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Summary

The Come Outside! programme ran from November 2012 to March 2016. The programme aimed to improve the health and wellbeing of people who are experiencing deprivation or disadvantage in Wales by encouraging community groups and support providers to use the outdoors as a means to increase levels of confidence, physical activity and wellbeing. A comprehensive literature review, stakeholder events and pilot projects carried out between 2005 and 2010 resulted in the development of the Come Outside! approach in 2010 and the design of the Come Outside! delivery model. The impetus for the programme was provided by research that suggested that only one-quarter of people in Wales were taking part in outdoor recreation often enough to be counted as ‘frequent’ participants. The programme was funded by the Big Lottery Fund, the Welsh Government and Natural Resources Wales.

A considerable evidence base demonstrates the link between outdoor activity and improved health and wellbeing outcomes. Using this evidence, this evaluation has sought to demonstrate the extent to which Come Outside! has encouraged more people to participate more frequently in outdoor activities and, as a result, how many people are more physically active, how many have higher self-esteem and how many feel more confident about participating further. We took a formative evaluation approach using the following mixed methods:

- records of attendance and demographic profiles;
- self-completed participant surveys;
- interviews and e-surveys with participants, staff and stakeholders;
- feedback captured by the Come Outside! team; and
- visits to sessions to create case studies.

The evaluation focused on measuring impact, capturing learning and building understanding of what works well or less well when engaging people and organisations in outdoor activity.

The Come Outside! model used the principles of community development to facilitate collaboration amongst existing community groups, organisations and outdoor activity providers in order to support people from disadvantaged communities to take part in a range of memorable outdoor activities.

Come Outside! has demonstrated how Natural Resources Wales can fulfil its duties under the Well-being of Future Generations (Wales) Act 2015 by working with people, communities and other public bodies to provide long-term health and wellbeing benefits.

‘Regular use of natural environments such as forests and parks seemed to protect against mental ill-health, whilst use of non-natural environments like a gym, did not…making a decision to exercise in a natural environment just once a week could be enough to gain a benefit.’

1 The response rate of 28% provides a confidence interval of ± 5%. Confidence level is 95%.
The key findings and learning from the programme are summarised in this final evaluation report.

**Key findings**

In three years the Come Outside! programme engaged around 260 separate public, voluntary and community organisations across Wales, working across a range of sectors, including:

- health and social care;
- children and young people;
- learning and education;
- mental and physical disabilities;
- drug and alcohol misuse; and
- outdoor activities/natural environment

Of these organisations, 80 were outdoor activity providers. Through collaborative working, Come Outside! also engaged 100 community groups, with 82 of these taking part in a total of more than 1,000 outdoor activity sessions. In total the programme engaged 3,370 unique participants and provided over 30 different types of outdoor activity, such as walking, gardening, geocaching, bushcraft and cycling.

A programme of one-off events, which attracted 775 people in total, was designed to provide opportunities for organisations and individuals to find out more about Come Outside! and to enable them to try new outdoor activities. After attending these events, 90% of participants said they were interested in finding ways to be more active and 62% reported that they had become more active because of the event.

Throughout the life of the programme, satisfaction rates were extremely high: 95% of participants were satisfied with the sessions they attended and 87% said that the sessions met their expectations. In addition, 83% of participants reported that because of Come Outside! they had learnt something new about wildlife and nature and were spending more time outdoors than they had before.

**Key learning 1: The Come Outside! delivery model is effective and replicable**

The Come Outside! delivery model is closely aligned with the transtheoretical model of behaviour change as shown in Figure 1 on the next page.
The behaviour-change model posits that people move through four main stages of change. Therefore, the theory of change for Come Outside! suggests that intermediate outcomes, such as improved confidence and better attitudes towards physical activity, need to be in place before sustained behaviour change in the form of increased physical activity can be achieved. Analysis of the survey data backs this up: the more sessions participants attended, the higher the numbers of people achieved the outcomes; and the highest level of change was reported by those who attended 10 sessions or more.

The Come Outside! delivery model is different from many other approaches aimed at changing health behaviours. Come Outside! targeted existing groups (supporting people who were not physically active) because the group members already had a sense of belonging, familiarity and structure. The approach put the group, rather than the activity, at the centre, introducing them to activities that reflected and addressed their interests, aspirations and concerns. Taking a ‘health by stealth’ approach, the activities that were offered focused on behaviours that were motivating for the group so that the behaviour change (an increase in physical activity, for example) became a ‘side effect’ of the activity.

Figure 1. Transtheoretical model of behaviour change

'Well - I have got muscles I didn’t know existed after my first experience of Nordic walking earlier. Looking forward to Monday already. Thanks for introducing me to my new keep-fit regime and for your patience with me. Thoroughly enjoyed it.'
The way in which the activities were designed and delivered was also different from that of other interventions. The focus was on creating opportunities for memorable experiences that participants would be motivated and inspired to repeat. In addition, the Come Outside! team targeted organisations that had support workers who could lead groups of service providers in outdoor activities. The team then developed buy-in from the support workers to the Come Outside! way of working.

**Key learning 2: To achieve change, Come Outside! coordinators need to be skilled at delivering across the community, health and outdoor sectors**

Using community development principles to create a bespoke, flexible, user-led programme of activities enabled groups to engage in activities that they would not have done otherwise. Having a team that was skilled in community development practices and knew the benefits of outdoor activity was critical to the programme’s success. The dedicated and highly motivated team was able to identify and facilitate collaboration amongst community groups, support organisations and activity providers in order to engage people, and influence existing service providers to work in a different way, rather than creating new services.

The programme demonstrated that groups and service providers need a greater proportion of the programme’s resources to be focused on skilled staff who can motivate and support them to move through the stages of behaviour change, in preference to providing them with lots of outdoor equipment.

Because of its engagement with support organisations and the team’s community development skills, Come Outside! was successful in reaching the most vulnerable or ‘hard to reach’ people. Of the participants involved:

- 88% lived in deprived communities;
- 25% were unemployed;
- 10% were from black and ethnic minority backgrounds; and
- 21% were sick or disabled.

Of the groups involved, 21% supported young people who were not in education, employment or training (NEET) and 12% supported people with mental-health issues.

Several factors lead to people living less healthy lifestyles; however, those who experience deprivation, have long-term life limiting illnesses or have chaotic lifestyles are more likely to lead sedentary lives. They are also the hardest people to engage and need more support to take part.

Although the programme was extremely successful in terms of reaching the most vulnerable people who are most likely to be inactive or in poor health, this resulted in drop-out rates that were higher than anticipated and created considerable challenges in encouraging people to participate in multiple sessions. However, as the programme involved a large number of people (almost 1,500 more than originally planned), even though 49% of participants attended only one outdoor activity session, 902 people attended three or more and 196
people attended between 10 and 60 sessions. On average, participants attended 3.5 sessions. However, people from particular disadvantaged groups attended more sessions: people who were sick or disabled attended an average of 6.9 sessions and unemployed people attended an average of 5.5 sessions. This indicates that the programme was particularly successful at engaging disadvantaged groups who often have the most to gain from taking part in outdoor activities.

Despite the challenges involved in encouraging repeat attendance, the programme improved participants’ confidence, attitude and behaviour around health and wellbeing. Of those who participated, 84% reported a positive improvement against at least one of the programme outcomes.

- Beneficiaries reporting high confidence in taking part in sessions increased from 45% to 91%.
- Beneficiaries reporting high self-esteem increased from 43% to 79%.
- Beneficiaries reporting that the programme influenced them to be more active increased from 43% to 80%.

**Key learning 3: It takes time and resources to enable people to overcome multiple barriers, but the impact can be significant**

Come Outside! helped to break down a number of barriers to engaging in outdoor activity: the most common barriers being lack of knowledge, lack of confidence and lack of experience. Over 80% of stakeholders who completed our survey agreed that Come Outside! has reduced these barriers to engagement, helping people from disadvantaged communities – and the organisations that support them – to better understand what the outdoors has to offer.

The programme’s success in engaging the people who are the most excluded from outdoor activities has also resulted in one of its biggest challenges. The chaotic lifestyles that many vulnerable people have contributed to drop-out rates being higher than anticipated, with fewer people taking part in repeat sessions than expected. Motivating people to make substantial changes to their habits and lifestyles took much longer than was originally anticipated, and required considerable support and resource. However, as demonstrated above, the positive impact on those who remained involved was significant.
**Key learning 4: Programmes need to be long enough to enable sedentary participants to build up to regular activity, when they gain the most benefits**

There is also evidence that engagement in outdoor activity is being sustained without the support of the Come Outside! team. At the time of writing this report, of the participating groups, 45% are now entirely self-organising or need minimum support from the team, and a further one-third have an independent leader. This means that around 54% of regular participants (those who have attended at least three sessions) are now taking part in outdoor activities with minimal input from the Come Outside! team.

Survey data and anecdotal feedback from groups also suggests that a significant number of participants are taking part in outdoor activities outside the group. We estimate that between 500 and 700 regular participants are likely to be taking part in other regular outdoor activities in addition to the organised sessions.

It takes time to influence changes in service provision and encourage organisations to take part. The programme built up momentum over its three years of operation: 52% of all sessions were delivered, and 43% of all participants were engaged, between April and December 2015. The final three months of delivery at full capacity (July–September 2015) saw the highest number of participants engaged. This indicates that time is needed to gain momentum in a programme of this nature, as the staff available to establish the groups and run sessions have broadly remained the same over the life of the programme. Analysis of the survey data indicates the more sessions people attended, the more people achieved the outcomes and the stronger the impact. It is reasonable to conclude that the impact of this programme on people’s health and wellbeing will continue to increase for as long as the self-organising groups continue to be active.

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*‘When you’ve been an addict for so long, it’s like you’re seeing the trees and the sky for the first time. I remember finding myself again at the beach.’*

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*‘In some ways it feels like we have only just got started: I’ve been approached by a number of organisations recently who want to work with us, but we are now winding down’*

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**Figure 2. Numbers of participants and sessions, Oct 2013 – Sep 2015**

Given more time, the programme could have focused efforts on encouraging repeat attendance at sessions and supporting groups to be self-organising.
Key learning 5: Those who have the most to gain from outdoor activity can be reached through the community, health and social care sectors

In the final nine months of delivery the team increased the proportion of beneficiaries engaged through service providers, because experience showed that this was a more effective way of engaging the target audience. By the end of the programme, 60% of the active groups were groups of service users with a range of service providers. Two-thirds of beneficiaries from service-provider groups attended five or more sessions, compared to one-third of beneficiaries engaged through community groups.

Key learning 6: Outdoor activity can be embedded into service provision if the benefits to service users are demonstrated

The programme increased knowledge and appreciation of the outdoors amongst the public and voluntary sectors in Wales. Of the organisations involved in the programme, 78% agreed that as a result of working with the Come Outside! team they have a better understanding of how the outdoors can benefit health and wellbeing, and 89% said they are now more aware of opportunities to involve groups in outdoor activities.

By facilitating links between outdoor activity providers and support organisations, Come Outside! has helped to make outdoor activity part of mainstream service provision within the public and voluntary sectors. Of the organisations involved, 68% reported that they have changed the way in which they work. This was achieved by:

- building the knowledge, skills and confidence of support workers;
- providing training, new ideas and equipment; and
- demonstrating the positive benefits of outdoor activity.

Organisations have committed officer time, training and budgets to delivering outdoor activities for their service users. However, although organisations are committed to continuing the delivery of outdoor activities where possible, they recognise that the end of the programme will result in the loss of the expertise, knowledge and support that they have benefited from: 93% of stakeholders want the programme to continue.

Key learning 7: Provision of outdoor activities can be adapted to deliver greater benefits

Of the outdoor activity providers involved in the programme, 75% reported that they are now designing their services to meet the needs of service users and community groups, delivering the benefits they want. In addition, as a result of Come Outside! 71% of providers are now working with a greater diversity of participants.

‘In social services some teams did outdoor activities (like the countryside team) but this wasn’t standard practice. But now they all have the opportunity to do the geocaching, as we have the kit and skills. Previously we wouldn’t have always considered outdoor activities, but it’s really opened our eyes to new opportunities.’
**Key learning 8: Sustained activity is possible if certain factors are in place**

Learning captured through the Come Outside! programme identified the following factors that influence the potential for sustained activity.

**Individual factors:** Come Outside! incorporated memorable experiences to build motivation and confidence; however, it found that it takes time to develop habits around outdoor and physical activity. Incentives, such as certificates, awards, qualifications and participation in future challenges, helped to motivate people to engage. For a group to be self-organising it was necessary to identify one individual who had the commitment, passion and drive to lead the group once the Come Outside! coordinator moved on.

**Group factors:** The Come Outside! model focused on working with existing groups; this encouraged people to participate, as they already had a sense of belonging and familiarity. The coordinators found that working within existing group timetables and making it easy for groups to take part in outdoor activities (by providing equipment and appropriate clothing and by staying local) helped to sustain attendance. Providing site-specific activities; for example, in community gardens, helped to build a sense of ownership that is likely to continue now that the support from Come Outside! has ended.

**Organisational factors:** Learning from the programme showed that when organisations were willing to commit resources (be it support workers or financial support), this helped to sustain activity once support from Come Outside! came to an end. However, the team found that it often takes time to achieve this level of commitment and organisations often needed to have the benefits clearly demonstrated to them before they were willing to commit resources. The coordinators found that it was important to identify individuals within organisations who had the passion and commitment needed to support groups.

**Strategic context:** Changing strategic priorities, loss of funding and uncertainty in the public and voluntary sectors created considerable challenges for the Come Outside! programme. The facilitation and assets-based approach was dependent on support from other organisations; as such, changes in the external environment had an impact on the programme’s ability to deliver in some areas. Although the flexible model meant that the approach could be adapted to suit local circumstances, the focus on hitting the original funding targets often led to quantity being prioritised over quality.

