



BHFNC Summary of 'Change4Life one year on'

**The key messages physical activity professionals
can take forward**

February 2010

1. Introduction

The Department of Health report, 'Change4Life one year on'^{*} reflects on the first twelve months of the high profile social marketing campaign, 'Change4Life'. Change4Life launched to the public in January 2009 and is the social marketing component of the 'Healthy Weight, Healthy Lives cross-governmental strategy for England'. In its first year, Change4Life targeted families with children aged 5-11, who were at greatest risk of becoming overweight or obese. 'Change4Life one year on' reports back on how Change4Life has performed against the targets set out in the Change4Life marketing strategy, together with what has been learned about using marketing to influence behaviour and the next steps for the campaign. In this BHFNC summary of the report, we will make recommendations for physical activity and health professionals involved in marketing physical activity, based upon the first year findings of 'Change4Life'.

1.1 Change4Life background information

Change4Life's focus in year one of the campaign was to promote a healthy relationship with food and activity among families with children aged 5-11 whose current behaviours and attitudes indicated that their children are at risk of excess weight gain. The campaign promotes 8 different behaviours that parents (and health professionals) should encourage children to adopt if they are to achieve and maintain a healthy weight.

Before its launch, Change4Life produced a working hypothesis for how behaviour change may be established (please see below).



Source: Department of Health (2010). 'Change4Life one year on'. HM Government

This model provided a framework for deploying communications activity, aligned into 6 phases:

- ❖ Mobilising the network;
- ❖ Reframing the issue;
- ❖ Personalising the issue;
- ❖ Rooting the behaviours;
- ❖ Changing social norms and inspiring new behaviours; and
- ❖ Supporting change.

^{*} Department of Health (2010). 'Change4Life one year on'. HM Government. Download a copy of this report [here](#).

Physical activity and health professionals developing a marketing and communications strategy may find it useful to read more about the Change4Life framework. This information can be found in chapter 4 of the report.

To encourage behaviour change, families were invited to join Change4Life and were given the opportunity to complete a questionnaire entitled '*How are the Kids?*' to assess their current behaviours and receive a tailored action plan based on their responses. The survey was available both online and on paper, and was 'door dropped' directly to high-risk cluster areas, delivered face to face via field marketing, made available in doctors' surgeries, pharmacies and post offices and distributed as loose inserts in women's magazines. Response to '*How are the Kids?*' was higher among at-risk segments, suggesting that Change4Life is engaging the right target audiences and not just reaching the already healthy, affluent households.

Of the 413,466 families who joined Change4Life, 200,000 families were prioritised to enter a customer relationship management (CRM) programme which comprised 4 separate packs of information and resources such as activity books, games and a pedometer for families with older children. In addition, over 90,000 others who had opted in to further communication received an electronic CRM programme.

1.2 In year one, how did Change4Life perform against its targets?

	Year one Target	Year one Achievement
Reach (% of all mothers of children under 11 who had an opportunity to see the advertising campaign)	99%	99%
Awareness (% of all mothers with children under 11 who recalled seeing the Change4Life advertising)	82%	87%
Logo recognition (% of all mothers with children under 11 who recognised the Change4Life logo)	44%	88%
Response to <i>How are the Kids?</i> (total number of questionnaires returned electronically, by post or from face-to-face marketing)	100,000	346,609
Total responses (including website visits, telephone calls, returned questionnaires)	1,500,000	1,992,456
Sign-up (total number of families who joined Change4Life)	200,000	413,466
Sustained interest (total number of families who were proven to still be interacting with Change4Life six months after joining)	33,333	44,833

Source: Department of Health (2010) '*Change4Life one year on*'. HM Government.

Change4Life successfully met and exceeded all of its targets – exceeding its target for logo recognition by 44%. Independent audits by the COI[†] concluded that Change4Life had the fastest awareness build of any government campaign that they had ever monitored. They also found that ‘*How are the Kids*’ was the most effective engagement tool in the COI Artemis database. These impressive results suggest the opportunity for physical activity professionals involved in campaigns and marketing to learn from the approach used by Change4Life.

