Final report of the evaluation of the Australian Sports Commission’s Active After-school Communities program 2005–07
HELPING KIDS AND COMMUNITIES GET ACTIVE

Final report of the evaluation of the Australian Sports Commission’s Active After-school Communities program 2005–07
The Australian Sports Commission is the Australian Government agency that manages, develops and invests in sport at all levels. It was established in 1985 and operates under the Australian Sports Commission Act 1989. The Commission’s national leadership role is achieved through four operational areas: the Australian Institute of Sport, Sports Development, Sport Leadership, and Corporate Operations. The Australian Sports Commission forms part of the Prime Minister and Cabinet portfolio.

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Research by Colmar Brunton Social Research
Produced by Australian Sports Commission Publishing staff
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### Abbreviations and acronyms

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<th>Description</th>
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<tr>
<td>AASC</td>
<td>Active After-school Communities</td>
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<td>ASC</td>
<td>Australian Sports Commission</td>
</tr>
<tr>
<td>BMI</td>
<td>Body mass index</td>
</tr>
<tr>
<td>CATI</td>
<td>Computer-assisted telephone interviewing</td>
</tr>
<tr>
<td>CBSR</td>
<td>Colmar Brunton Social Research</td>
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<tr>
<td>CCTP</td>
<td>Community Coach Training Program</td>
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<tr>
<td>OSHCS</td>
<td>Out-of-school-hours care services</td>
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</table>
## Glossary

<table>
<thead>
<tr>
<th>Term</th>
<th>Definition</th>
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<tr>
<td><strong>Cohort 1</strong></td>
<td>The first cohort in the study, including baseline data collection in term 3 of 2005 and follow-up data collection in term 3 of 2006</td>
</tr>
<tr>
<td><strong>Cohort 2</strong></td>
<td>The second cohort, including baseline data collection in term 3 of 2006 and follow-up data collection in term 3 of 2007</td>
</tr>
<tr>
<td><strong>Cohort 3</strong></td>
<td>The third cohort, including baseline data collection in term 3 of 2007 and follow-up data collection in term 3 of 2008</td>
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<tr>
<td><strong>Deliverer</strong></td>
<td>An AASC-registered individual who delivers structured physical activity and motor skills programs as part of the AASC program</td>
</tr>
<tr>
<td><strong>General physical activity</strong></td>
<td>Any physical activity that is not classified as structured physical activity</td>
</tr>
<tr>
<td><strong>Leisure time</strong></td>
<td>Any time during out-of-school hours, including before-school hours, after-school hours, weekends and school holidays</td>
</tr>
<tr>
<td><strong>Non-participating child</strong></td>
<td>A primary school-aged child not enrolled to participate in the AASC program</td>
</tr>
<tr>
<td><strong>Parent of a non-participating child</strong></td>
<td>A parent of a primary school-aged child not enrolled to participate in the AASC program</td>
</tr>
<tr>
<td><strong>Parent of a participating child</strong></td>
<td>A parent of a primary school-aged child enrolled to participate in the AASC program</td>
</tr>
<tr>
<td><strong>Participating child</strong></td>
<td>A primary school-aged child enrolled to participate in the AASC program</td>
</tr>
<tr>
<td><strong>Stakeholders</strong></td>
<td>AASC participating schools and OSHCS staff, children participating in the AASC program and their parents, AASC program deliverers and AASC program staff</td>
</tr>
<tr>
<td><strong>Structured physical activity</strong></td>
<td>An organised, supervised physical activity that happens on a regular basis at a set time and place</td>
</tr>
<tr>
<td><strong>Total physical activity</strong></td>
<td>The combination of structured physical activity and general physical activity</td>
</tr>
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</table>
From its inception, research and evaluation have been integral components of Active After-school Communities (AASC) in determining whether the objectives of the program are being achieved and to what extent. This research has ensured continuous improvement by providing opportunities for reflection and learning, so that the AASC program is as appropriate, efficient and effective as it can be.

Evaluation of the AASC program for the period 2005–07 was undertaken by Colmar Brunton Social Research, in collaboration with the Australian Sports Commission’s (ASC’s) Research and Corporate Planning team. It has led to this summary report, prepared by the ASC, which has allowed us to revise components of the program, continue good practice, enhance existing processes, and plan and implement new procedures where necessary.

Additional research and evaluation will be conducted as the program moves forward to monitor its continued commitment to, and practice of, engaging inactive children and, through positive experiences, helping them develop a love of sport that inspires them to join a local sporting club. This will also present further opportunities for stakeholders to provide feedback on the program’s success.

Matt Miller
Chief Executive Officer
Australian Sports Commission
This report summarises the major findings from the evaluation of the Active After-school Communities (AASC) program during 2005–07. The AASC program is an Australian Government-funded program that provides primary school-aged children with access to free, fun, safe, inclusive and structured physical activities in the after-school timeslot of 3.00–5.30pm.

The Australian Sports Commission (ASC) administers the program, which is open to all Australian primary schools and childcare benefit-approved out-of-school-hours care services (OSHCS).

The AASC program is designed to engage traditionally inactive children in structured physical activities that focus on mobility skills and motor-skill development. The program also aims to build pathways within local community organisations to stimulate community involvement in delivering sports and physical activity programs.

The AASC program has been running since 2005, and has had an evaluation plan in place since its inception. This report summarises the key findings of research conducted between 2005 and 2007 that evaluated the progress of the program in meeting its objectives of:

- enhancing the physical activity levels of Australian primary school-aged children through a nationally coordinated program
- providing increased opportunities for inclusive participation in quality, safe and fun structured physical activity
- growing community capacity and stimulating local community involvement in sport and structured physical activity.

The evaluation concludes that the AASC program has been largely effective in achieving its objectives. Overall, the evidence gathered strongly indicates that the program has made a very positive contribution to the communities in which it has been introduced.

The report also provides an overview of stakeholders’ satisfaction with the program, and includes on-the-ground case studies that highlight the evaluation findings. It is important to note that the evaluation focused on providing an understanding of whether the AASC program has had an impact on inactive children’s participation in structured physical activity. When viewed collectively, the results of this evaluation suggest that by participating in the AASC program, children became more physically active in their leisure time, grew to love structured physical activity and wanted to continue their involvement.

In addition, participating schools and OSHCS increased their capacity to deliver structured physical activity outside of the AASC program, memberships at local clubs and structured physical activity organisations increased through their involvement in the program, and local communities were strengthened by the program being delivered in their area. The program achieved exceptionally high stakeholder satisfaction ratings, and was considered safe, fun and inclusive. In these matters, the AASC program can be considered to have successfully met its objectives.
In the concluding section of the report, the evaluators analyse the findings and provide advice on a number of ways in which the AASC program can be further enhanced. These include:

- considering strategies to increase the longevity of the program
- increasing the frequency with which children participate in the program
- conducting additional research to assess how the program can be made more effective for all children
- increasing awareness of the AASC program and its benefits
- mapping demand for the program and its activities
- considering strategies to better link schools, OSHCS, deliverers and sports clubs
- examining stakeholder feedback for suggestions on additional improvements and assessing whether they are viable
- communicating the evaluation results to stakeholders.
About the Australian Sports Commission

The ASC is Australia’s primary national sports administration and advisory agency, and the cornerstone of a wide-ranging sports system. On behalf of the Australian Government, the ASC plays a central leadership role in the development and operation of the Australian sports system. It administers and funds innovative sports programs and provides leadership, coordination and support for the sports sector.