**Key learning 9: The Come Outside! approach offers value for money**

Using social value methodology, we estimate that for every £1 spent, Come Outside! has generated between £5 and £18 of social value in terms of the improved confidence, increased physical activity and increased wellbeing achieved by participants.
**Legacy and the future**

The programme has left a considerable legacy in terms of tangible assets (such as community gardens, geocaching routes, equipment and clothing) and intangible assets (such as improved knowledge, skills and confidence in using the outdoors). It has also helped organisations to embed their use of outdoor activities into their way of working as a tool for improving their service users’ health and wellbeing. There is evidence that a considerable number of groups and individuals will continue to participate in outdoor activities now that the programme has ended.

The programme has also left a considerable legacy of learning around how to engage community groups in outdoor activities and how to influence support organisations to use the natural environment as part of their service delivery. Although three years has only been enough time to start to build the momentum needed to engage more people and organisations in outdoor activities, the learning from the programme should be invaluable in helping to inform future health and wellbeing programmes.

**Conclusions**

Overall, Come Outside! has successfully achieved its original objectives. However, it is recognised that this sort of behavioural change takes time to achieve and that using an asset-based facilitation model resulted in momentum increasing over time. A significant proportion of participants were engaged in sessions run in the final six months of the programme and, even towards the end of the programme delivery, levels of demand amongst new groups and organisations was increasing. Given more time, the programme could see even higher levels of impact and build on the momentum it has achieved over the last 3 years.
Introduction

The Come Outside! programme was funded by the Big Lottery Fund, the Welsh Government (Communities First and Homes and Places) and Natural Resources Wales. The programme supported 3,370 people from deprived communities across Wales. It aimed to inspire, motivate and support young people and those who are less physically active to enjoy the outdoors, experience the benefits of being outside, and value and care for the natural environment.

The programme was managed by Natural Resources Wales and supported by a steering group with representatives from the programme’s funding organisations. A programme team at Natural Resources Wales (programme managers, regional coordinators and project support officers) was established to facilitate the creation of outdoor activity groups across 12 Communities First cluster areas in Wales.

Through recreation, play, volunteering, outdoor learning and skills development and active travel (e.g. walking and cycling), the programme aimed to improve participants’ confidence and skills in accessing the outdoors; in turn, leading to better health and wellbeing.

The objectives of the programme are reflected in the following outcomes agreed with the Big Lottery Fund and Communities First.

- To improve physical health and mental wellbeing amongst disadvantaged groups.
- To improve levels of skill, self-esteem and confidence.
- To increase participation in community-led outdoor activity.
- To increase the number of organisations providing outdoor recreation, play, volunteering, learning/skills development and active-travel infrastructure that design and deliver their services with their beneficiaries in mind.
- To facilitate collaboration amongst national stakeholders to sustain delivery beyond the end of the programme.

The programme started in November 2012 and finished in March 2016. Year 1 (November 2012– November 2013) involved stakeholder scoping and delivering workshops in clusters; this aimed to map opportunities and organisations and facilitate networking between the outdoor sector and organisations that support disadvantaged groups. The first outdoor activity groups were engaged in late 2013 and monitoring of activity continued until December 2015.

Evaluating Come Outside!

In November 2013 Trilein Ltd and Shephard & Moyes Ltd were commissioned to undertake a formative evaluation of the Come Outside! programme. The aim of the evaluation was to:

- improve delivery processes;
- report to funders on outcomes, indicators and performance measures; and
- support the development of monitoring skills amongst the team, network members and outdoor activity groups.
Our approach to evaluating Come Outside! includes the following three strands of activity and meets the evaluation requirements of the funders: the Big Lottery Fund and the Welsh Government.

- A core evaluation, establishing systems for routinely collecting progress and impact data that focuses on the key targets for the programme, along with an annual process evaluation of what has worked well and lessons for the future.
- Self-evaluation support: evaluation workshops for groups and organisations involved in Come Outside! to raise understanding of evaluation in general and the requirements of the programme in particular.
- Independent research: additional support for groups and staff members collecting data; and primary research in the form of case study visits, interviews and surveys with participants, organisations and wider stakeholders.

When designing the evaluation methodology, we recognised that a considerable evidence base already demonstrated the link between outdoor activity and improved health and wellbeing outcomes – this is discussed in more detail later in the report. Rather than duplicating this evidence, our evaluation sought to demonstrate the extent to which the programme has encouraged more people to participate more frequently in outdoor activities and, as a result, how many people are more physically active, have higher self-esteem and feel more confident about participating further. The evaluation focused on capturing learning and building an understanding of what works well and what works less well when engaging people and organisations in outdoor activity.

We took a formative evaluation approach. We developed user-friendly tools that enabled Come Outside! regional coordinators and support workers to collect simple attendance and outcome data, which we supplemented with independent research. We used mixed methods, including:

- records of attendance and demographic profiles;
- self-completed participant surveys;
- interviews and e-surveys with participants, staff and stakeholders;
- feedback captured by the Come Outside! team; and
- visits to sessions.

We worked with members of the Come Outside! team and other stakeholders to produce a theory of change and an evaluation framework, which helped to set the parameters of this evaluation. The theory of change is summarised in Figure 4. It assumes that, as a result of engaging in a series of outdoor activity taster sessions, people will be inspired and motivated to take part in outdoor activities, which, in turn, will build their confidence and improve attitudes towards healthy lifestyles. Ultimately, the programme aimed to improve participants’ levels of physical activity, leading to sustained improvements in their health and wellbeing.

Each quarter we produced a summary report to provide the team with core data on the progress and impact to date. In addition, we produced two annual evaluation reports to pull together the process and impact evaluation strands. This is the second and final of these two reports and contains our findings from data collected up to the end of December 2015.
The focus of the research for the final report was to:

- understand the impact on individuals who have taken part in Come Outside! activity;
- understand the impact on organisations working with groups and supporting the Come Outside! team; in particular, to what extent the programme has made sustained changes to the ways in which organisations use the outdoors to improve health and wellbeing outcomes;
- consider the sustainability of the programme – what is likely to continue beyond the life of Come Outside!; and
- capture learning to inform similar future programmes.

To produce this report, we collected and analysed the following data.

- Register data from 82 groups. The registers contain attendance data for all sessions delivered and demographic data for a large sample of participants. The team collected data on gender (for 77% of participants), economic status (for 30% of participants) and ethnicity (for 50% of participants), which gave us a sample size that was sufficient for analysing the profile of participants.

- Participant self-completion survey data. We collected 253 surveys from regular participants (defined as those taking part in three or more sessions). The response rate was 28%, which provided a confidence interval of ± 5% and confidence level of 95%. The survey asked participants to score themselves against a number of outcome statements before they took part in Come Outside! and as a consequence of taking part. This enabled us to show the change in levels of confidence, wellbeing and physical activity. A copy of the survey is shown in Appendix 1.

- Stakeholder survey data. We sent an e-survey to all outdoor activity service providers, support organisations and volunteer group leaders involved in the programme. We received responses to 72 of 481 surveys sent out, which is a good response rate of 15%. A copy of the survey is shown in Appendix 2a, along with a list of the organisations that responded (Appendix 2b).

- Participant e-survey data. We sent an e-survey to a small number of participants who had provided their email addresses to the Come Outside! team. The survey focused on the extent to which people took part in outdoor activities outside the organised group taster sessions. It was sent to 88 participants and the response rate was 26%. A copy of the e-survey is shown in Appendix 3.

- Interviews and visits. In addition to the stakeholder survey, we carried out 16 telephone interviews with support workers, team leaders/managers, volunteer group leaders and strategic stakeholders. We also visited a number of groups; these visits, combined with the telephone interviews, generated 12 detailed case study reports on individual groups. These case study reports are included in Appendix 4.

This report starts with a detailed consideration of how the project was set up and some of the theory underpinning the Come Outside! delivery model. It goes on to consider the activity provided, along with the practicalities of delivery and the outcomes the project has achieved. It finishes with a set of conclusions and recommendations.
Figure 4. Theory of change

- Only a quarter (26%) of people in Wales are taking part in outdoor recreation often enough to be counted as 'frequent' participants. (Countryside Council for Wales 2009)
- People experiencing deprivation or disadvantage are more likely to have poorer health, lower skills levels and lower self-esteem and self-confidence
- People experiencing deprivation and disadvantage are less likely to participate in outdoor activities

- Come Outside! project team
- Big Lottery, Communities First, NRW and Welsh Government funding
- Voluntary and public sector support organisations
- Outdoor activity providers
- Community groups

- Facilitating creation of Outdoor Activity Groups
- Supporting delivery of outdoor activity taster sessions
- Influencing and supporting organisations to embed outdoor activities in service provision

- 125 groups
- 1,875 participants
- 750 sessions

- Better understanding of natural environment and what the outdoors can offer
- Improved confidence
- Improved knowledge of opportunities and greater networking between organisations

- Improved understanding of healthier lifestyles
- Improved attitudes towards outdoor activity and physical activity
- Improved skills and attitudes of support organisations and outdoor activity providers

- Improved physical activity levels
- Improved health and wellbeing
- Outdoor activity embedded within service delivery
About Come Outside!

This chapter provides details of the Come Outside! delivery model and approach. It also sets out the theoretical underpinning of the programme design, including the link between outdoor activities and long-term outcomes for health and wellbeing.

Evidence of need

The need to improve health and wellbeing has long been a priority for the Welsh Government. In particular, research has identified a gap between the health of people living in Wales’ most deprived and least deprived communities. The 2011 bid to the Big Lottery Fund for Come Outside! involved a comprehensive review of this evidence, and a few examples are listed below. Come Outside! was set up in recognition of the fact that only one-quarter of the Welsh population (26%) was taking part in outdoor recreation often enough to be counted as ‘frequent’ participants (Countryside Council for Wales 2009). People experiencing deprivation or disadvantage are more likely to have poorer health, lower skill levels, lower self-esteem and lower self-confidence; they are also less likely to participate in outdoor activities. The Come Outside! programme was set up to address the need to raise physical activity levels by increasing participation in outdoor activities and focusing on the most disadvantaged areas and people.

The Welsh Government’s report *Our Healthy Future* (2010) identified the health inequalities in Wales:

‘People living in the poorer parts of Wales are almost twice as likely to die before they are 75 as those in the richer areas. There are also unfair differences in health between people as a whole and some social groups. These include disabled people, some ethnic minorities, the long-term unemployed and people who are homeless.’

The World Health Organization identified the link between inactivity and deprivation:

‘Disadvantaged people and especially people with low income tend to be less active in their leisure time because they are less able to afford and access programmes and facilities and more likely to live in neighbourhoods with crime and traffic safety problems (barriers to active living)’

This is backed up by research published by Sustrans (Drakeford, 2006), which found the same to be true in Wales:

‘In the most deprived areas of Wales people are twice as unlikely to take exercise.’

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The Welsh Government’s strategy *Climbing Higher: Creating an Active Wales* (2009)\(^4\) identified the need to improve physical activity levels in a considerable proportion of the population:

‘The latest data from the Welsh Health Survey (2008) indicates that about 30% of adults undertake sufficient physical activity to benefit their health (the current recommendation is 30 minutes of moderate intensity physical activity on 5 or more days of the week). At the other end of the scale 34% are classed as sedentary (not achieving 30 minutes on any day of the week).’

The costs of poor health resulting from physical inactivity are considerable: NHS Wales estimates that the cost of physical inactivity to Wales is around £650 million per year (Welsh Government, 2009)\(^4\).

The need identified in 2011 still exists in 2016. Wales’ Chief Medical Officer, in her last annual report (2014–15) identified physical inactivity as one of the principal health-risk behaviours. She reported that less than one-third of the population is active on five days a week and, whilst there have been some improvements in other health-risk behaviours, there has been little change in levels of physical activity. She also reported that those living in the most deprived areas continue to have a lower life expectancy and poorer general health. In 2015 the Welsh Government, together with Sport Wales and Public Health Wales, appointed a physical activity programme director to lead the development and implementation of a physical activity action plan for Wales.

**A case for change**

A considerable amount of academic and grey (non-peer-reviewed) literature demonstrates the positive correlation between taking part in outdoor activity and improved health and wellbeing outcomes.

**Increased levels of physical activity lead to improved health**

The British Heart Foundation’s paper ‘Making the case for physical activity’ (2013)\(^5\) summarises what we know about the impact of physical activity on health. It states that physical inactivity is known to be the fourth biggest cause of global mortality and that many of the leading causes of ill health in today’s society, such as coronary heart disease, cancer and type 2 diabetes, could be prevented if more inactive people were to become active:

‘Participating in physical activity also has benefits for mental health, quality of life and wellbeing, and maintaining independent living in older people.’

It also states that being physically active can:

- decrease cardiovascular disease by 33%;
- decrease the risk of stroke by 31%;
- decrease the risk of coronary heart disease by 14%;
- reduce blood pressure;

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\(^5\) British Heart Foundation (2013). Making the case for physical activity.
• reduce the risk of lung cancer by 30%;
• enhance self-esteem and self-concept; and
• reduce the risk of depression, distress and dementia by 20-30%.

**Participating in outdoor activity has additional health benefits**

Research carried out by the Centre for Research on Environment, Society and Health (CRESH) (Mitchell 2012) found that physical activity in natural environments has a stronger association with a reduced risk of poor mental health than physical activity in other environments does. It found that:

• regular use of natural environments, such as forests and parks, seemed to protect against mental ill health, whilst the use of non-natural environments, like a gym, did not;
• making the decision to exercise in a natural environment just once a week could be enough to gain a benefit; and
• activity in different types of environment may promote different kinds of positive psychological response.

The research concluded that access to natural environments for physical activity should be safeguarded and promoted as a contribution to protecting and improving mental health.

