scientific evidence, as well as academic expertise. It is part of a larger project on the development of health-promoting sports clubs, including other tools, such as the health-promoting sports clubs national audit tool, designed to evaluate country policies that support sports clubs in investing in health promotion (76).



REFERENCES¹

1. Aguinis H. Organizational responsibility: Doing good and doing well. In: Zedeck S, editor, *APA handbook of industrial and organizational psychology, Vol. 3. Maintaining, expanding, and contracting the organization* (pp. 855–79). Washington DC: American Psychological Association; 2011:855–79. doi:10.1037/12171-024.
2. Health promotion glossary of terms 2021. Geneva: World Health Organization; 2021 (<https://apps.who.int/iris/handle/10665/350161>).
3. Ferkins L, Shilbury D, McDonald G. Board involvement in strategy: Advancing the governance of sport organizations. *J Sport Manage.* 2009;23(3):245–77. doi:10.1123/jsm.23.3.245.
4. Ottawa Charter for health promotion. Geneva: World Health Organization; 1986 (<https://www.who.int/teams/health-promotion/enhanced-wellbeing/first-global-conference>).
5. Bull, Fiona, Milton, Karen & Kahlmeier, Sonja (2015). Health-enhancing physical activity (HEPA) policy audit tool (PAT). Version 2. Copenhagen: WHO Regional Office for Europe (<https://apps.who.int/iris/handle/10665/369593>).
6. Johnson S, Vuillemin A, Geidne S, Kokko S, Epstein J, Van Hoya A. Measuring health promotion in sports club settings: a modified Delphi study. *Health Educ Behav.* 2019;47(1): 1090198119889098. doi:10.1177/1090198119889098.
7. Van Hoya A, Johnson S, Geidne S, Donaldson A, Rostan F, Lemonnier F et al. The health promoting sports club model: an intervention planning framework. *Health Promot Int.* 202;36(3):811–23. doi:10.1093/heapro/daaa093.
8. Middleton, J. Welcome address. *Public Health Today.* UK Faculty of Public Health. London; 2016
9. Elmoose-Østerlund K, Ibsen B. Social inclusion and volunteering in sports clubs in Europe. Combining knowledge on sports club policies, sports clubs and members in ten European countries. Odense: University of Southern Denmark, Sports Science and Clinical Biomechanics; 2016 (https://boris.unibe.ch/96268/1/lbsen-Nichols-Elmoose-Osterlund_Sports%20club%20policies%20in%20Europe.pdf).
10. Fédération sportive. Définition [Sports federation. Definition]. Paris: Institut national de la statistique et des études économiques; 2021 (<https://www.insee.fr/fr/metadonnees/definition/c1258>).
11. Edwards, M. B. (2015). The role of sport in community capacity building: An examination of sport for development research and practice. *Sport management review*, 18(1), 6–19.
12. White paper on sport. Brussels: European Commission; 2007 (<https://eur-lex.europa.eu/legal-content/EN/TXT/?uri=celex%3A52007DC0391>).
13. European Commission. Sport and Physical Activity Eurobarometer. Brussels: European Commission (<https://europa.eu/eurobarometer/surveys/detail/2668>)
14. Kokolakakis T, Gratton C, Guenther G. The economic value of sport. In: Downward P, Frick B, Humphreys BR, Pawlowski T, Ruseski JE, Soebbing BP, editors. *The SAGE handbook of sports economics*. Thousand Oaks (CA): SAGE Publishing; 2019:18–21. doi:10.4135/9781526470447.
15. Zeimers G, Lefebvre A, Winand M, Anagnostopoulos C, Zintz T, Willem A. Organisational factors for corporate social responsibility implementation in sport federations: a qualitative comparative analysis. *Eur Sport Manage Q.* 2021;21(2):173–93. doi:10.1080/16184742.2020.1731838.
16. Mäkelä K, Kokko S, Kannas L, Villberg J, Vasankari J, Heinonen O et al. Physical activity, screen time and sleep among youth participating and non-participating in organized sports: the Finnish Health Promoting Sports Club (FHPSC) study. *Adv Phys Educ.* 2016;6(4):378–88. doi:10.4236/ape.2016.64038.
17. Paakkari L, Kokko S, Villberg J, Paakkari O, Tynjälä J. Health literacy and participation in sports club activities among adolescents. *Scand J Public Health.* 2017;45(8):854–60. doi:10.1177/1403494817714189.
18. Sævarsson ES, Svandottir E, Sveinsson T, Asgeirsdottir TL, Arngrimsson SA, Johannsson E. Organized leisure-time sport participation and academic achievement in preadolescents. *Scand J Public Health.* 2017;45(8):861–8. doi: 10.1177/1403494817705560.
19. Triantafyllidis S, Mallen C. Sport for sustainable development. In: Triantafyllidis S, Mallen C, editors. *Sport and Sustainable Development. An Introduction*. Abingdon: Routledge; 2022 (<https://www.routledge.com/Sport-and-Sustainable-Development-An-Introduction/Triantafyllidis-Mallen/p/book/9780367653330>).