The ASC is recognised as a world leader in the development of high performance sport and sports participation. Services are provided in a range of fields, including high performance coaching, sports sciences, sports information, sports education and resources, sports participation development, and delivery of funding programs to national sporting organisations.
AASC is an Australian Government program that provides primary school-aged children with access to quality, fun, safe, inclusive and structured physical activity in the after-school timeslot of 3.00–5.30pm.

The AASC program is provided free of charge as part of the government’s commitment to improving the physical activity levels, health and wellbeing of Australian children.

The program’s objectives are to:

- enhance the physical activity levels of Australian primary school-aged children through a nationally coordinated program
- provide increased opportunities for inclusive participation in quality, safe and fun structured physical activity
- grow community capacity and stimulate local community involvement in sport and structured physical activity.

The AASC program offers organised sporting games and activities, concentrating on a ‘playing for life’ approach. This approach centres on:

- the fun of the game
- the need to cater for all abilities
- a model whereby the coach is seen as a facilitator who modifies the game based on feedback from the players
- the encouragement and engagement of children in modified sporting games that focus on mobility skills and motor-skill development.

The types of activities and games delivered through the AASC program range from traditional sports, such as basketball, netball and football, to non-traditional sports such as frisbee and martial arts. Other structured physical activities, such as dance and circus skills, are also offered (see Appendix A for a detailed list).

The coordinators at each school or OSHCS select activities based on their knowledge of the children’s ages and abilities, available community resources, the environment and any identified barriers to involvement. Two to three AASC sessions are offered each week and, in general, a minimum of 15 children is required to participate in each session. However, all of the program’s parameters can be modified under certain conditions (for example, in order to meet the local needs of remote or Indigenous communities).

The cornerstone of AASC is the involvement of local communities in the delivery of the program. This involvement offers opportunities to support and strengthen community cohesion and development. All activities and games must be facilitated by deliverers who are registered with the ASC; anyone may apply for registration, including individuals and organisations. Current AASC deliverers include school teachers, OSHCS staff, development officers from national and state sporting organisations, local club personnel, local government staff, parents, private providers, and university and secondary-school students. In order to gain registration, deliverers must complete the Community Coach Training Program (CCTP), and a satisfactory police check or working with children check must be carried out. The CCTP is offered free of charge to participants, and has been designed to teach core skills such as communicating with children, behaviour management, promoting safe environments, nutrition and wellbeing, and most importantly, the playing for life philosophy. By the end of 2007, more than 22 000 community members had completed the CCTP.
A key objective of the AASC program is to build the capacity of communities to create and maintain opportunities for physical activity. This means building pathways within local community organisations, including sporting clubs, and stimulating community involvement in sport and structured physical activity. It includes an approach that:

- encourages local community partnerships
- promotes a local community approach to increasing participation in structured physical activity
- provides participating schools and OSHCS with support to determine programs that meet the needs of their community.

AASC regional coordinators are critical to the success of this approach. They are the on-the-ground people who forge relationships, provide advice and guidance, and empower stakeholders to become involved. Their roles are to:

- link suitable ASC-registered deliverers from the community with schools and OSHCS to meet their program requirements
- help schools and OSHCS to plan and develop suitable programs to engage traditionally inactive children
- identify and train suitable deliverers in the community to meet the quality standards set by the program
- monitor, assess and provide feedback to deliverers regarding the quality of program delivery
- explore and identify opportunities for unique community initiatives to enhance the program’s objectives.

**Rationale for the AASC program**

The AASC program was initiated by the Australian Government in 2004 as a result of the following societal changes:

- primary school-aged children across Australia were becoming less active and subsequently less healthy
- the motor-skill competencies of children were poor, in large part as a result of the continuing decline of physical education and sport in Australian schools, which began more than two decades ago
- work patterns were changing, and thereby reducing opportunities for families to support their children’s out-of-school activities, whether in sport or other areas
- opportunities for children to be physically active were diminishing as families were becoming increasingly mindful of the dangers of leaving children to play in unsupervised settings and were instructing them to remain inside
- screen-based leisure time activities were becoming increasingly popular.

The AASC program marks an important stage in efforts to improve physical activity outcomes for Australian primary school-aged children.
Evolution of the AASC program

In 2002, in recognition of the growing challenges in engaging children in structured physical activity, including sport, the ASC began exploring options to provide opportunities for more children to become physically active. The major challenge was to provide an attractive, safe and accessible program that could compete for children’s time against electronic games, television, the internet, shopping mall trips and other sedentary activities.

Both in-school and out-of-school timeslots were considered, and pilot programs across Australia tested different delivery models. This included an out-of-school-hours sports program conducted in 2003 in partnership with VicHealth. This program was evaluated, recommendations were made, and these were subsequently incorporated into the budding blueprint for the AASC program.

The AASC program was launched in 2004 as part of the government’s Building a Healthy, Active Australia initiative. In the first school term of 2005, the AASC program was piloted in 21 schools and OSHCS around Australia (see Appendix B). This quickly expanded to 900 primary schools and OSHCS in term 2 of 2005.

The AASC program is now delivered to more than 3200 schools and OSHCS, and more than 150 000 Australian primary school-aged children are involved.

In 2007, the government announced that it would extend the AASC program for a further three years.

AASC FACTS

By term 4 of 2007:

> the AASC program was being delivered at 3126 schools and OSHCS sites across the country
> half of AASC schools and OSHCS were located in regional and remote areas
> more than 150 000 children were participating in the program
> 80 traditional and non-traditional structured physical activities were being offered for delivery across the country
> more than 22 000 community members had been trained by AASC staff in the CCTP
> a network of AASC regional coordinators all over Australia was continuing to make the program work at the local level, with local communities
> more than 4000 participating teachers and almost 3000 participating OSHCS staff had received free professional development training related to structured physical activity
> more than $40 million in grants had been awarded to participating schools and OSHCS to assist in areas such as training and purchasing equipment, and each had received Playing for Life resource kits, which provide more than 100 activity cards and eight-week lesson plans for 14 different sports and activities.

