Sports Club for Health (SCforH)

Country Cards







Co-funded by the Erasmus+ Programme of the European Union

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Introduction

There is a range of physical, psychological, and social benefits associated with the participation in sports. From a public health perspective, it is therefore important to enable access to high-quality sports programmes to as many people as possible. Sports clubs are a key setting in which people engage in sports; hence, they may play an important role in improving population health. However, numerous sports clubs are focused predominately or exclusively on elite athletes and achieving top results in competitions while underutilising their potential to engage wider audiences by offering sport-for-all activities.

With the aim to improve the quality and availability of health-enhancing sports activities, since 2008, a group of experts in health-enhancing physical activity (HEPA) and sports promotion has been developing and promoting the Sports Club for Health (SCforH) approach. To support this endeavour, within three large SCforH projects funded by the European Commission we have created various resources, such as the SCforH guidelines, textbook, online course, website, and database of examples of good practice. These materials have been directly disseminated to more than six thousand stakeholders in the European sports sector, including sports club managers and coaches, representatives of sports associations, physical educators, physical activity promoters, and policy makers in the area of sport.

Since 2013, the national implementation of SCforH guidelines has been one of the 23 indicators for evaluation of physical activity levels and policies in the EU, as proposed by the Council of the European Union. To facilitate the assessment of national performance against this indicator, enable comparisons between countries, and inform future actions to promote the implementation of SCforH guidelines, in this book we summarised data relevant to the promotion of health-enhancing sports activities in 36 European countries and presented them in the form of Country Cards.

Methods

The SCforH Country Cards were developed in four stages. From February 2020 to July 2022, we conducted a SCforH survey among 689 stakeholders in the sports sector, including academic staff in higher education or research institutions and representatives of sports clubs, sports associations, governmental bodies, and public health institutions. From March to June 2022, four authors of the book (SBT, HH, DJ, and ŽP) selected indicators relevant to the national implementation of SCforH approach. The proposed indicators were then reviewed and approved by 8 authors of the book (SBT, LB, GDG, HH, DJ, TM, ŽP, and RV). From July to September 2022, four authors of the book (DJ, TM, ŽP, and MS) extracted and analysed data from the SCforH 2015-17 survey, SCforH 2020-22 survey, and secondary sources. For the purpose of this book, we used the list of countries/economies/states/regions (hereafter referred to as "countries") provided by the World Bank. Not all of the authors necessarily agree with all the definitions provided on this list. The SCforH Country Cards were prepared for 36 European countries, including 27 European Union member states, 4 candidate countries (Albania, North Macedonia, Serbia, and Turkey), Iceland, Norway, Switzerland, and the UK. In the final stage, 32 authors of the book were asked to review and approve the content of SCforH Country Cards.

Indicators

Each SCforH Country Card includes the following 11 groups of indicators:

- I. Demographics
- II. Socioeconomic status
- III. Population health
- IV. Physical activity and sport participation
- V. National policy
- **VI.** Commitment of the national government to the promotion of elite sports and HEPA
- VII. Commitment of sports organisation to the promotion of elite sports and HEPA
- VIII. Networking
- **IX.** Awareness and implementation of the SCforH guidelines among sports clubs
- X. Initiatives taken to promote the SCforH guidelines
- XI. Summary scores

DEMOGRAPHICS

The most recent available data on the population size (expressed in millions) and percentage of urban population were taken from the World Bank's World Development Indicators database in April, 2022.

SOCIOECONOMIC STATUS

The most recent available data on the income per capita (GNI per capita in 2020, Atlas method, exchanged from US Dollars at the average Dollar – Euro exchange rate for 2020 and expressed in Euros) were taken from the World Bank's <u>World</u> <u>Development Indicators</u> database in April, 2022. The most recent available data on educational attainment were taken from the same database in April, 2022 and expressed as the percentage of adults (25+ years of age) in the population with at least the bachelor degree, for all countries except Croatia, Luxembourg, Montenegro, Switzerland, and Turkey. For these five countries, data on educational attainment were taken from the Eurostat database and expressed as the percentage of people aged 15 to 64 years in the population with at least a tertiary education degree. The most recent available data on income inequality (Gini index) and unemployment rate (expressed as the percentage of total labour force) were also taken from the World Bank's World Development Indicators database in April 2022.

POPULATION HEALTH

The most recent available data on life expectancy at birth (expressed as the number of years for males and females) and deaths from non-communicable diseases (expressed as the percentage of total deaths) were taken from the World Bank's World Development Indicators database in April 2022.

PHYSICAL ACTIVITY AND SPORT PARTICIPATION

The percentage of individuals in the population who exercise or play sports at least once a week and the percentage of individuals in the population who never exercise or play sports were taken from the Special Eurobarometer 525 Sport and Physical Activity survey.

NATIONAL POLICY

The most recent available data on health expenditure (expressed in Euros per capita according to the average Dollar – Euro exchange rate for the given year) and availability of physical activity policy (Yes/No) were taken in April, 2022 from the World Bank's World Development Indicator database and the Global Observatory for Physical Activity (GoPA!) – 2^{nd} Physical Activity Almanac (Policy and Surveillance status, question 1), respectively. The use of data on the availability of national physical activity policies was approved by the publisher of the almanac.

COMMITMENT OF THE NATIONAL GOVERNMENT TO THE PROMOTION OF ELITE SPORTS AND HEPA

To assess the commitment of national government to the promotion of (a) elite sports, (b) health-enhancing sports activities, and (c) overall health-enhancing physical activity (HEPA), we analysed the data from the SCforH 2015-17 (for Albania and Norway) and SCforH 2020-22 (for the remaining 34 countries) surveys conducted among academic staff in higher education or research institutions and representatives of sports clubs, sports associations, governmental bodies, and public health institutions. The level of commitment was estimated on the scale from o to 10, where o denotes "not at all committed" and 10 denotes "most highly committed".

COMMITMENT OF SPORTS ORGANISATIONS TO THE PROMOTION OF ELITE SPORTS AND HEPA

To assess the commitment of sport organisations to the promotion of (a) elite sports, (b) health-enhancing sports activity, and (c) overall health-enhancing physical activity (HEPA), we analysed the data from the SCforH 2015-17 survey conducted among representatives of sports associations. The level of commitment was estimated on the scale from o to 10 where o denotes "not at all committed" and 10 denotes "most highly committed".

NETWORKING

Data on the number of national members in (a) European Federation for Company Sports (EFCS), (b) European Network for the Promotion of Health-Enhancing Physical Activity (HEPA Europe), (c) European Non-Governmental Sport Organisation (ENGSO), (d) International Sport and Culture Organisation (ISCA), and (e) The Association For International Sport for All (TAFISA) were collected from their websites and from the representatives of the organisations in the SCforH 2020-22 project.

AWARENESS AND IMPLEMENTATION OF THE SCFORH

GUIDELINES AMONG SPORTS CLUBS

To estimate the percentage of sports clubs (a) whose representatives are aware of the SCforH guidelines and (b) that implemented the SCforH guidelines, we analysed the data from the SCforH 2015-17 (for Albania, Cyprus, Greece, Lithuania, Luxembourg, and Norway) and SCforH 2020-22 (for the remaining 30 countries) surveys conducted among academic staff in higher education or research institutions and representatives of sports clubs, sports associations, governmental bodies, and public health institutions. We analysed the responses to the following question: *"Please estimate the percentage of sports clubs in your country that:* (a) are aware of the 'Sports Club for Health' (SCforH) Guidelines, (b) implemented 'Sports Club for Health' Programmes according to the SCforH guidelines."

INITIATIVES TAKEN TO PROMOTE THE SCFORH GUIDELINES

To determine whether any initiatives were taken to promote the use or implementation of SCforH guidelines by (a) the government, (b) sports organisations, (c) higher education institutions, (d) public health institutions, (e) members of the SCforH consortium, and (d) other stakeholders, we analysed the data from the SCforH 2015-17 (for Germany, Italy, Netherlands, Norway, and Turkey) and SCforH 2020-22 (for the remaining 31 countries) surveys conducted among academic staff in higher education or research institutions and representatives of governmental bodies and public health institutions.

SUMMARY SCORES

The summary scores were calculated for: (a) the commitment of national government, (b) the commitment of sports organisations, (c) networking, (d) the awareness of SCforH guidelines, (e) the implementation of SCforH guidelines, and (f) the initiatives taken to promote the SCforH guidelines. We also calculated the overall score to estimate the current national capacity to promote HEPA through sports clubs and associations. The summary scores were categorised as "Low", "Medium", and "High", based on the following data:

- A. the commitment of national government to the promotion of HEPA (0-3.4 = Low, 3.5-6.4 = Medium, 6.5-10 = High)
- **B.** the commitment of sports organisations to the promotion of HEPA (0-3.4 = Low, 3.5-6.4 = Medium, 6.5-10 = High)
- C. the number of umbrella organisations with the membership from the given country (0-1 = Low, 2-3 = Medium, 4-5 = High)
- D. the estimated percentage of sports clubs whose representatives are aware of the SCforH guidelines (0-30% = Low, 31-60% = Medium, 61-100% = High)
- E. the estimated percentage of sports clubs that implemented the SCforH guidelines (0-30% = Low, 31-60% = Medium, 61-100% = High)
- F. the number of different types of stakeholders that have taken initiatives to promote the use or implementation of SCforH guidelines (0-1 = Low, 2-4 = Medium, 5-6 = High)

The overall score was calculated as the sum of points in all summary scores, where no points were assigned for "Low", 1 point was assigned for "Medium", and 2 points were assigned for "High" summary scores. The sum of points was then further categorised into "Low" (0-3 points), "Medium" (4-8 points), and "High" (9-12 points).

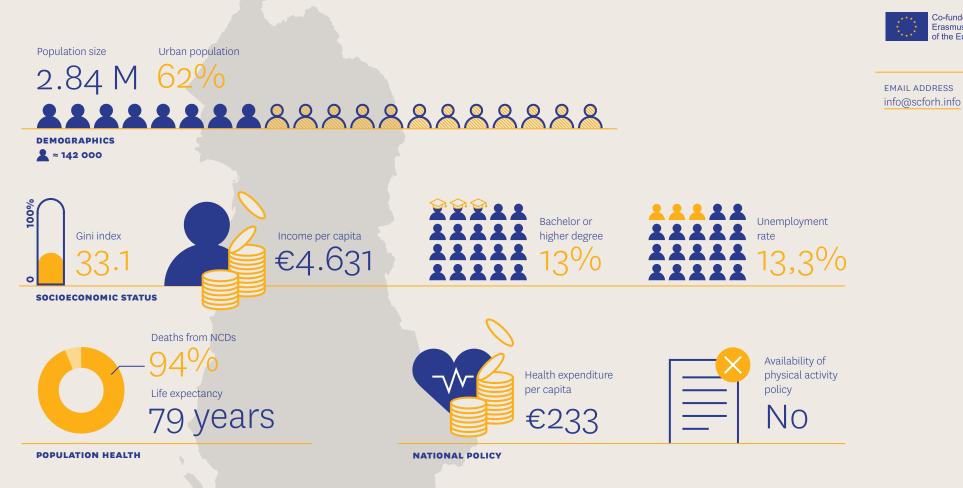


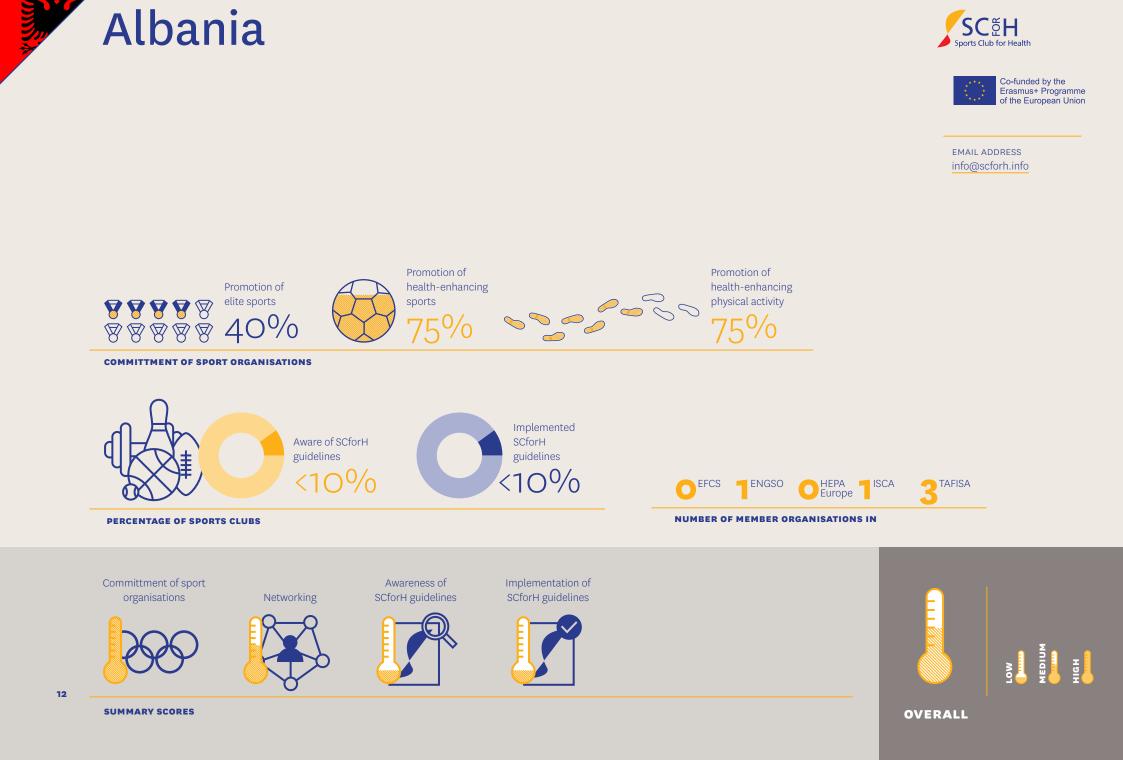
MALTA

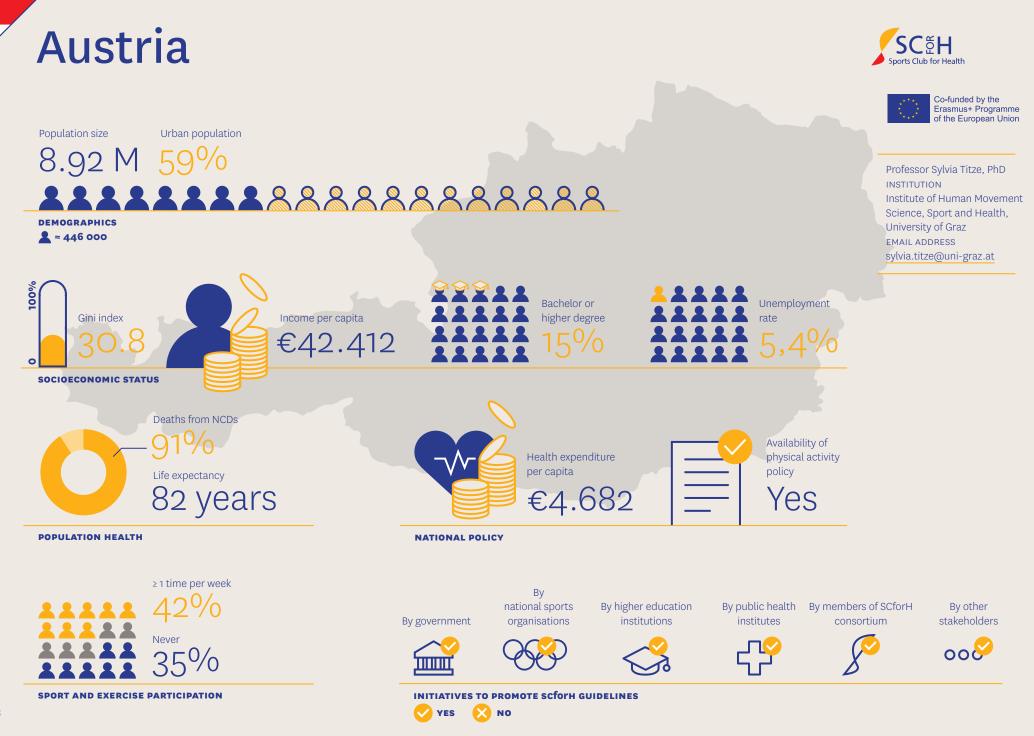
Albania

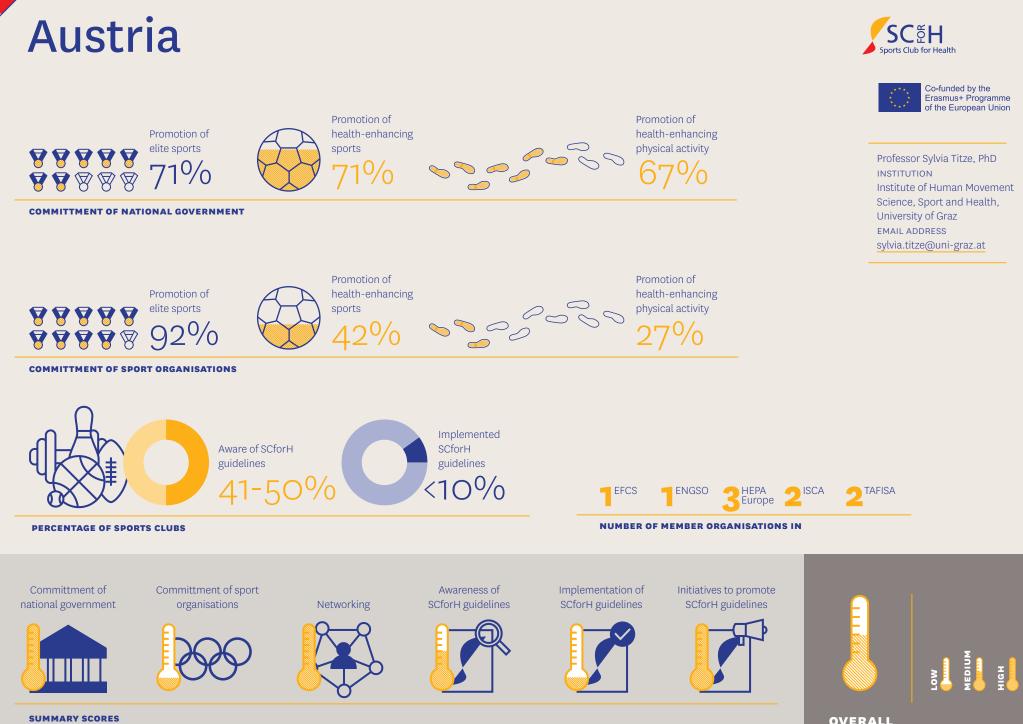


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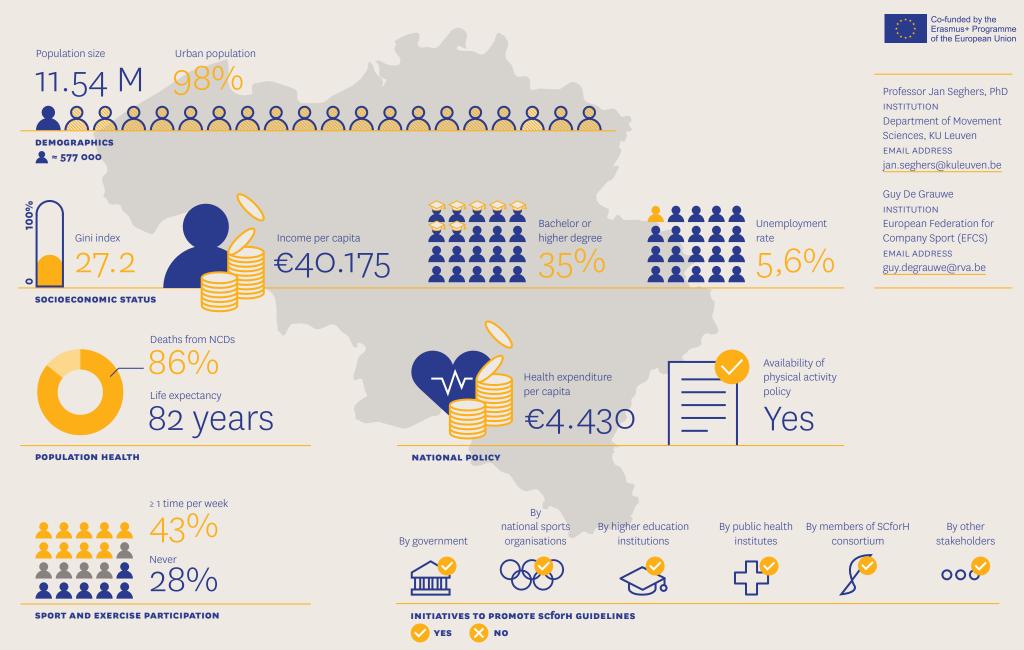