¹ All references were accessed 31 May 2023

20. Holman, C. D., Donovan, R. J., Corti, B., & Jalleh, G. (1997). The myth of "healthism" in organized sports: implications for health promotion sponsorship of sports and the arts. *American journal of health promotion : AJHP*, 11(3), 169–176. <https://doi.org/10.4278/0890-1171-11.3.16>
21. Oja P, Titze S, Kokko S, Kujala UM, Heinonen A, Kelly P et al. Health benefits of different sport disciplines for adults: systematic review of observational and intervention studies with meta-analysis. *Br J Sports Med*. 2015;49(7):434–40. doi:10.1136/bjsports-2014-093885.
22. Eime RM, Young JA, Harvey JT, Charity MJ, Payne WR. A systematic review of the psychological and social benefits of participation in sport for children and adolescents: informing development of a conceptual model of health through sport. *Int J Behav Nutr Phys Activity*. 2013;10(1):1–21. doi:10.1186/1479-5868-10-98.
23. Kelly B, Chapman K, King L, Hardy L, Farrell L. Double standards for community sports: promoting active lifestyles but unhealthy diets. *Health Promot J Aust*. 2008;19(3):226–8. doi:10.1071/he08226.
24. DiFiori JP, Benjamin HJ, Brenner JS, Gregory A, Jayanthi N, Landry GL et al. Overuse injuries and burnout in youth sports: a position statement from the American Medical Society for Sports Medicine. *Br J Sports Med*. 2014;48(4):287–8. doi:10.1136/bjsports-2013-093299.
25. Sønderlund AL, O'Brien K, Kremer P, Rowland B, De Groot F, Staiger P et al. The association between sports participation, alcohol use and aggression and violence: a systematic review. *J Sci Med Sport*. 2014;17(1):2–7. doi:10.1016/j.jsams.2013.03.011.
26. Giles-Corti B, Clarkson JP, Donovan RJ, Frizzell SK, Carroll AM, Pikora T et al. Creating smoke-free environments in recreational settings. *Health Educ Behav*. 2001;28(3):341–51. doi:10.1177/109019810102800308.
27. Van Hoya A, Sarrazin P, Heusé JP, Kokko S. Coaches' perceptions of French sports clubs: health-promotion activities, aims and coach motivation. *Health Educ J*. 2015;74(2):231–43 doi:10.1177/0017896914531510.
28. Wolfenden L, Kingsland M, Rowland BC, Dodds P, Gillham K, Yoong SL et al. Improving availability, promotion and purchase of fruit and vegetable and non sugar-sweetened drink products at community sporting clubs: a randomised trial. *Int J Behav Nutr Phys Activity*. 2015;12(1):35. doi:10.1186/s12966-015-0193-5.
29. Casey M, Harvey J, Eime R, Payne W. Examining changes in the organisational capacity and sport-related health promotion policies and practices of State Sporting Organizations. *Ann Leisure Res*. 2012;15(3):261–76. doi:10.1080/11745398.2012.719213.
30. Kingsland M, Wolfenden L, Tindall J, Rowland B, Sidey M, McElduff P et al. Improving the implementation of responsible alcohol management practices by community sporting clubs: A randomised controlled trial. *Drug Alcohol Rev*. 2015;34(4):447–57. doi:10.1111/dar.12252.
31. Ooms L, Veenhof C. Factors facilitating and inhibiting implementation of easy accessible sporting programs. *J Sci Med Sport* 2012;15:S86. doi:10.1016/j.jsams.2012.11.208.
32. Johnson S, Van Hoya A, Donaldson A, Lemonnier F, Rostan F, Vuillemin A. Building health-promoting sports clubs: a participative concept mapping approach. *Public Health*. 2020;188:8–17. doi:10.1016/j.puhe.2020.08.029.
33. Ooms L, Veenhof C, Schipper-van Veldhoven N, de Bakker DH. Sporting programs for inactive population groups: factors influencing implementation in the organized sports setting. *BMC Sports Sci Med Rehabil*. 2015;7:12. doi:10.1186/s13102-015-0007-8.
34. Mountjoy M, Junge A. The role of international sport federations in the protection of the athlete's health and promotion of sport for health of the general population. *Br J Sports Med*. 2013;47(16):102–7. doi:10.1136/bjsports-2013-092999.
35. De Bock T, Scheerder J, Theeboom M, Constandt B, Marlier M, De Clerck T et al. Stuck between medals and participation: an institutional theory perspective on why sport federations struggle to reach sport-for-all goals. *BMC Public Health*. 2022;22:1891. doi:10.1186/s12889-022-14230-5.
36. Johnson S, Vuillemin A, Epstein J, Geidne S, Donaldson A, Tezier B et al. French validation of the e-PROSCeSS questionnaire: stakeholder perceptions of the health promoting sports club. *Health Promot int*. 2022;daab213. doi:10.1093/heapro/daab213.
37. Lane A, Murphy N, Regan C, Callaghan D. Health promoting sports club in practice: a controlled evaluation of the GAA Healthy Club Project. *Int J Environ Res Public Health*. 2021;18(9):4786. doi:10.3390/ijerph18094786.
38. Van Hoya A, Heuzé JP, Van den Broucke S, Sarrazin P. Are coaches' health promotion activities beneficial for sport participants? A multilevel analysis. *J Sci Med Sport*. 2016;19(12):1028–32. doi:10.1016/j.jsams.2016.03.002.
39. Van Hoya A, Johnson S, Geidne S, Vuillemin A. Relationship between coaches' health promotion activities, sports experience and health among adults. *Health Educ J*. 2020;79(7):0017896920919777. doi:10.1177/0017896920919777.