Note: These facts and figures are representative of the period 1 January 2005 to 31 December 2007.
Figure 1: The AASC program around Australia

- **Northern Territory**
  - 71 OSHCS and schools
  - 3078 children
  - 442 CCTP trained community members

- **Queensland**
  - 575 OSHCS and schools
  - 28 171 children
  - 4511 CCTP trained community members

- **Tasmania**
  - 94 OSHCS and schools
  - 4808 children
  - 1412 CCTP trained community members

- **Western Australia**
  - 342 OSHCS and schools
  - 12 101 children
  - 2273 CCTP trained community members

- **South Australia**
  - 299 OSHCS and schools
  - 14 877 children
  - 2413 CCTP trained community members

- **Victoria**
  - 830 OSHCS and schools
  - 37 001 children
  - 5120 CCTP trained community members

- **New South Wales**
  - 823 OSHCS and schools
  - 38 392 children
  - 5116 CCTP trained community members

- **Australian Capital Territory**
  - 170 OSHCS and schools
  - 5001 children
  - 1232 CCTP trained community members

- **Northern Territory**
  - 71 OSHCS and schools
  - 3078 children
  - 442 CCTP trained community members
The AASC program originally had a three-year implementation timeframe, from 2005 to 2007. This report provides the final findings of the evaluation of the AASC program’s performance against its objectives in 2005–07 and its future potential.

The aims of the evaluation were to:

- assess whether the AASC program has achieved its stated objectives to:
  - enhance the physical activity levels of Australian primary school-aged children through a nationally coordinated program (by increasing participation levels of inactive children within structured physical activity, improving attitudes of inactive children towards structured physical activity and increasing fundamental motor-skill development of inactive children)
  - provide increased opportunities for inclusive participation in quality, safe, fun and structured physical activity
  - grow community capacity and stimulate local community involvement in sport and structured physical activity
- determine and evaluate the effectiveness of the associated quality assurance framework in supporting and guiding the development and implementation of the AASC program
- monitor children’s participation in AASC over the life of the program, including the transition of children from the program to the local club structure and/or level of junior sport membership
- assess the level of satisfaction with the AASC program from the perspective of participants, deliverers and other key stakeholders
- measure the level of ‘unmet’ demand for the AASC program’s services
- identify reasons for lack of participation among children, both within schools and OSHCS offering the AASC program and those not offering the AASC program, including barriers to participation
- provide information and draw conclusions about the strengths and weaknesses of the AASC program model of delivery
- suggest modifications that are deemed necessary to achieve the stated aims and objectives of the AASC program.
The challenge for any evaluator is to design an appropriate framework to collect reliable, representative and insightful data in order to assess performance against a range of objectives. The evaluation objectives for the AASC program are particularly wide ranging, and therefore require input from different stakeholder groups. Consequently, the AASC program evaluators developed a number of research components to assess the program’s performance. Following is an overview of the evaluation design and its limitations.

**The evaluation design**

One of the biggest challenges faced in developing and executing an evaluation of the AASC program was timing. The speed with which the AASC program was developed and delivered meant that the initial evaluation approach had to be designed within tight timeframes, to ensure that baseline information could be collected in time. Secondly, the research and evaluation commenced alongside the implementation of the AASC program. This meant that the program itself was going through a phase of natural evolution, and the evaluation approach had to be flexible enough to adapt where needed.

The evaluation of the AASC program is intended to assist with the implementation of the program, enable its ongoing refinement and assess its effectiveness in establishing after-school structured physical activity programs. The ASC and its evaluators, Colmar Brunton Social Research (CBSR), undertook an extensive scoping phase to develop and design an appropriate evaluation framework within the constraints of timing, budget and other external demands. This process included a series of discussions with various government and community stakeholders, and an intensive planning phase.

A traditional model of formative evaluation was initially considered, but was felt to be too simplistic for the purposes of the AASC program evaluation. Therefore, the final evaluation approach adopted follows more closely a systems-theory model, whereby:

- the needs and strategies of the evaluation are agreed on and objectives are set using previous experience
- planning is completed by the team of researchers from CBSR and the ASC, alongside key personnel from the AASC program
- key informants are identified and engaged in the evaluation process
- evaluation instruments are cognitively tested and piloted
- the AASC program implementation and process are monitored through a series of data collection over three years
- the AASC program impact is compared between participants and non-participants
- outcomes are shown through analysis and interpretation of the data from different evaluation components.

The evaluation focuses on providing an understanding as to whether the AASC program has met its stated objectives; in particular, whether it has had a positive impact on children’s participation in structured physical activity. Table 1 provides an overview of the evaluation methods.
Table 1: Overview of evaluation methods

<table>
<thead>
<tr>
<th>Research participants</th>
<th>Research method</th>
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<tr>
<td><strong>Quantitative research</strong></td>
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<tr>
<td>Parents of participating children</td>
<td>Pre and post-measure computer-assisted telephone interviewing (CATI) with three cohorts in 2005, 2006 and 2007. The third post-measure was conducted in 2008.</td>
</tr>
<tr>
<td>Representatives from participating schools and OSHCS</td>
<td>A web-based survey inviting comments/feedback from representatives from all schools and OSHCS in term 4 (term 3 in Tasmania), in 2005, 2006 and 2007.</td>
</tr>
<tr>
<td>AASC program staff</td>
<td>A web-based survey inviting comments/feedback from all AASC program staff in term 4 (term 3 in Tasmania) in 2005, 2006 and 2007.</td>
</tr>
<tr>
<td><strong>Qualitative research</strong></td>
<td></td>
</tr>
<tr>
<td>Selected participating and non-participating communities</td>
<td>Two four-day visits, spaced a year apart, to nine selected communities. Case studies included a mix of focus groups, in-depth interviews and use of a self-completion questionnaire. Case studies were conducted in the following communities:</td>
</tr>
<tr>
<td></td>
<td>&gt; Pine Rivers (QLD)</td>
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<td></td>
<td>&gt; Adelaide (SA)</td>
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<td></td>
<td>&gt; Queanbeyan (NSW)</td>
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<td></td>
<td>&gt; Lyell/Queenstown (TAS)</td>
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<td></td>
<td>&gt; Greater Hobart (TAS)</td>
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<td></td>
<td>&gt; Perth — northern metropolitan (WA)</td>
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<td></td>
<td>&gt; Busselton (WA)</td>
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<tr>
<td></td>
<td>&gt; Geelong (VIC)</td>
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<tr>
<td></td>
<td>&gt; Roma (QLD).</td>
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<tr>
<td>Selected Indigenous communities</td>
<td>One four-day visit to two selected Indigenous communities. Case studies included a mix of focus groups, in-depth interviews and use of picture drawing, as appropriate. Case studies were conducted in the following Indigenous communities:</td>
</tr>
<tr>
<td></td>
<td>&gt; Milikapiti (NT)</td>
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<td></td>
<td>&gt; Lombadina (WA).</td>
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The findings presented in this report draw on all evaluation methods, including the community case studies.

Refer to Appendix C for further details about the evaluation design and limitations. Appendix D provides interpretive notes for this report, including ratings, reporting scales, weighting, significance testing and sample sizes.
Summary of findings

The evaluation findings after the first three years of the AASC program’s operation show that it is achieving its objectives of:

1  Enhancing the physical activity levels of Australian primary school-aged children through a nationally coordinated program

   AASC children now take part in more sport and structured physical activities after school:
   - On average, participating children in the AASC program almost doubled their structured physical activity hours per week.
   - Participating children in the AASC program also significantly increased their total physical activity hours per week by up to 1.4 hours.
   - More than 80 per cent of school and OSHCS staff were satisfied or extremely satisfied that the AASC program encouraged traditionally inactive children to participate in organised, supervised physical activity.