**Specific outdoor activities can lead to better health and wellbeing**

A number of research papers have considered the impact of specific outdoor activities on health and wellbeing. Research carried out by the University of Essex (Barton and Pretty 2010) determined a link between ‘green exercise’ (activity in green places in the presence of nature) and improvements in mood and self-esteem. It found that green exercise generates positive health outcomes, builds ecological knowledge, fosters social bonds and influences behavioural choices.

A literature review carried out by Garden Organic and Sustain in 2014 found that gardening and growing improves health and wellbeing by contributing to people’s physical activity levels and improving their eating habits. To improve physical health, regular involvement in gardening, community food-growing projects or formal horticultural therapy can:

• increase overall levels of physical activity and fitness, burn more calories and, therefore, contribute to healthy weight management and reducing the risk of obesity; and
• increase consumption of healthy fruit and vegetables amongst adults and improve young people’s attitudes to healthy eating.

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8 Garden Organic and Sustain (2014). *The benefits of gardening and food growing for health and wellbeing.*
For people with acute or persistent mental-health problems or difficult personal circumstances, regular involvement in gardening or community food-growing projects can:

- improve social interactions and build community cohesion;
- reduce the occurrence of episodes of stress, the severity of that stress and the associated depression;
- reduce reliance on medication;
- provide productive manual activity and beneficial social interaction for people tackling drug and alcohol dependency; and
- help people to manage the distress associated with mentally challenging circumstances.

Research into the impact of walking groups carried out by the University of East Anglia (Hanson and Jones 2014) found that:

- outdoor walking groups provide health benefits beyond making people more physically active, such as reducing blood pressure, body fat, total cholesterol and the risk of depression; and
- the dynamics and social cohesion of walking groups may have supportive effects that encourage and sustain adherence and positive attitudes towards physical activity, companionship and a shared experience of wellness.

A further study carried out by the universities of London, Coventry and Manchester (Kassavou, Turner and French, 2013) found that:

- interventions to promote walking in groups are efficacious for increasing physical activity;
- when considering the health benefits of physical activity and the fact that group interventions target more people than individual based interventions, it seems worth considering devoting resources to designing and implementing interventions to promote walking in groups;
- walking interventions that provide social support relationships for behaviour change may lead to greater maintenance of behaviour change; and
- participants maintain attendance at walking groups for a long period of time when they have high self-efficacy and their outcomes expectations have been satisfied by the walking group intervention.

Finally, research carried out into the impact of outdoor activities on children and young people (Children and Nature Network, 2010) found that:

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9 Hanson and Jones (2014). Is there evidence that walking groups have health benefits? University of East Anglia.
time spent outdoors supports many aspects of children’s health – children’s time spent outdoors is linked to increased physical activity, healthy development and overall wellbeing;

direct experience in nature is critical but is diminishing – play in nature, particularly during middle childhood, appears to be an especially important time for developing the capacities for creativity, problem-solving and emotional and intellectual development;

children who are ‘nature-smart’ get higher test scores;

children benefit from appropriate risk-taking during outdoor play;

children with attention deficit hyperactivity disorder (ADHD) concentrate better after walking in a park;

outdoor experiences for teenagers (specifically wilderness programmes) have self-reported life-changing results; and

technology may help to engage children in outdoor activities.

What this means for evaluating Come Outside!

These research projects prove the link between outdoor activity (be it gardening, walking or green exercise) and better long-term health and wellbeing outcomes through increases in confidence, self-esteem and physical activity. We do not need to repeat this research, as the wider evidence base already exists. What we need to do in this evaluation is demonstrate that, as a result of the Come Outside! programme:

- people are participating in outdoor activities;
- people are engaging more in outdoor activities (either as part of an organised Come Outside! session or otherwise);
- people are engaging more often in outdoor activities;
- as a result of taking part in outdoor activities, people have higher self-esteem and feel more confident about participating again; and
- as a result of taking part in outdoor activities, people are more physically active.

If we have evidence that the above activities and outcomes have been achieved, we can be confident that this will lead to long-term, sustained improvements in health and wellbeing.

Changing behaviour

There are several models of behaviour change in health. For many years, health education was based on scare tactics, founded on the belief that people would make a positive change if they knew that their current behaviour would shorten their lives. This model was shown to be ineffective because of the complexity of a person’s interaction with their own beliefs, their environment and their social ties (Conner 2005).12

This approach to health improvement was based on a ‘deficit model’: focusing on identifying populations’ problems and needs, which can then be addressed with professional resources. In contrast, ‘assets’ models emphasise the capability of individuals and communities to identify problems and activate their own solutions. Asset-based approaches focus on promoting individual people’s self-esteem and coping abilities, which eventually leads to less

dependency on professional services (Morgan and Ziglio 2007)\textsuperscript{13}. Developing a range of personal and social resources can build the resilience of people living in difficult circumstances by developing a positive attitude to health, effective coping skills (self-efficacy), strong self-confidence and social capital.

To achieve the ultimate outcome of improved health and wellbeing through increased physical activity, Come Outside! needed to build on these personal and social assets and support people to make changes to their lifestyle. The transtheoretical model of behaviour change\textsuperscript{14} posits that people go through five stages of change. Figure 5 shows these stages of change and how the Come Outside! delivery model aimed to move people from 'pre-contemplation' to 'maintained change'.

\textsuperscript{13} Morgan A, Ziglio E. (2007) Revitalising the evidence base for public health: an assets model. Promotion and Education. Michigan State University Best Practice Briefs

\textsuperscript{14} The transtheoretical model has been described as an integrative and comprehensive model of behaviour change that has been drawn from all major theories of psychotherapy. Source: http://her-oxfordjournals.org/content/17/4/451.full
The Come Outside! model

Come Outside! sought to achieve behaviour change that would lead to improvements in health and wellbeing. It aimed to do this by increasing and sustaining participation in outdoor activities amongst people who were experiencing deprivation or disadvantage.

The programme was designed to take a community development approach to delivery, building on local assets rather than creating new services or projects. With their strong community development skills, Come Outside! regional coordinators motivated and enabled outdoor activity providers and organisations that support disadvantaged groups to work together to provide opportunities for people to take part in outdoor activities that would benefit their health and wellbeing. The aims were:

<table>
<thead>
<tr>
<th>Behaviour Change model</th>
<th>Come Outside! Delivery Model</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pre-contemplation – participant does not yet know they need to change</td>
<td>Stage 1 - Scoping</td>
</tr>
<tr>
<td>Contemplation – participant knows they need to change but not how</td>
<td>• Find potential participants who fit the Welsh Government’s target population for increasing physical activity</td>
</tr>
<tr>
<td></td>
<td>• Find partner organisations who can support the participants to sustain a more active lifestyle</td>
</tr>
<tr>
<td></td>
<td>• Engage with potential participants, through service providers and existing community groups to understand their interests, aspirations and barriers</td>
</tr>
<tr>
<td>Preparation – participant takes steps towards change</td>
<td>Stage 2 - Demonstrating</td>
</tr>
<tr>
<td></td>
<td>• Involve participants in 1-2 bespoke outdoor activity taster sessions. Provide memorable experiences, address barriers and demonstrate personal benefits. Monitor impact to demonstrate the benefits to participants and service providers</td>
</tr>
<tr>
<td>Action – participant makes change</td>
<td>Stage 3 - Influencing</td>
</tr>
<tr>
<td></td>
<td>• Build motivation, confidence and knowledge, encouraging and enabling participants to take part in more regular outdoor activity sessions. Continue to address barriers, broaden experiences and encourage with rewards and incentives</td>
</tr>
<tr>
<td>Maintain – participant continues with change</td>
<td>Stage 4 - Enabling</td>
</tr>
<tr>
<td></td>
<td>• Encourage and support independent, active lifestyles with information, resources, contacts, networks, essential equipment and training, including the Come Outside! Activity Skills Learning Programme</td>
</tr>
</tbody>
</table>

Figure 5. Behaviour change model
• to support groups to become self-organising and self-resourcing; and
• for organisations to embed outdoor activities into everyday practice.

More details on the Come Outside! approach are provided in Appendix 5.

Community development and the environment sector
Community development practitioners work with people who are experiencing deprivation or disadvantage. Health and social care support workers work with many people who face barriers to participating in physical activity. These practitioners all have the skills to engage with groups that are viewed as ‘hard to reach’ by the environment sector; they also have the skills to support and empower these groups to address the issues that are affecting their lives.

Research and previous experience of working with community development organisations led to the understanding that the community, health and social care sectors did not often work in partnership with the outdoor sector. It was not mainstream thinking for community development or support workers to recognise the outdoors as a resource for addressing health and wellbeing needs; as a result, many of these practitioners had limited experience of using the outdoors in their work.

Come Outside! sought to address this by combining a community development model with working in partnership with the outdoor sector.

Asset-based model
The Come Outside! delivery model is an example of asset-based working: the regional coordinators identified and facilitated connections between existing community groups, support organisations and outdoor activity providers. This is a different way of working from the traditional ‘deficit’ model, where considerable resources are acquired to address needs and new services or projects are set up to address those needs – often for a limited period of time. Many argue that this negative emphasis communicates a sense of failure and helplessness and reinforces low expectations (Michigan State University, 1999)15. It tends to create dependency and actively discourages individuals and communities from moving towards the positive outcomes that the service or project aims to achieve. Conversely, asset-based approaches are held to:

• communicate a sense of hope;
• establish expectations for success within an individual’s capacities;
• promote empowerment and independence; and
• set in motion forces for improvement.

15 Michigan State University Best Practice Briefs, the assets / strength-based approach To programming, 1998-1999
Creating memorable experiences

In the context of outdoor activities, the concept of a memorable experience is about designing and delivering these activities to inspire and motivate participants so that they continue to talk and think about them, even dream about them, and want to repeat them. This concept has been developed for Come Outside! from the work of psychologists Giges and Rosenfeld on personal development (Greenaway 1998) and the study of happiness, creativity and the notion of ‘flow’ (Csikszentmihalyi 1997) by Cummings, Manzoku.

Providing opportunities for memorable experiences is important: projects that introduce people to outdoor activities through pleasant but uninspiring activities risk failing to motivate people to return and become more involved.

The memorable experience model was used when designing taster sessions with groups, applying the four principles shown in Figure 6. This means that the activity sessions incorporated:

- some elements that were challenging;
- opportunities for social interaction;
- time for quietness and reflection; and
- activities that connect people with the natural environment around them.

Moving towards sustainability

The community development and asset-based approach aims to empower groups to become self-organising and resourcing. The goal of Come Outside! was to raise awareness of and enthusiasm for outdoor activities by facilitating cross-sector networking, supporting taster sessions and encouraging a participative way of working. The expectation was that groups would continue to benefit from the outdoor activity providers and the natural assets available in their communities.

Programme funding and spend

Come Outside! received £1.1m of funding from the Big Lottery Fund (53%), the Welsh Government (19%) and Natural Resources Wales (28%) to run the programme from

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November 2012 to March 2016. The majority of the programme funding (79%) was for staffing and overheads. Only a relatively small amount of expenditure (13%, or £145,000) was allocated to direct delivery, which included the initial workshops, partner training, communications, events and equipment, the Community Engagement Fund and the Capacity Building Fund. These funds provided a total of £105,000 to support groups and service providers.

The Community Engagement Fund enabled groups to get involved in taster sessions. It provided £64,000 of outdoor activity equipment, activity session costs and transport: equivalent to an average of £780 of funding per group.

The Capacity Building Fund enabled groups to become self-sustaining. It provided £41,000 of essential outdoor clothing, footwear, equipment and training that enabled groups and service users to continue providing outdoor activities independently. This came to an average of £500 per group.

The spend ratio between staffing/overheads and direct delivery costs reflects the programme learning, which is that groups and service providers have more need for programme resources to be focused on skilled staff who can motivate and support them to move through the stages of behaviour change, in preference to providing them with lots of outdoor equipment etc. A summary of the programme’s funding and spend is shown in Appendix 6.
Activity and outputs achieved

This chapter provides a summary of what the programme has achieved in terms of organisations, groups and people engaged in outdoor activities.

Working with a wide range of organisations

In two years of delivery on the ground, the Come Outside! programme worked with around 260 organisations and groups across 11 Communities First cluster areas (see Appendix 7 for the full list of organisations). Although the programme focused on health and wellbeing, it worked across a range of sectors, including young people, older people, learning and education, and employment.

In the public sector, the programme engaged Communities First teams, local authorities, social services, youth services, schools and pupil-referral units. The voluntary sector organisations involved included charities supporting older people, heritage organisations, mental-health charities, and drug and alcohol recovery charities. Finally, Come Outside! worked with a wide range of community groups and organisations, such as weight-management groups, youth clubs and parenting groups. Of all these participants, 60% were users of community, health or social care services and 40% were members of community groups.

Of the 260 organisations engaged by the programme, around 80 were outdoor activity service providers. These included Groundwork Trusts; the Federation of City Farms and Gardens; Sustrans and other cycling organisations; local authority heritage, parks and landscape services teams; bushcraft specialists; astronomers; allotment societies; fishing societies; and Wildlife Trusts.

Community groups and service users participating in outdoor activity sessions

Between late 2013 and December 2015 Come Outside! worked with 100 community groups and users of health and social care services, encouraging them to take part in outdoor activity taster sessions. The process of engaging groups and support workers involved an initial consultation followed by taster sessions. In some cases the group did not move beyond the consultation stage, as it became clear that the interest wasn’t there. However, some groups needed considerable amounts of consultation before they became confident enough to move on to the active phase. Once a group stopped working direct with the Come Outside! team, it was classed as ‘finished’ and the monitoring of activity stopped. In some cases activity in these ‘finished’ groups ended, whilst in others it continued without the support of the Come Outside! team. The proportion of groups able to continue delivery once the involvement of Come Outside! had finished is discussed later in this report.
Table 1 shows the status of each group as at end December 2015.