40. Whitelaw S, Baxendale A., Bryce C., Machardy L, Young I, Witney E. Settings based health promotion: a review. *Health Promotion Int.* 2001; 16(4): 339-353.
41. Kokko S. Sports clubs as settings for health promotion: fundamentals and an overview to research. *Scand J Public Health.* 2014;42(15_Suppl):60-5. doi:10.1177/1403494814545105.
42. Dooris M, Powell S, Parking D, Farrier A. Health promoting universities: effective leadership for health, well-being and sustainability. *Health Education.* 2001;121(3):295-310.doi: 10.1108/HE-12-2020-0121
43. Lee A, Tsang C, Lee SH, To CY. A comprehensive "Healthy Schools Programme" to promote school health: the Hong Kong experience in joining the efforts of health and education sectors. *J Epidemiol Commun Health.* 2003;57(3):174-7. doi:10.1136/jech.57.3.174.
44. de Leeuw E. Evidence for Healthy Cities: reflections on practice, method and theory. *Health Promot Int.* 2009;24(Suppl_1):i19-36. doi:10.1093/heapro/dap052.
45. Health promotion. Manila: WHO Regional Office for the Western Pacific; 2020 (<https://www.who.int/westernpacific/about/how-we-work/programmes/health-promotion>).
46. World Health Organization, United Nations Educational, Scientific and Cultural Organization. Making every school a health-promoting school: global standards and indicators for health-promoting schools and systems. Geneva: World Health Organization; 2021 (<https://apps.who.int/iris/handle/10665/341907>).
47. Shediac-Rizkallah MC, Bone LR. Planning for the sustainability of community-based health programs: conceptual frameworks and future directions for research, practice and policy. *Health Educ Res.* 1998;13(1):87-108. doi:10.1093/her/13.1.87.
48. Van Hoye A, Lane A, Dowd K, Seghers J, Donaldson A, Ooms L, Kokko S, Geidne S. Health Promoting Sports Clubs: from theoretical model to logic model. *Health Promotion Int.* 2023;38(2). doi: 10.1093/heapro/daad009
49. Dooris, M. (2006). Healthy settings: challenges to generating evidence of effectiveness. *Health Promotion International*, 21(1), 55-65.
50. Dooris, M. (2009). Holistic and sustainable health improvement: the contribution of the settings-based approach to health promotion. *Perspectives in public health*, 129(1), 29-36.
51. Geidne S, Kokko S, Lane A, Ooms L, Vuillemin A, Seghers J et al. Health promotion interventions in sports clubs: Can we talk about a setting-based approach? A systematic mapping review. *Health Educ Behav.* 2019;46(4):592-601. doi: 10.1177/1090198119831749.
52. McFadyen, T., et al., Strategies to improve the implementation of policies, practices or programmes in sporting organizations targeting poor diet, physical inactivity, obesity, risky alcohol use or tobacco use: a systematic review. *BMJ Open*, 2018. 8(9): p. e019151.
53. Tezier, B., Guillemin, F., Vuillemin, A., Johnson, S., Lemonnier, F., Rostan, F., & Van Hoye, A. (2022). Evaluation of implementation and effects of a health-promoting sports club intervention using a mixed-method design: PROSCeSS protocol. *BMJ Open Sport & Exercise Medicine*, 8(4), e001444.
51. VicHealth (2014). Stepping in: A bystander action toolkit to support equality and respect at work. Retrieved on <https://www.vichealth.vic.gov.au/search/bystander-action-toolkit>.
52. European Commission (2013). EU Guidelines on dual careers of athletes. Retrieved on <https://op.europa.eu/en/publication-detail/-/publication/3648359d-61c4-4132-b247-3438ee828450>.
53. Community and Health Department of the Gaelic Athletics Association (2018). Irish Life GAA Healthy Club Project Manual. Retrieved on <https://www.gaa.ie/api/pdfs/image/upload/jq8ujb6qge44ad6tpzjd.pdf>.
54. Marlier et al. (2022). Sport Good Governance Game. Retrieved on <https://www.sg3.eu/>.
55. International Sport and Culture Association (n.d.) Grassroots Sports Diplomacy Course. Retrieved on <https://learn.isca.org/courses/grassroots-sport-diplomacy/>.
56. International Safeguards for Children in Sport (2016). International Safeguards for Children in Sport toolkit. Retrieved on <https://safeinsport.org/resources/#eight-safeguards>.
57. Scottish Association for Mental Health (2018). Mental Health Charter for Physical Activity and Sport. Retrieved on www.sportandrecreation.org.uk/mental-health-charter.
58. European Sports NGO Youth (2022). Sport coaching for mental well-being. Retrieved on <https://www.engso-education.eu/projects/spirit/>.