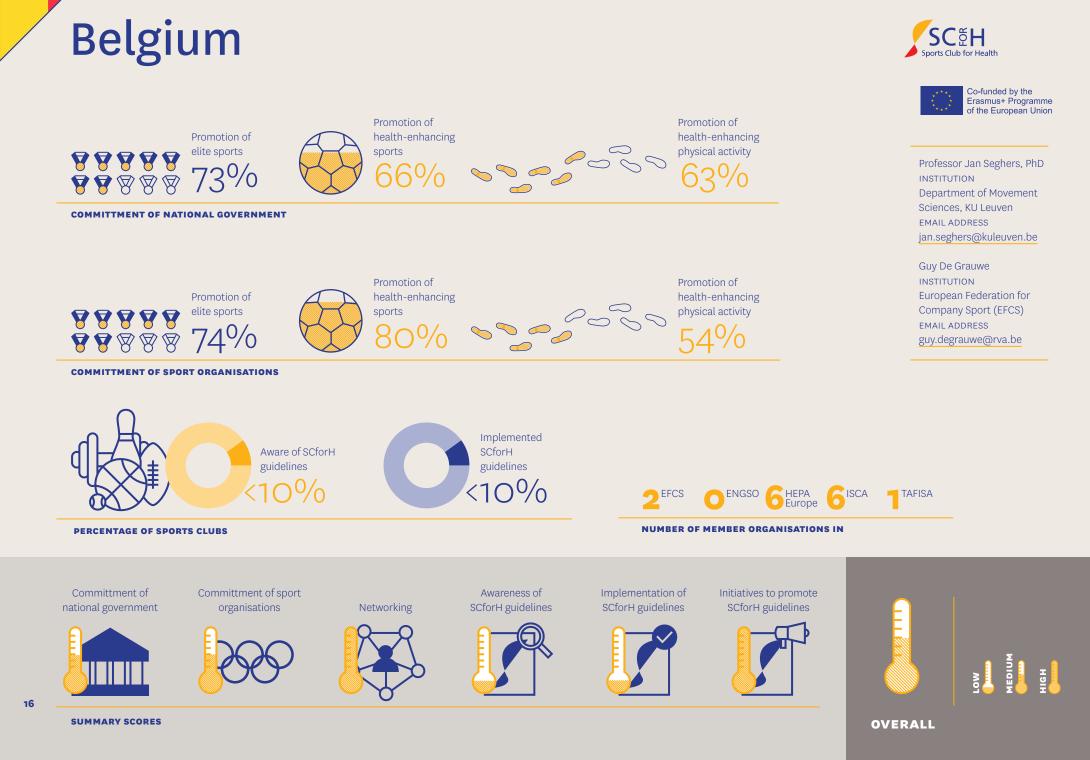


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100% Bachelor or Unemployment higher degree Income per capita Gini index rate €8.446 1% 0 SOCIOECONOMIC STATUS Deaths from NCDs Availability of Health expenditure physical activity per capita policy Life expectancy Yes €623 75 years **POPULATION HEALTH** NATIONAL POLICY ≥ 1 time per week Never 61%



6.93 M 76%

SPORT AND EXERCISE PARTICIPATION

Urban population

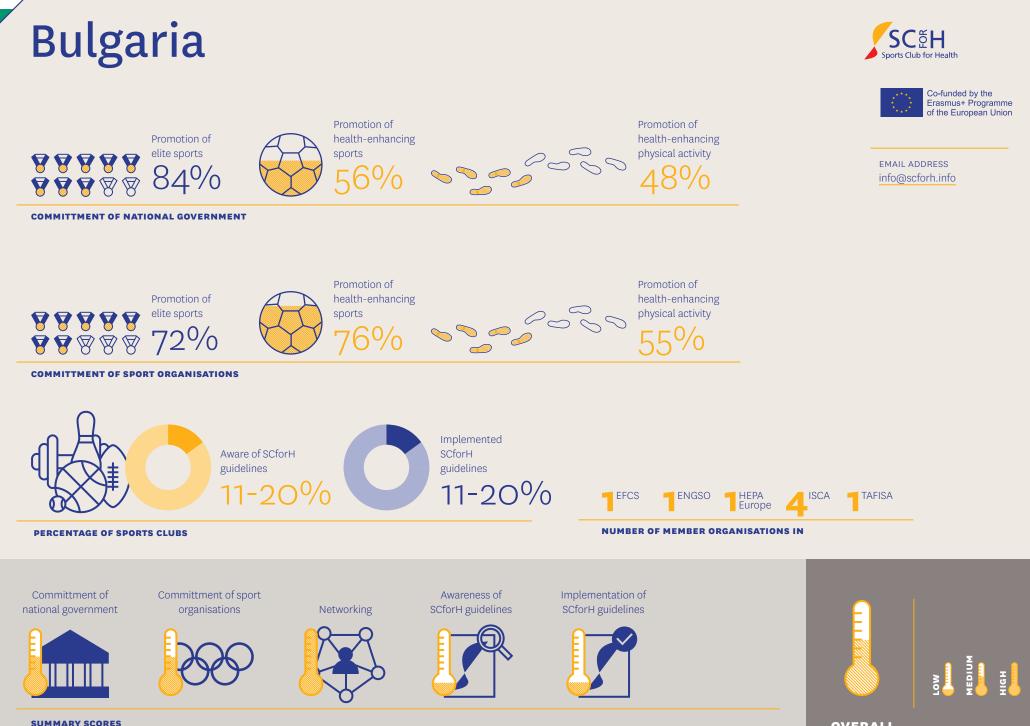
Population size

DEMOGRAPHICS ≈ 346 000

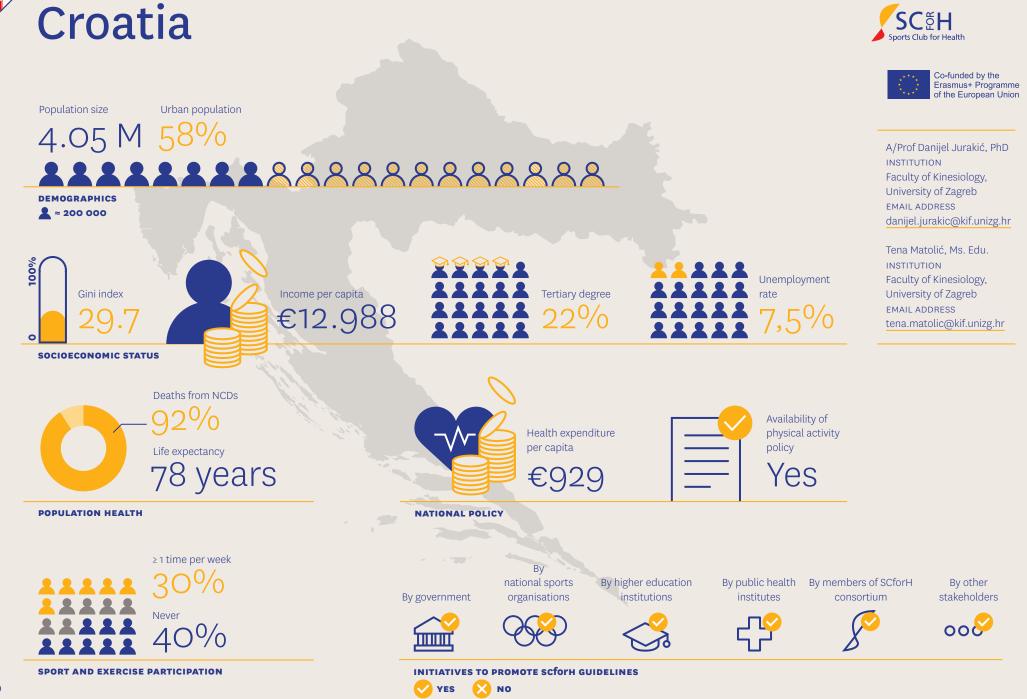


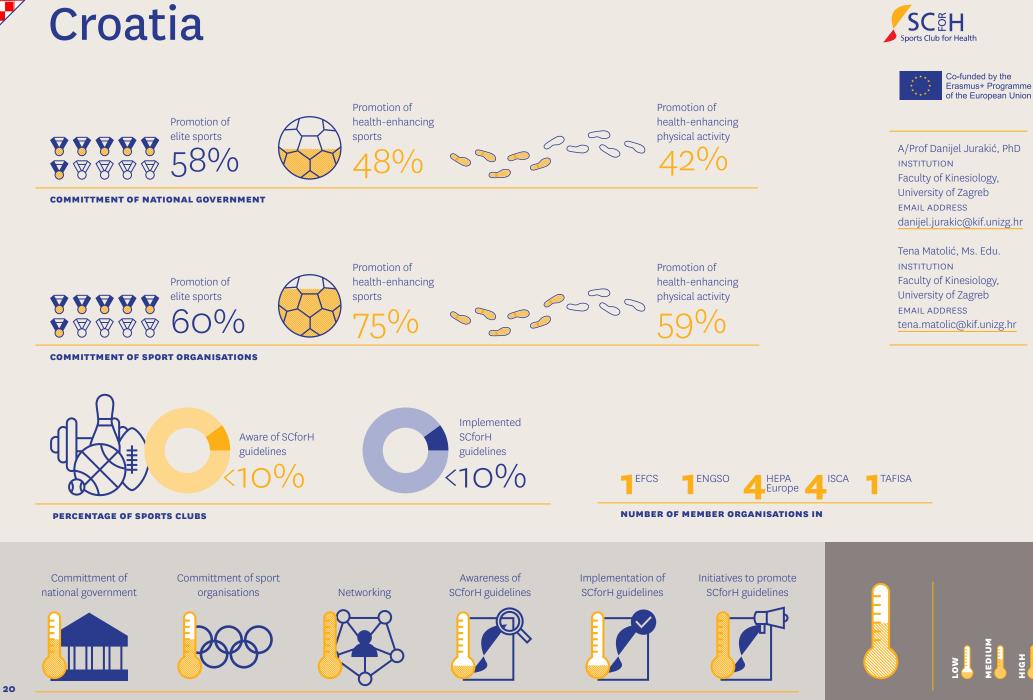


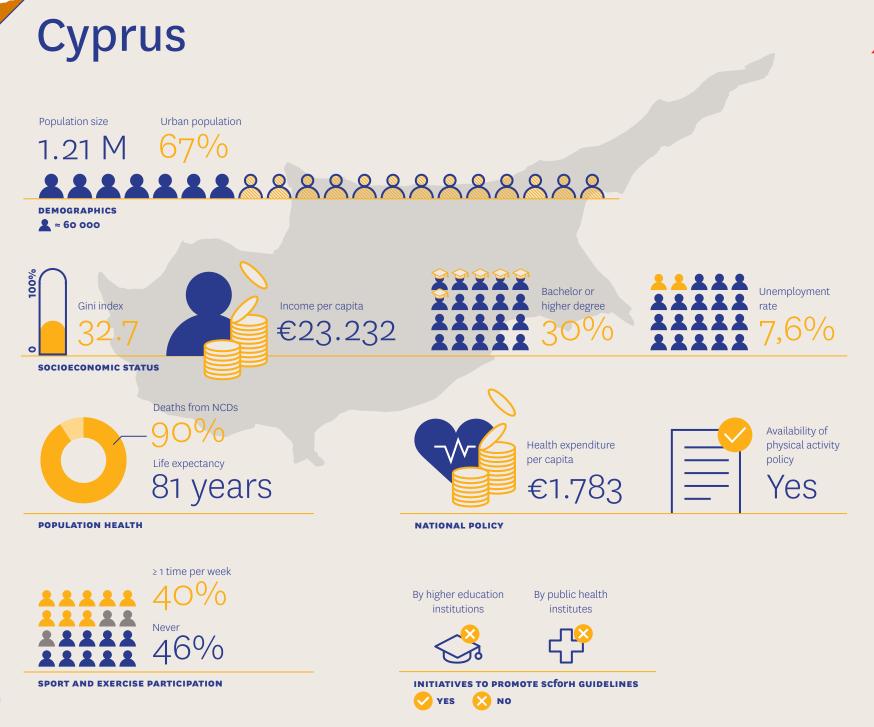




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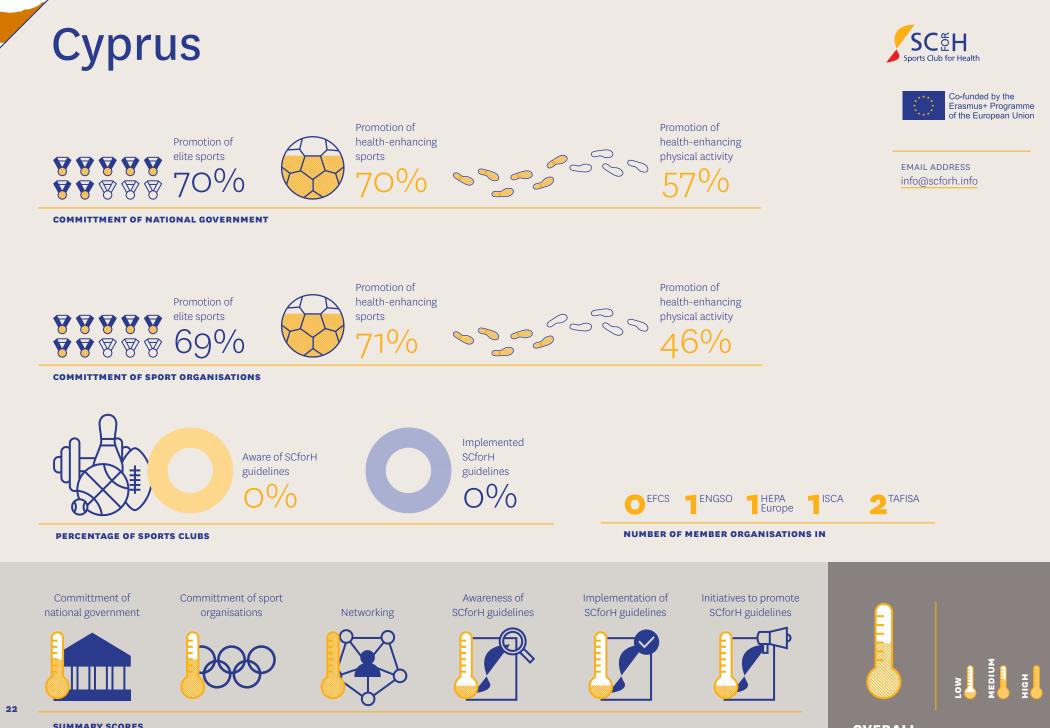


SC H Sports Club for Health

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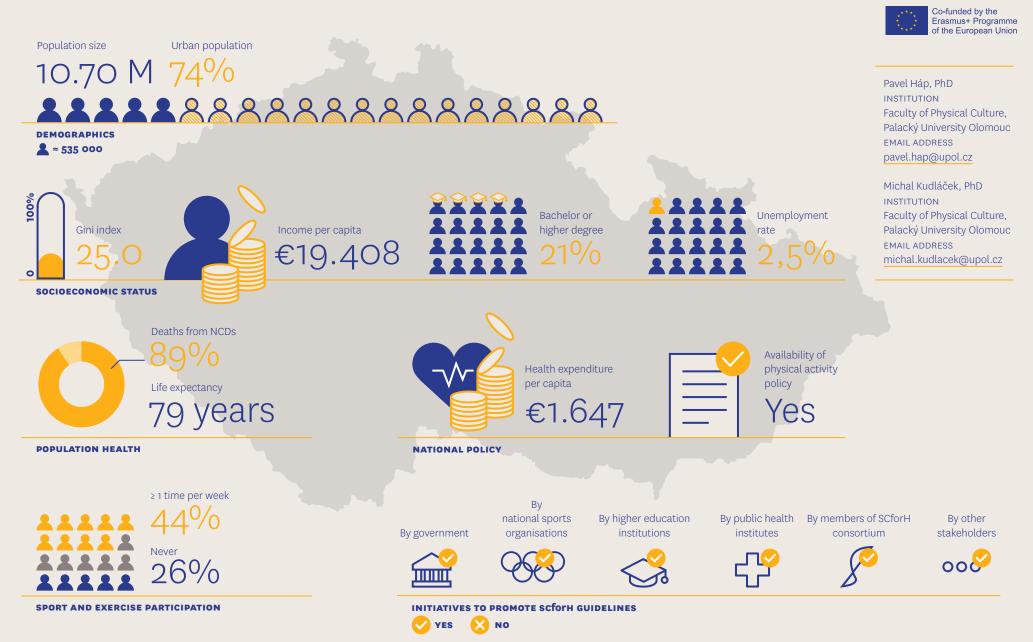
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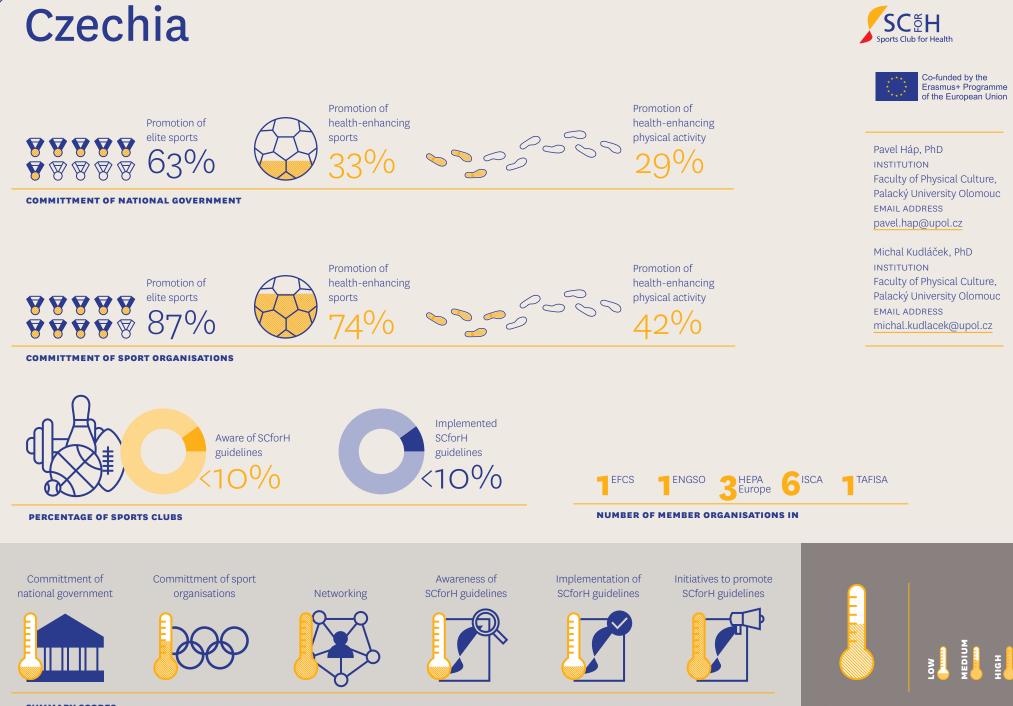
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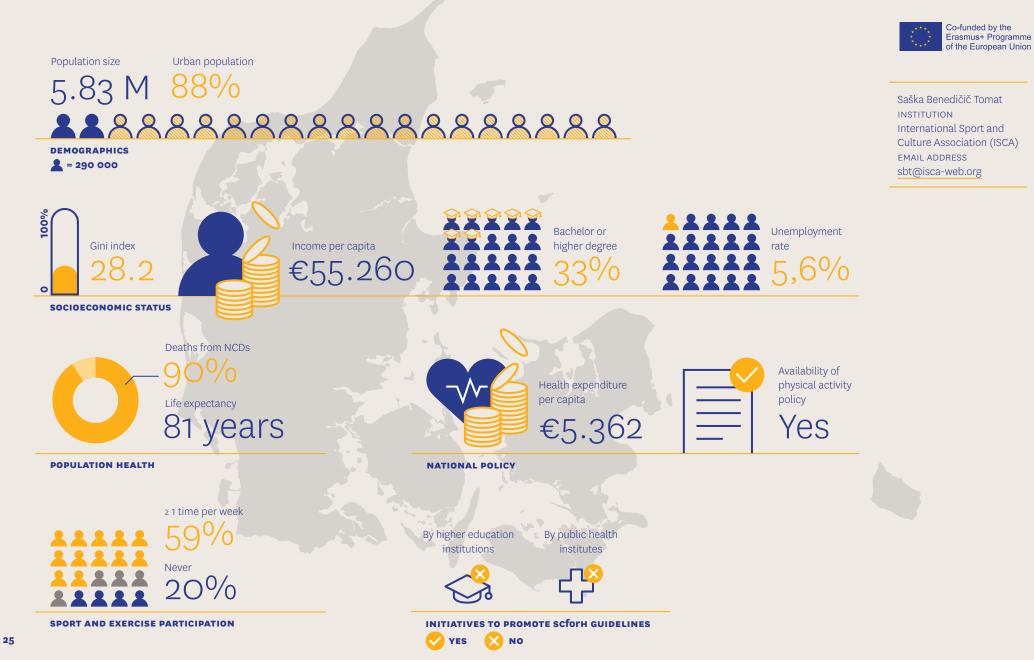