2.0 What can physical activity and health professionals learn from the Change4Life campaign?

2.1 Key factors for success

The ‘Change4Life one year on’ report looks closely at its successes to date and identifies a few factors thought to be critical to its success. Two key factors emerge that are relevant to professionals involved with other physical activity campaigns – these factors are detailed below:

- 1) **Base the campaign on the latest research evidence.** The Change4Life campaign is based on the latest research evidence. This includes evidence generated through ongoing campaign research and monitoring, sharing the evidence base widely and seeking expert opinion where the evidence base is limited. For example, Change4Life consciously avoided government branding, since their research showed them that people were keener to be part of a movement that was owned by all rather than prescribed by the Government. The evidence base also influenced the decision not to use the word ‘obesity’ in the brand name and instead focus on positive messages about healthy lifestyles.

Physical activity and health professionals should spend sufficient time researching all components of a planned campaign (e.g. market research, insight into target group etc.) before implementation. Campaigns should be shaped around the current evidence base.

- 2) **Build a coalition of partners.** The Change4Life campaign built a coalition of partners (including the commercial sector, non-governmental organisations and other government departments), and worked hard to engage the local NHS and schools. This was paramount in achieving public awareness of the Change4Life brand – primary schools generated over 50,000 sign-ups to Change4Life and NHS staff ordered over 6 million items of Change4Life material to distribute to the public. Commercial partners such as Halfords promoted and supported the campaign by offering fixed price bikes under the ‘Bike4Life’ sub-brand and Tesco offered lower-cost fruit and vegetables. Change4Life also formed a partnership with the regional

[†] COI Artemis tool holds data for 54 government campaigns and enables government departments to assess the cost effectiveness of their activity.

press to target 'at risk areas' and showcase stories of Change4Life making an impact at community level. This was part of Change4Life's move to help the public to believe in their ability to change behaviour and believe that people like them are already making changes.

Before the Change4Life campaign launched, the Chief Medical Officer wrote to every general practice, the Chief Nursing Officer wrote to every practice nurse and the Secretary of State for Children, School and Families wrote to every head teacher, urging them to lend their support to the movement. As mentioned above, these professionals played a significant role in engaging people with Change4Life and the fact that the letters came from high profile Government officials may have influenced this

Physical activity and health professionals should work in partnership to deliver and promote physical activity intervention. Partners can offer expertise, resources, funding and may have the networks to reach and engage a diverse range of people. Organisations such as the BHF/BHFNC can offer support in terms of knowledge and resources – a whole range of resources for health professionals to use to promote physical activity in a variety of settings can be found at www.bhf.org.uk or www.bhfactive.org.uk .

With regards to engaging other health professionals at a local level, key influences should be identified and their support sought at an early stage. For example, engaging schools was key for Change4Life as encouraging healthy behaviours among children was the focus of the campaign. Sending letters to schools prior to the launch of Change4Life appears to have been a good way to encourage support and raise awareness. Letters/emails to other key community groups could be sent – perhaps with the 'backing' of a high profile member of the community or 'local celebrity'. It would be particularly useful if resources or a website for further information can be made available to these professionals.

2.2 Suggested improvements for future campaigns

The 'Change4Life one year' report reflects upon the first year of the campaign and advises others embarking on a similar campaign to:

- 1) **Develop more products for professionals.** Where possible, products should be developed for those with a professional interest in combating obesity.

Physical activity professionals should ensure where possible that resources are available for professionals to use with their population groups to promote physical activity. These products should be tailored to meet the needs of different partners. The BHF/BHFNC offer a wide range of physical activity resources that can either be downloaded from www.bhf.org.uk or www.bhfactive.org.uk Hard copies of the majority of these resources can be ordered in bulk free of charge, although donations are welcomed.

- 2) **Spend more time on the 'mobilising the network' phase** – this phase began in January 2008 and aimed to ensure that when the public attempted to change behaviours, they met an informed and supportive local environment. This stage involved a significant amount of work by local authorities, primary care trusts, strategic health authorities, the government offices in the regions and commercial and NGO partners to prepare for the public launch. On reflection, it is acknowledged that the amount of time it would take to engage properly was underestimated.