   AASC children love being physically active and want to keep participating in sport and structured physical activity:
   - More than 80 per cent of participating children reported that they liked participating in physical activity classes and sport.
   - More than three-quarters of participating children reported that they wanted to again participate in the AASC program after the school holidays.
   - Four out of five AASC deliverers said that children involved in the program were becoming more positive towards organised, supervised physical activity.
   - Three-quarters of parents of participating children said their child had expressed interest in new sports and physical activity in the previous 12 months.
   - Two out of three parents of participating children indicated that their child would like to join a new sporting club or organisation.

2  Providing increased opportunities for inclusive participation in quality, safe and fun structured physical activity

   The AASC program is of high quality and offers fun and safe experiences for children:
   - The AASC program network now covers 3250 schools and OSHCS sites across the country, 50 per cent of which are in regional or remote areas.
   - More than 80 per cent of participating children, their parents, AASC program deliverers, and participating schools and OSHCS rated the AASC program as being fun.
   - More than 90 per cent of parents of participating children, deliverers, schools and OSHCS rated the program as being safe.
   - More than 80 per cent of parents of participating children considered the program to be of high quality.
Growing community capacity and stimulating local community involvement in sport and structured physical activity

The AASC program is a springboard for growth for participating schools and OSHCS, local communities and structured physical activity organisations:

- More than three-quarters of participating schools and OSHCS reported that they had increased their capacity to deliver structured physical activities.
- Of the AASC program deliverers from sporting clubs or physical activity organisations, 50 per cent reported an increase in the number of children attending and participating at their club or organisation.
- More than 70 per cent of school and OSHCS staff, and AASC program deliverers were satisfied that the program had stimulated local community involvement in sport and physical activity.
- At least two out of three program deliverers agreed that the community in which they worked had improved its ability to support and encourage children’s participation in structured physical activities since participating in the AASC program.
- As part of the research, participating schools with a dedicated physical education teacher reported that in many instances these teachers spent less than 70 per cent of their time on physical education. A high proportion of schools also reported that they had no dedicated physical education teacher. As part of the AASC program, more than 4000 participating teachers and almost 3000 OSHCS staff were provided with free professional development relating to structured physical activity. More than $40 million in grants were also provided to participating schools and OSHCS, along with Playing for Life resource kits.
- More than 22 000 community members were trained free of charge by AASC program staff in the CCTP.

Satisfying stakeholders with the operation and effectiveness of the program

The AASC program wins stakeholder acclaim and support:

- More than 80 per cent of parents of participating children said they were satisfied with the AASC program.
- More than 80 per cent of parents acted on this satisfaction by enrolling their child in the program more than once.
- More than 80 per cent of participating children reported that they found participating in the AASC program fun.
- More than 80 per cent of school and OSHCS staff, program deliverers and AASC staff said they were satisfied with the AASC program overall.
- More than 80 per cent of school and OSHCS staff, and program deliverers said they were satisfied with the AASC program’s implementation.
- This was further supported when broken down into elements that included:
  - more than 85 per cent of school and OSHCS staff, and deliverers were satisfied with the overall performance of regional coordinators
  - more than 80 per cent of school and OSHCS staff were satisfied with the funding process
  - more than 80 per cent of program deliverers were satisfied with their registration process and the CCTP.
AASC objective 1
Enhancing the physical activity levels of Australian primary school-aged children through a nationally coordinated program

AASC children now take part in more sport and structured physical activities after school

KEY FINDINGS

Parents of participating children reported significant increases in both structured physical activity and total physical activity of their child per week,* more so than parents of non-participating children.

Parents of participating children were more likely to report that their child’s structured physical activity* had increased in the previous 12 months than parents of non-participating children.

The AASC program helped to improve the participation of inactive children in structured physical activity according to the majority of identified stakeholders, including school and OSHCS staff, program deliverers and AASC regional coordinators.

* The hours related to children’s physical activity levels refer only to the time that children spent on physical activity in their leisure time.

The kids involved are active when they are doing the sessions ... some are definitely more active than they used to be.

AASC program deliverer, Roma community case study, Queensland

The program has helped produce healthier, fitter, more active kids.

AASC stakeholder, Queenstown community case study, Tasmania

Not only did participating children almost double their structured physical activity hours per week, AASC program stakeholders saw the children enjoy a range of other benefits. These included:

> improved motor skills including throwing, kicking, spatial awareness, running skills and basic coordination levels, particularly in children aged between 5 and 12 years
> making new friends
> improved social skills and team work
> improved confidence levels
> increased leadership and cognitive skills.

An evidence snapshot

> On average, cohort 1 and cohort 2 parents of participating children reported that their child almost doubled their structured physical activity hours per week, from 1.5 hours in baseline measure to 2.9 hours in follow-up measure.
> Non-participating children also increased their average structured physical activity hours per week, from 1.6 to 2.5 hours (cohort 1) and from 1.7 to 2.6 hours (cohort 2). The evaluators report that this may be due to a number of factors, including that children’s physical abilities improved, they were older and therefore able to participate in some activities that previously may have been unavailable to them, or more activities were available or offered at a more convenient time.
It is important to note that the increase in structured physical activity for participating children (1.4 hours per week, on average) was significantly higher than for non-participating children (0.9 hours per week, on average). At a follow up with both survey cohorts, 15 per cent of parents of participating children who reported their child’s increase in structured physical activity mentioned the AASC program or after-school sport as a reason for their child’s increased participation in structured physical activity over the preceding 12 months.

Participating children also significantly increased their total physical activity hours per week, on average from 7.9 hours in baseline measure to 8.6 hours in follow-up measure (cohort 1), and 6.6 to 8.0 hours (cohort 2).

In contrast, non-participating children recorded no significant difference in total physical activity for cohort 1 (from 8.2 to 8.0 hours per week), but a decline in total physical activity for cohort 2 (from 8.1 to 7.4 hours per week).

In assessing the views of identified stakeholders about the effectiveness of the program, around three-quarters were satisfied that the AASC program encouraged inactive children to participate in organised, supervised physical activities (see Table 2).