**Table 1. Status of groups engaged**

<table>
<thead>
<tr>
<th>Status</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Consulted only</td>
<td>18</td>
</tr>
<tr>
<td>Active</td>
<td>56</td>
</tr>
<tr>
<td>Finished</td>
<td>26</td>
</tr>
<tr>
<td>Total</td>
<td>100</td>
</tr>
</tbody>
</table>

A total of 82 groups were involved in outdoor activity taster sessions. Monitoring data was collected from the attendance registers of all 82 groups; this data forms the basis of the analysis in this report relating to attendance, participant profiles and sessions delivered. Appendix 8 provides a list of all the groups and a profile of their members.

The 82 groups were involved in 1,084 outdoor activity taster sessions altogether, exceeding the original target of 750 sessions by some margin. Table 2 shows the number of sessions delivered in each quarter of the programme, along with the cumulative total.

**Table 2. Sessions delivered, by quarter**

<table>
<thead>
<tr>
<th>Quarter</th>
<th>Total sessions</th>
<th>Cumulative total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Oct–Dec 2013</td>
<td>5</td>
<td>5</td>
</tr>
<tr>
<td>Jan–Mar 2014</td>
<td>31</td>
<td>36</td>
</tr>
<tr>
<td>Apr–Jun 2014</td>
<td>86</td>
<td>122</td>
</tr>
<tr>
<td>Jul–Sep 2014</td>
<td>111</td>
<td>233</td>
</tr>
<tr>
<td>Oct–Dec 2014</td>
<td>131</td>
<td>364</td>
</tr>
<tr>
<td>Jan–Mar 2015</td>
<td>151</td>
<td>515</td>
</tr>
<tr>
<td>Apr–Jun 2015</td>
<td>240</td>
<td>755</td>
</tr>
<tr>
<td>Jul–Sep 2015</td>
<td>200</td>
<td>955</td>
</tr>
<tr>
<td>Oct–Dec 2015</td>
<td>129</td>
<td>1,084</td>
</tr>
</tbody>
</table>

Figure 7 shows the overall trend of increasing numbers of sessions as the programme developed. It shows that 52% of all sessions delivered were held during the nine months leading up to the end of delivery at full capacity (April to December 2015). This indicates the length of time needed to gain momentum in a programme of this nature, as the staff available to establish the groups and run the sessions broadly remained the same throughout the life of the programme.

‘In some ways it feels like we have only just got started; I’ve been approached by a number of organisations recently who want to work with us, but we are now winding down.’

(Regional coordinator)
Table 3 shows that although Swansea had the highest number of groups, the highest number of sessions was delivered in Merthyr, with this cluster also showing the largest average number of sessions per group.

An analysis of group types shows that Communities First residents’ groups were involved in the largest number of sessions, followed by young people who are not in education, employment or training (NEET) or at risk of becoming NEET. However, groups supporting unemployed people ran, on average, more sessions per group, followed by groups supporting adults recovering from addiction. This is detailed in Table 4 (please note that this shows data only for categories that included at least two groups).
Table 4. Groups and sessions by group type

<table>
<thead>
<tr>
<th>Group type</th>
<th>Total sessions</th>
<th>Number of groups</th>
<th>Average sessions per group</th>
</tr>
</thead>
<tbody>
<tr>
<td>Communities First residents</td>
<td>307</td>
<td>22</td>
<td>14</td>
</tr>
<tr>
<td>Young people who are NEET or are at risk of becoming NEET</td>
<td>258</td>
<td>21</td>
<td>12</td>
</tr>
<tr>
<td>Weight-management groups</td>
<td>108</td>
<td>7</td>
<td>15</td>
</tr>
<tr>
<td>Adults with mental-health issues</td>
<td>99</td>
<td>7</td>
<td>14</td>
</tr>
<tr>
<td>Adults recovering from addiction</td>
<td>64</td>
<td>4</td>
<td>16</td>
</tr>
<tr>
<td>Unemployed adults</td>
<td>79</td>
<td>4</td>
<td>20</td>
</tr>
<tr>
<td>Adults with parenting support needs</td>
<td>49</td>
<td>7</td>
<td>7</td>
</tr>
<tr>
<td>Adults with mental and/or physical disabilities</td>
<td>24</td>
<td>2</td>
<td>12</td>
</tr>
</tbody>
</table>

Engaging participants in a wide range of outdoor activities

The groups took part in a wide range of outdoor activities. Altogether, they participated in more than 30 different types of outdoor activities: from simple activities, such as walking, gardening and visiting parks and other outdoor spaces, to more adventurous activities, such as bushcraft, survival training and gorge-walking. Figure 8 shows the 10 most popular activities, with walking and geocaching making up just over one-third (36%) of sessions.

![Figure 8. Top 10 activities](image)

Some groups – for example, gardening and walking groups – tended to focus on one or two activities, whereas others engaged in a wide range, depending on what they were interested in. A full list of activities and outdoor places involved in the programme is shown in Appendix 9.
Engaging a diverse range of participants from disadvantaged backgrounds

In total, Come Outside! engaged 3,370 unique participants throughout the life of the programme: 2,595 as members of outdoor activity groups and 775 through one-off events. The programme exceeded the original target of engaging 1,875 participants by some margin.

Table 5 shows the numbers of participants engaged in outdoor activity groups over the life of the programme. This shows the number of unique participants and the cumulative total per quarter. Similar to the data for the number of sessions delivered, this data shows that the programme gained momentum over the two years it was operational. The programme engaged 43% of its participants in the nine months from April to December 2015; the final quarter of delivery at full capacity (July–September 2015) saw the highest number of participants engaged. The regional coordinators found that they were turning away new groups and service providers at this point so that they could focus on increasing the engagement of existing participants rather than engaging new ones.

Table 5. Participants engaged, by quarter

<table>
<thead>
<tr>
<th></th>
<th>Unique participants</th>
<th>Cumulative total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Oct–Dec 2013</td>
<td>11</td>
<td>11</td>
</tr>
<tr>
<td>Jan–Mar 2014</td>
<td>102</td>
<td>113</td>
</tr>
<tr>
<td>Apr–Jun 2014</td>
<td>284</td>
<td>397</td>
</tr>
<tr>
<td>Jul–Sep 2014</td>
<td>256</td>
<td>653</td>
</tr>
<tr>
<td>Oct–Dec 2014</td>
<td>425</td>
<td>1,078</td>
</tr>
<tr>
<td>Jan–Mar 2015</td>
<td>393</td>
<td>1,471</td>
</tr>
<tr>
<td>Apr–Jun 2015</td>
<td>413</td>
<td>1,884</td>
</tr>
<tr>
<td>Jul–Sep 2015</td>
<td>586</td>
<td>2,470</td>
</tr>
<tr>
<td>Oct–Dec 2015</td>
<td>125</td>
<td>2,595</td>
</tr>
</tbody>
</table>

The number of participants per group varied considerably: from two (in the Swansea East Adult Learners group) to 181 (in the Cadoxton Primary parents group). Looking at the averages in each cluster area, participants per group ranged from 16 in Wrexham to 52 in the Vale of Glamorgan.
Table 6. Participants per group by cluster area

<table>
<thead>
<tr>
<th></th>
<th>Total participants</th>
<th>Number of groups</th>
<th>Average participants per group</th>
</tr>
</thead>
<tbody>
<tr>
<td>Swansea</td>
<td>679</td>
<td>16</td>
<td>42</td>
</tr>
<tr>
<td>Rhondda Cynon Taf</td>
<td>378</td>
<td>11</td>
<td>34</td>
</tr>
<tr>
<td>Denbighshire</td>
<td>320</td>
<td>7</td>
<td>46</td>
</tr>
<tr>
<td>Cardiff</td>
<td>307</td>
<td>8</td>
<td>38</td>
</tr>
<tr>
<td>Vale of Glamorgan</td>
<td>258</td>
<td>5</td>
<td>52</td>
</tr>
<tr>
<td>Merthyr Tydfil</td>
<td>221</td>
<td>9</td>
<td>25</td>
</tr>
<tr>
<td>Gwynedd</td>
<td>158</td>
<td>8</td>
<td>20</td>
</tr>
<tr>
<td>Caerphilly</td>
<td>119</td>
<td>5</td>
<td>24</td>
</tr>
<tr>
<td>Newport</td>
<td>108</td>
<td>5</td>
<td>22</td>
</tr>
<tr>
<td>Wrexham</td>
<td>81</td>
<td>5</td>
<td>16</td>
</tr>
<tr>
<td>Torfaen</td>
<td>42</td>
<td>2</td>
<td>21</td>
</tr>
</tbody>
</table>

Analysing the average number of participants by group type shows that Communities First residents’ groups attracted the most participants overall, amounting to 41% of all participants.

Table 7. Participants by group type

<table>
<thead>
<tr>
<th>Group Type</th>
<th>Total participants</th>
<th>% of total participants</th>
</tr>
</thead>
<tbody>
<tr>
<td>Communities First residents</td>
<td>1,088</td>
<td>41%</td>
</tr>
<tr>
<td>Young people who are NEET or at risk of becoming NEET</td>
<td>343</td>
<td>13%</td>
</tr>
<tr>
<td>Adults with parenting support needs</td>
<td>326</td>
<td>12%</td>
</tr>
<tr>
<td>Weight-management groups</td>
<td>202</td>
<td>8%</td>
</tr>
<tr>
<td>Adults with mental-health issues</td>
<td>145</td>
<td>5%</td>
</tr>
<tr>
<td>Families with literacy support needs</td>
<td>121</td>
<td>5%</td>
</tr>
<tr>
<td>Unemployed adults</td>
<td>106</td>
<td>4%</td>
</tr>
<tr>
<td>Adults recovering from addiction</td>
<td>66</td>
<td>2%</td>
</tr>
<tr>
<td>Adults and children recovering from domestic abuse</td>
<td>67</td>
<td>3%</td>
</tr>
<tr>
<td>Homeless people</td>
<td>53</td>
<td>2%</td>
</tr>
<tr>
<td>Black and minority ethnic (BME) women</td>
<td>42</td>
<td>2%</td>
</tr>
<tr>
<td>Adults with mental and physical disabilities</td>
<td>35</td>
<td>1%</td>
</tr>
<tr>
<td>Other young people</td>
<td>33</td>
<td>1%</td>
</tr>
<tr>
<td>Adults and young people with mental-health issues</td>
<td>23</td>
<td>1%</td>
</tr>
<tr>
<td>Adults with physical disabilities</td>
<td>21</td>
<td>1%</td>
</tr>
</tbody>
</table>

The programme engaged a good range of participants. Female participants made up 52% and males made up 48%. Eighty-eight per cent lived in Communities First cluster areas,
which demonstrates that the vast majority of participants were living in deprived communities.

Figure 9 gives a breakdown of the participants by age. It shows that the programme engaged a broad age range, from children of pre-school age to people in their 70s and 80s. A considerable proportion of participants (37%) was made up of children aged under 13, and 18% were young people (aged 13–24). Only 3% of participants were aged over 65; however, this still equates to around 80 people in this age range.

![Figure 9. Breakdown of participants by age](image)

Figure 10 provides a breakdown of the participants by economic status. One-quarter of participants (25%) were unemployed, compared with 4% of the Welsh population as a whole\(^{18}\), and 21% were sick or disabled, compared with 6% of the Welsh population\(^{19}\). This demonstrates the high proportion of people engaged in the programme who were economically disadvantaged or had a life-limiting illness or disability.

\(^{18}\) 2011 Census.
\(^{19}\) 2011 Census.
Table 8 shows the ethnic origin of participants compared with the corresponding proportion in the Welsh population, which has been taken from the 2011 Census. The data shows that the programme has engaged a higher proportion of people from a black or ethnic minority background (10%) than the corresponding proportion in the Welsh population (6%).

Table 8. Ethnic background of participants

<table>
<thead>
<tr>
<th>Come Outside! participants</th>
<th>Population of Wales</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mixed</td>
<td>1.29%</td>
</tr>
<tr>
<td>Other</td>
<td>0.15%</td>
</tr>
<tr>
<td>White British</td>
<td>90.44%</td>
</tr>
<tr>
<td>White other</td>
<td>4.63%</td>
</tr>
<tr>
<td>Asian/Asian British</td>
<td>3.03%</td>
</tr>
<tr>
<td>Black/Black British</td>
<td>0.46%</td>
</tr>
</tbody>
</table>

Figure 11 further illustrates the range of groups engaged in the programme, showing the high proportion of groups that support vulnerable people or people who are traditionally labelled ‘hard to reach’. One-third (33%) was made up of resident-led community groups involving people living in deprived communities, one-fifth (21%) was made up of groups supporting young people who are NEET, and just over one-tenth (12%) was made up of groups supporting people with mental-health issues.

A variety of factors lead to people being less physically active, but those who experience deprivation, long-term life-limiting illnesses or chaotic lifestyles are more likely to lead sedentary lifestyles. They are also the hardest to engage and need more support to build their confidence and self-esteem in order for them to take part in regular outdoor activities.
The programme has been extremely successful in engaging vulnerable or ‘hard to reach’ groups that are more likely to be inactive or in poor health.

One-off events
In addition to taster sessions run by groups, the programme held seven one-off events, which were designed to give people the opportunity to find out more about the programme and try some outdoor activities. These one-off events attracted 775 people in total, with two events held in February 2015 attracting over 80% of these participants.

The two February events were multi-activity days at Parc Bryn Bach and Daerwynno Outdoor Centre in Llanwynno Forest. The days were organised and run in partnership with other Natural Resources Wales teams and local organisations. Participants were offered information about the sites and given the chance to have a go at new, inspiring outdoor activities. This provided opportunities to build confidence and learn something new and inspiration to continue some of the activities after the event.