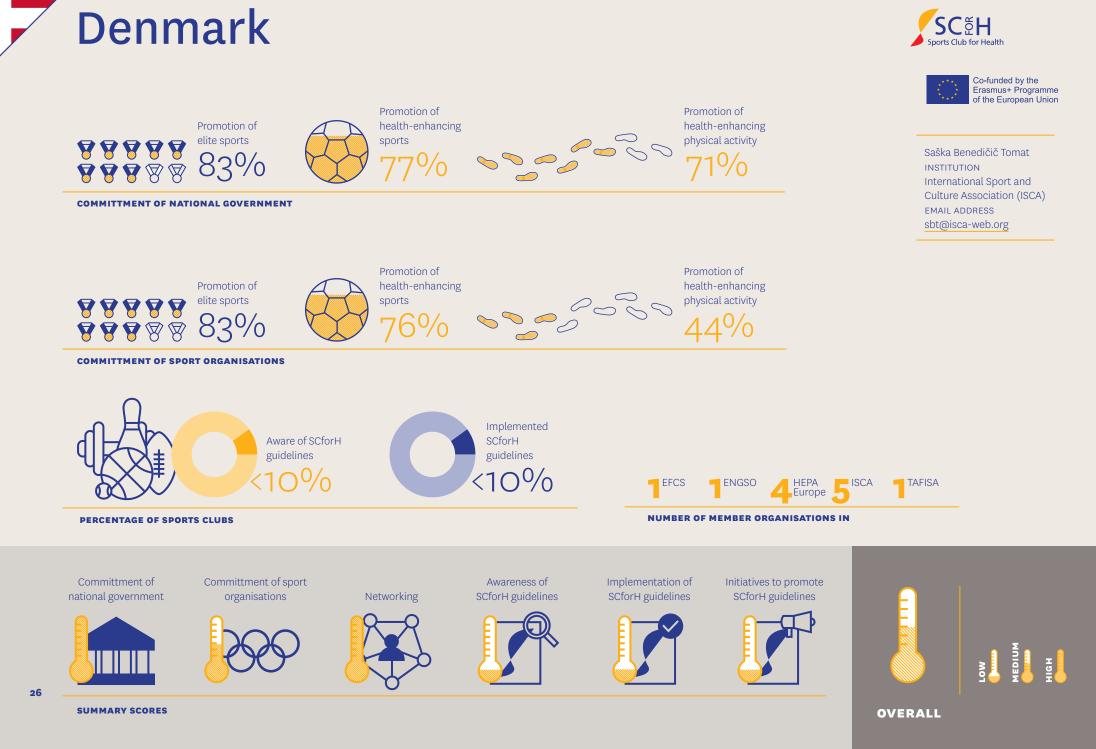


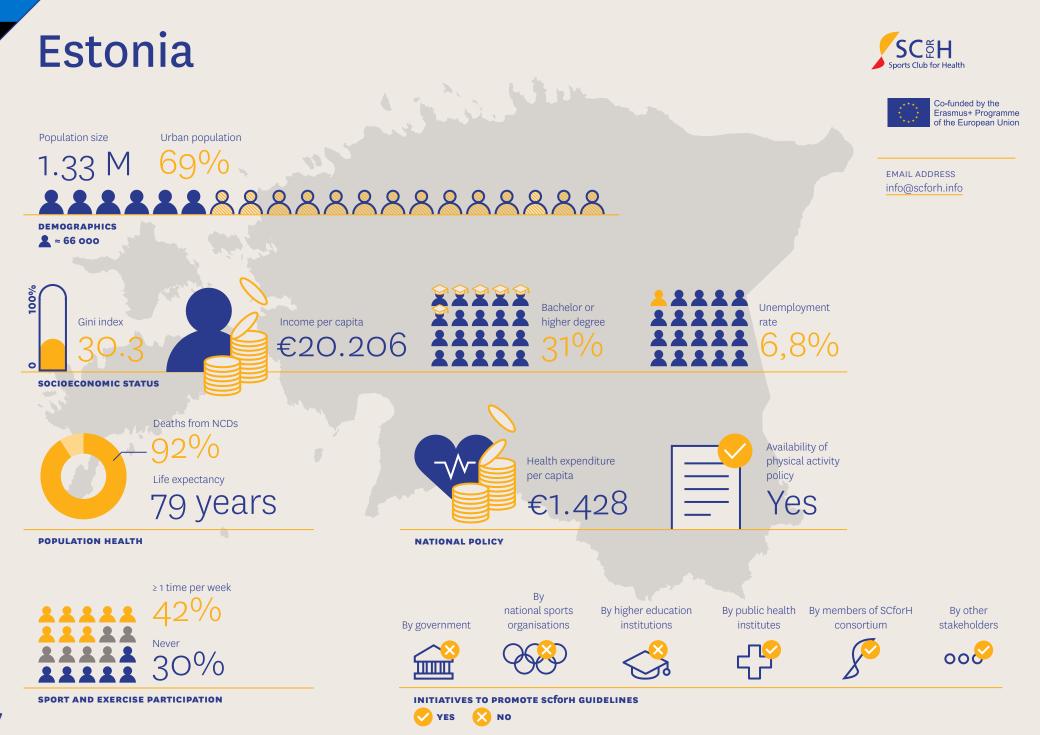
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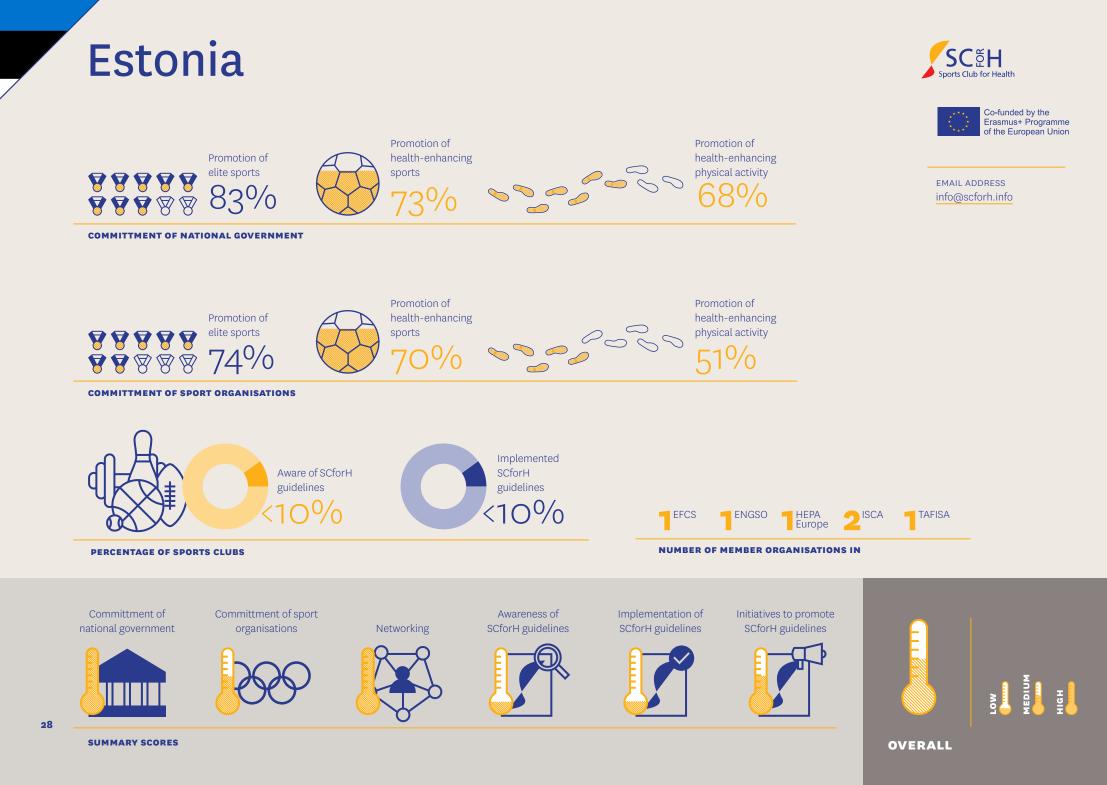


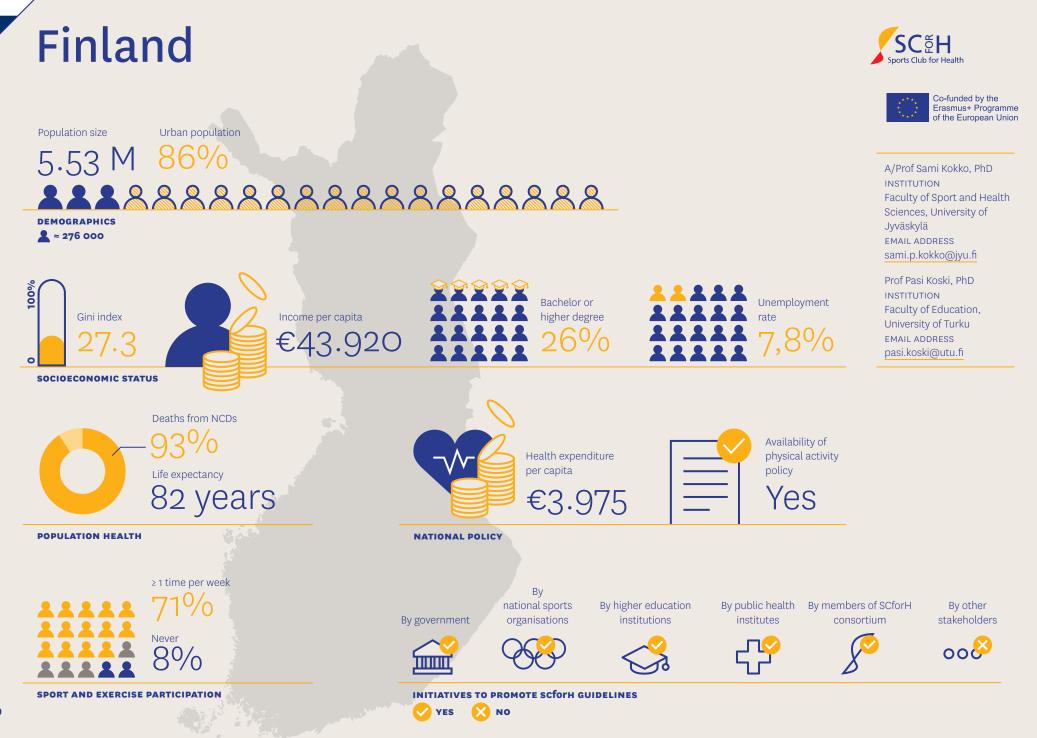
Denmark

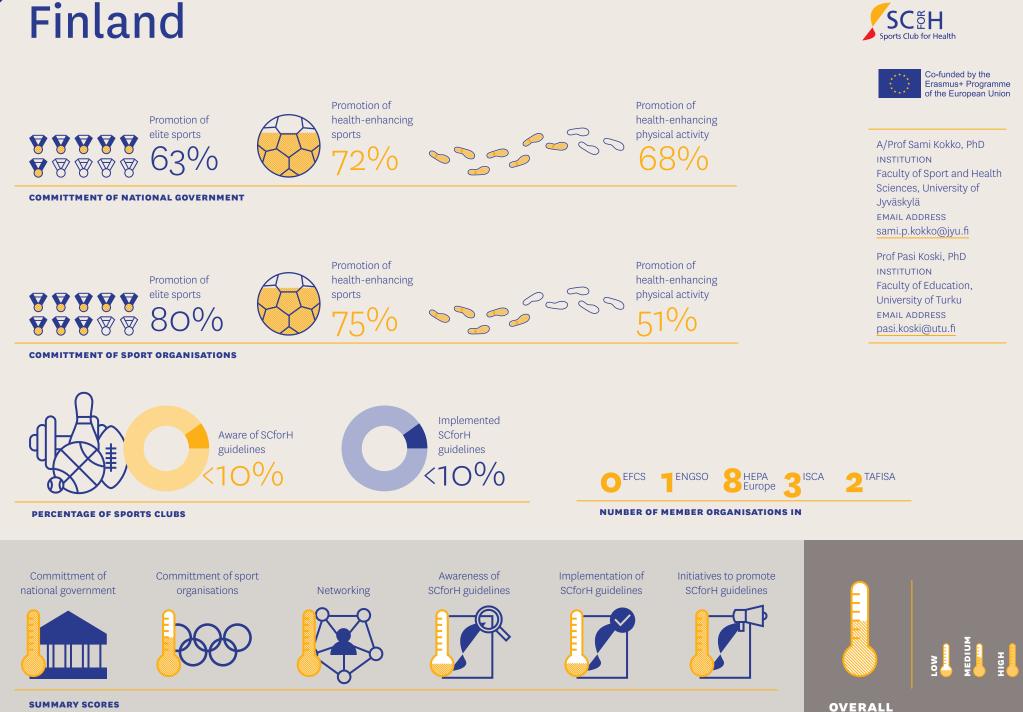






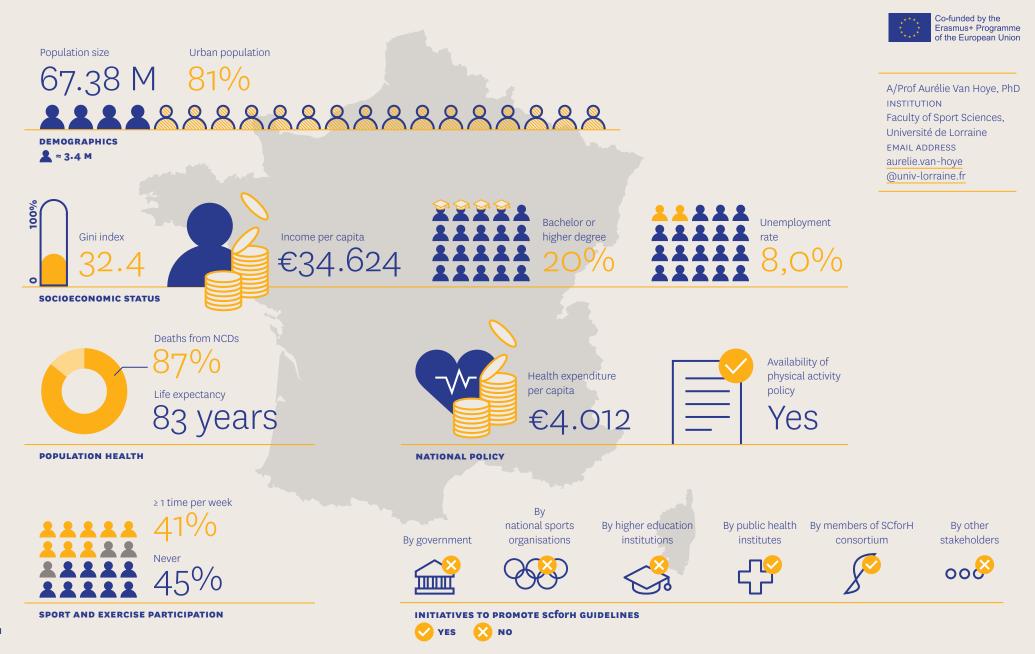


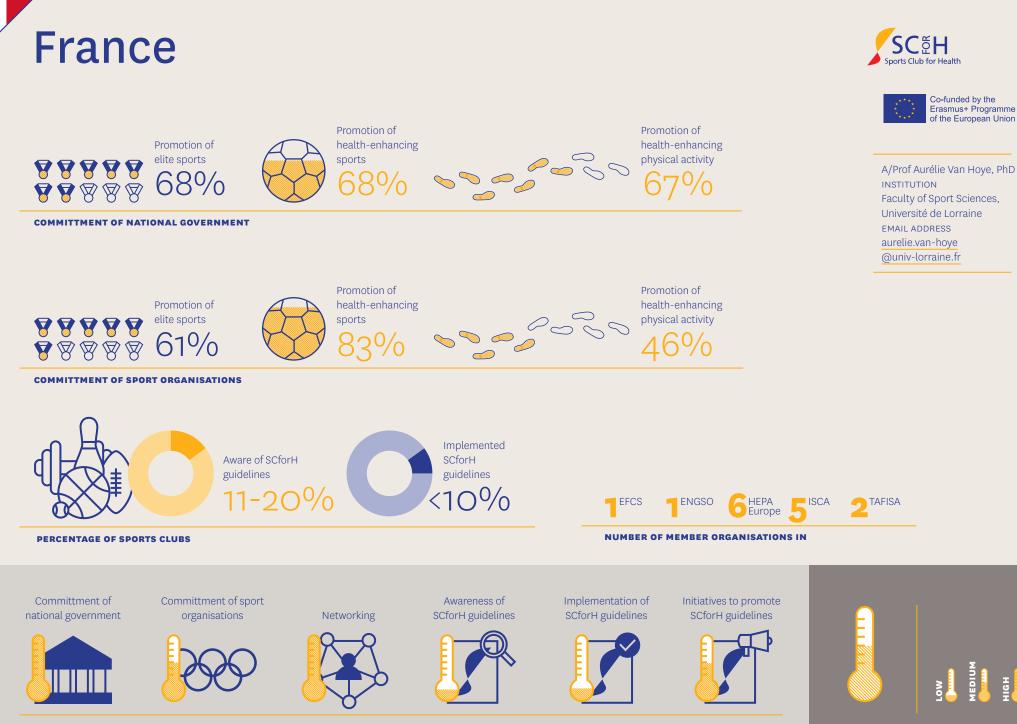




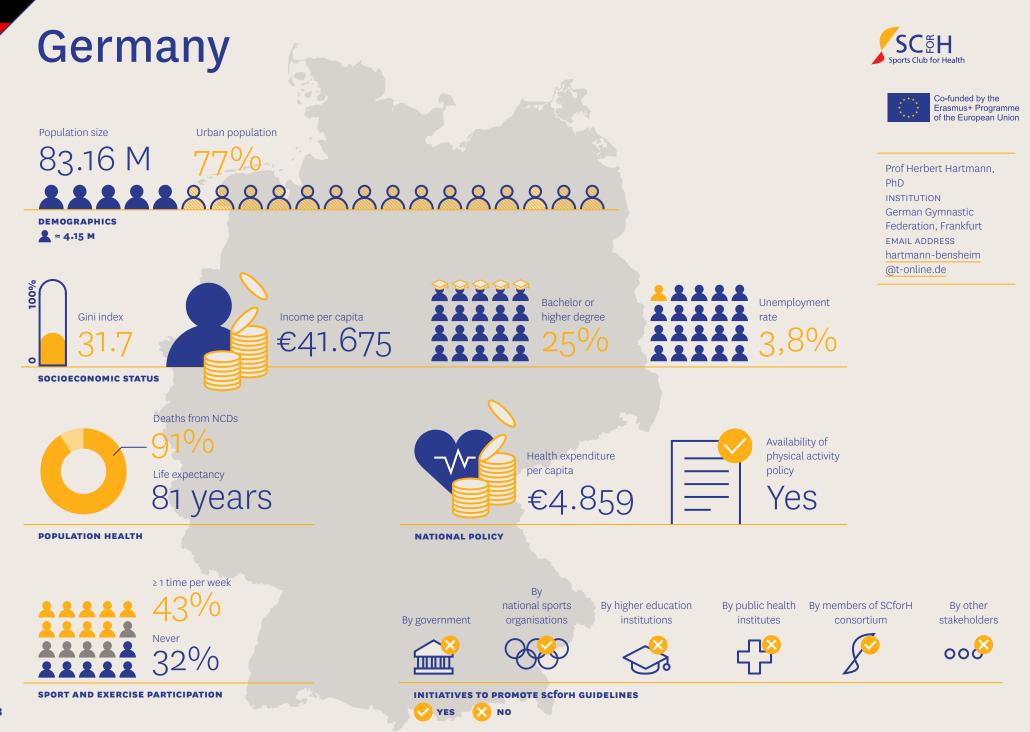
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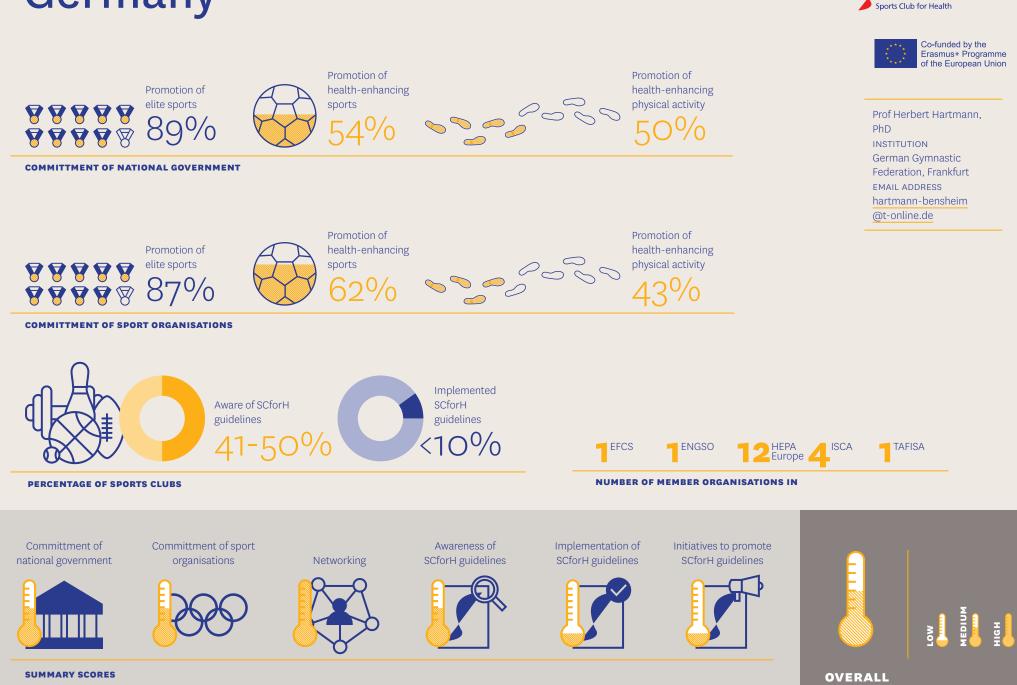