Table 2: Satisfaction that the AASC program encourages inactive children to spend more time doing organised, supervised physical activities

<table>
<thead>
<tr>
<th>Stakeholder</th>
<th>2005</th>
<th>2006</th>
<th>2007</th>
</tr>
</thead>
<tbody>
<tr>
<td>School/OSHCS staff</td>
<td>81%</td>
<td>83%</td>
<td>85%</td>
</tr>
<tr>
<td>Program deliverers</td>
<td>79%</td>
<td>81%</td>
<td>83%</td>
</tr>
<tr>
<td>AASC program staff</td>
<td>71%</td>
<td>78%</td>
<td>74%</td>
</tr>
</tbody>
</table>

Figure 2: Hours per week spent doing total physical activity in an average term 2 week

![Graph showing hours per week spent doing total physical activity](image-url)
AASC SNAPSHOT — Penola scores big with football

With the success of the 2006 Football World Cup, young children in South Australia have decided to take up the sport with the help of local award-winning AASC community coach, Guy Detot. Detot has successfully delivered football (soccer) to Penola and other small schools and local communities in the south-east of the state, in an effort to get kids active and generate a passion for football.

AASC Regional Coordinator, Josephine Duigan, said that with a current population of 1200 there had never really been the capacity or interest to establish a local club or competition in Penola. However, this has all changed with the introduction of Detot’s football program. ‘Due to Guy’s enthusiasm for football, AASC participants have become inspired and many now travel a 100-kilometre round trip each week for training and games with clubs in Mount Gambier and Naracoorte,’ Duigan said.

Inspired by his most recent state AASC Community Coach Award, Detot’s passion for football continues to burn. He has single-handedly organised a fun Saturday morning football competition, which is hosted with the approval of the governing council at Penola Primary School. Detot said that parents and students from five AASC sites, including Nangwarry, Kalangadoo, Glencoe, Mount Burr and Penola, are involved in various roles each week. ‘Parents take on the roles of coaches and referees, and teams are changed each week to ensure a fun, fair and social game,’ Detot said. ‘It is quite possible that the huge turnout of parents is because the morning ends with a “kids versus parents” friendly game. I have never seen so many mums and dads so keen to get on the field!’

Detot, who is a member of the Western Border Centrals Soccer Club, is now calling for local children and adults to register their interest in a twilight summer competition. ‘Through the competition I hope to attract local footballers and netballers of all ages to continue their fitness regimes through playing football in the off season,’ Detot said. Detot maintains that his enthusiasm for creating community football opportunities was generated by his participation in the AASC program’s CCTP learning about the Playing for Life philosophy and becoming a popular choice for local sites participating in the AASC program. Duigan believes that, given the momentum that has been created by one person’s love of a popular sport, it seems safe to assume that with support from the community, a new club will eventually emerge.

Source: AASC National Newsletter, December 2006
AASC children love being physically active and want to keep participating in sport and structured physical activity

**KEY FINDINGS**

<table>
<thead>
<tr>
<th>Findings</th>
</tr>
</thead>
<tbody>
<tr>
<td>More than 80 per cent of participating children reported that they liked participating in physical activity classes and sports (83 per cent in 2005, 84 per cent in 2006 and 85 per cent in 2007).</td>
</tr>
<tr>
<td>More than three-quarters of participating children reported that they wanted to again participate in the AASC program after the school holidays (78 per cent in 2005, 79 per cent in 2006 and 81 per cent in 2007).</td>
</tr>
<tr>
<td>Participating children becoming more positive towards organised, supervised physical activity according to four in every five AASC program deliverers (82 per cent in 2005, 84 per cent in 2006 and 86 per cent in 2007).</td>
</tr>
<tr>
<td>Participating children expressed interest in new sports and physical activity in the previous 12 months, according to three-quarters of parents surveyed in 2007.</td>
</tr>
<tr>
<td>Parents of participating children were more likely to agree that their child would like to and will join a new sporting club or organisation than parents of non-participating children.</td>
</tr>
<tr>
<td>Of the AASC program deliverers from sporting clubs or structured physical activity organisations, 50 per cent reported an increase in the number of children attending and participating at their club or organisation (50 per cent in 2006 and 2007).</td>
</tr>
</tbody>
</table>

*The program definitely has improved the kids’ attitudes to doing sport. It might be that they can encourage other mates to come along after the first session. Not many kids drop out — kids stay fairly the same week in, week out. If you start with 20 you have around about 20 at each session.*

AASC program deliverer, Busselton community case study, Western Australia

*They are more positive about themselves and in giving things a go because they are not being ‘bagged out’ by the others.*

School staff, Queenstown community case study, Tasmania

By becoming involved in the AASC program, children grew to love structured physical activity and wanted more. They reported that they were making new friends, having fun and learning about new activities. These activities included modified sports and non-traditional activities, such as dance classes, which gave them increased opportunities to find activities at which they could excel. This was seen as particularly positive for inactive children, whose confidence levels may inhibit participation in traditional and competitive structured physical activities. A combination of elements was seen as contributing towards improving children’s attitudes to participating in structured physical activity. These included the:

- variety of activities
- emphasis on fun rather than competition
- eight-week program structure that allowed children’s competency and confidence to build
- quality and enthusiasm of the program deliverers.

Many deliverers reported benefiting from an increasing number of children participating in physical activity and/or sport at their organisation. Yet, while many parents felt their child would like to join a new sporting club, fewer felt that it would actually happen in the forthcoming 12 months. This suggests that while the AASC program can improve the attitudes of participating children towards structured physical activity, other barriers, such as cost, parental time constraints, travel and transport issues, may be affecting that transition.
An evidence snapshot

Figure 3: Drawing from an AASC program participant

My name is [Redacted] and I like playing soccer and basketball. My favourite fruit is apple, orange, and banana. And I like play football too.
Three in every four (75 per cent) parents of participating children (cohort 2) agreed that since participating in the AASC program their child had expressed interest in new sports and physical activities in the previous 12 months. This perception was significantly stronger when compared with parents of non-participating children, of whom 62 per cent agreed.

Almost two in every three (63 per cent) parents of participating children agreed that their child would like to join a new sporting club or organisation. This perception was significantly stronger in comparison with parents of non-participating children, of whom 48 per cent agreed.

However, while a majority of parents of both participating and non-participating children agreed that their child would like to join a new sporting club, fewer parents of participating children (49 per cent) agreed that their child would actually join a new sporting club or organisation in the following 12 months. This was just 5 per cent higher than the proportion of parents of non-participating children (44 per cent) who agreed that their child would join a club or organisation.

Table 3: Parents’ views on children joining a new sporting club

<table>
<thead>
<tr>
<th>Children would like to join a new sporting club or organisation</th>
<th>Children will join a new sporting club or organisation in the following 12 months</th>
</tr>
</thead>
<tbody>
<tr>
<td>Parents of participating children</td>
<td>Parents of non-participating children</td>
</tr>
<tr>
<td>Agree</td>
<td>63%</td>
</tr>
<tr>
<td>Neither agree nor disagree</td>
<td>16%</td>
</tr>
<tr>
<td>Disagree</td>
<td>21%</td>
</tr>
<tr>
<td>Don’t know</td>
<td>1%</td>
</tr>
</tbody>
</table>

Note: Figures may not equal 100 per cent due to rounding.
The AASC program is of high quality and offers fun and safe experiences for children

**KEY FINDING**

A vast majority of identified stakeholders, including parents of participating children, agreed that the AASC program is fun, safe and of high quality.