The events were extremely popular and received excellent feedback from participants. Of those who provided feedback, 99% enjoyed the day, 90% tried something new and 75% learnt more about the Come Outside! programme.

‘The event was run excellently. All the staff were so friendly and we loved it!’

Following each event, we carried out a short e-survey with participants. Respondents were asked to state the extent to which they agreed or disagreed with a number of statements regarding their attitudes, knowledge and behaviours relating to outdoor activity as a result of attending the event. Figure 12 shows the results.
Figure 12. Impact of one-off events

The data shows that 90% of respondents were interested in taking part in more outdoor activities and were interested in finding ways for themselves or their families to be more physically active. Sixty-seven per cent of respondents said that they were taking part in more outdoor activities and 62% said they knew more about outdoor activities they could take part in. As a result of attending the event, 62% of respondents reported that they are now more physically active.

The survey also asked participants if they had returned to the park since the organised event. Over half (55%) said that they had been back at least once or twice, and a further 30% were planning on going back.

Participants were asked what difference attending the event has made to their or their family’s involvement in outdoor activities. The responses showed that people had taken part in new and different outdoor activities and that they had felt encouraged to do more activities with their families or join local groups.

’We do more outdoor activities together and have even joined the geocache hunt.’

’We have done a lot of geocaching with a phone app.’

’We discovered some new activities which we enjoyed and are looking forward to doing more of this as the weather improves this summer.’

’We started running after the event.’

In addition to the impact on individuals who attended, the events acted as a springboard for the establishment of new outdoor activity groups. As a result of the Daerwynno event, three new outdoor activity groups were established, and many existing service providers included outdoor activities as part of their provision. Women’s Aid in Rhondda Cynon Taf established a community garden in one of its hostels, the Gofal Rhondda Cynon Taf group started running an outdoor activity once a month as part of its work (bushcraft, geocaching, and
archery), and Pinewood House (a mental-health home run by Rhondda Cynon Taf council) began to deliver outdoor activities with service users.

Following the Parc Bryn Bach event, the team worked with GAVO (a project run by Communities First) to help them set up an astronomy club for young people with Asperger’s. This involved an astronomy taster session, where participants watched the night sky.
Impact on participants

This chapter provides a detailed analysis of the positive difference that the programme has made to participants’ health and wellbeing.

Satisfaction levels

Satisfaction levels remained very high throughout the life of the programme, and the survey results and anecdotal feedback reflect the positive experience that most participants had. Overall, 95% of participants were satisfied with the session (or sessions) they attended, and 87% said that the session (or sessions) met their expectations. This is detailed in Figures 13 and 14, which show that the satisfaction rates have remained higher than the rates for sessions meeting participants’ expectations. Overall, satisfaction and meeting expectation rates both increased over the first nine months of the programme and then remained relatively stable. There was no significant difference between the satisfaction levels of adults and those of young people.

Figure 13. Satisfaction levels, by quarter

Figure 14. Rates of meeting expectations, by quarter
A further survey sent to a small sample of participants explored satisfaction levels in more detail. Figure 15 shows that 96% of participants found out about outdoor activities they could take part in and tried something new, whilst 83% of participants learnt something new about wildlife and nature and spent more time outdoors than they had before.

![Figure 15. Satisfaction in detail](image)

### Regular engagement

To make significant and sustainable changes to health and wellbeing, people need to engage in multiple sessions. It is incredibly unlikely that attendance at one session will have any significant impact on an individual: it is through regular engagement that changes in habits and lifestyle are achieved, which, in turn, lead to better health and wellbeing.

As discussed, Come Outside! engaged a significant number of people from disadvantaged backgrounds. These backgrounds often result in people having chaotic lifestyles, poor motivation and low self-confidence. As a result, a large number of participants in the programme (49%) attended only one session. However, 1,328 beneficiaries went on to attend at least two outdoor activity sessions, 902 people attended three or more sessions and 196 people attended between 10 and 60 sessions.

On average, participants attended 3.5 sessions, with 20% attending five or more sessions by December 2015. Throughout the life of the programme, the percentage of people attending five or more sessions has remained relatively constant: between 15% and 20%. However, as the programme has engaged more people, the number of people attending five or more sessions has increased, as shown in Figure 16.
Of the participating groups, 28% (23) had an average participant attendance of more than five sessions. Groups working with disabled people had the highest engagement rates, with people from these groups attending, on average, more than five sessions.

Table 9. Average number of sessions attended, by group type

<table>
<thead>
<tr>
<th>Group type</th>
<th>Average sessions attended</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adults with physical disabilities</td>
<td>6.7</td>
</tr>
<tr>
<td>Adults with mental and physical disabilities</td>
<td>5.7</td>
</tr>
<tr>
<td>Young people who are NEET</td>
<td>5.5</td>
</tr>
<tr>
<td>Adults with mental-health issues</td>
<td>4.2</td>
</tr>
<tr>
<td>Adults recovering from addiction</td>
<td>4.2</td>
</tr>
<tr>
<td>Unemployed adults</td>
<td>4.2</td>
</tr>
<tr>
<td>Adults and young people with mental-health issues</td>
<td>3.8</td>
</tr>
<tr>
<td>Weight-management</td>
<td>3.6</td>
</tr>
<tr>
<td>Residents</td>
<td>3.1</td>
</tr>
<tr>
<td>BME women</td>
<td>2.5</td>
</tr>
<tr>
<td>Adults and children recovering from domestic abuse</td>
<td>2.4</td>
</tr>
<tr>
<td>Adults with parenting support needs</td>
<td>2.2</td>
</tr>
<tr>
<td>Young people</td>
<td>2.1</td>
</tr>
<tr>
<td>Homeless people</td>
<td>2.0</td>
</tr>
<tr>
<td>Literacy support needs</td>
<td>1.1</td>
</tr>
</tbody>
</table>

Analysing individual participants’ economic status and the average number of sessions attended shows that people who class themselves as being long-term sick or disabled attended, on average, the second highest number of sessions (6.9), with those who were unemployed attending an average of 5.5 sessions: two more sessions than the average for all participants. This indicates that the programme was particularly successful at engaging...
disadvantaged groups – who often have the most to gain from taking part in outdoor activities.

Table 10. Average number of sessions attended, by economic status

<table>
<thead>
<tr>
<th>Economic status</th>
<th>Average sessions attended</th>
</tr>
</thead>
<tbody>
<tr>
<td>Retired</td>
<td>10.3</td>
</tr>
<tr>
<td>Long-term sick or disabled</td>
<td>6.9</td>
</tr>
<tr>
<td>Employed (part time)</td>
<td>6.8</td>
</tr>
<tr>
<td>Self-employed</td>
<td>6.2</td>
</tr>
<tr>
<td>Unemployed</td>
<td>5.5</td>
</tr>
<tr>
<td>Employed (full time)</td>
<td>5.5</td>
</tr>
<tr>
<td>Looking after home or family</td>
<td>4.4</td>
</tr>
<tr>
<td>Student</td>
<td>3.6</td>
</tr>
<tr>
<td>Not given</td>
<td>2.5</td>
</tr>
<tr>
<td>All</td>
<td>3.5</td>
</tr>
</tbody>
</table>

In the last nine months of delivery the team increased the proportion of beneficiaries engaged through service providers, because experience showed that this was a more effective way of engaging the target audience. Data up to the end of December 2015 shows that 63% of beneficiaries from service-provider groups attended five or more sessions, compared with 36% of beneficiaries engaged through community groups.
**Breaking down barriers**

One of the aims of the Come Outside! programme was to break down barriers to engagement in outdoor activities. Our survey with programme stakeholders in 2015 asked respondents to rank a number of barriers to engagement, and the results of this are shown in Figure 17 (note that the barriers given the lowest scores were ranked as the most significant). This data shows that the biggest barriers to engaging in outdoor activities were lack of knowledge, lack of confidence and lack of experience.

![Figure 17. Most significant barriers to participating in outdoor activity](image)

More than 80% of respondents felt that by working with community groups and exposing them to new opportunities through taster sessions, the programme reduced the three most significant barriers to engagement. This is shown in Figure 18. In addition, over 80% of respondents felt that the programme tackled concerns about the safety of participants. More than 50% of respondents agreed that Come Outside! reduced all but three barriers to engaging with outdoor activities: the programme did not affect the cost of transport, organisational support and time available to take service users outside.
‘We are giving people who wouldn’t normally engage in outdoor activities “permission” to do so by showing them that the natural environment is for everyone.’

**Overall impact**

The impact survey asked participants to rate themselves against a number of outcome statements, before and after they started participating in the programme. The survey went live in January 2015 and 253 surveys were completed by people who attended at least three sessions, which gives us a statistically significant sample to draw conclusions from. Through these surveys we can see the impact that the programme is making. Of those who responded, 83% demonstrated an increase against at least one of the programme outcomes.

**Table 11. Progress towards programme outcomes**

<table>
<thead>
<tr>
<th>Change in outcomes</th>
<th>Respondents</th>
</tr>
</thead>
<tbody>
<tr>
<td>No change to any outcomes</td>
<td>17%</td>
</tr>
<tr>
<td>One outcome improved</td>
<td>8%</td>
</tr>
<tr>
<td>Two outcomes improved</td>
<td>7%</td>
</tr>
<tr>
<td>Three outcomes improved</td>
<td>9%</td>
</tr>
</tbody>
</table>
Change in outcomes | Respondents
---|---
Four outcomes improved | 15%
Five or more outcomes improved | 43%
At least one outcome improved | 83%

We have analysed the survey results in comparison with data on attendance at sessions to determine if there is any correlation between the number of sessions participants attended and the impact on those participants. Due to issues with matching two different datasets, the sample size is relatively small; however, Figures 19 and 20 indicate that the more sessions people attended, the more people achieved the outcomes and the stronger the impact.

![Figure 19. Number of participants achieving outcomes by number of sessions attended](image1.png)

![Figure 20. Change in outcomes score by number of sessions attended](image2.png)
Building confidence and skills

The behaviour-change model suggests that, in order to make changes to health and wellbeing, projects first need to improve people’s confidence in taking part. Of the participants who completed the impact survey, 64% reported an increase in confidence in taking part in the taster sessions and 59% reported an increase in confidence in taking part in other outdoor activities. This is also supported by stakeholder observation, with 83% of stakeholders who completed our survey agreeing that people’s confidence and skills improved as a result of Come Outside!

“They would never talk about it but I can see that their confidence has increased massively. I can see them talking more and opening up.”

When applied to all participants who attended at least three sessions, these results suggest that almost 577 people are now more confident about taking part in outdoor activities as a result of the programme. Table 12 shows the average scores reported before and after taking part in Come Outside! The data illustrates that although confidence levels were ‘average’ to start with, they have improved to ‘good’ on a 5-point scale. The greatest change has been in building people’s confidence to take part in the outdoor activity taster sessions.

Table 12. Impact on levels of confidence

<table>
<thead>
<tr>
<th>Outcome</th>
<th>Average ‘before’ score</th>
<th>Average ‘after’ score</th>
<th>Change in average score</th>
</tr>
</thead>
<tbody>
<tr>
<td>I feel confident taking part in the sessions</td>
<td>3.34</td>
<td>4.49</td>
<td>+1.15</td>
</tr>
<tr>
<td>I feel confident taking part in other outdoor activities</td>
<td>3.26</td>
<td>4.33</td>
<td>+1.07</td>
</tr>
</tbody>
</table>

However, when the data is analysed in more detail it can be seen that the proportion of people who have moved from having low confidence levels (a score of 1 or 2) to having high confidence levels (a score of 4 or 5) is substantial. Only 45% of participants were confident about getting involved in outdoor activities before participating in Come Outside!, but this increased to 91% afterwards. In addition, one-third of participants did not feel confident about taking part in other outdoor activities (outside organised sessions) before taking part in Come Outside!; this reduced to only 5% after taking part, with 85% having high confidence levels as a result.

“It’s built my confidence back up.”

‘It has benefited them all – but one or two have really helped improve their communication skills – people who would normally take a back seat are starting to take the lead – geocaching encourages this as it needs people to direct. It’s really helped to build their confidence.’
Come Outside! participants also developed new skills: not only practical skills in the activities they took part in but also interpersonal skills, such as team-working and communication skills. Approximately 200 people took part in formal training that leads to qualifications; for example, in first aid, bushcraft, gardening, walk leadership and navigation. For example, the Caia Crafts group learnt green woodworking skills and, as a result of Come Outside!, gained a new set of skills to use when working with wood and making things that the wood shop can potentially sell. Group members also made things for themselves and their families.

‘It’s been really good to develop our skills.’

‘I’ve just started making a spoon. I’m making it for my grandson as he likes cooking.’

Figure 21. Impact on confidence in taking part sessions

Figure 22. Impact on confidence in taking part in other outdoor activities
Changing attitudes

Once confidence levels have been improved, the next stage in the behaviour-change process is to influence attitudes towards healthy living and physical activity. Of the participants who completed the survey, 62% said that the Come Outside! programme influenced them to be more physically active, and 40% said they now have a better understanding of how to lead a healthy life. When applied to all participants who attended at least three sessions, these results suggest that 560 people are more likely to take part in physical activity because of Come Outside! and 360 people have a better understanding of how to lead a healthy life.

Table 13 shows the average scores reported before and after taking part in the Come Outside! programme. It suggests that people already had an average to good understanding of how to lead a healthy life, and that the programme improved this slightly. The programme resulted in a greater change in people’s attitudes to physical activity.

<table>
<thead>
<tr>
<th>Outcome</th>
<th>Average ‘before’ score</th>
<th>Average ‘after’ score</th>
<th>Change in average score</th>
</tr>
</thead>
<tbody>
<tr>
<td>I understand how to live a healthy life</td>
<td>3.75</td>
<td>4.29</td>
<td>+0.54</td>
</tr>
<tr>
<td>These sessions have had an influence on me doing more physical activity</td>
<td>3.08</td>
<td>4.17</td>
<td>+1.09</td>
</tr>
</tbody>
</table>

‘Prior to joining the Men’s Project I was constantly at home playing on the PC, rarely going out, only to go shopping. I had approximately 18 months with nothing of interest to me. I had lost my job, but I managed to get by, as my father had recently died and left me money.