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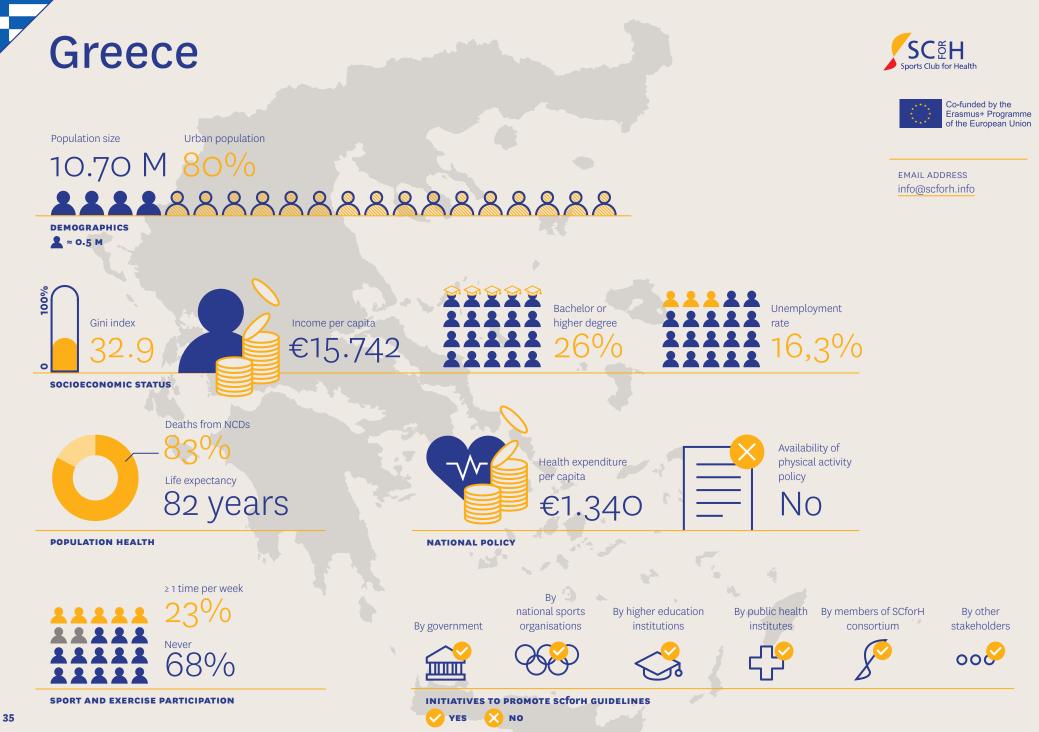


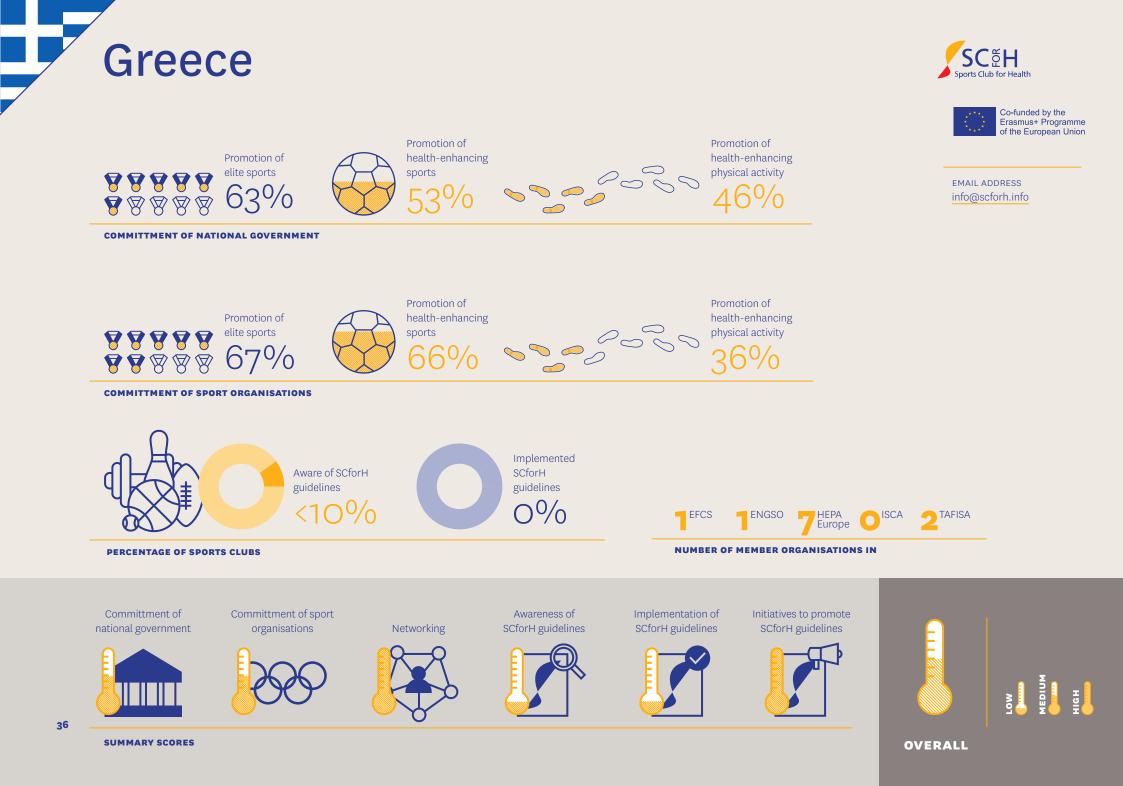


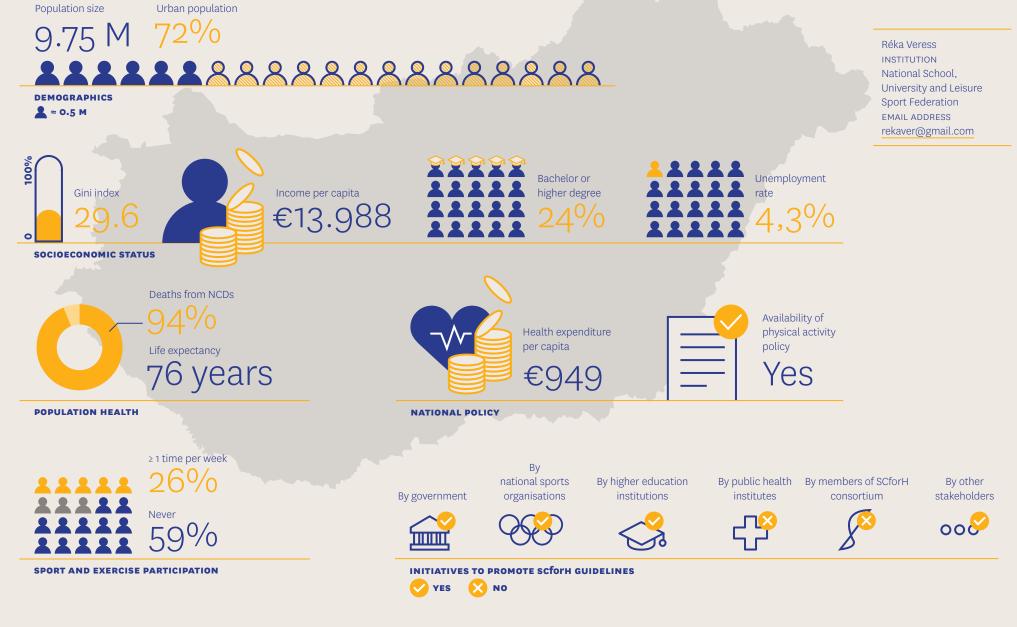
SC H

Germany

34



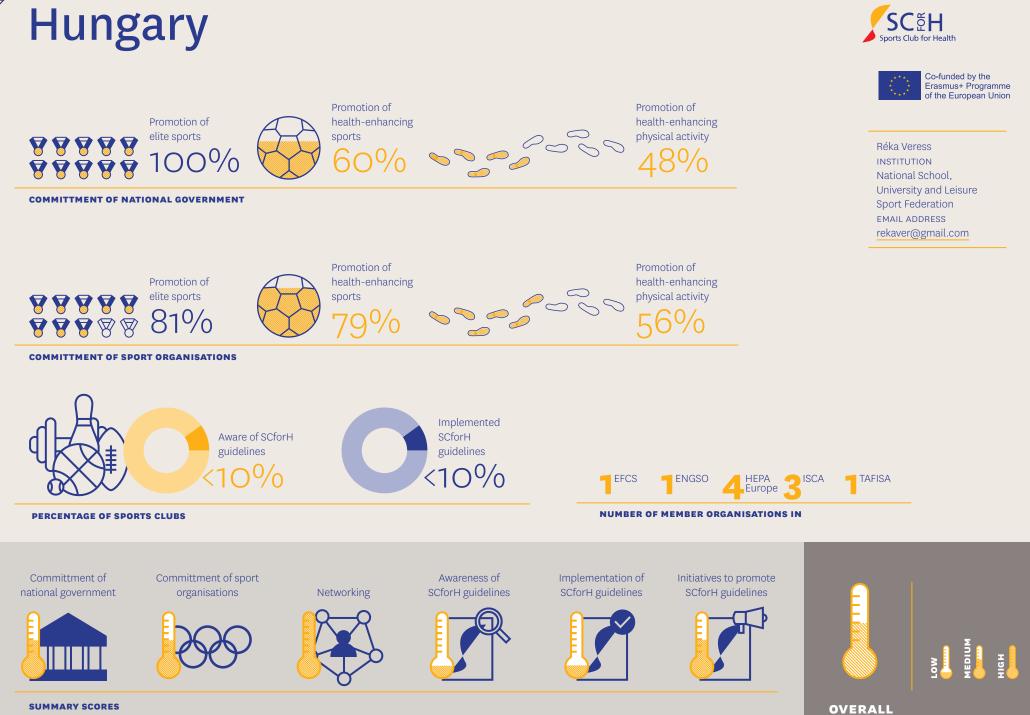


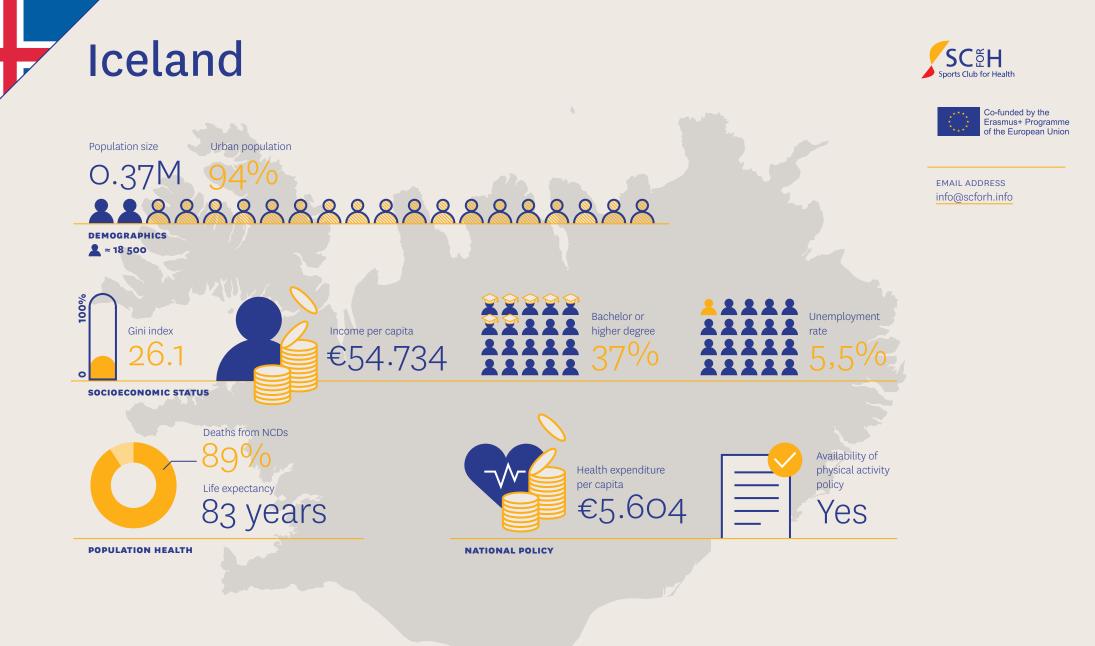


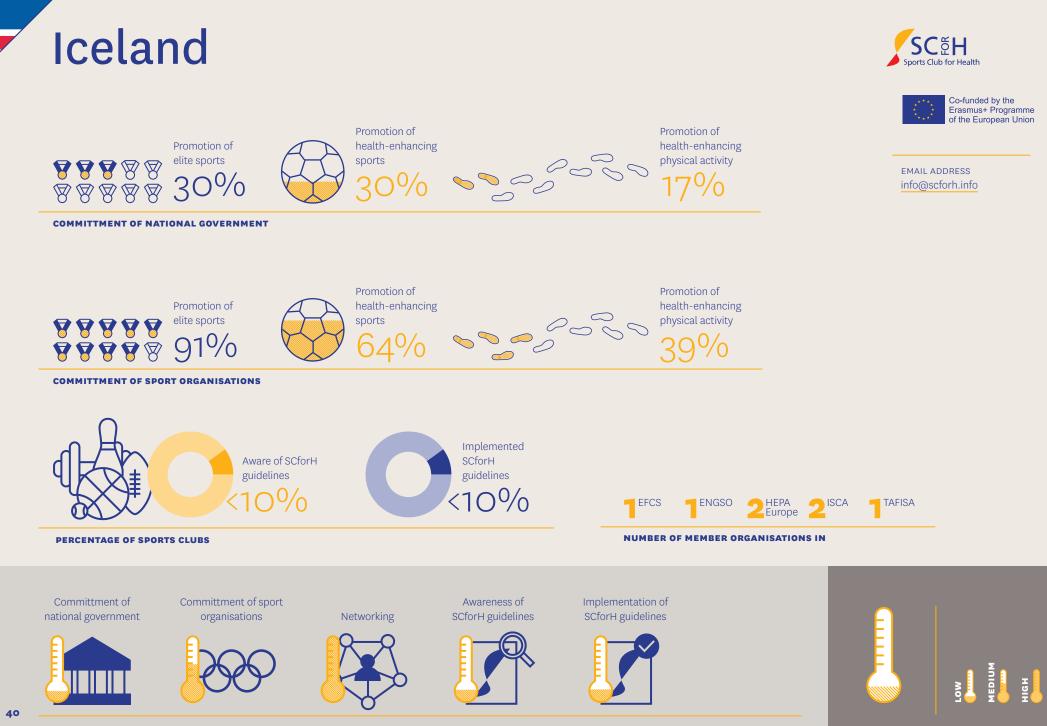


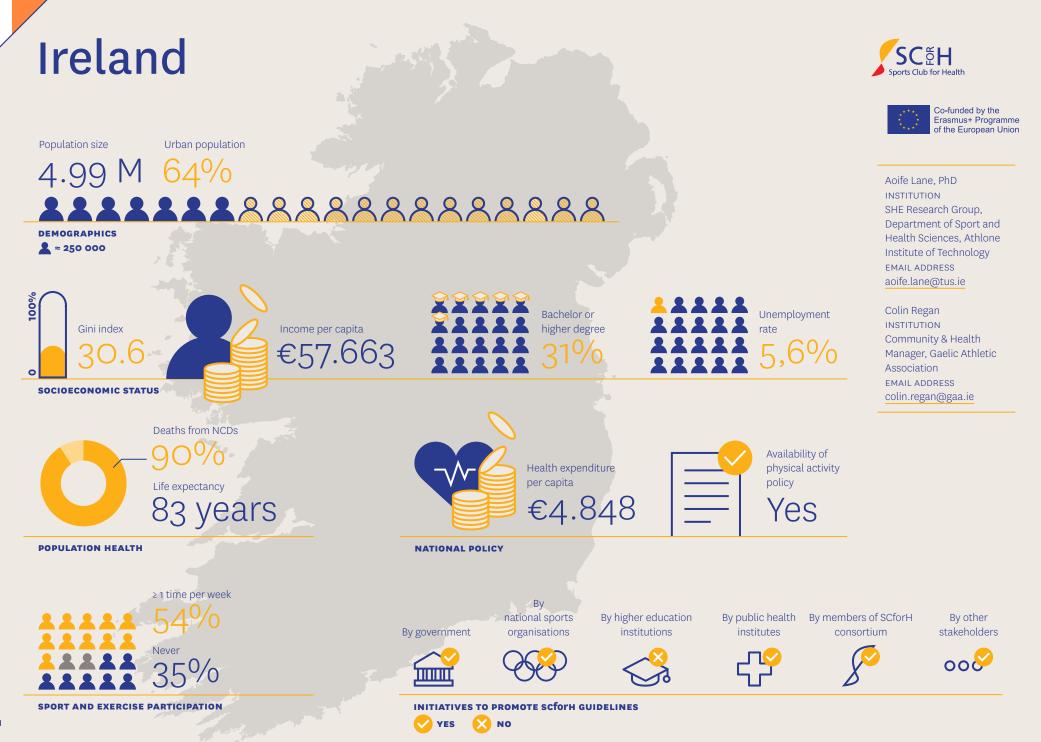


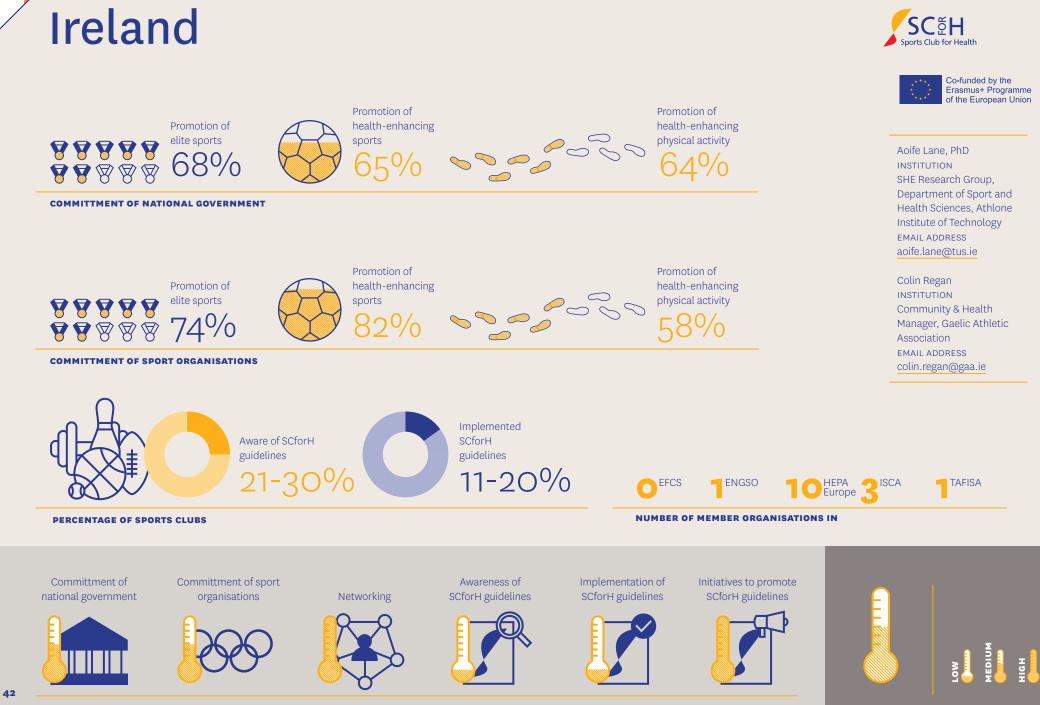
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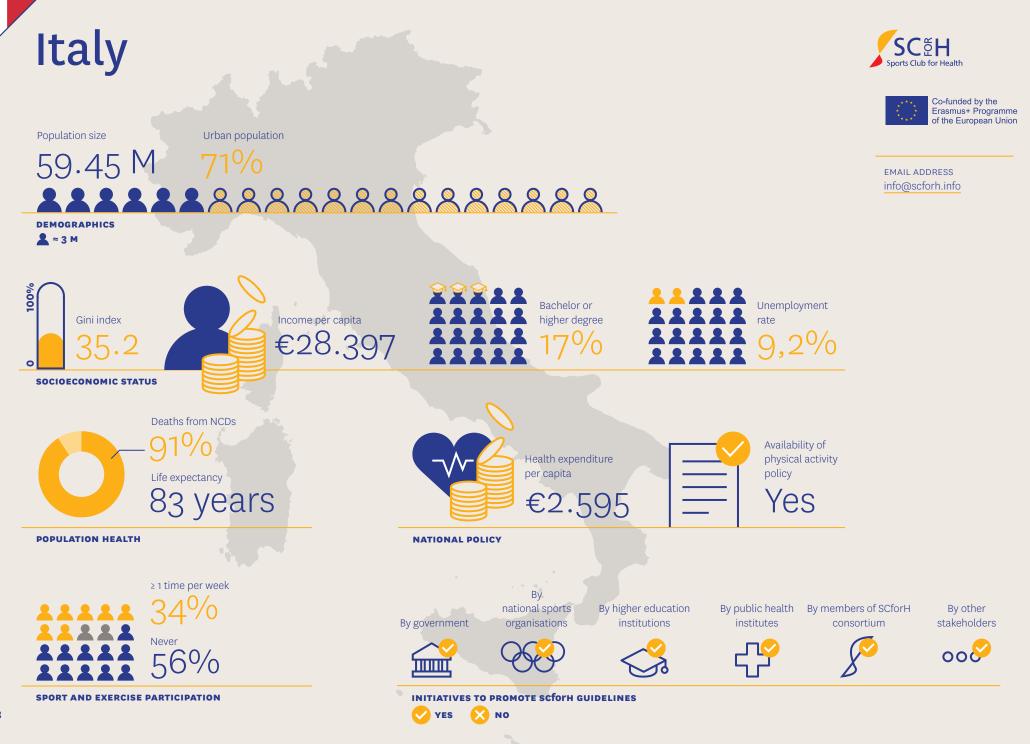