_They don’t see it as activity, they see it as having fun with their friends. The program creates an environment where they can have fun._

Teacher, Geelong community case study, Victoria

_The games we play are fun ... The teachers join in and it’s cool ... It’s fun ... never boring._

Child, Vasse community case study, Western Australia

_The AASC program is definitely more inclusive than traditional school sports. Quite often with organised sports and teams, the kids who aren’t as coordinated get less time on the field, which makes them feel less involved. This program makes the kids feel included._

Key stakeholder, Hobart community case study, Tasmania

Surveyed stakeholders believed that the AASC program not only provided more opportunities for children to experience supervised physical activity after school, but that it was carried out in a safe and fun manner. The inclusiveness of the program was another big factor in their positive assessment of AASC. They also indicated that they thought the way the AASC program was organised and run ensured that it was a high-quality program, and they made particularly favourable mentions of the presence and enthusiasm of the AASC regional coordinators.

Parents used words and phrases such as ‘fun’, ‘encouraging’, ‘friendly’ and ‘well organised’ to describe the program. They also found it convenient that activities were being delivered within schools or OSHCs, which they considered to be safe for their children, and believed the program to be of a high standard because a quality assurance framework was in place.
The AASC program is fun and safe

Table 4: Perceptions of the AASC program held by parents of participating children

<table>
<thead>
<tr>
<th>Agree that the AASC program is ...</th>
<th>Cohort 1</th>
<th>Cohort 2</th>
</tr>
</thead>
<tbody>
<tr>
<td>A high-quality program</td>
<td>84%</td>
<td>84%</td>
</tr>
<tr>
<td>Safe for children to participate in</td>
<td>91%</td>
<td>94%</td>
</tr>
<tr>
<td>Fun for children to participate in</td>
<td>90%</td>
<td>94%</td>
</tr>
</tbody>
</table>

Table 5: Perceptions of the AASC program held by stakeholders

<table>
<thead>
<tr>
<th>Agree that the AASC program provides ...</th>
<th>Stakeholder</th>
<th>2005</th>
<th>2006</th>
<th>2007</th>
</tr>
</thead>
<tbody>
<tr>
<td>A safe experience for children</td>
<td>Deliverers</td>
<td>95%</td>
<td>96%</td>
<td>96%</td>
</tr>
<tr>
<td></td>
<td>Schools/OSHCS</td>
<td>95%</td>
<td>95%</td>
<td>96%</td>
</tr>
<tr>
<td>A fun experience for children</td>
<td>Deliverers</td>
<td>93%</td>
<td>95%</td>
<td>94%</td>
</tr>
<tr>
<td></td>
<td>Schools/OSHCS</td>
<td>91%</td>
<td>95%</td>
<td>94%</td>
</tr>
</tbody>
</table>

The AASC program is a high-quality program

- More than 80 per cent of school and OSHCS staff were satisfied with the overall performance of deliverers (84 per cent in 2005, 88 per cent in 2006 and 89 per cent in 2007).
- The majority of school and OSHCS staff were satisfied with the deliverers’ abilities to provide physical activity sessions that were appropriate to the likes and needs of children (83 per cent in 2005, 87 per cent in 2006 and 88 per cent in 2007).
- More than 80 per cent of AASC program deliverers expressed satisfaction with the CCTP. The CCTP trains prospective AASC deliverers in the required qualifications, knowledge and expertise to join the program. Deliverers were satisfied that the CCTP helped them:
  - deliver physical activities that are fun (86 per cent in 2005, 88 per cent in 2006 and 89 per cent in 2007)
  - provide physical activity sessions that are appropriate to the likes and needs of children (83 per cent in 2005 and 2006, and 85 per cent in 2007)
  - ensure the safety of children participating in the AASC program (84 per cent in 2005, 85 per cent in 2006 and 85 per cent in 2007)
  - deliver physical activities that maximise the involvement of all children (85 per cent in 2005, 2006 and 2007)
  - adjust activities to suit the needs of individual children (81 per cent in 2005, 2006 and 2007).
AASC objective 3
Growing community capacity and stimulating local community involvement in sport and structured physical activity

The AASC program is a springboard for growth for participating schools and OSHCS, local communities and structured physical activity organisations

**KEY FINDING — SCHOOLS AND OSHCS**

Since participating in the program, more than three-quarters of AASC participating schools and OSHCS agreed that their organisation had improved its ability to support and encourage student participation in structured physical activity (79 per cent in 2005, 83 per cent in 2006 and 85 per cent in 2007).

*It [the AASC program] is effective ... it has helped with the professional development of our staff ... teaching them new skills.*

Schoolteacher, Geelong community case study, Victoria

A high proportion of schools involved in this research reported that they did not have a physical education teacher. In the schools that did, the majority of those teachers spent less than 70 per cent of their time on physical education. The AASC program has taken steps to address this trend. In supporting participating schools and OSHCS, the AASC program has provided:

- free professional development through the CCTP to 4232 participating teachers and 2786 participating OSHCS staff
- more than $40 million in grants to participating schools and OSHCS to support the delivery of structured physical activities
- free *Playing for Life* resource kits (with more than 100 games and activities) and companion books for 14 different sports (providing eight-week lesson plans) to each participating school and OSHCS.

**Table 6: Schools’ and OSHCS’ views on their improved ability to support and encourage participation in structured physical activity since the introduction of the AASC program**

<table>
<thead>
<tr>
<th>Attitude</th>
<th>2005</th>
<th>2006</th>
<th>2007</th>
</tr>
</thead>
<tbody>
<tr>
<td>Agree</td>
<td>79%</td>
<td>83%</td>
<td>85%</td>
</tr>
<tr>
<td>Neither agree nor disagree</td>
<td>15%</td>
<td>12%</td>
<td>9%</td>
</tr>
<tr>
<td>Disagree</td>
<td>5%</td>
<td>4%</td>
<td>5%</td>
</tr>
<tr>
<td>Don’t know</td>
<td>1%</td>
<td>1%</td>
<td>1%</td>
</tr>
</tbody>
</table>
KEY FINDING — AASC PROGRAM DELIVERERS

Half of all AASC program deliverers who were directly involved with a local sporting club or other organised sport or physical activity program agreed that the AASC program led to an increase in the number of children participating in organised sport and/or physical activity programs at their organisation (50 per cent in 2006 and 2007).

Through participating in the program and doing judo and karate we’ve had about 5 per cent of the kids join those clubs. Particularly we’ve had a lot of girls go into dancing after having done it here. About three to four have joined the club this term.

School staff member, Busselton community case study, Western Australia

More clubs are now looking to provide opportunities for young kids, whereas they used to mainly target adults and teenagers. When we started out the only activity for the young ones was little athletics. Since we started the program a lot more clubs are now catering for younger kids and there are more opportunities for families to become involved. We see clubs watching what other clubs are doing in terms of working out activities for the younger ones and they imitate them so they do not get left behind.