On a visit to the local fish shop I noticed a poster asking for men to join the group. I immediately went in and spoke to someone about getting involved, which I did the very next week. At first we did historical walks, learning about the area in which we live, then moved on to geocaching around the local valleys and then starting the Bear Grylls course. I took part in all activities, pushing myself to the limit.

In time I would like to learn more skills so that I can help and support groups such as these.

This project has re-integrated me into the community and into a system of socialising, which has given me the impetus to seek employment.’

‘Well - I have got muscles I didn’t know existed after my first experience of Nordic Walking earlier. Looking forward to Monday already. Thanks for introducing me to my new keep fit regime and for your patience with me. Thoroughly enjoyed it.’
Analysing the data in more detail shows that although, on average, people had a relatively good level of understanding about how to lead a healthy life before taking part in Come Outside!, this increased from 63% to 88% after taking part. In addition, attitudes towards physical activity increased from 43% of people who had high scores before Come Outside! to almost 80% as a result.

‘We want to aim to be fit enough to get to Castell Coch and back.’

I can’t believe I walked that far! If you had told me at the beginning I was going to walk over three miles I would have told you there’s no chance I can do that.’

From speaking to groups and participants, it is clear that the programme motivated people to make changes to their lifestyles and altered attitudes towards physical activity.

‘I need to lose a few pounds and want to get fitter – this is great!’
**Increased physical activity levels**

The behaviour-change model suggests that improving confidence and changing attitudes towards health and physical activity leads to people being more physically active. Overall, 52% of participants are more physically active as a result of engaging in Come Outside!, which when extrapolated suggests that 469 people became more physically active as a result of the programme. This is backed up by stakeholder observation, with 94% of support organisations, activity providers and other stakeholders agreeing that Come Outside! resulted in people being more physically active.

Table 14 shows that, overall, participants moved from an ‘average’ physical activity rating to a ‘good’ rating.

**Table 14. Impact on physical activity rating**

<table>
<thead>
<tr>
<th>Outcome</th>
<th>Average ‘before’ score</th>
<th>Average ‘after’ score</th>
<th>Change in average score</th>
</tr>
</thead>
<tbody>
<tr>
<td>I am physically active</td>
<td>3.30</td>
<td>4.14</td>
<td>+0.84</td>
</tr>
</tbody>
</table>

Figure 25 shows that before taking part in Come Outside!, nearly one-third (29%) of participants led inactive lives – scoring only 1 or 2 out of 5. As a result of Come Outside!, this figure reduced to 6%, with the percentage of people living active lives (scoring 4 or 5 out of 5) increasing from 48% to 78%. Of the survey respondents, 18% are now meeting the government target of five 30-minute sessions of physical activity a week. When applied to all participants who attended at least three sessions, this suggests that around 160 people are now meeting the government target as a result of taking part in Come Outside!.

‘Most of our service users are very isolated and live sedentary lives – this gets them out the house – most would be inactive, at home if the project didn’t exist.’

‘I used to go down to the woods and up in the mountains when I was younger. I ran a half marathon once too. I want to get fit again so I can get back to the woods and mountains. It made me happy being there.’

Figure 25. Impact on physical activity levels

[Image of bar chart showing change in physical activity levels before and after the programme.]
Improved wellbeing

In addition to improving physical health, the programme sought to increase emotional wellbeing and self-esteem. Of the participants who responded to the impact survey, 58% reported that as a result of Come Outside! they felt better able to make changes in their lives, and 46% reported that they felt happier. This indicates that up to 523 people now have improved wellbeing because of Come Outside!. This is also supported by the results of the stakeholder survey: 83% of respondents agreed that the mental wellbeing of their group members improved because of the Come Outside! programme.

Table 15 shows the changes in average scores for the wellbeing outcomes. In both categories the scores improved from ‘average’ to ‘good’, with the greatest change being in people’s self-esteem.

Table 15. Impact on wellbeing

<table>
<thead>
<tr>
<th>Outcome</th>
<th>Average ‘before’ score</th>
<th>Average ‘after’ score</th>
<th>Change in average score</th>
</tr>
</thead>
<tbody>
<tr>
<td>I feel able to make changes in my life</td>
<td>3.23</td>
<td>4.20</td>
<td>+0.97</td>
</tr>
<tr>
<td>I am happy</td>
<td>3.74</td>
<td>4.51</td>
<td>+0.77</td>
</tr>
</tbody>
</table>

Figures 26 and 27 show that the percentage of people with high self-esteem increased from 43% to 79%, and the percentage of people with low self-esteem decreased from 28% to 7%. The change in happiness levels is also significant, with the percentage of people who class themselves as ‘happy’ increasing from 63% to 90% as a result of Come Outside!, and the percentage of people who class themselves as ‘unhappy’ decreasing from 19% to zero.
The programme was especially successful at engaging people who have mental-health problems; it helped to reduce depression and tackle the stigma associated with having a mental illness.

‘It supports them massively – they are low in confidence, some have depression and poor mental health – getting them outdoors helps improve this.’

‘There is a lot of stigma associated with mental-health issues – the programme has helped our service users build their confidence to the extent that they felt able to join another (non-mental-health) group in a geocache hunt. Taking part in the activities together has helped break down the stigma of mental health, showing them that not everyone out there will judge them. They were able to laugh and crack jokes about their illness, which is an incredible step forward for people who were previously very isolated.’
It is clear from the analysis above that Come Outside! made a difference to people’s confidence, attitudes and behaviour and that people who took part became more physically active and improved their emotional wellbeing. However, one of the key aims of the programme was to ensure that this behaviour change could be sustained: that people carry on taking part in outdoor activities without the support of the regional coordinators. The facilitation model also worked on the basis that to maximise resources, coordinators needed to step away from groups once they were up and running and move on to support new groups.

Figure 28 shows the sustainability rating of groups. It shows a modest drop-out rate of just over 15% – this represents groups that took part in activities but subsequently stopped functioning. At the time of writing, 45% of groups (37 groups in total) were either entirely self-organising or needed minimal input from the Come Outside! team to run sessions. A further 32% of groups (26 groups) had an independent leader (either a volunteer or support worker) working with the regional coordinator to run sessions.

‘Today we all went drumming in the woods. I really looked forward to this as I do with all Come Outside! activities. Everyone took part and it was good fun. We played all different kinds of instruments, and gave our own personal inputs and beats on the drums.

We also had a go at tree hugging, so I crept away from the group to find a suitable tree to hug, and had a look around to see if anyone was looking, but it felt good. I then looked around and it was nice to see everyone else hugging the trees.

I love all outside activities because they always seem to lift me up when I am feeling low. I really hope we continue to do these activities, as it’s been a long time since I have started to smile. Doing the Come Outside! programme has made me feel alive again.

Sustaining behaviour change

It is clear from the analysis above that Come Outside! made a difference to people’s confidence, attitudes and behaviour and that people who took part became more physically active and improved their emotional wellbeing. However, one of the key aims of the programme was to ensure that this behaviour change could be sustained: that people carry on taking part in outdoor activities without the support of the regional coordinators. The facilitation model also worked on the basis that to maximise resources, coordinators needed to step away from groups once they were up and running and move on to support new groups.

Figure 28 shows the sustainability rating of groups. It shows a modest drop-out rate of just over 15% – this represents groups that took part in activities but subsequently stopped functioning. At the time of writing, 45% of groups (37 groups in total) were either entirely self-organising or needed minimal input from the Come Outside! team to run sessions. A further 32% of groups (26 groups) had an independent leader (either a volunteer or support worker) working with the regional coordinator to run sessions.
Figure 28. Sustainability of groups

At the time of writing, the 32 groups that were either entirely self-organising or needed minimum support from the regional coordinators had 486 regular participants (those who had taken part in at least three sessions) between them. This indicates that around 54% of regular participants are continuing to take part in outdoor activities without input from the Come Outside! team.

There is evidence that, in addition to organised sessions delivered through groups, the programme influenced people to take part in other outdoor activities. A survey sent to a small sample of participants found that 83% of respondents had taken part in outdoor activities outside of the organised group sessions, with the majority of these (78%) involving their family. Almost all (94%) respondents said they were taking part in outdoor activities at least once a week, indicating that they had made a sustained change to their habits and lifestyles. This is backed up by the stakeholder survey: 62% of respondents agreed that they were aware of group members who were taking part in outdoor activities outside the organised sessions.

Using this survey data, we can estimate that between 500 and 700 regular participants (that is, those who attended at least three sessions) are likely to be taking part in regular outdoor activities outside the organised sessions. The Capacity Building Fund, which contributed to the cost of equipment and training, helped to enable independent activity by groups and individuals. In addition, the Come Outside! Outdoor Activity Skills Learning Programme (see Appendix 10) set up in the final year piloted training for people who were keen to take part in outdoor activities independently.

Valuing the impact

Social value is a broad term for a family of approaches that help organisations place a value on the impact of their work. Within this, a number of different approaches attribute a financial value to the impact of an intervention. To estimate the social value of Come Outside! we...
used existing social values, drawing from the HACT social value bank created by Daniel Fujiwara, a leading expert on social value, and research carried out by Ecorys for the national wellbeing evaluation.

We used the survey data to estimate (1) the social value of the programme for participants who reported a change against an outcome; and (2) the value to all participants who attended at least three sessions. Table 16 shows the results of this analysis. For those participants who reported a change, the programme has delivered £5 of value for every £1 spent; when this is extrapolated to all participants, we estimate that the programme has delivered £18 of value for every £1 spent.

Table 16. Social value of the programme

<table>
<thead>
<tr>
<th>Survey outcome</th>
<th>Proxy value</th>
<th>Source</th>
<th>Value per person</th>
<th>People reporting an increase</th>
<th>Value</th>
<th>Total number of participants (estimated)</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>I feel confident taking part in the sessions</td>
<td>High confidence</td>
<td>HACT</td>
<td>£13,065</td>
<td>163</td>
<td>£2,129,595</td>
<td>577</td>
<td>£7,538,505</td>
</tr>
<tr>
<td>I feel able to make changes in my life</td>
<td>In control of life</td>
<td>HACT</td>
<td>£12,454</td>
<td>146</td>
<td>£1,818,284</td>
<td>523</td>
<td>£6,513,442</td>
</tr>
<tr>
<td>I am happy</td>
<td>Improved mental wellbeing</td>
<td>Ecorys</td>
<td>£10,560</td>
<td>116</td>
<td>£1,224,960</td>
<td>415</td>
<td>£4,382,400</td>
</tr>
<tr>
<td>I am physically active</td>
<td>Frequent moderate activity</td>
<td>HACT</td>
<td>£4,272</td>
<td>131</td>
<td>£559,632</td>
<td>469</td>
<td>£2,003,568</td>
</tr>
<tr>
<td><strong>Total social Value</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td><strong>£5,732,471</strong></td>
<td></td>
<td><strong>£20,437,915</strong></td>
</tr>
<tr>
<td><strong>Total cost</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td><strong>£1,137,640</strong></td>
<td></td>
<td><strong>£1,137,640</strong></td>
</tr>
<tr>
<td><strong>Value per £1 of cost</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td><strong>£5</strong></td>
<td></td>
<td><strong>£18</strong></td>
</tr>
</tbody>
</table>
Impact on organisations

This chapter considers the difference the programme has made to support organisations and outdoor activity providers.

Improved knowledge

Of the programme’s stakeholders, 92% have a better understanding of what Come Outside! is trying to achieve and 78% agree that as a result of working with the team they have a better understanding of what the outdoors has to offer. A total of 89% are more aware of opportunities to involve groups in outdoor activities.

In raising awareness, the programme faced a dilemma. The team did not want to impose a methodology on partners by promoting it heavily, with a clear brand. It was within the ethos of the approach to enable partners to take the learning from the model and embed it into their own ways of working. Over time, a number of partners ceased to attribute their delivery to the Come Outside! programme (especially when they had experienced staff turnover). However, the regional coordinator’s early consultation notes provided evidence that previous delivery had been different.

This is one reason for the lack of a clear understanding amongst all partners about exactly what Come Outside! is and what it does. The knowledge that exists is often inconsistent, as it reflects individual partners’ experiences. Another reason is that Come Outside! is a complex, multifaceted concept that is challenging to describe succinctly and introduces new ideas that are not always easy to understand.

Improved partnership working

Of the support workers involved, 81% agreed that there is more collaboration between their organisation and outdoor activity providers. Also, 58% of outdoor activity providers agreed that they are better connected to support organisations and the community groups they support:

‘It has helped us network and get ideas or links to funding for community groups.’

‘It has connected me to new groups’.

Some stakeholders reported a lack of understanding and joint working between support organisations and the outdoors sector before Come Outside!, and the importance of the facilitation and networking that the programme provided:

‘It was the catalyst we needed to bring people together – we had lots of different organisations doing different things and we are now much more able to link things together than before. It was exactly what was needed.’
Impact on outdoor activity providers

Through engaging outdoor activity providers and connecting them to community groups, Come Outside! helped to extend the offer to a more diverse range of people, and encourage providers to take on some of the principles of community development when working with more vulnerable groups.

Figure 29 shows that as a result of working with the Come Outside! team, 75% of outdoor activity providers were designing activities to meet the specific needs of groups more often, and 71% had a better understanding of what groups want from outdoor activities.

The programme also helped providers to work with groups and individual people who wouldn’t normally access their offer. Of the providers who responded, 71% agreed that they are now working with groups that they had not worked with previously, and the same percentage agreed that the diversity of people using their services had improved because of the programme.