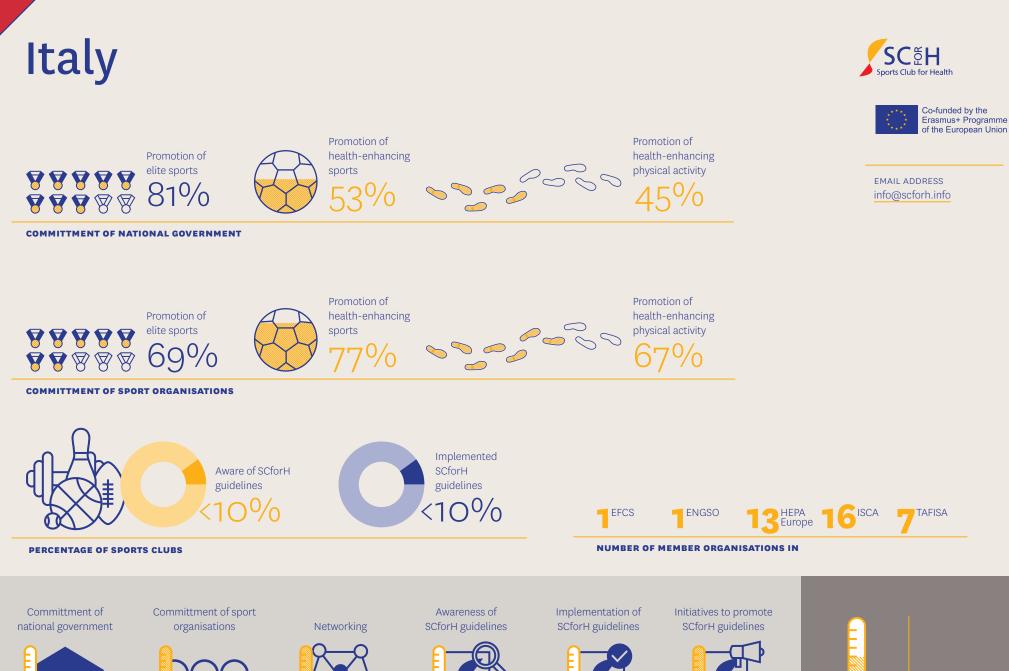


















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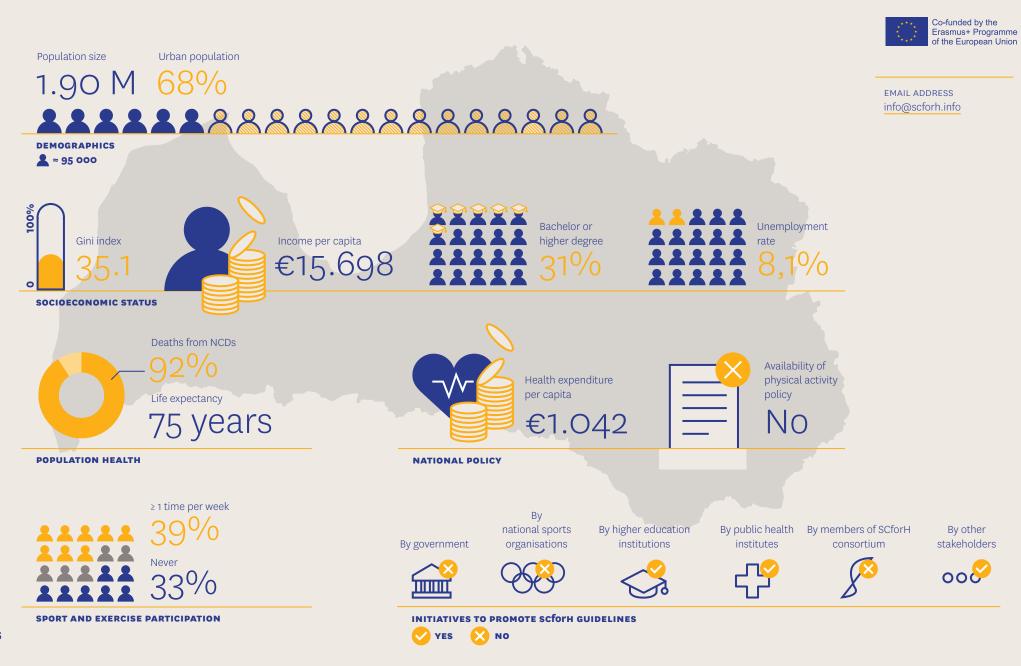
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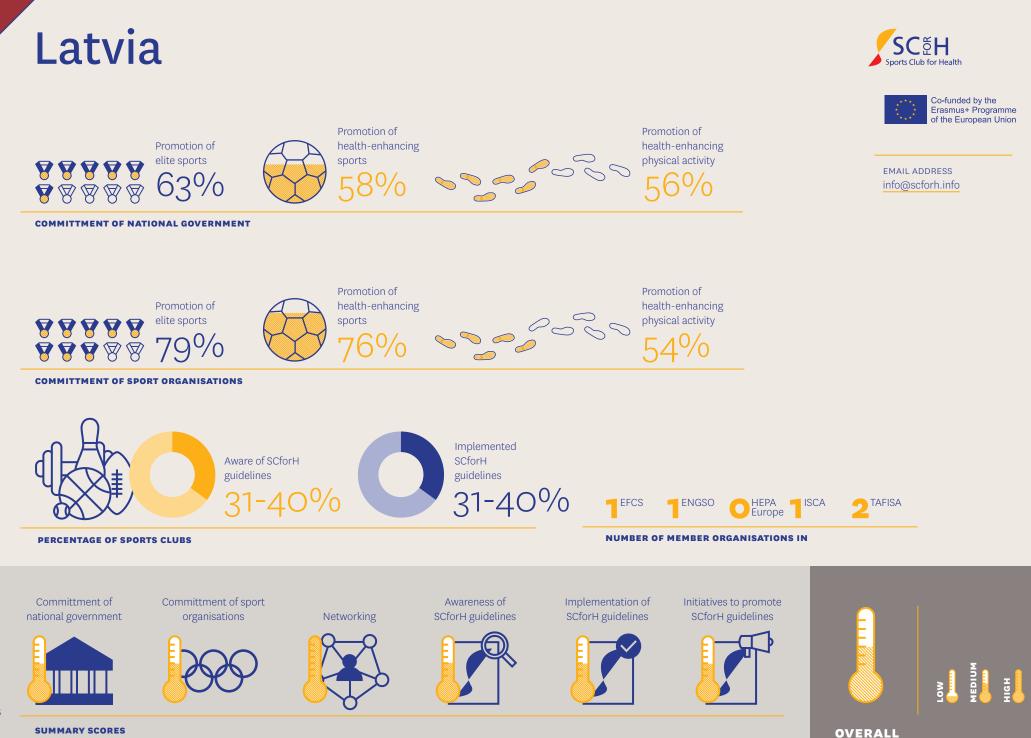
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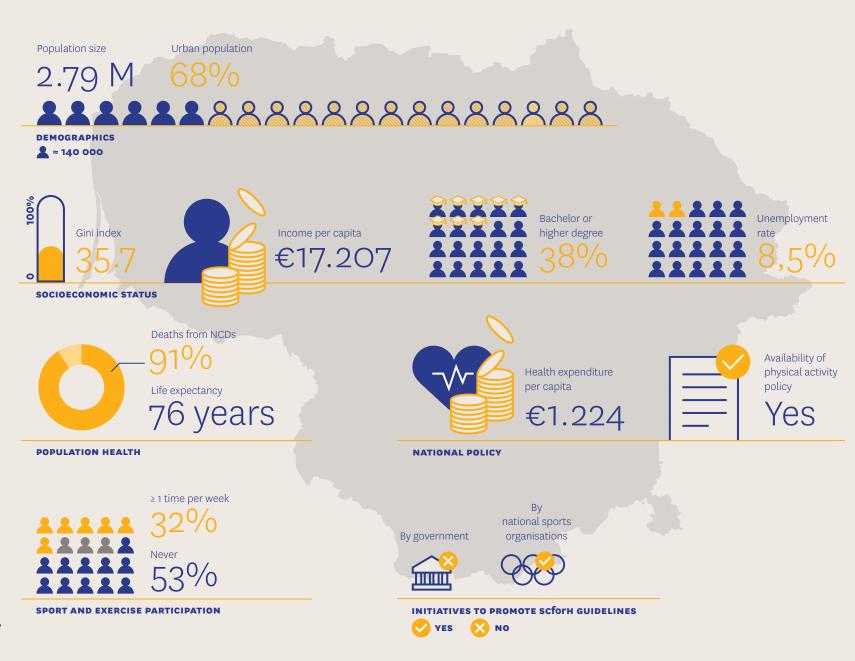
SUMMARY SCORES









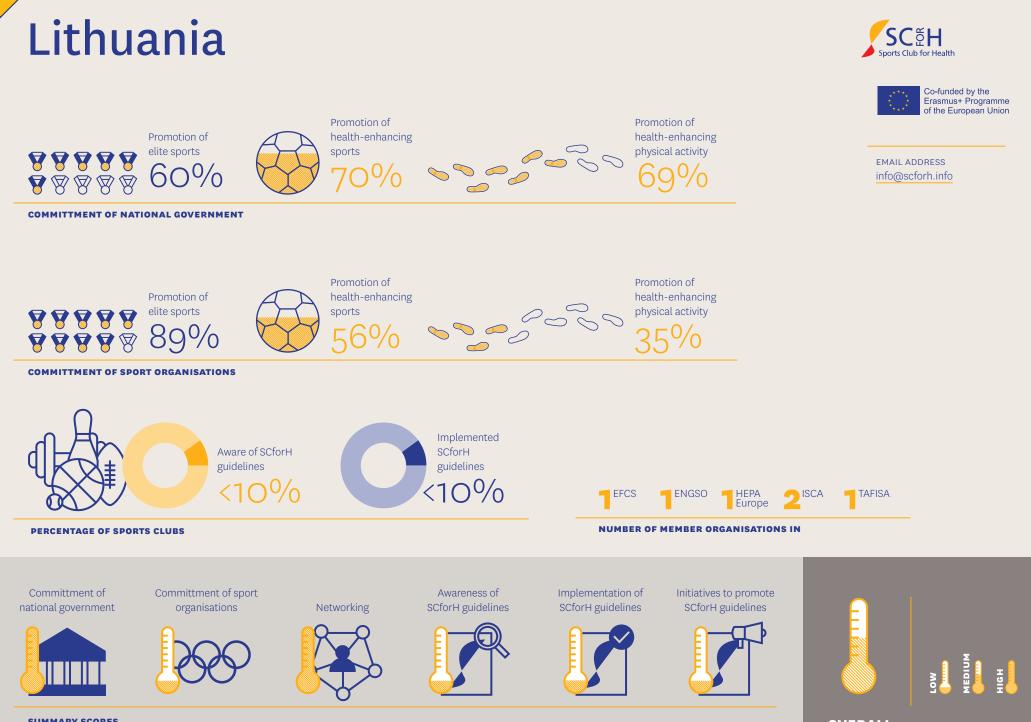


Lithuania



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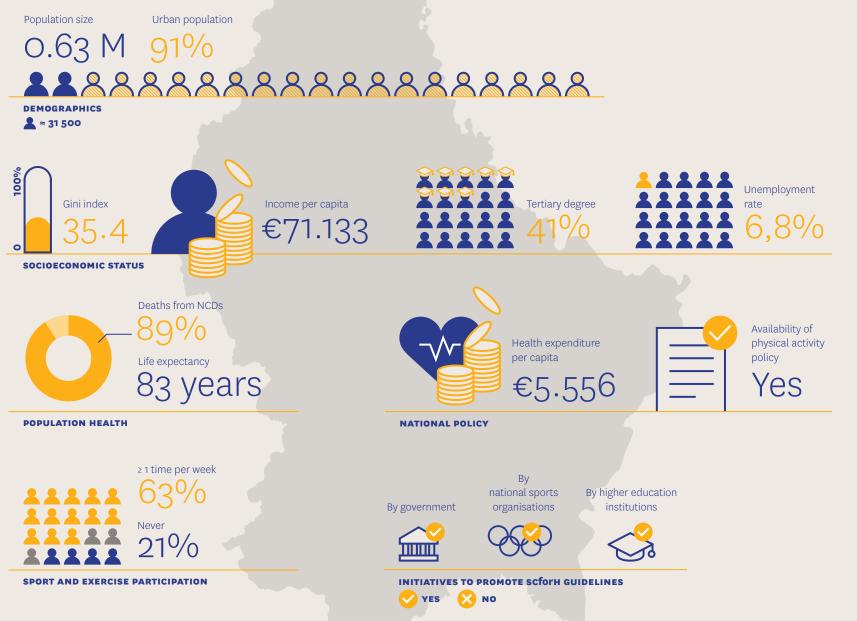
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Luxembourg



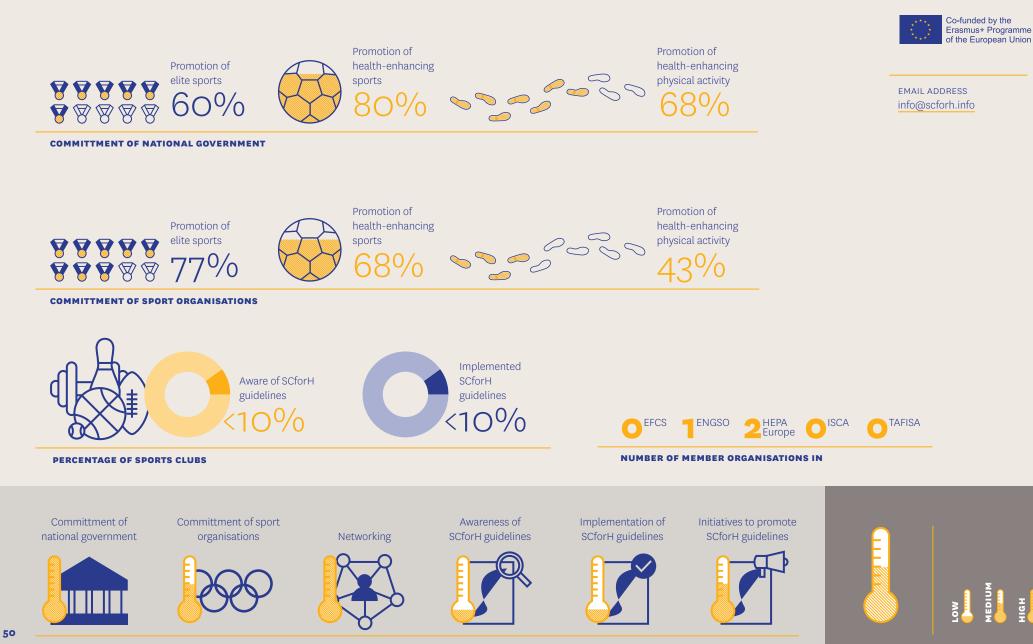
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Luxembourg





SUMMARY SCORES

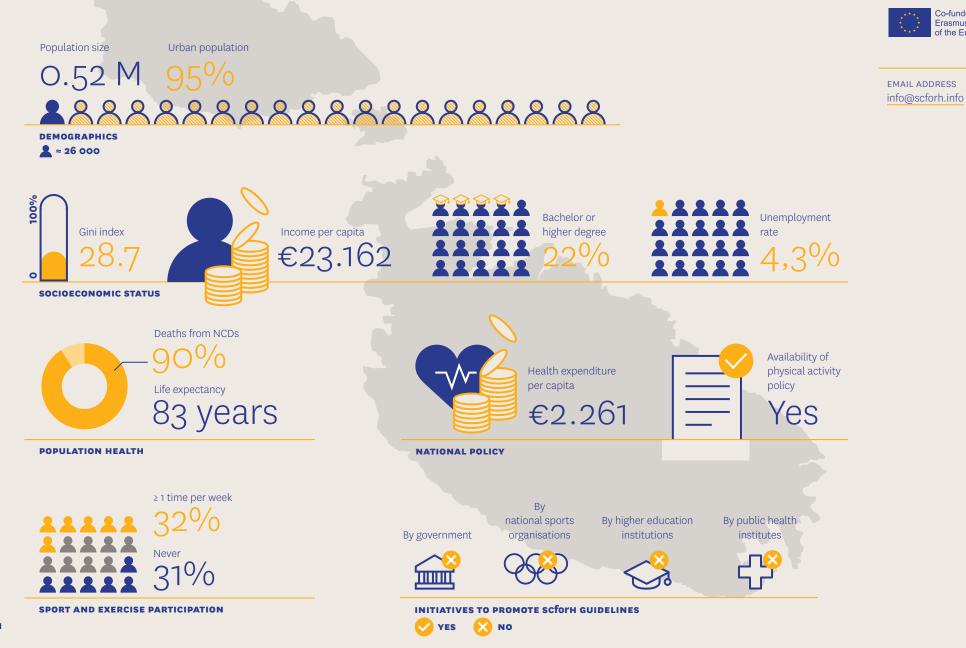
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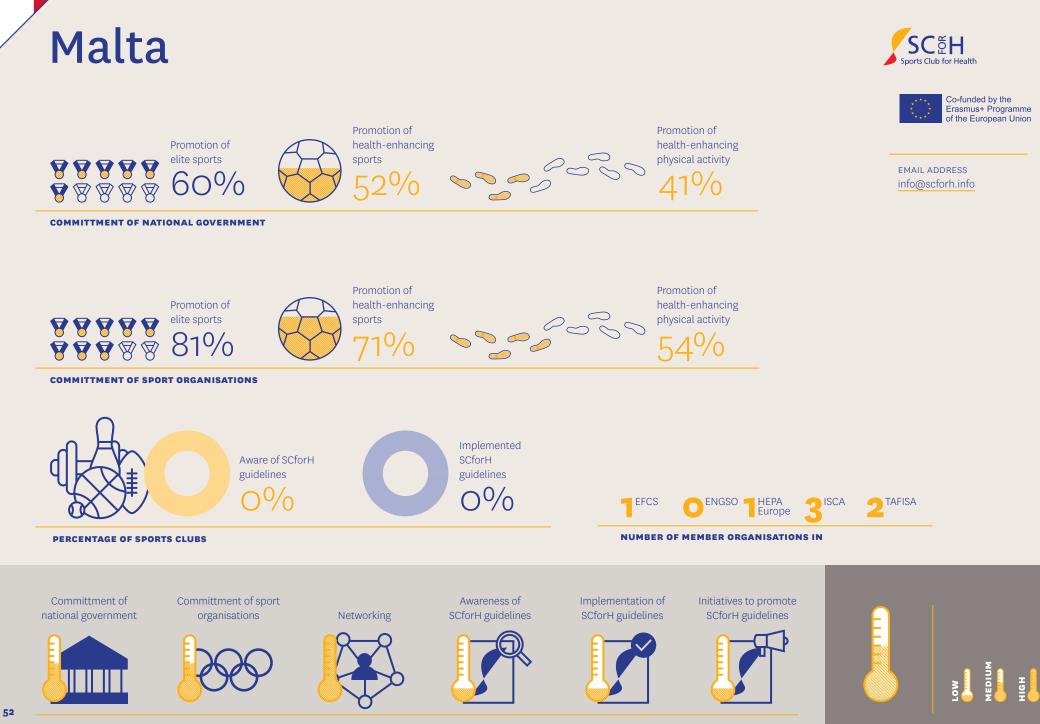
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Malta



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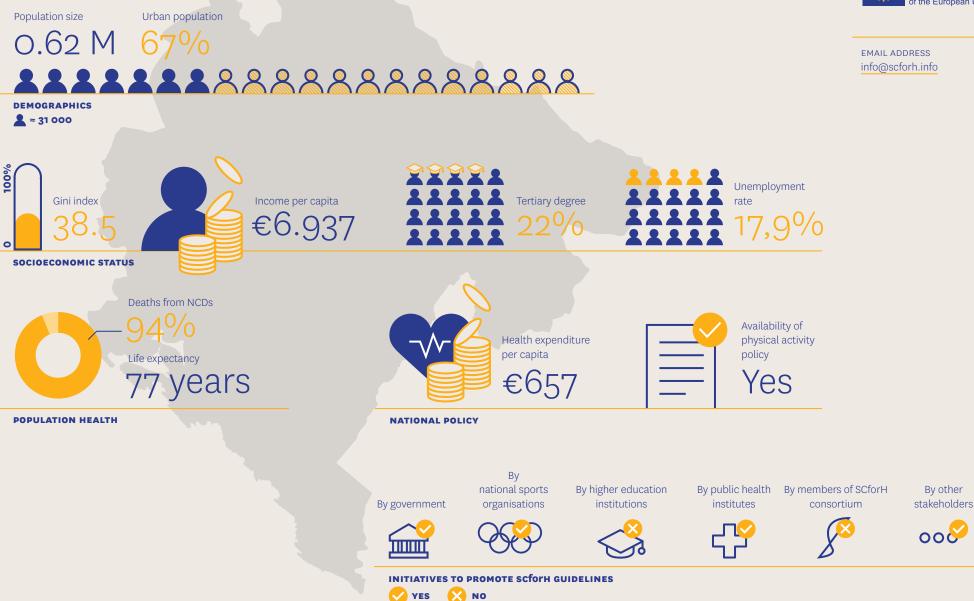




Montenegro







Montenegro

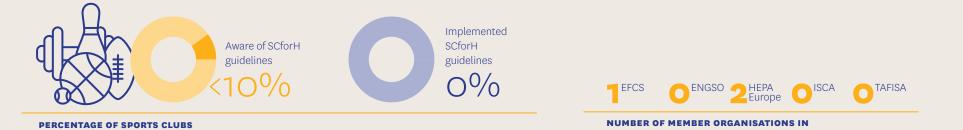






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COMMITTMENT OF NATIONAL GOVERNMENT