OSHCS staff, Pine Rivers community case study, Queensland

Some AASC program deliverers reported an increasing movement into clubs, local sports, dance and other activities in the community as a result of the program. Parents also reported some movement into local sporting clubs, as well as increased interest in sports that had not earlier been considered by children, and even in some sports that were not part of the AASC program. Therefore, there is some evidence that children in the program have followed their interests into local sporting clubs.

However, parents’ time constraints and financial costs continue to inhibit greater movement of children into clubs. Parents were keen for their children to remain in the AASC program, as it is delivered at schools or OSHCS and it is free of charge. Parents even suggested that the program could be expanded to cover all primary school-aged children as well as young teenagers.

Some deliverers reported falling attendance at some sessions, and some schools have withdrawn from the program. This suggests that further efforts are required to market and promote the program to parents and children in schools, to ensure that overall attendance in established sites is maintained. It also means that mechanisms, such as succession planning, should be in place to cope with staff changes or program ‘champions’ moving on.

In supporting local clubs and structured physical activity organisations, the AASC program has provided:

> training for more than 16 000 community members through the CCTP, including local clubs, students and parents

> more than $300 000 in grants directly to local organisations delivering structured physical activity.

AASC SNAPSHOT

At Deniliquin in New South Wales, the local golf club’s partnership with the AASC program attracted so many budding young golfers that the club is looking to start a junior competition. With a town population of just over 8000 people, 50 local primary school-aged students were introduced to the sport when it became part of the local AASC program in April 2007. The club saw the potential of the AASC program to attract new members, and seven club members became registered AASC program deliverers. Club member Pat Aitken said the program gave the club the resources and confidence to be proactive in attracting juniors. ‘Initially, we set about attracting new members and seeking some much-needed funds for the club, but our involvement has been much more rewarding than we imagined,’ she said. ‘To see the look on a student’s face when they finally connect with the ball is quite inspirational.’
KEY FINDING — LOCAL COMMUNITIES

The majority of identified stakeholders believed that the AASC program is growing community capacity and stimulating local community involvement in sport and structured physical activity.

There are a lot more partnerships now between agencies like the local council, Queensland Health and the AASC and local clubs.

Key stakeholder, Roma community case study, Queensland

More people have become qualified coaches as a result of the program. This provides the community with a long-term resource to foster ongoing physical activity for the future.

Key stakeholder, Busselton community case study, Western Australia

Many elements contributed to the finding that local communities were strengthened through the AASC program being delivered in their area. AASC program deliverers, and school and OSHCS staff shared many examples of how the program positively impacted on community resources, community capacity, partnerships and problem-solving capabilities. These included:

- forming links and partnerships within the community among sporting and recreation clubs, state and national-level sporting organisations, and schools and OSHCS (for example, Police and Citizens Youth Clubs see the AASC program as an opportunity to maximise use of facilities, and sporting organisations see the AASC program as a ‘feeder’ that will help them retain and increase membership and sustain their viability)
- generating interest in different sports
- building skills (of parents, teachers, local students and volunteers) to increase the number of trained sports deliverers and coaches in the community through the CCTP
- raising parental awareness of the issue of childhood activity
- increasing awareness of the facilities and leisure options that are available in community sporting and recreation clubs
- providing primary schools and OSHCS with sporting equipment they would not otherwise have
- providing an accessible means of participation in structured physical activity (for example, for special needs or isolated children).

An evidence snapshot

In assessing the views of identified stakeholders, the majority were satisfied that the AASC program stimulates local community involvement in sport and physical activity:

- school and OSHCS staff — 71 per cent in 2005, 77 per cent in 2006 and 76 per cent in 2007
- AASC program deliverers — 76 per cent in 2005 and 2006, and 78 per cent in 2007
- AASC staff — 57 per cent in 2005, 67 per cent in 2006 and 70 per cent in 2007.

In addition, at least two in every three program deliverers agreed that the community in which they worked had improved its ability to support and encourage children's participation in structured physical activity since participating in the AASC program.
AASC SNAPSHOT — Building community capacity

The Northern Territory has more than 60 sites participating in the AASC program, with over 60 per cent of these located in remote areas. Just under half of these sites are exclusively for Indigenous children. The program aims to build community capacity through many means, including training and supporting local people to deliver sport.

Wallace Dennis is a local resident in the remote community of Minyerri, 260 kilometres south-east of Katherine. With the assistance of the AASC program, he has gained important qualifications and employment through his involvement, and is a vibrant role model for younger children in the region. ‘Sport is important for young people within the community because it gives them something to do and makes them feel good about themselves,’ Dennis said.

Through the AASC program, Dennis has completed his CCTP and now assists in coaching junior AFL, cricket, softball and football. He completed Year 10 in 2005 and now has a full-time position as Minyerri Council’s sport and recreation officer. Dennis has two employees and runs the AASC program and holiday programs in the area.

Source: AASC National Newsletter, September 2007
AASC objective 4
Satisfying stakeholders with the operation and effectiveness of the program

The AASC program wins stakeholder acclaim and support

**KEY FINDINGS**

| The majority of parents of participating children, schools, OSHCS staff, deliverers and AASC staff were satisfied with the AASC program overall. |
| A large majority of school and OSHCS staff and deliverers were also satisfied with the AASC regional coordinators’ performances. |
| Parents of participating children were satisfied with the AASC program deliverers’ overall performance, and ability to provide appropriate sessions and adjust activities to suit individual needs. |
| School and OSHCS staff, deliverers and AASC staff reported high levels of satisfaction with the implementation of the program. |
| The majority of program deliverers were satisfied with their registration process and the CCTP. |

Schools and OSHCS were strong supporters of the AASC program, as it gave children in their care more opportunities to engage in structured physical activities. The program’s funding also enabled them to purchase new sporting equipment, and through AASC training, enhance the skills of their staff. In the case of OSHCS, this led to higher enrolments on the days the program was running. Schools and OSHCS often felt they received a high level of service from AASC staff and that the AASC program’s quality assurance framework delivered a quality product. Schools and OSHCS also reported that participating children benefited, with:

- improved motor skills
- enhanced leadership and thinking skills
- improved attitude to physical activity
- improved ability to interact with each other
- improved self-confidence
- increased opportunities to try new things
- greater awareness of the importance of being active
- encouragement to follow their interests by joining local clubs.
Parents were also extremely supportive of the program, believing it to be essential in exposing children to a range of activities and discovering where their talents lie.

Key stakeholders believed the use of community-based regional coordinators was very effective, as it helped broaden the coordinators’ knowledge of the local community and built community awareness of the AASC program.

Deliverers were particularly happy with the opportunity to market their activities among children. They valued the CCTP and the assistance they received from the AASC program.

An evidence snapshot

More than 80 per cent of parents of participating children said that they were satisfied with the AASC program (84 per cent of cohort 1 and 87 per cent of cohort 2). They acted on this satisfaction by enrolling their child in the program more than once (87 per cent of cohort 1 and 89 per cent of cohort 2). Among the main reasons for re-enrolling their child, parents said it was because their child liked the activities and asked to be enrolled, their child was more active and watched less television while participating in the program, and their child learnt new skills from the program.