Physical activity and health professionals should ensure that before a campaign / intervention is launched, plenty of time has been spent informing and engaging key groups in the local area. Sufficient time and resources should be allocated to this phase when creating a project plan .

- 3) **Start the CRM programme sooner.** Unfortunately, many families waited months for their first CRM pack; it would have been beneficial if this was ready to go out to families as soon as they joined Change4Life.

Physical activity professionals can learn from this and ensure supportive materials and further information are given to participants as soon as they show an interest in engaging with a project.

- 4) **De-prioritise paid-for distribution channels.** The COI Artemis results indicate that government funded channels out-performed paid-for commercial channels both in terms of the overall levels of response and the cost per response. Including the Change4Life questionnaires within the school fruit and vegetable boxes generated 53,091 survey returns at a cost of £2.34 per returned survey. This compares to 5,559 survey returns from inserts in women's weeklies at a cost of £11.59 per returned survey. In 2010, Change4Life are therefore planning to focus more on Government channels and de-prioritise paid-for distribution plans.

Physical activity professionals should keep this in mind when devising a marketing strategy. Using free distribution channels such as GP surgeries may generate more interest and prove more cost effective than paying for inserts or features in magazines.

2.3 Additional learning

During the first stage of the public campaign, Change4Life set out to reframe obesity from a cosmetic to a health issue. Although the campaign has significantly increased awareness of the links between exercise, nutrition and chronic disease, awareness still needs to be increased further.

After year one of the Change4Life campaign:

- **39%** of those surveyed recognised that physical inactivity among children could affect their chances of developing **diabetes**
- **25%** of those surveyed recognised that physical inactivity among children could affect their chances of developing **cancer**; and
- **48%** of those surveyed recognised that physical inactivity among children could affect their chances of developing **heart disease**.

This demonstrates that as physical activity and health professionals, we still have a lot of work to do to promote the health benefits of physical activity and the health risks of physical inactivity; particularly with regards to cancer prevention. See BHFNC 'Physical activity and health' fact sheet for further details (www.bhfactive.org.uk)

3.0 What are the next steps for Change4Life?

3.1 The activities

During 2010, Change4Life intends to maximise opportunities for behaviour change with a particular focus on activities that encourage people to try unfamiliar or hard-to-adopt behaviour. This could provide professionals with a good opportunity to tie in with Change4Life and offer 'unusual' physical activities or 'push' the less mainstream activities already on offer.

3.2 The 'How are the Kids?' questionnaire

The 'How are the Kids' questionnaire will be developed during 2010 in two ways:

- ❖ A second questionnaire will be sent to all families who completed the first one; and
- ❖ A localised questionnaire will be piloted which will enable primary care trusts and local authorities to collect data and engage directly with their populations.

3.3. Sub brands

In 2010 Change4Life will prioritise Let's Dance, Bike4Life, Walk4Life and a new sub-brand: Football4Life. Although the other 7 sub-brands will continue to operate and be supported by Change4Life, the Change4Life team feel that a proliferation of sub-brand names has fragmented partner activity and probably duplicates a lot of resource. However, it is noted that these sub-brands have also helped to generate a sense of buzz and movement around 'Change4Life'.

3.4. New audiences

A sister brand, 'Start4Life' was launched to the public in January 2010 and promotes breastfeeding, healthy weaning and active play. Start4Life will target healthcare professionals, pregnant women, families with babies under 2 years old and those who influence them.

In February 2010 Change4Life launched a campaign targeted at adults. This campaign advises adults to 'swap it, don't stop it' and will involve:

- ❖ A public relations campaign;
- ❖ Advertising the Change4Life message to an adult audience;
- ❖ Promoting a 'swapper' tool to facilitate behaviour change;
- ❖ Web-based tools and content contained within a dedicated part of the Change4Life site, and
- ❖ A partnership element, including an employee health and wellbeing programme.

3.5 Change4Life in Wales

Change4Life launched in Wales in February 2010 and will feature a Welsh language version of '*How are the Kids?*' For further details, click [here](#).

4.0 Further information

For further information about the impact of the first year of the Change4Life campaign, including the evidence to-date about family behaviour change (chapter 6), download 'Change4Life one year on' [here](#).

To visit the Change4Life website, click [here](#) .

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