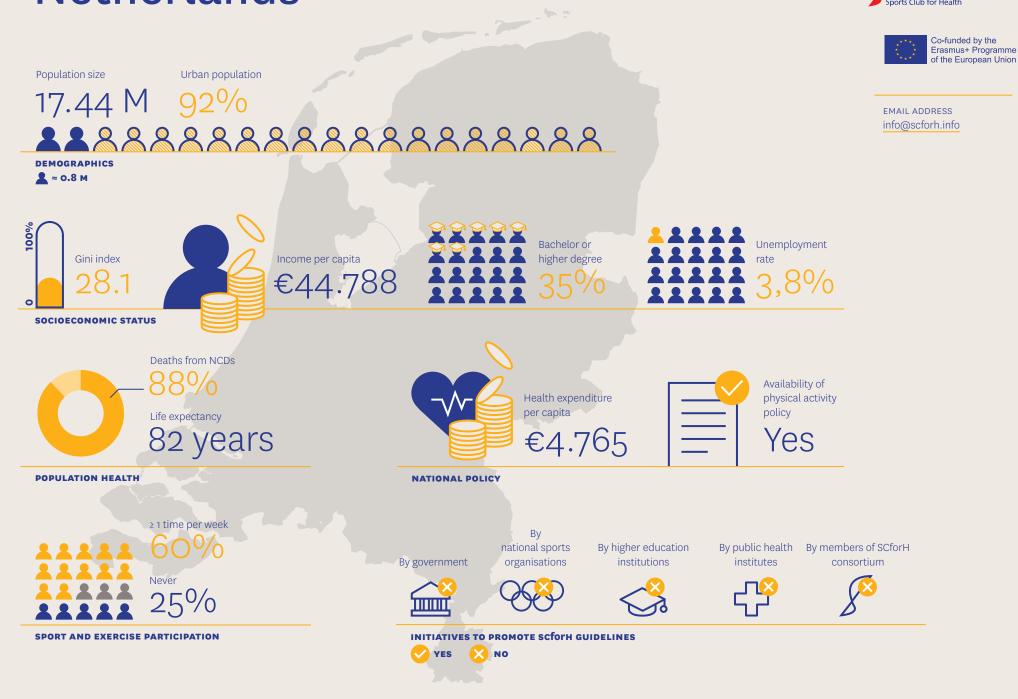


SUMMARY SCORES

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Netherlands



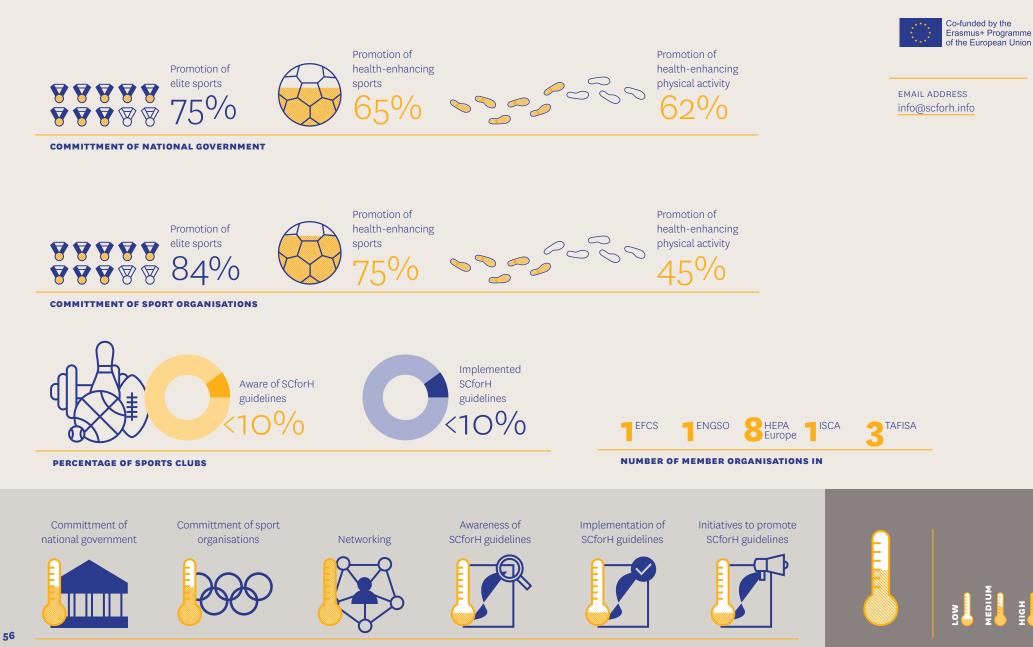


Netherlands



IGH

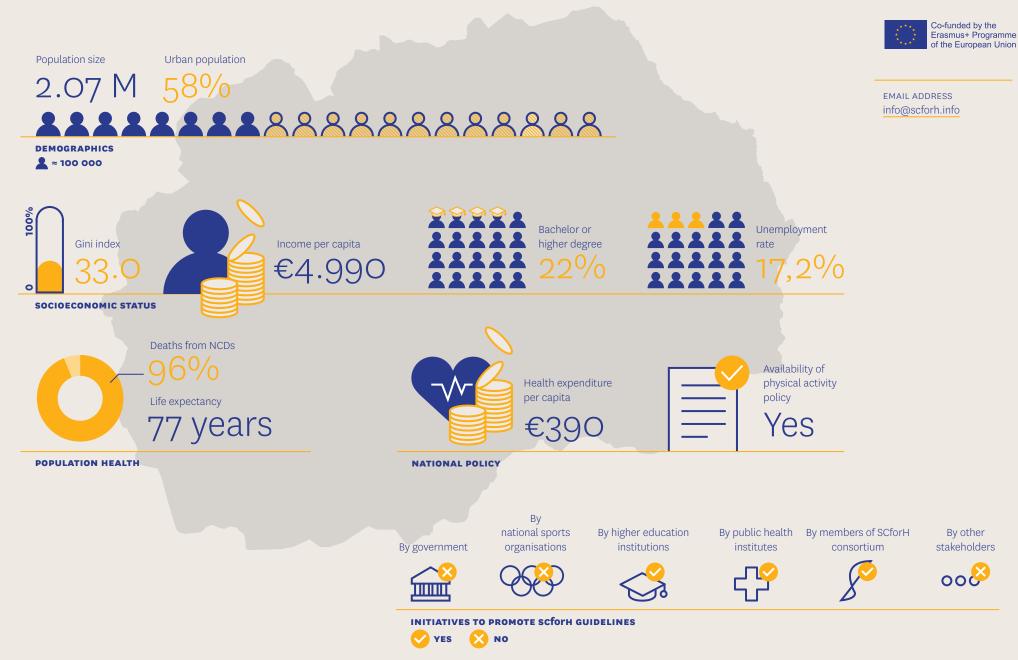
OVERALL



SUMMARY SCORES

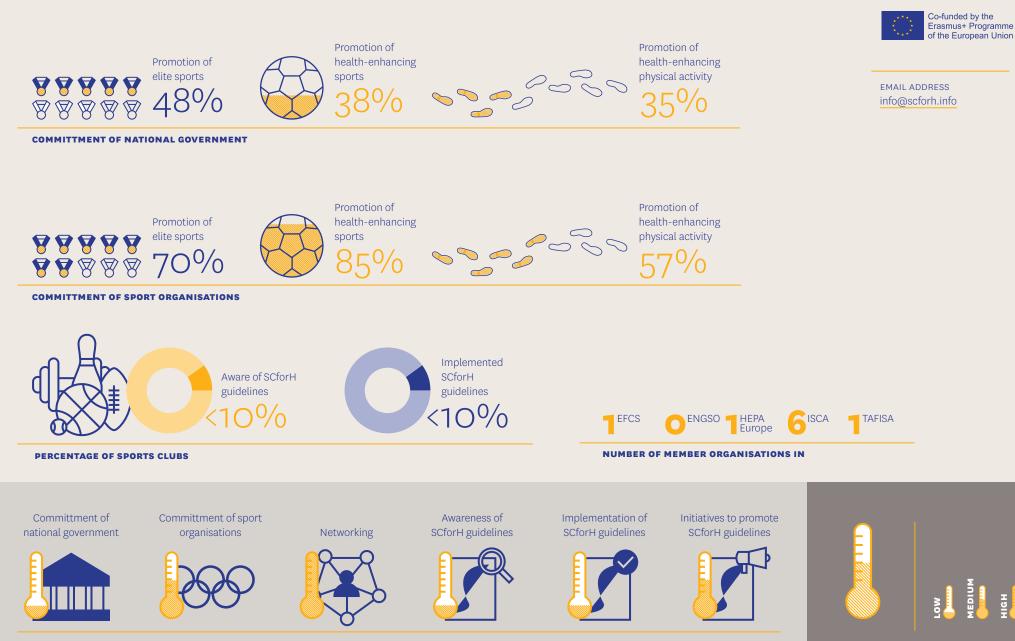
North Macedonia





North Macedonia





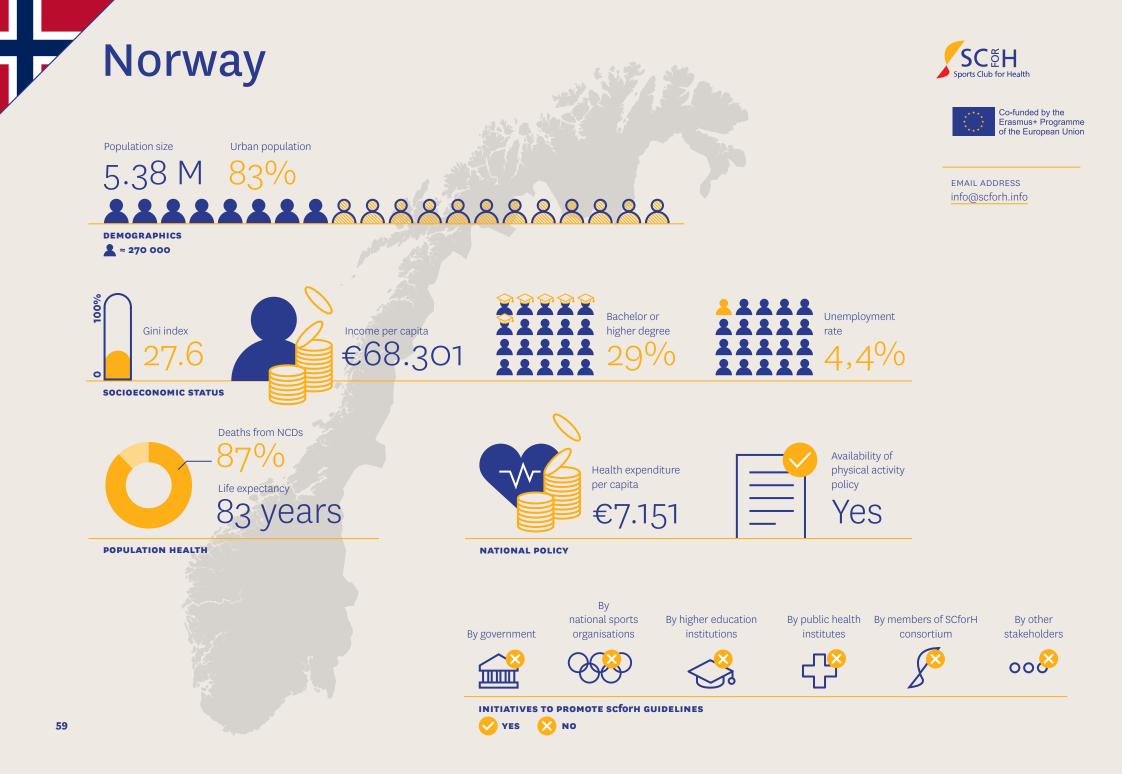
SUMMARY SCORES

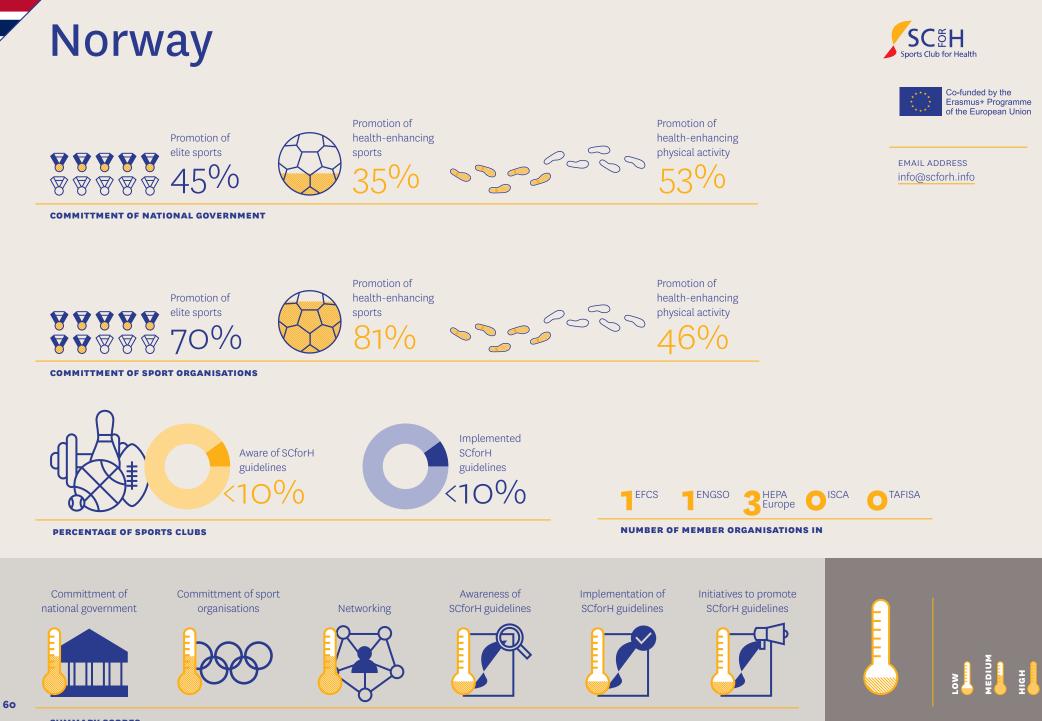
58

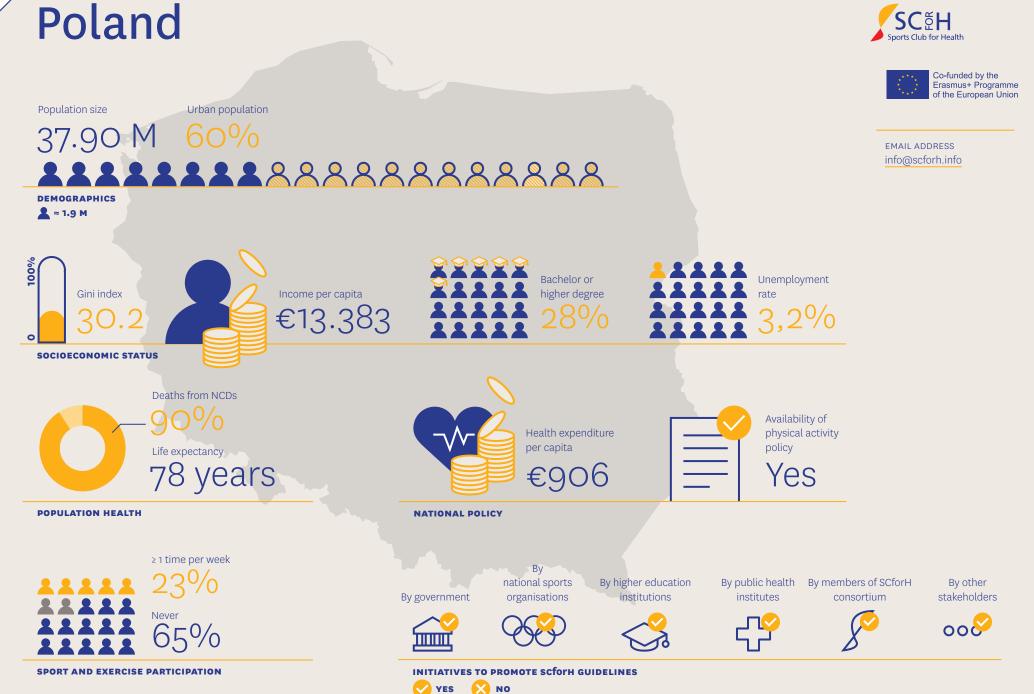
OVERALL

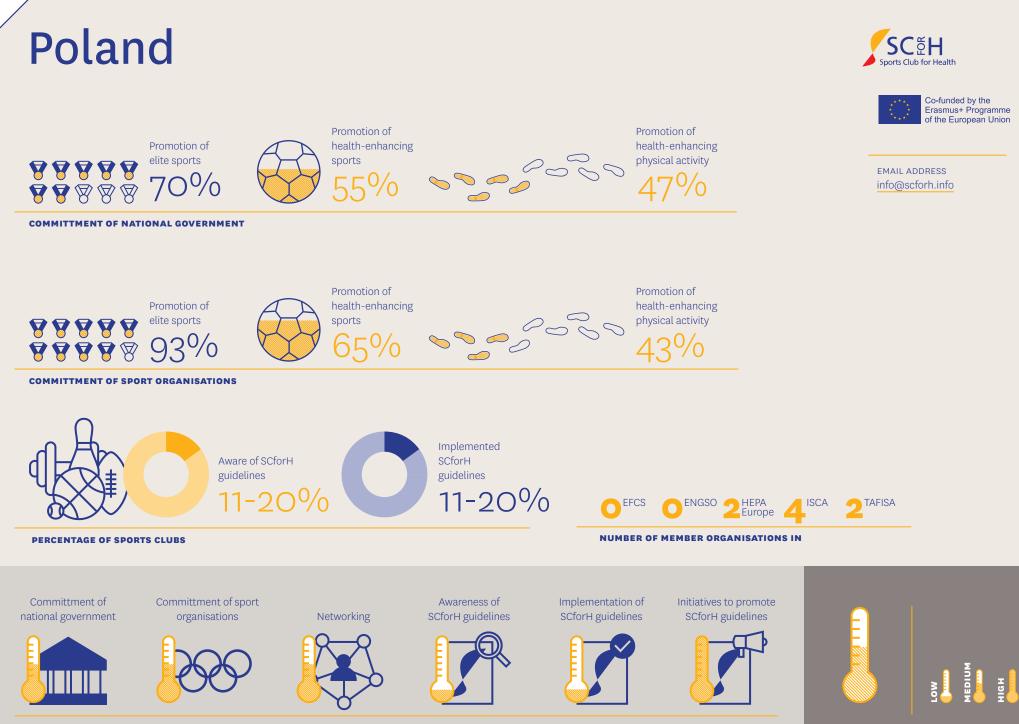