59. Földi, L. et al. (2019). Outsport Toolkit (<https://www.out-sport.eu/wp-content/uploads/2019/11/OUTSPORTTOOLKIT-EDUCATION-THROUGH-SPORT.pdf>).
60. Safe Sport International (2017). Pro Safe Sport+ Training Kit (<https://pjp-eu.coe.int/en/web/pss/training-kit>).
61. European Sports NGO Youth (2020). Sport for Active Citizenship Toolkit (https://youth-sport.net/wp-content/uploads/2022/04/6acfa9_68f0d4d26f7c4c8ea5d4e8ea32b17f4a.pdf).
62. United Nations High Commissioner for Refugees (UNHCR), International Olympic Committee (IOC) and Terre des hommes organisation (2018). Sport for Protection Toolkit: Programming with Young People in Forced Displacement Settings (<https://www.unhcr.org/media/sport-protection-toolkit>).
63. Transparency International (2014). Staying on side. How to stop match-fixing (https://images.transparencycdn.org/images/2014_Stop_MatchFixing_EN.pdf).
64. Alcohol and Drug Foundation (2000). The Good Sports Program (<https://goodsports.com.au>).
65. Sask Sport (n.d.). Community Sport for Children and Youth Planning Toolkit (<https://www.sasksport.ca/wp-content/uploads/2020/12/Community-Sport-for-Children-and-Youth-Planning-Toolkit.pdf>).
66. VicHealth (n.d.). Everyone wins - Community sports clubs (https://www.vichealth.vic.gov.au/media-and-resources/publications/everyone-wins_clubs).
67. Jones et al. (2022). The Gender Equality Tool for Generation Z (<https://getzproject.eu/>).
68. VicHealth (2021). How to select mental health program providers for sports clubs (<https://www.vichealth.vic.gov.au/search/how-to-select-mental-healthprogramme-providers-for-sports-clubs>).
69. International Sport and Culture Association (2016). Integration of refugees through sport (<https://learn.isca.org/courses/irts/>).
70. International Olympic Committee (2021). IOC Mental Health in elite athletes' tool (<https://olympics.com/athlete365/mentally-fit/mentallyfit-toolkit-resources/>).
71. Dijk et al. (2016). Keep Youngster Involved (<https://tools.kenniscentrumsportenbewegen.nl/keep-youngsters-involved/tool/keep-youngsters-involved/>).
72. National Council of Youth Sports (2022) (<https://www.ncys.org/safety/stop-sports-injuries/>).
73. Sports club for Health (2020) (<https://www.scforh.info/>).
74. Sugapas (2020) (<https://sugapas.csd.auth.gr/mooc/>).
75. The National Centre of Excellence in Youth Mental Health (2019). Supporting mental well-being in community sport (<https://www.orygen.org.au/Training/Resources/Physical-and-sexual-health/Toolkits/Supporting-mental-wellbeing-in-community-sport/MH-in-community-sports-toolkit-WEB>).
76. Health-promoting sports clubs national audit tool (2022). Copenhagen: World Health Organization Regional Office for Europe (<https://apps.who.int/iris/handle/10665/353076>).

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WHO/EURO:2023-5216-44980-64040