Figure 29. Impact on outdoor activity providers

Amongst the support organisations, 73% agreed that outdoor activity providers had a better understanding of groups’ needs.

‘Our work together has increased our profile in broader circles and the facilitation offered has broadened our contact with a wider range of community members.’

‘It has taught me many new skills and provided me with vital support on what was proving to be a very challenging project.’
**Improved skills and confidence of support workers**

Turning to support workers, 72% learnt new skills as a result of engaging in Come Outside! and 73% gained more confidence in leading groups in outdoor activities.

Support workers learnt how to run outdoor activities, such as geocaching, and benefited from training to enable them to lead groups. As Come Outside! provided equipment, such as geocaching kits and wet weather clothing, support workers are able to continue to deliver outdoor activities beyond the life of the programme.

‘After completing a walk leaders course I now have the ability and confidence with service users.’

**Changes to how organisations work**

Of the stakeholders that completed our survey, 68% reported that as a result of Come Outside! they have changed how they work. Of these:

- 50% dedicated more officer time to outdoor activities;
- 67% provided or paid for training for support workers in outdoor activities;
- 67% provided transport for taking groups outdoors; and
- 67% committed part of their budgets to outdoor activities.

These changes increased the likelihood of organisations sustaining these changes beyond the life of the programme, ensuring that groups can continue to use outdoor activities as part of their service provision.

There is also evidence that the programme influenced wider teams and departments; for example, the social services team at Torfaen Council now uses geocaching as a regular engagement tool.

‘In social services some teams did outdoor activities (like the countryside team) but this wasn’t standard practice. But now they all have the opportunity to do the geocaching as we have the kit and skills. Previously we wouldn’t have always considered outdoor activities, but it’s really opened our eyes to new opportunities.’

We are now in a better position to support groups in taking part in outdoor activities. The volunteers are also taking responsibility for sustaining the activity themselves – they have shown real resourcefulness in carrying out fundraising activities themselves to fund future outdoor activity sessions.’
Although organisations have said that they are committed to continuing delivering outdoor activities, they also recognise that the end of the programme means that they will lose the expertise of the team, in terms of their knowledge and connections. Although they will be able to continue in some form, they recognise that in some ways this will be limited without the team’s support. As such, 93% of stakeholders want the programme to continue.

The following case study demonstrates how Come Outside! resulted in a significant change to how Swansea Family Support Service works.
The Family Support Services (FSS) provides parenting support and other family-related services across Swansea. Come Outside! was invited to consult with a group at Mayhill Family Centre in April 2014. This led to a summer programme of activities being delivered with Gower Landscape Partnership for families accessing the family centre and parenting groups. The programme was designed in response to the needs of the groups and included activities in the community and further afield, such as sessions on pond dipping, storytelling in the park and in woodlands, geocaching, beach visits, and ‘wild’ arts and crafts. Unfortunately, just before the programme of activities was due to start it was identified that the FSS staff did not have the capacity to support the groups to attend. However, with the Come Outside! team providing support, the activities were still able to go ahead and were well attended.

The success of the summer programme resulted in isolated parents engaging with other families and developing a support network. The support workers saw confidence growing in the children and families, and the parents reported that the experiences brought their family closer together and that they were spending more time together as a family outdoors in the places they had been introduced to over the summer. Following the success of the summer programme, Come Outside! was invited to meet one of the FSS team managers to establish how they could enable these sessions to continue with the support of the FSS workers, who could ensure that the group members got the most out of the sessions.

By demonstrating the positive impact of outdoor activities for service users, the FSS is now changing their service provision with support from Come Outside!.

‘Since the start of the collaboration I have seen a huge difference in the dad’s behaviour and their attitude towards other opportunities; we have a number of dads who did not like going out anywhere and this has changed since the start of the geocaching sessions. The mental health of a large proportion of the group has improved; a lot were suffering with anxiety and depression. I am not saying this has gone but it has definitely improved. Nearly half the group have done further training courses and two have started work. The rest are talking about what they are doing with their children outside of the home and this is the biggest change for me. The project has created a drive to do more outside and as a group they are planning a big geocaching Easter egg hunt with their children. They are also talking about more days out together throughout the summer. For a group that was low in confidence it is a huge turnaround; during our walks we talk about how their children learn from what they experience and the dads can see how doing activities with their children outside can impact on their children.

For us as a service the project has helped us focus the dads on spending more quality time with their children and building their relationships while doing activities together outside. It has supported us to build the confidence of the dads through small, achievable targets. It was also something that we could access because there were no costs to our team and in these days of cut backs it is getting harder to find projects that support the work we do.’

‘Recently we held the Easter egg hunt and had probably our best ever turnout to one of our events (over 75 parents and children) and Come Outside! has enabled us to do this more in the school holidays, supporting families to get outdoors more and spend quality family time together.’ (FSS support worker)
Insights and learning
This chapter discusses the strengths of weaknesses of the Come Outside! approach, with a particular focus on the legacy of the programme and the learning that can be applied to future initiatives designed to engage people in outdoor activities.

Programme strengths
This section discusses the main strengths of the programme; in particular, elements that set it apart from other health and wellbeing initiatives.

Groups at the centre
The Come Outside! approach put the group, rather than the activity, at the centre. Traditional health and wellbeing programmes are often activity-focused; for example, walking programmes, exercise programmes, healthy eating courses, and cook-and-eat classes. These attract people who are interested in those specific activities, which may exclude people who don’t see the appeal. Come Outside! was different, because it worked with the group as the starting point. The regional coordinators discussed with group members what they would like to do, exploring their goals and aspirations and identifying options. The approach was entirely flexible: participants did not need to commit to attending a programme of activity, and the sessions could be adapted to meet the group’s needs in terms of frequency, type and variety of activity, location, and so on. The types of activities were adapted to meet the needs of individuals: some groups were interested in just one type of activity (such as gardening or walking), whereas others were keen to try a variety.

Specific activities were also geared to meet individuals’ needs. For example, a number of groups took part in bushcraft activities. Young people who had never cooked outdoors before were given an introduction to camping and cooking outdoors, whilst a group supporting veterans with PTSD encouraged members to take part in much more adventurous survival courses, reminding them of the skills they used when they were in the forces. For both groups, the result was the same – building confidence and self-esteem – but the approach was adapted to meet the needs of the individuals.

‘They treat people with respect – our service users are consulted about the activities and if they don’t want to take part they don’t have to. People are involved.’

‘The bushcraft brought out the best in them; it got them to interact, and reminded them of their time in the forces. They were in a secluded, quiet place where they didn’t have to think about their problems. It was totally inclusive, with young people doing more adventurous activities and the older people or people with mobility issues helping them with easier tasks. It reminded them of how fit and confident they used to be and it gave those who wanted it more of a challenge.’
Skills and expertise of the team and activity providers

Much of the flexibility and ability to adapt to meet the needs of individuals and groups was down to the particular skills and expertise of the regional coordinators and the outdoor activity providers. It is worth noting that the five regional coordinators remained in post throughout the programme (with two starting in October 2014), as did the programme managers (through a job-share). This resulted in consistent, high-quality delivery, with staff being able to learn and improve approaches throughout the programme, individually and as a team. This enabled the team to develop strong relationships with partners and groups, which enhanced their ability to influence how the groups worked. The team was driven by a shared vision and a commitment to have a positive impact on those who could benefit the most.

Support workers and group members were full of praise for the regional coordinators; the combination of their community development skills and knowledge and expertise in outdoor activities was invaluable. The same was true of the activity providers, with support workers and participants alike appreciating their personable approach, their expertise and their willingness to adapt their delivery to overcome barriers and meet participants’ needs.

‘She’s very approachable – the group all really like her, she gets involved, they all speak highly of her. Not everyone has these skills, and you need both these skills and expertise/knowledge of outdoor activities – you need both set of skills, which are hard to come by.’

Health by stealth

As discussed previously, the message ‘being inactive is bad for your health’ often fails to motivate people to make changes to their lifestyle; people know that physical activity is good for them, but this message alone is not enough to encourage behavioural change.

Most health and wellbeing programmes are advertised as such, but Come Outside! was different. Rather than overtly encouraging people to be more active, regional coordinators tapped into people’s interests and aspirations and promoted the benefits of the natural environment and the outdoors, focusing on ensuring that the activities were enjoyable and challenging without being competitive.

The programme worked on the principle that maintaining activity is easier in natural environments, because of the added social benefits and improved mood that being in nature brings. The ‘fun factor’ of being out in the fresh air with a group of other people results in people finding the physical activity easier, which has a strong influence on whether they sustain their behaviour change. These are stronger motivators than being told, ‘This is good for your health’. In addition, designing and delivering activities that maximise the likelihood of participants having a memorable experience that they want to repeat was another important and innovative aspect of the programme.

‘It has helped me show people that getting physically active doesn’t mean going to a gym. It has helped me engage people who wouldn’t normally take part in a physical activity project.’
To a certain extent, people being more active is a side effect of the activity.

‘I really enjoyed the walk. Because we were hunting for the different geocaches it didn’t even feel like we were exercising.’

This approach – designing stealth interventions – is based on research pioneered by Professor Tom Robinson of Stanford University in California\textsuperscript{20}. Robinson’s work promotes the view that interventions need to target behaviours that are motivating in themselves, so that the behaviour change (increase in physical activity, for example) becomes the ‘side effect’ of the intervention.

\textbf{A broader focus than health and wellbeing}

Because the focus of the programme was on the wider benefits that being outdoors can bring, the coordinators were able to work with a broader range of organisations and deliver more benefits than if the focus had been purely on health and wellbeing. Regional coordinators worked with education and learning teams, pupil-referral units, employment projects and youth offending teams, spanning a variety of sectors and departments. They avoided the ‘silo’ working that can sometimes develop in programmes with a single focus.

\textbf{Programme challenges}

As with all programmes, Come Outside! faced a number of challenges.

\textbf{Capacity and resources needed to support groups}

The Come Outside! model was designed based on a number of assumptions, the main one being that there would be sufficient resources and commitment in support organisations and service providers to enable the regional coordinators to take on a facilitating, rather than a direct delivery, role. Significant changes to the public and voluntary sector in the UK since 2012 resulted in considerable reductions in capacity and resources in support organisations; this led to regional coordinators taking a more hands-on approach in order to meet the funders’ targets. Although this did not affect the team’s ability to reach large numbers of people, it did reduce their ability to ‘step away’ from groups once they had been established, as the groups often lacked the support that was needed to continue without the coordinators.

The vulnerable nature of the individuals engaged in the programme also meant that more support was needed. A significant proportion of participants were living isolated, sedentary lives, so encouraging them to take part in outdoor activities took time and support. A number of groups needed much more consultation than originally anticipated.

‘Some people have very low aspirations and need constant support to keep going.’

\textsuperscript{20} For more information, see http://www.bhfactive.org.uk/userfiles/Documents/tom_robinson.pdf
**Encouraging networking**

The first year of the programme was spent mapping need, demand, support and suppliers in each of the cluster areas the programme was working in. Although this development time was important to ensure that the programme obtained buy-in within the areas, it was recognised that the approach of creating ‘networks’ in order to facilitate the creation of groups was not working. Although participants thought that the initial workshops were useful networking opportunities and helped them find out more about the programme, the events did not always lead to organisations feeling like part of a formal ‘network’.

Instead, the regional coordinators identified one or two organisations that were keen to establish outdoor activity groups and worked with these, using them as ‘demonstration projects’ to build interest and momentum amongst other organisations.

It was clear that a ‘top down’ approach of creating networks first and using these to establish outdoor activity groups did not work in practice. A more ‘bottom up’ and organic approach worked best, as this allowed organisations and people to see the benefits of the approach, which resulted in better partnership working and informal networking arrangements.

‘People needed to be “shown” that it works before committing themselves.’

**Targets can lead to a focus on quantity, not quality**

A common challenge for many publicly funded projects is setting appropriate targets that are reasonable whilst being attractive to funders. Come Outside! had very high targets for the numbers of people they needed to engage and the number of groups they had to set up, which had been estimated based on the assumption that the coordinators would be providing minimal support ‘on the ground’. As discussed, this was not the case; however, the targets were not reduced to reflect this change. This led to a focus on increasing numbers of people and groups instead of on encouraging a smaller number of people to take part in multiple sessions, which would have led to more meaningful change.

Targets can also prevent programmes from growing organically based on demand and buy-in; in some cases, coordinators were turning organisations away because they were not based in the target Communities First areas, or they were putting considerable resource into trying to engage organisations in target areas that did not have the necessary commitment or buy-in to the approach.

‘In one area it took 11 months to get one group up and running, and in another it only took four months.’

*If we want lasting impact then we need to spend more time with less groups.*
Legacy and learning

Figure 30 summarises the factors identified by the programme that influenced the potential for engaging participants and sustaining activity.

Individual factors: Come Outside! incorporated memorable experiences that aimed to motivate and build confidence; for example, by adapting geocaching to make it appropriate for a group’s activities or needs. One group working with young offenders and people who were at risk of offending used geocaching to produce quizzes related to victim awareness and crime prevention, which provided a focus for the activity.

However, the programme found that it takes time to develop habits around outdoor and physical activity. Running a set programme of activity (for example, a five-week bushcraft course) encouraged people to take part regularly, especially if they received a certificate or qualification at the end. Incentives, such as rewards, qualifications and participation in future challenges, motivated people to get and stay involved. A ‘passport’ scheme, piloted in a small number of groups, was successful in encouraging people to attend a programme of sessions. Under this scheme, individual participants collected stamps when they attended a session that enabled them to take part in an additional challenge or event.

For a group to become self-organising it was necessary to identify one individual with the commitment, passion and drive to lead the group once the Come Outside! coordinator moved on.

Group factors: The Come Outside! model focused on working with existing groups. This encouraged people to participate, as they already had a sense of belonging and familiarity.