EDIU

IGH

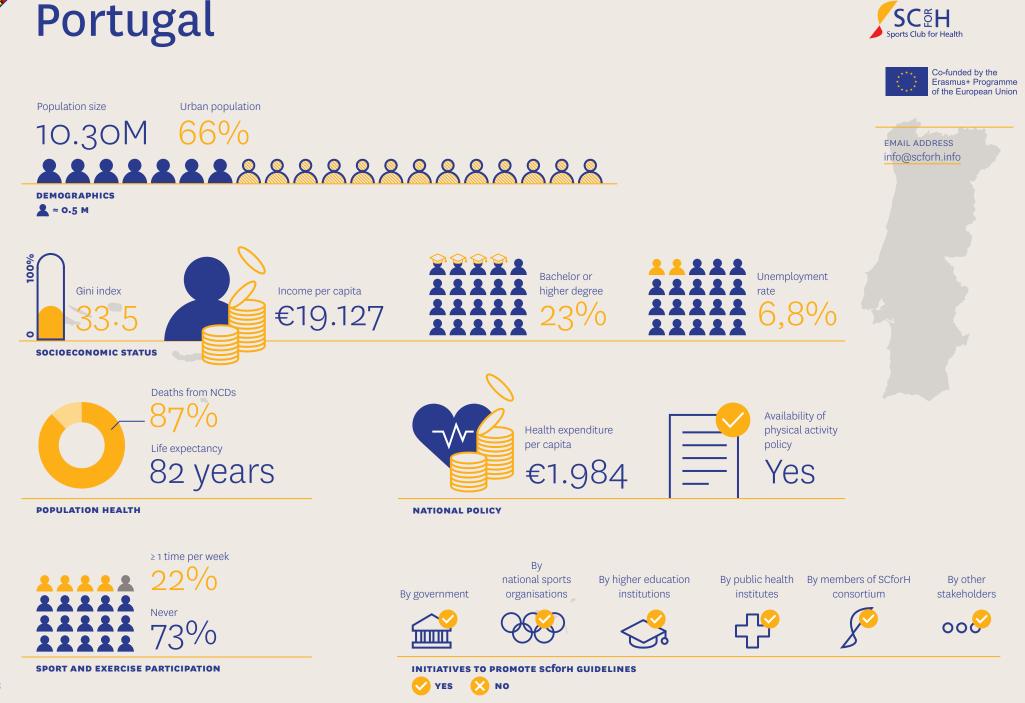


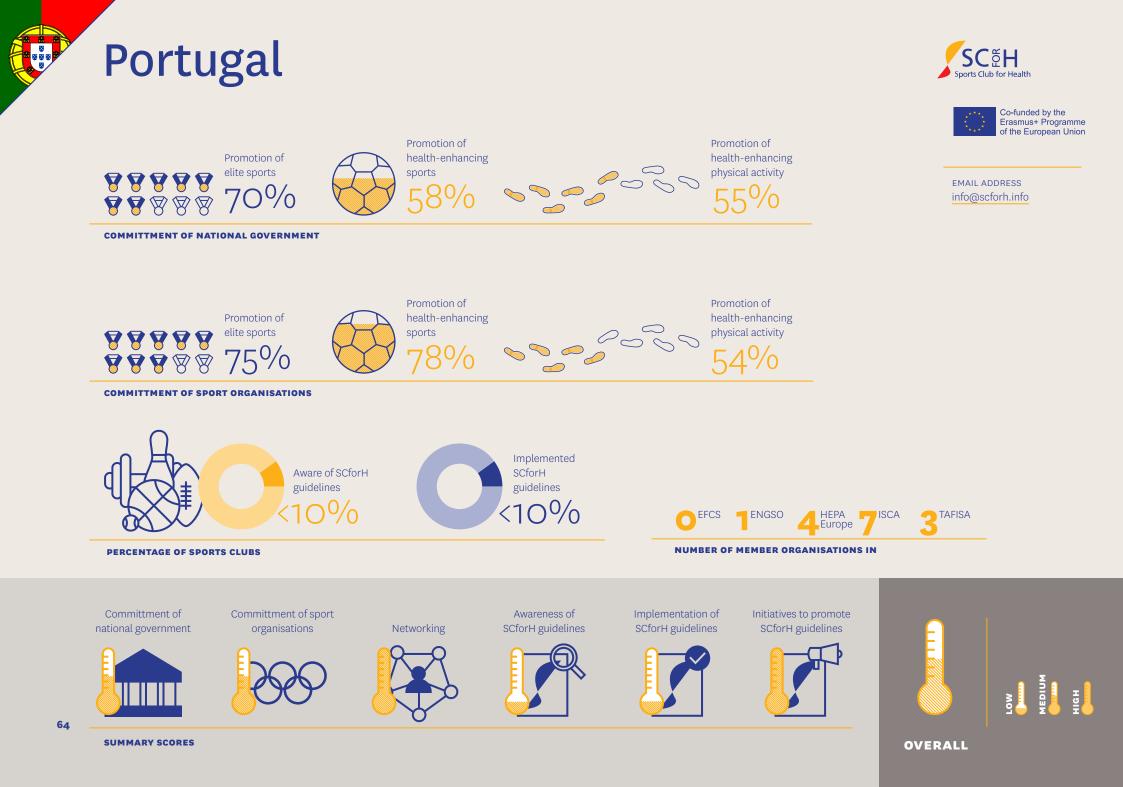


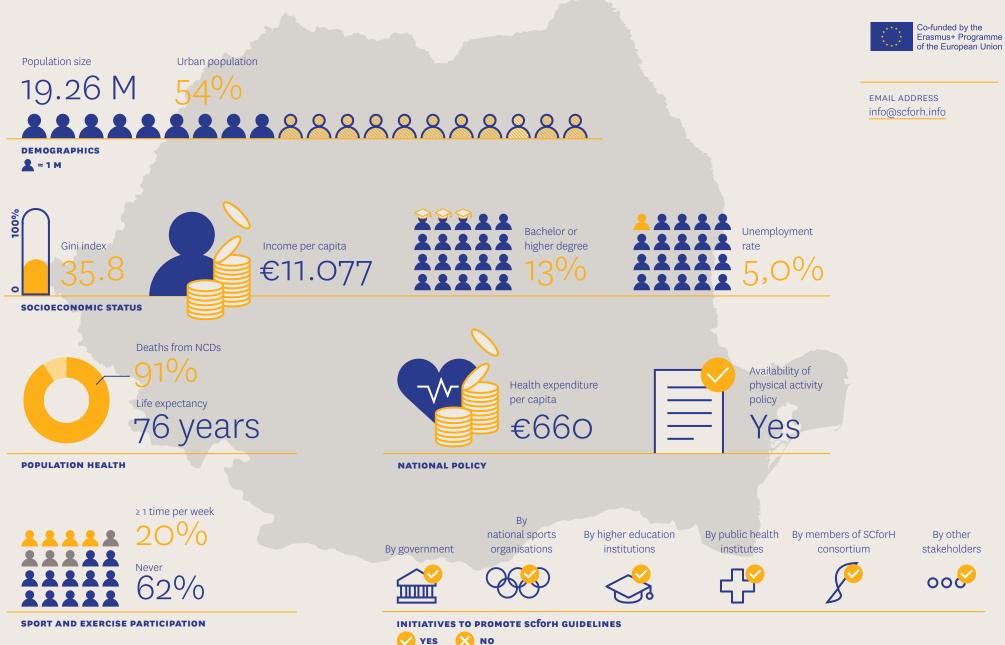




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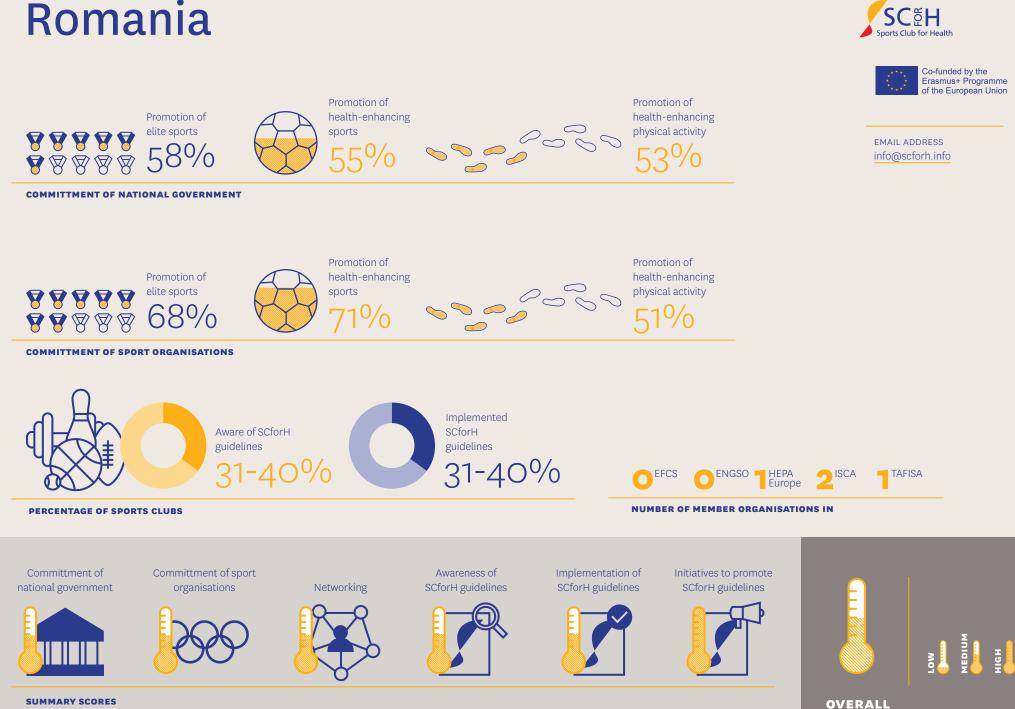


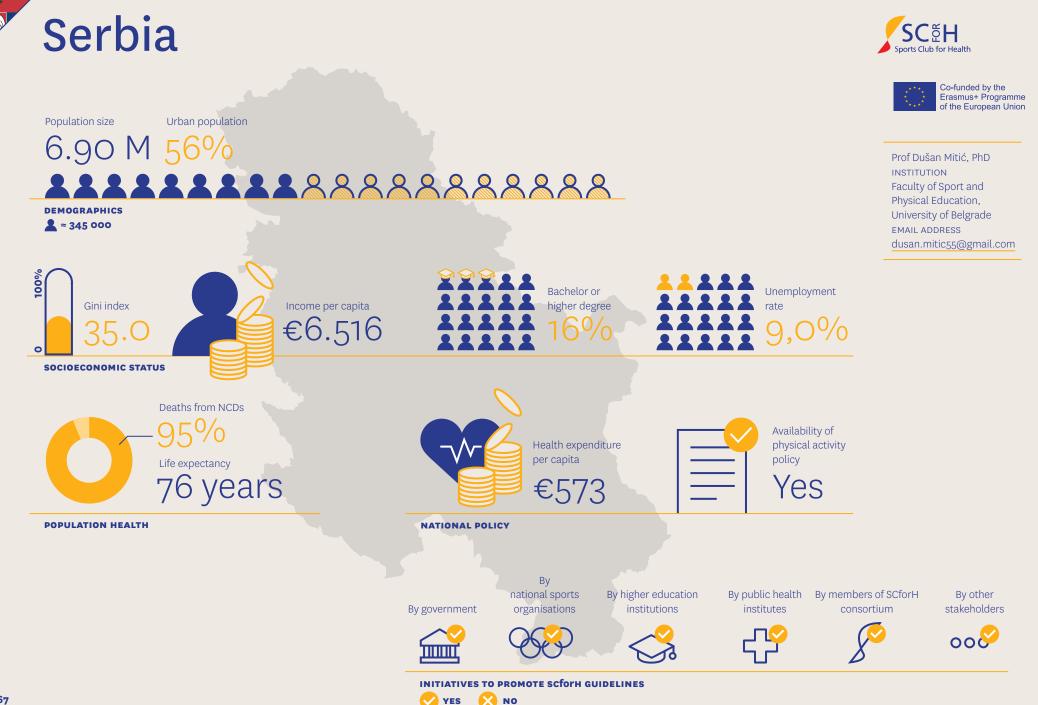


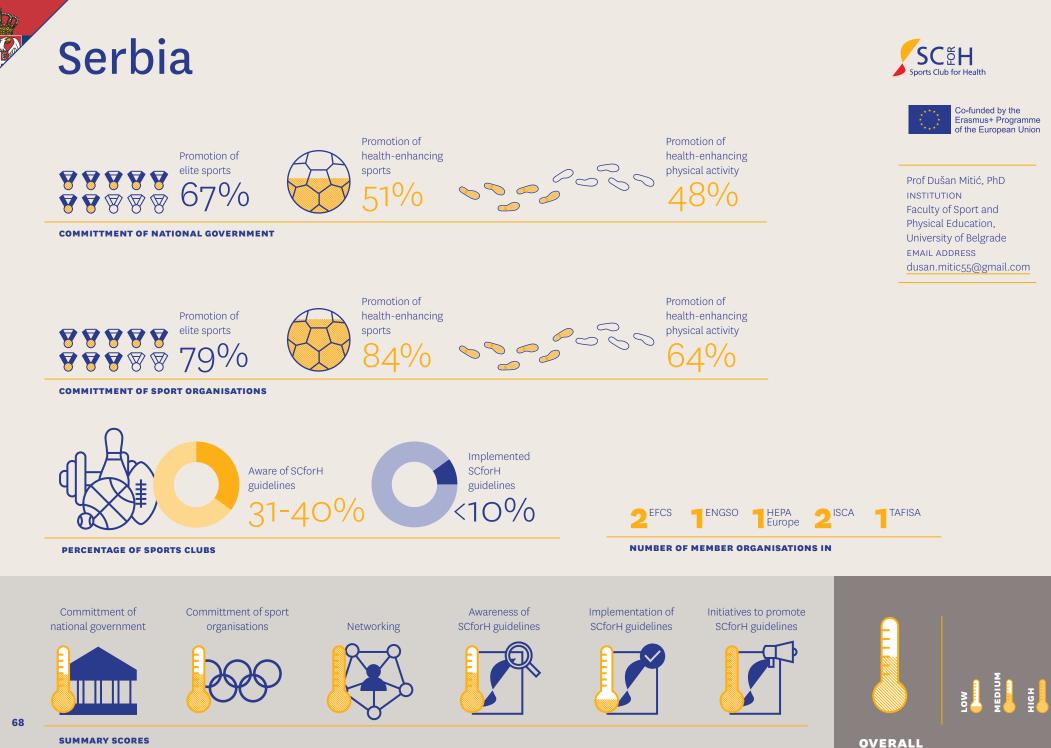


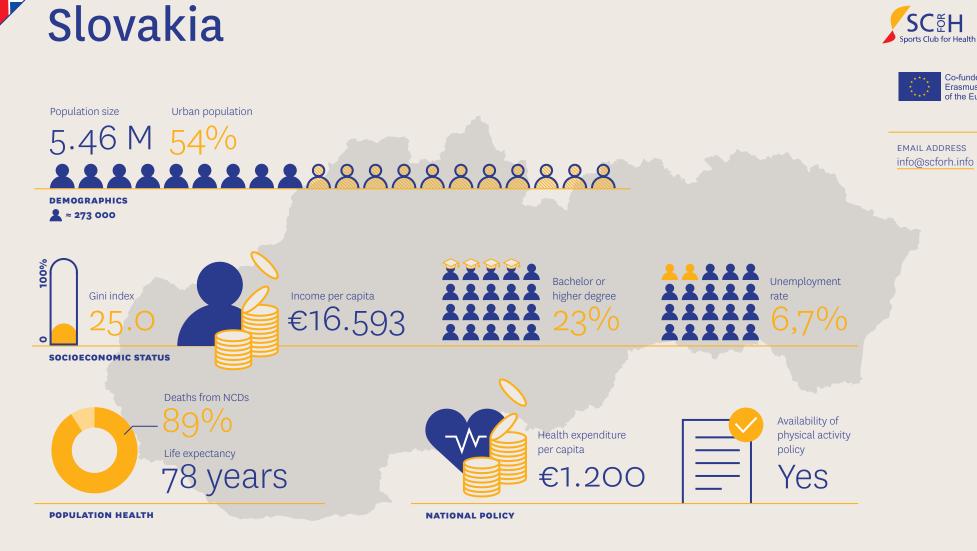
Romania







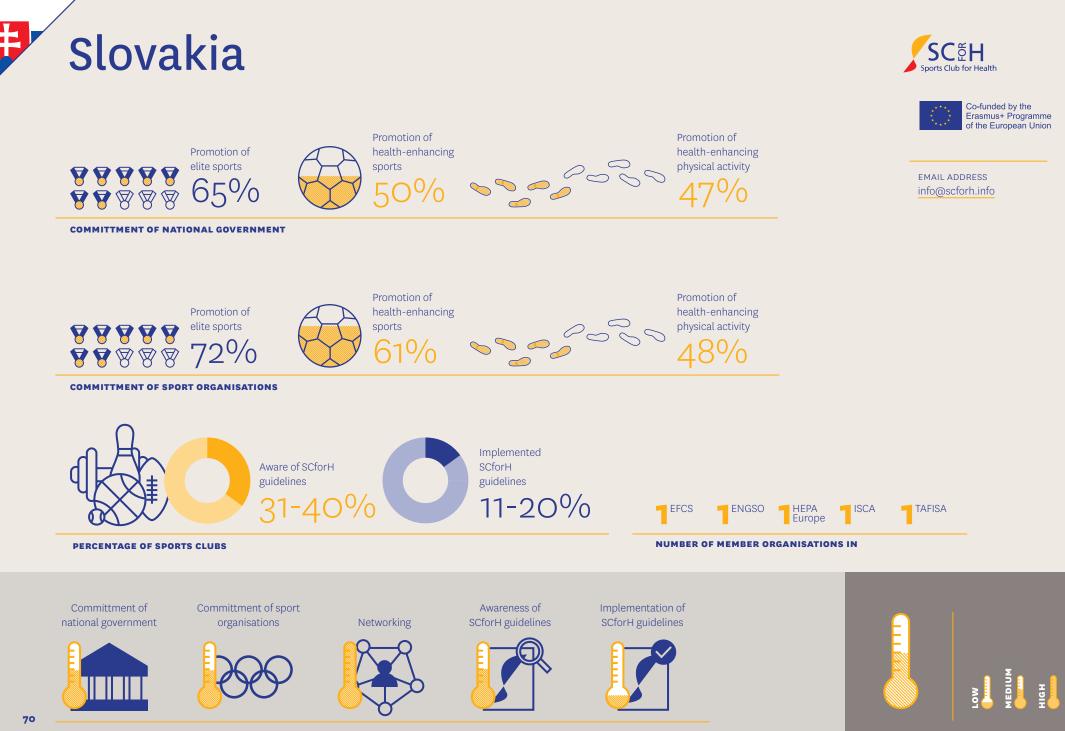




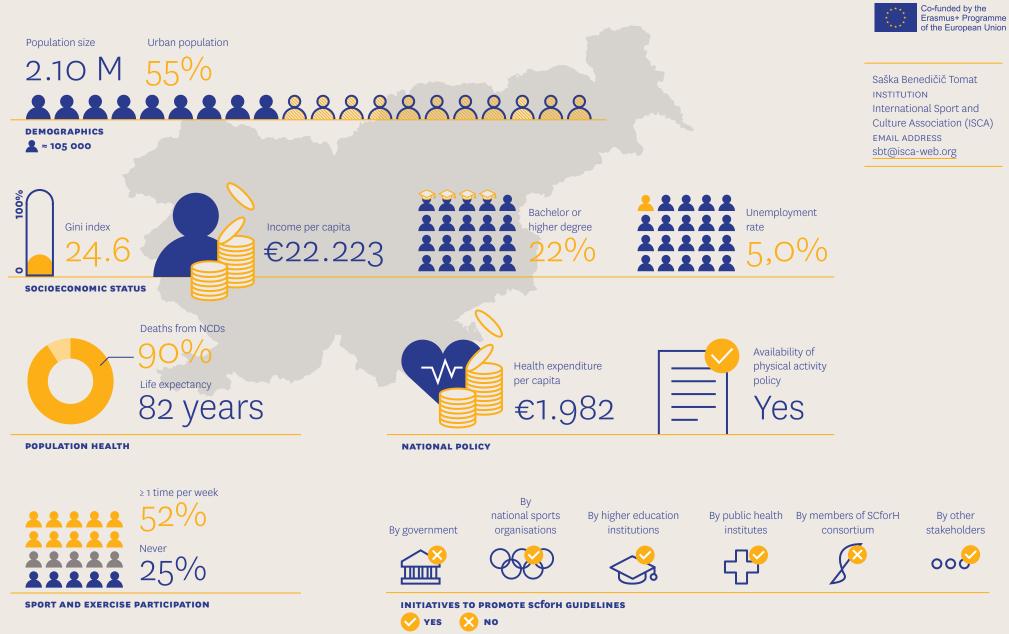
Co-funded by the Erasmus+ Programme of the European Union

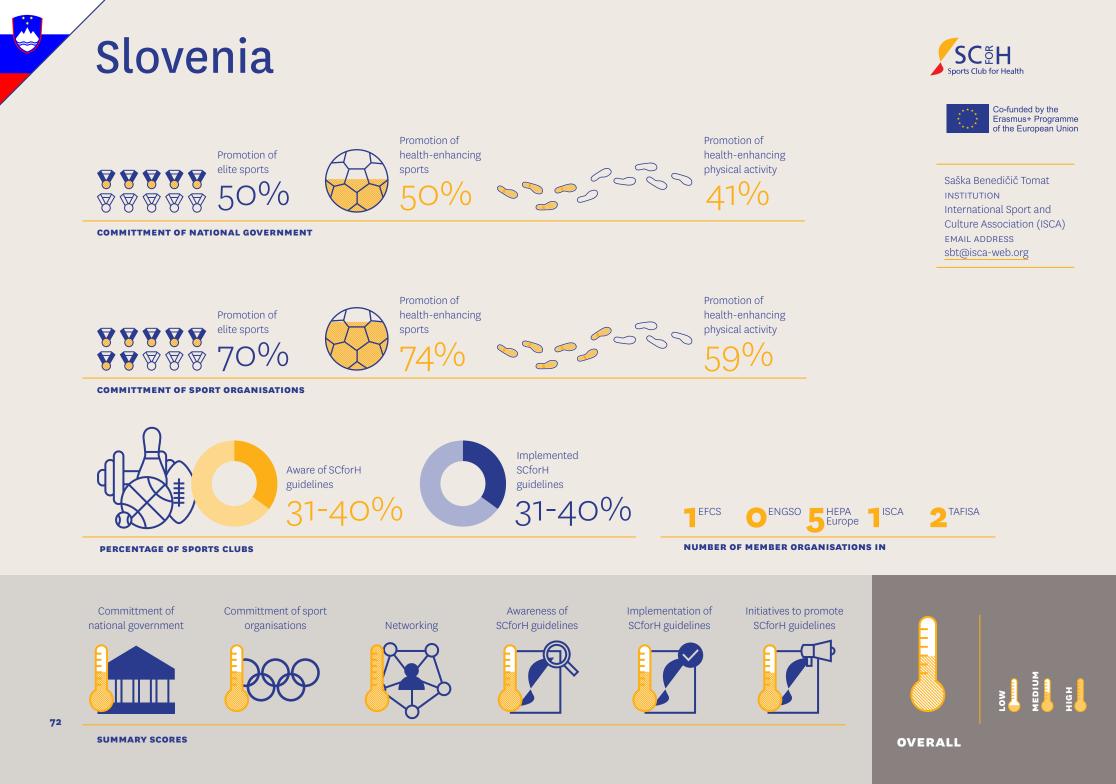
≥1 time per week 35% Never 43%

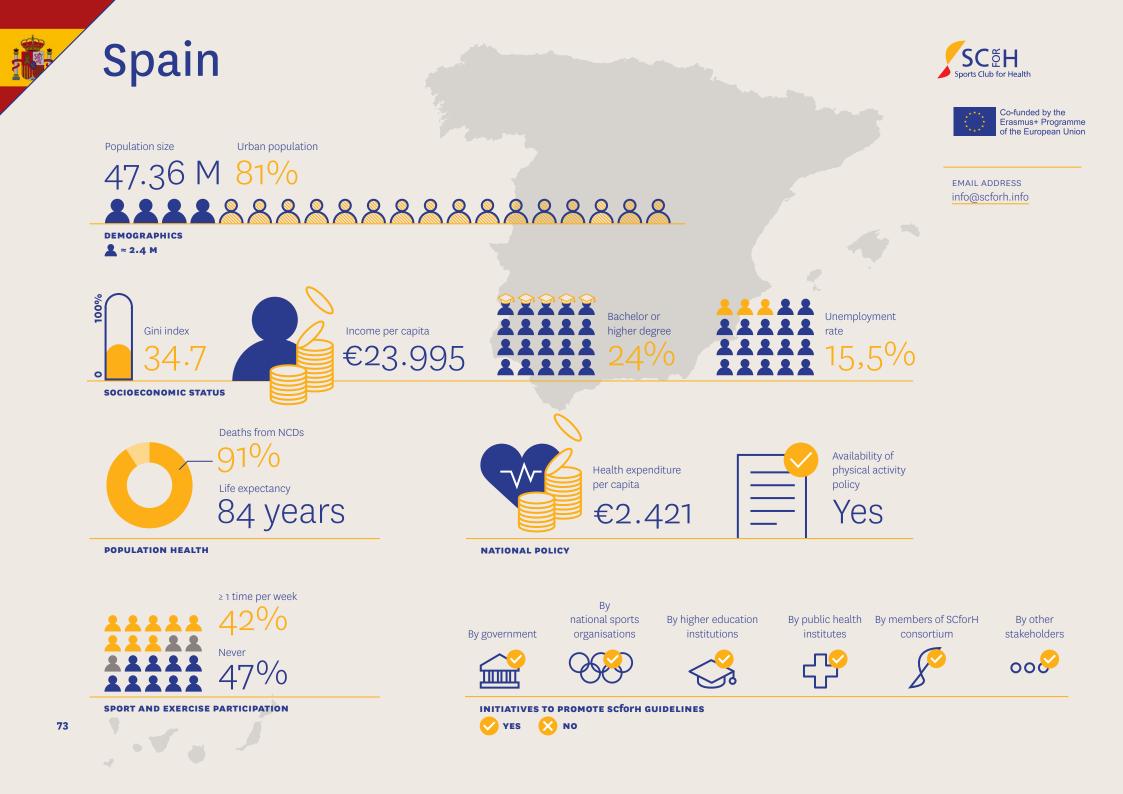
SPORT AND EXERCISE PARTICIPATION

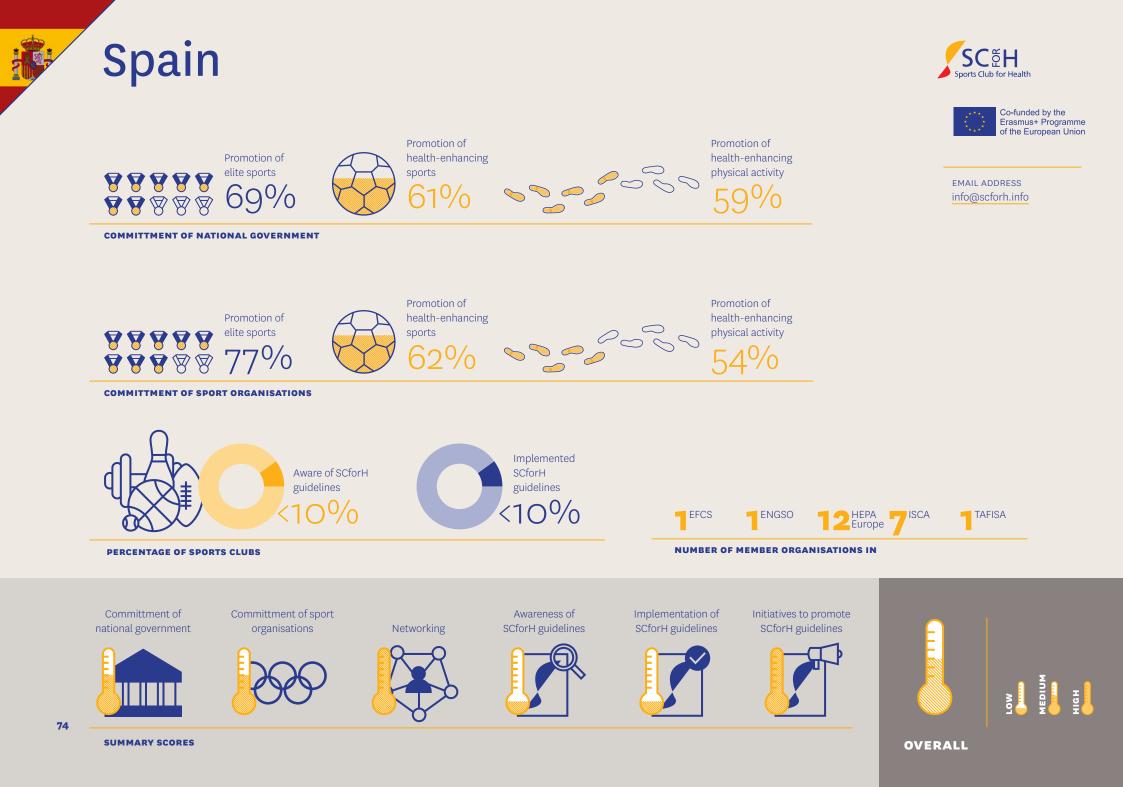


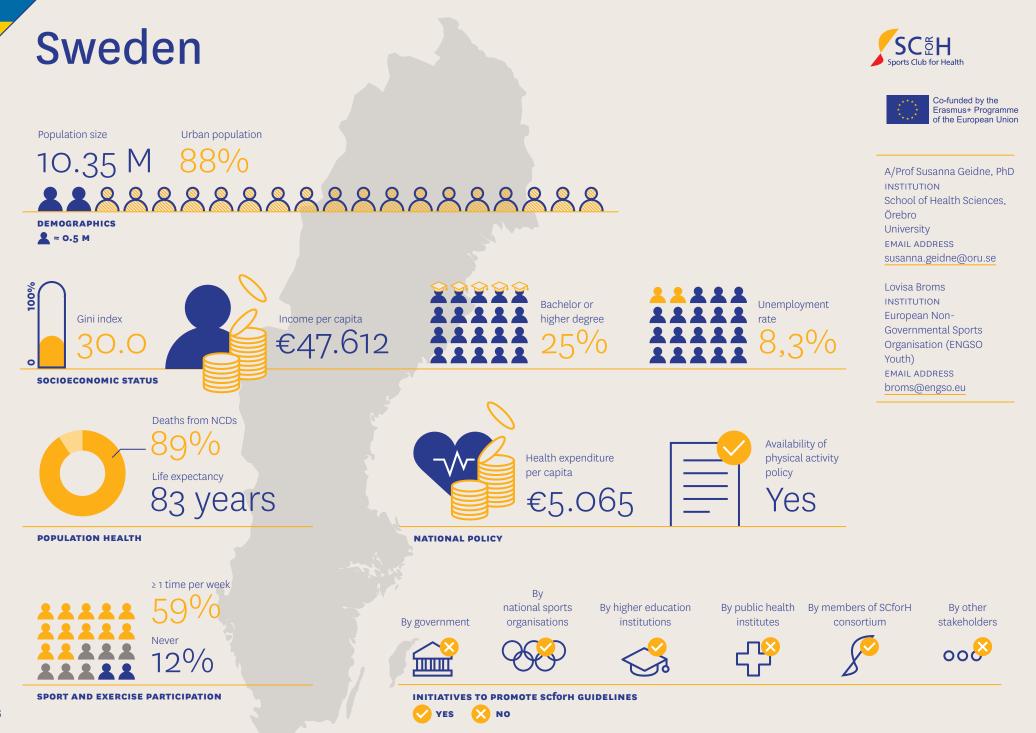


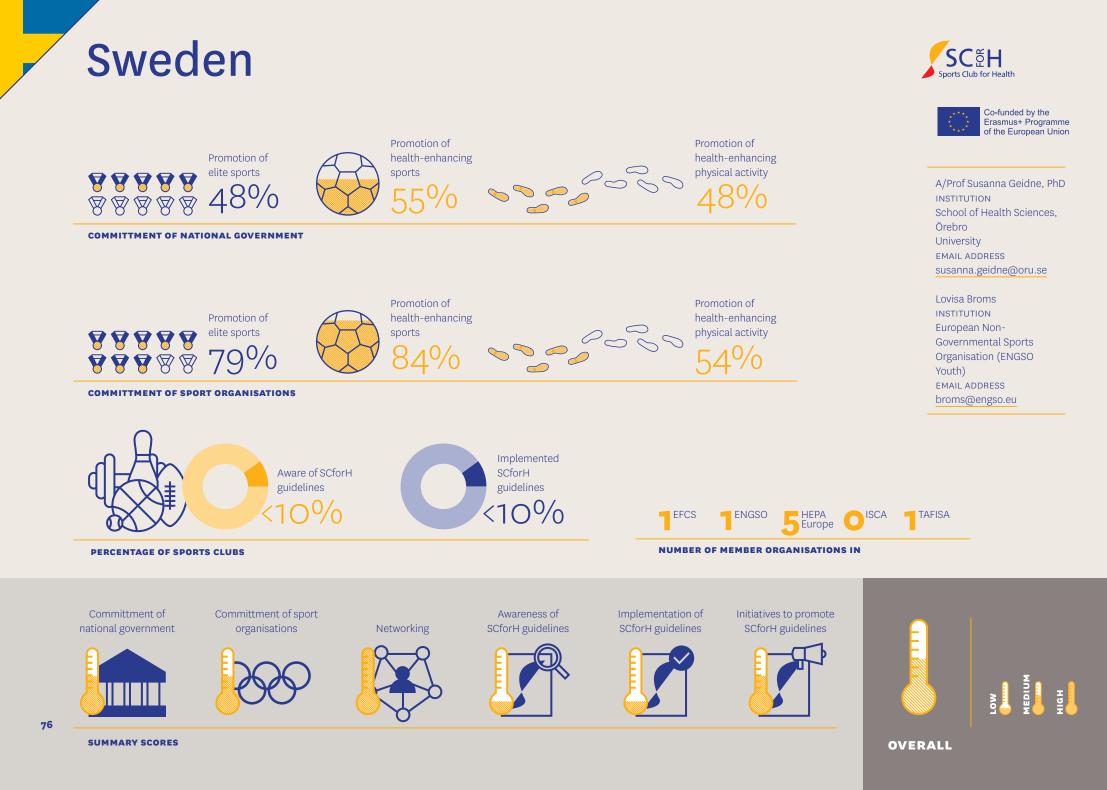


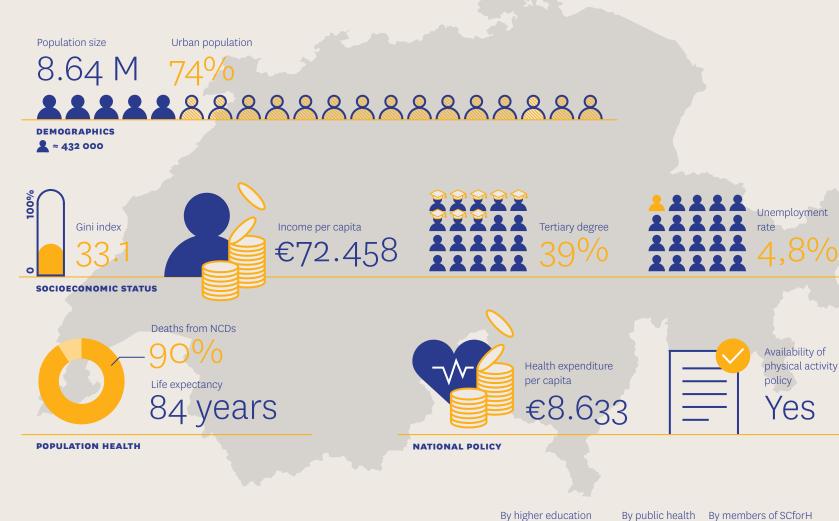












By government

VES

institutions

INITIATIVES TO PROMOTE SCFORH GUIDELINES

X NO

institutes

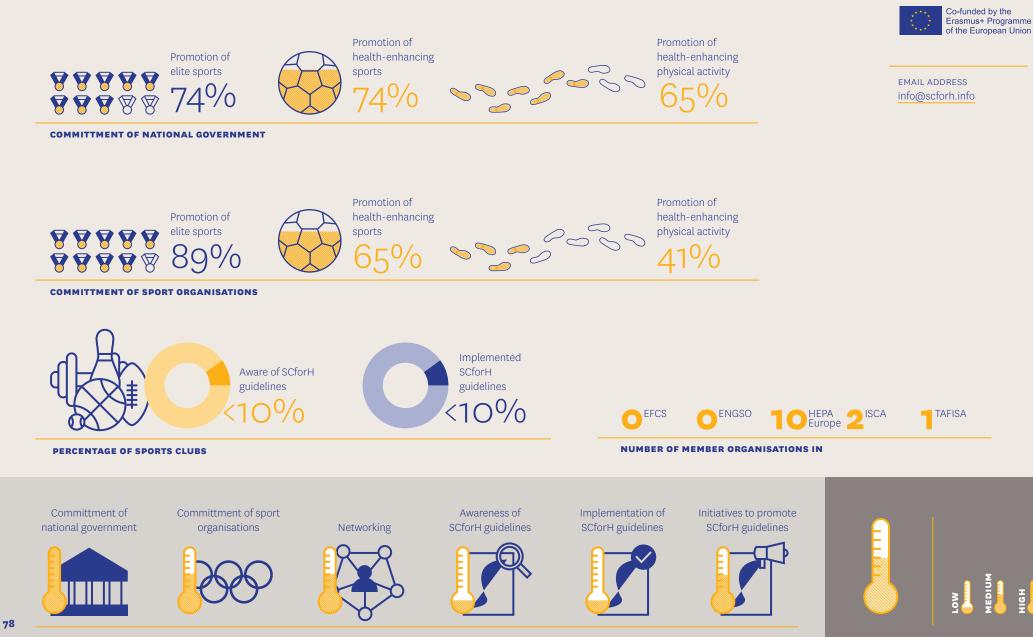
consortium





EMAIL ADDRESS info@scforh.info Switzerland



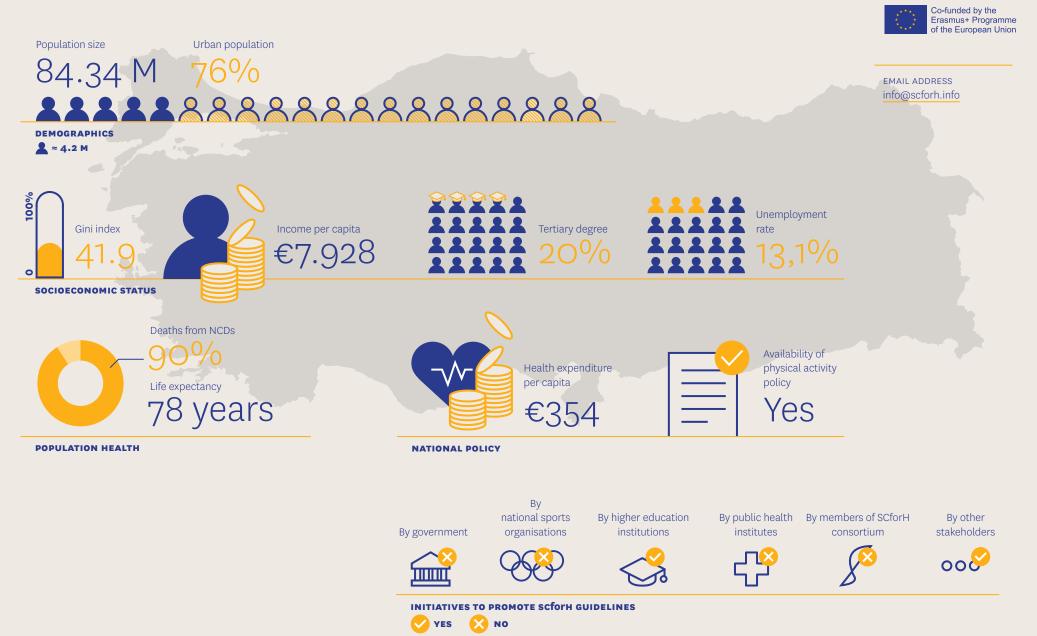


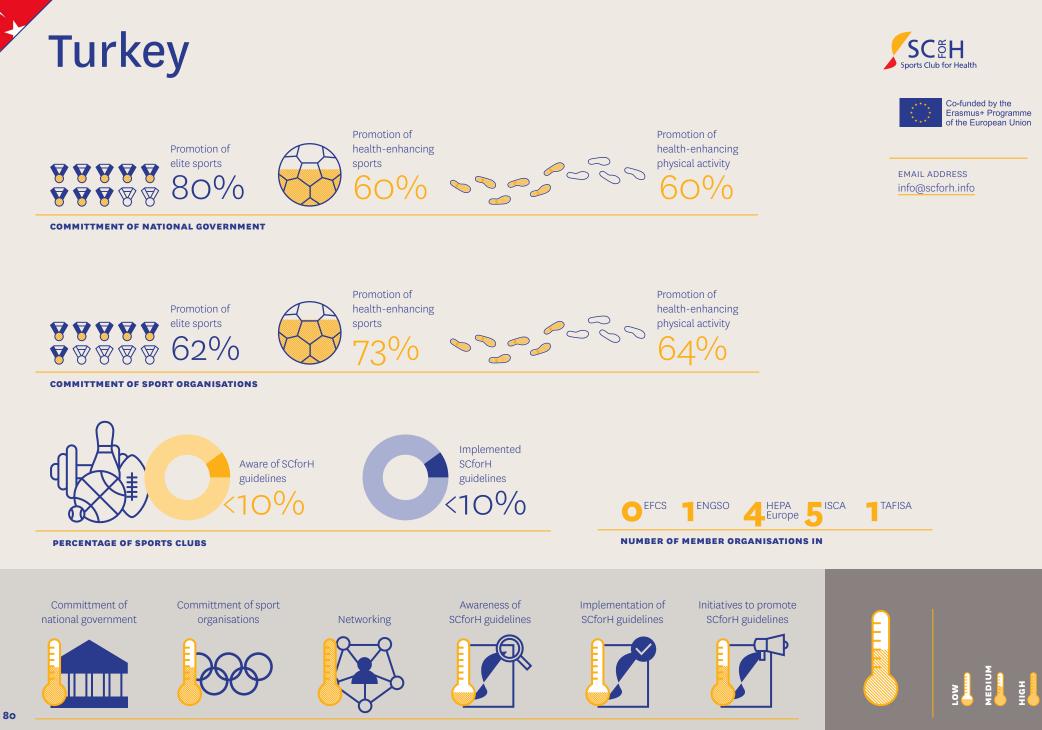
SUMMARY SCORES

OVERALL

Turkey







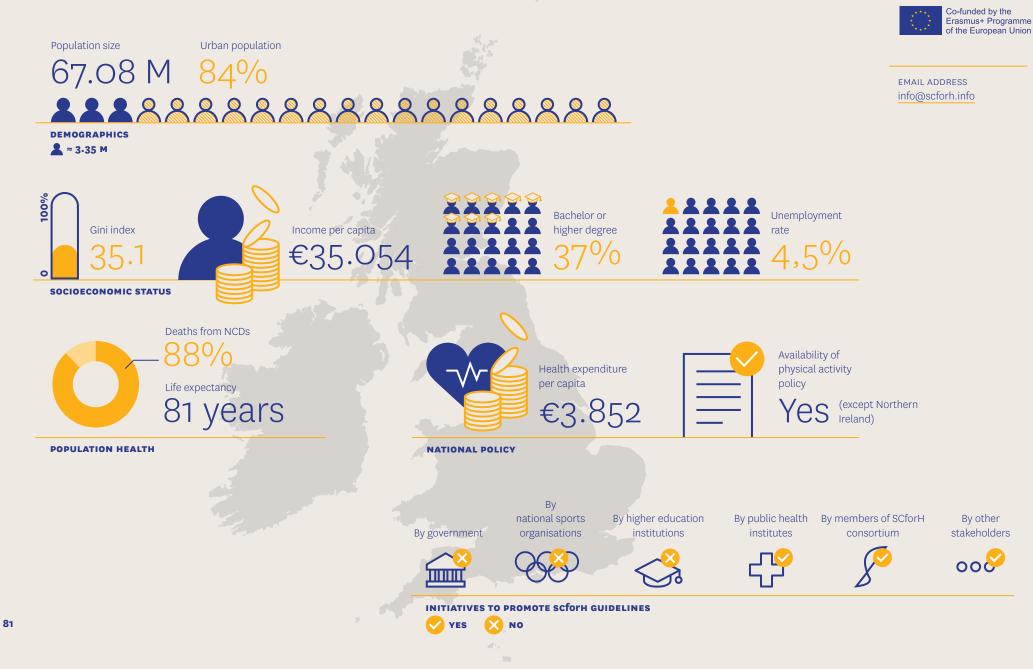
SUMMARY SCORES

OVERALL

United Kingdom

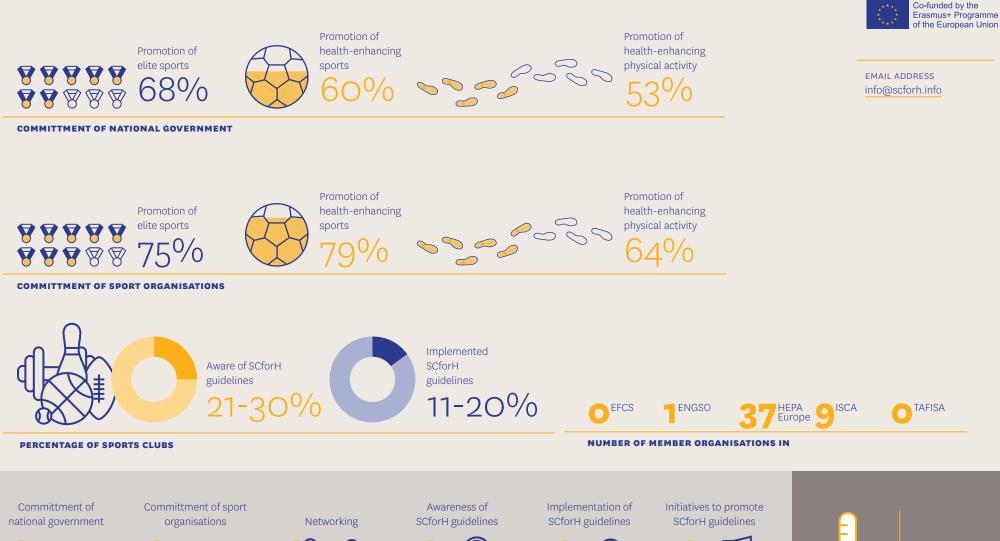






United Kingdom













OVERALL

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SUMMARY SCORES

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