One advantage of working with existing groups was that they already had a timetable. Coordinators found it much easier to engage people if they ran activities during the group’s normal weekly session, as people were used to attending the group on that day and time. The team also found it easier to get people to take part in activities that were in their local area, or easily accessible. For example, the ADHD group in Wrexham originally wanted to go further afield but, because of factors outside their control, they had to stay local. This led to people organising themselves – arranging lifts or walking together – which meant they were more likely to turn up.

‘If they can walk there or get the bus they are much more likely to turn up.’
Providing equipment (such as geocaching kits) and outdoor clothing also encouraged groups to take part in outdoor activities with the support of the coordinators. In addition, providing site-specific activities, such as working in community gardens, helped to build a sense of ownership that was likely to continue beyond the Come Outside! support.

**Organisational factors:** Learning from the programme showed that when the team worked with organisations that were willing to commit resources – be it support workers or finances – this helped to sustain the activity after support from Come Outside! finished. However, the team also found that this commitment often takes time to build, and many organisations needed to be shown the benefits before they were willing to commit resources.

The coordinators found that it was important to identify individuals within organisations who had the passion and commitment to support groups. For the model to work, it is essential to get the commitment and buy-in of the lead organisation and individual support workers. Although most were keen to attend sessions and take on responsibility over time, some saw Come Outside! as a replacement for themselves, freeing them up to do other things, or simply did not see it as their responsibility. Much of this is about individual personalities and commitment – identifying natural leaders or supporting people to become leaders by providing training and support.

**Strategic context:** changing strategic priorities, loss of funding and uncertainty in the public and voluntary sectors posed considerable challenges for the Come Outside! programme: the facilitation and asset-based approach is dependent on support from other organisations and, as such, changes to the external environment had an impact on the programme’s ability to deliver in some areas. The programme managers also recognised that in some cases they were not as successful at influencing senior managers as they were in other cases.

**Programme legacy**

Come Outside! has left a considerable legacy of tangible and intangible assets.

- Physical assets, such as community gardens, geocaching routes, community roundhouse buildings, equipment and clothing.
- Personal assets, such as the increased confidence, skills and knowledge of participants and support workers.
- Social and organisational assets, in terms of the groups that will continue to meet and take part in outdoor activities and the connections that have been made between support organisations and outdoor activity providers.

A further legacy is the Come Outside! Outdoor Activity Skills Learning Programme. This was developed in the final year of the programme in response to the recognition that people need to have knowledge and skills in order to engage in outdoor activities, either individually or as a group. It is a unique accredited training programme designed to support people who want to participate in outdoor activities. It takes a progressive approach, starting with modules for people who want to engage in outdoor activities with their friends or family, and moving on to modules for people who are keen to lead groups. The training programme was piloted with...
two groups and the participants involved gave positive feedback. Although it is too soon to know what impact this training will have, the course is an important part of the legacy of the programme and it could provide a source of revenue to support future activity. More information about the course is provided in Appendix 10.

Come Outside! also leaves a considerable legacy of learning around how to engage community groups in outdoor activities and how to influence support organisations to use the natural environment as part of their service delivery.

Although three years was enough time only to start to build momentum around engaging more people and organisations in outdoor activities, the learning from this should help to inform future health and wellbeing programmes.

**The future?**

At the time of writing this report, Come Outside! is due to finish on 31 March 2016. To facilitate discussions with potential funders in autumn 2015, data to June 2015 was combined with the trends in participation rates during the three years, and indicative projections were made to show the number of people who could be involved in Come Outside! activity should additional funding be secured.

Figure 31 shows that with funding of £270,000 a year (based on actual programme costs for 2014–2015), the current team of four full-time equivalent staff could engage around 11,000 people in the programme by 2023. This is possible only by using the existing team and delivery model, whereby the Come Outside! team supports groups for a limited period of time (until they are able to be self-organising) whilst engaging new service providers. The projections are based on delivery continuing from 1 April 2016, working with the programme’s current participants and stakeholders.

![Figure 31. Come Outside! projections at £270,000 per year](image-url)
Conclusions

To conclude this report we return to the original objectives of the Come Outside! programme:

- To improve physical health and mental wellbeing amongst disadvantaged groups.
- To improve levels of skill, self-esteem and confidence.
- To increase participation in community-led outdoor activity.
- To increase the number of organisations providing outdoor recreation, play, volunteering, learning/skills development and active travel infrastructure that design and deliver their services with their beneficiaries in mind.
- To facilitate collaboration amongst national stakeholders to sustain delivery beyond the end of the programme.

Improving health and wellbeing amongst disadvantaged groups

The Come Outside! programme was extremely successful in reaching disadvantaged groups: 88% of participants lived in the most deprived communities in Wales, 25% were unemployed and 21% were sick or disabled. There is considerable evidence that through consultation, flexible approaches to delivery and taking the ‘health by stealth’ approach, a large number of participants saw improved levels of physical activity and wellbeing. Of the participants who attended three or more sessions, 62% were influenced to be more active and 52% are now more physically active as a result. There is also considerable anecdotal evidence of the impact of being outdoors on wellbeing, with people reporting that access to nature and the natural environment has improved their mood, reduced feelings of depression and stress, and made them feel happier.

However, we know that to achieve a long-term sustained impact on health and wellbeing, people need to make significant changes to their lifestyle – and behaviour change takes time. Evidence from the programme suggests that the more sessions people attend, the stronger the impact. To increase the number of people achieving significant changes in their health and wellbeing, the programme needed to focus efforts on encouraging people to participate in multiple sessions. Because the number of people attending multiple sessions increased steadily over the life of the programme, given more time, this trend would be likely to continue; thus, increasing the numbers of people achieving the target health and wellbeing outcomes.

Improving skills, confidence and self-esteem

Before people can make changes to their behaviour that will result in a healthier lifestyle, it is necessary to improve their level of confidence and self-esteem so that they feel better able to make changes in their lives. Participants’ confidence to take part in outdoor activities was identified as one of the three highest barriers preventing people from engaging in outdoor activity, and over 80% of the stakeholders we surveyed agreed that the programme helped to break down this barrier.

The survey results from participants also show that confidence levels improved: 64% of regular participants (those taking part in three or more sessions) reported improved confidence levels and 58% reported improved self-esteem. Using a range of outdoor
activities that suit different individuals and groups (from easier, non-competitive activities, such as walking and geocaching, to more adventurous challenges, such as gorge-walking and bushcraft survival skills) ensured that the programme met the needs of a range of participants, which helped to improve confidence levels.

Many participants benefited from formal or informal training. Through taking part in outdoor activities, they learnt new practical skills, such as walk leadership or gardening. Participants also learnt new interpersonal skills, such as working in a team and communication, using activities like geocaching to work with others to achieve a particular goal.

Support workers and volunteer group leaders also reported that they had increased their skills, enabling them to continue to support groups beyond the life of the Come Outside! programme.

*Increase participation in community-led outdoor activity*

The programme reached a large number of organisations, community groups and individuals, exceeding the original targets for participant numbers and outdoor activity sessions by a considerable margin. More than 250 separate organisations and groups got involved in Come Outside! and 82 community groups took part in more than 1,000 outdoor activity sessions involving 2,595 unique participants. The one-off events reached a further 775 people, with 90% of participants trying something for the first time and 88% wanting to get more involved in outdoor activities.

Although the programme had a very large reach, the drop-out rates were also high, with almost half of participants attending only one session. This was partly due to the challenge of working with vulnerable and hard-to-reach participants, who are the least likely to want to engage in physical activity. It was also a result of the high output targets set at the start of the programme, which initially led to a focus on increasing numbers of participants rather than on encouraging attendance at multiple sessions. This was addressed in the final year of delivery, resulting in a steady increase of people attending multiple sessions.

*Increase the number of organisations providing outdoor activities*

The programme engaged a large number of organisations across the public and voluntary sectors. It has improved collaboration and partnership working between support organisations and outdoor activity providers and helped to increase knowledge and understanding of the benefits of outdoor activity. As a result, there is evidence that organisations have changed how they work to incorporate outdoor activity into their provision. Sixty-eight per cent of organisations reported that they have changed how they work, committing officer time, training or budgets in order to deliver outdoor activities for their service users.

*Sustain delivery beyond the life of the programme*

There is evidence that individuals, groups and organisations will continue to engage in outdoor activities beyond the life of Come Outside!. Taking a participative, capacity-building approach has enabled them to develop the confidence, knowledge and skills that are necessary for independent activity. We estimate that, at the time of writing, between 500 and 700 participants are taking part in outdoor activities outside the organised group sessions, and nearly a half of groups are self-organising and delivering sessions without the support of
the Come Outside! regional coordinator. A further one-third have their own leader, which significantly increases the likelihood that they will continue without any support from the programme.

It is recognised that, to embed outdoor activity into the services provided by health and social care organisations, the management within those organisations needs to actively support the change. Evidence shows that the programme achieved this in a number of organisations (for example, Swansea Family Support Service). However, it is also recognised that more focus on securing buy-in from senior managers may have resulted in outdoor activity being embedded into more organisations.

Over the last 18 months of the programme, considerable efforts were made to secure the commitment and resources necessary to continue the programme and involve many more thousands of people in outdoor activities. However, the Welsh Government and the public sector are facing more budget cuts every year. This has had an impact on the voluntary sector, and it has not yet been possible to secure the necessary resources. This is despite the efforts of senior managers within Natural Resources Wales, a great deal of positive feedback about the programme and much interest and support for what it has achieved.

Overall, the Come Outside! programme has successfully achieved its original objectives. However, it is recognised that change of this nature takes time. Using an asset-based facilitation model has resulted in momentum increasing over time: a significant proportion of participants and sessions were engaged in the final six months of the programme and the team was still seeing increasing levels of demand amongst new groups and organisations as the programme was drawing to a close. Given more time, the programme could have even higher levels of impact and increase the momentum it has built up over the last three years.

**Learning**

The four-stage delivery model has shown to be effective for providing health and wellbeing benefits. Table 17 sets out the learning from this programme that would enable future, similar interventions to deliver even greater benefits. We have used the four stages of the Come Outside! model to summarise what it is important to do and what should be avoided.

**Table 17. Learning from the programme**

<table>
<thead>
<tr>
<th>Scoping</th>
<th>Things to do</th>
<th>Things to avoid</th>
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<tbody>
<tr>
<td></td>
<td>• Initial networking sessions are a useful way to launch activity and act as a catalyst for future networking.</td>
<td>• Don’t try to ‘create’ networks – allow them to evolve naturally over time.</td>
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<td></td>
<td>• Work with what is there – if the support infrastructure or groups don’t exist, move on.</td>
<td>• Don’t underestimate the value of local knowledge – coordinators with local experience and existing networks will help to kick-start activity.</td>
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<td></td>
<td>• Develop a strong central communications function and strategy in order to promote the programme, offer and benefits to support organisations and existing community.</td>
<td>• Don’t just focus on organisations or groups that want to improve the health and wellbeing of their beneficiaries</td>
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<tr>
<td>Things to do</td>
<td>Things to avoid</td>
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<td>----------------------------------------------------------------------------</td>
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<tr>
<td>• Use case studies and champions from elsewhere when starting to work in a new area.</td>
<td>– Being outdoors brings wider benefits.</td>
<td></td>
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<tr>
<td>• Work with individual groups to understand the barriers they face and explore with them some ways in which to break down those barriers.</td>
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<tr>
<td><strong>Demonstrating and influencing</strong></td>
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<tr>
<td>• Accept that the benefits of the approach need to be demonstrated to groups and support organisations before they are likely to be willing to provide support themselves.</td>
<td>• Don’t become invisible amongst strategic stakeholders – although participants don’t need to understand that they are part of a specific programme, a strong brand combined with a strategic plan for communication and influencing wider stakeholders will help raise awareness of the programme amongst future decision-makers.</td>
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<tr>
<td>• More support ‘on the ground’ will be needed in the early stages, which means that more staff resources are needed to support a large number of groups.</td>
<td>• Don’t set unrealistic targets – accept that it takes time to build momentum in an area and change behaviour. It is important to set targets that reflect this.</td>
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<td>• Focus on quality, not quantity – focus efforts on sustained engagement, rather than the numbers of groups or participants engaged. Use incentives and rewards to encourage repeat attendance.</td>
<td>• Avoid ‘silo’ working – ensure you have mechanisms to share learning amongst the coordinator team.</td>
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<td>• Recruit coordinators who have strong community development skills and experience of delivering outdoor activities.</td>
<td>• Don’t be too prescriptive – offer a range of outdoor activities and be flexible to the needs of each group.</td>
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<td>• Ensure that taster sessions offer memorable experiences for participants in order to inspire and motivate them to continue.</td>
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<tr>
<td>• Use one-off events to promote the programme and the benefits of outdoor activities. However, ensure that there is some follow-up work and resources provided to support people after the events.</td>
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<td><strong>Enabling</strong></td>
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<tr>
<td>• Ensure that organisations and groups make some kind of commitment to support other groups once they have been introduced to the concept of outdoor activities. Work with groups to develop sustainability</td>
<td>• Accept that working with very vulnerable groups will result in high drop-out rates – ensure that targets around sustainability reflect this.</td>
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<td>Things to do</td>
<td>Things to avoid</td>
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<td>plans from the outset and stop working with organisations that are not committed.</td>
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<td>• Ensure that sufficient time and resources are invested in influencing managers as well as support workers – this will enable changes to service provision.</td>
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<td>• Use incentives and rewards to encourage repeat attendance.</td>
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<td>• Identify one individual within the group or support organisation who has the commitment, drive and passion to lead the group once the coordinator moves on – support this individual to achieve that leadership role.</td>
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<td>• Provide small amounts of funding to pay for training and equipment that will enable groups to be self-organising.</td>
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