More than 80 per cent of school and OSHCS staff, program deliverers and AASC staff said they were satisfied with the AASC program overall:
- school and OSHCS staff — 88 per cent in 2005, and 93 per cent in 2006 and 2007
- AASC program deliverers — 87 per cent in 2005 and 2006, and 89 per cent in 2007
- AASC staff — 83 per cent in 2005, 93 per cent in 2006 and 92 per cent in 2007.
A successful model

It is clear that the underlying model of the AASC program does work. The areas that provide evidence of this success are summarised below:

> what the AASC program offers
> additional and new structured physical activity generated from the AASC program
> very high satisfaction levels from all parties involved
> a quality experience for participants
> longer-term benefits of the AASC program beyond the immediate experience.

What the AASC program offers

Since 2005, the AASC program has grown to encompass more than 3000 sites across Australia and more than 150,000 children participate in the program per term.

The AASC program offers access to funding, equipment, resources, AASC-registered coaches, CCTP training for school and OSHCS staff, and regional coordinator assistance in establishing links between qualified coaches and sites. Sites have been attracted to the program because they understand that physical activity is beneficial to children, and it allows them to better deliver such physical activity to the children they service. For OSHCS, the program not only helps support the services they provide to children and parents, but more pragmatically, it effectively gives them some time out from their direct service delivery role.

The AASC program helps overcome a wide range of barriers to children being able to participate in structured physical activity. For parents, it provides a safe environment in which their child can participate in sport, at no personal cost and with no additional transport complications, and it is conveniently located within the existing time structures they have developed. For children, it provides a fun environment in which they can experiment with new and different types of activities.

Additional and new structured physical activity generated from the AASC program

There is strong evidence that a proportion of the structured physical activity completed under the AASC program has been new or additional activity that would not otherwise have taken place.

The increase in structured physical activity and total physical activity for participating children was significantly higher than for non-participating children. In addition, a large majority of those actively involved in delivering the program were satisfied that it encouraged inactive children to participate in structured physical activity.

Cumulatively, these results strongly indicate that at least some of the structured physical activity done through the program was activity that would not have happened otherwise. Importantly, 85–88 per cent of children in the program were inactive to begin with, meaning that these increases are being obtained from a desirable audience.
The AASC program also appears to be assisting a reduction in unmet demand for free, quality, after-school structured physical activity for primary school-aged children. Forty per cent of parents of participating children felt that there were sufficient opportunities for their child, compared with 25 per cent of parents of non-participating children. Of course, while this differential is a positive indicator, even among parents of participating children there were still 60 per cent who did not feel that sufficient opportunities exist. This suggests an unmet need well beyond what the program is currently delivering. AASC staff reinforce this, with 60 per cent feeling that there are not enough places in the program for children.

**Very high satisfaction levels from all parties**

Those who are actively involved in the delivery of the program — deliverers, and AASC, school and OSHCS staff — were all largely positive about their experience with, and involvement in, the program. Overall, satisfaction with the program was very high from all groups, ranging from around 85 per cent of parents, 88 per cent of deliverers, to 93 per cent of school, OSHCS and AASC staff. The role of the regional coordinators was considered central to the success of the program, particularly in relation to their input when establishing relationships and links between organisations; satisfaction with the regional coordinators was also very high.

**A quality experience for participants**

There is consistent evidence from across the evaluation that all participants and stakeholders were satisfied with the experiences offered through the AASC program in terms of overall quality, and providing a fun and safe environment for children.

All groups strongly felt that children enjoyed the program, and the children themselves reported this in both the qualitative and quantitative components of the evaluation. More than 80 per cent of children felt that the program was fun or really fun, and around 80 per cent wanted to do it again next term. It was thought that the emphasis of the program being on fun rather than competition heavily contributed to this outcome.

The safety of the AASC program was very strongly endorsed, and the deliverer registration and question and answer processes were both seen as important contributors. The school and OSHCS setting also allowed parents to be implicitly confident about the safety of any program that would be approved for use in these environments.

Perceptions of overall quality were strong. While there was some concern about the lack of consistent high-quality standards among deliverers, it was not a major concern for any specific group — more an area in which improvement could be achieved. The CCTP has the processes in place to ensure the consistency of the training the coaches received. Furthermore, a nationally coordinated program may assist in ensuring that consistency in the quality of deliverers is achieved.

**Longer-term benefits of the AASC program beyond the immediate experience**

As part of the AASC program, more than 4000 school and 3000 OSHCS staff have received training, more than 22 000 community members have gone through the CCTP run by AASC staff, program resources have been distributed, and more than $40 million in grants have been allocated. This should provide a greater capacity in the wider community to deliver structured physical activity for primary school-aged children, at the very least within the context of the AASC program itself.

The evaluation was also able to provide some clarity about how the program increased community capacity. The location of regional coordinators within the community was seen as central to this outcome, resulting in a capacity to develop effective linkages between AASC sites and local resources, such as clubs or educational institutions, and to provide deliverers. An examination of the evolution of relationships between the program and the wider community suggest that many were formed in the set-up stages of a site, and continued to evolve and expand over time.
The program was intended to have a positive effect on children’s attitudes towards structured physical activity. Children reported enjoying the program and hoping to participate again the following term, which suggests a positive attitudinal influence. However, parents did not report any noticeable positive impact on their children’s attitudes. Given the generally positive attitudes expressed by all groups, including children, to the program and the experiences it generated, it seems more likely than not that any impact on attitudes would be positive — but this can only be surmised in a circumstantial manner.

The final, longer-term effect of the program was intended to be the transition from the program into club sport. Theoretically, children making this transition would extend their increased participation in structured physical activity to a longer-term involvement in organised sport or physical activity, thus extending their involvement in beneficial levels of activity. The research identified some evidence that this transition is occurring. One in two (50 per cent) deliverers from local clubs or sporting organisations reported that the AASC program led to an increase in the number of children participating in sport and other structured physical activity at their organisations, and qualitatively all groups could give relevant examples.

Although it is intended that on conclusion of the AASC program, children will be encouraged to continue with a sport by joining a community club, barriers that the program overcomes, such as cost, convenience and accessibility, may come back into the equation. The AASC program was never intended as a replacement for club membership; this transition to club sport is seen as an area in which improvements to the program could be made.

**Strengths of the AASC program**

The evaluation identified a number of core strengths of the program as it currently operates. They are:

- use of school and OSHCS sites, which imply safety and are convenient from a time and transport perspective
- no cost
- making better use of existing facilities
- funding that provides wider benefits
- an increase in community capacity
- regional coordinators based in local communities
- variety of content and emphasis on fun.

**Improvements to the AASC program**

A number of relative weaknesses and possible areas for improvement were identified. They are:

- better integration with existing activities
- more formal pathways and integration into club sport
- improved consistency of deliverer quality
- reducing the impact on the viability of surrounding OSHCS when delivered through schools
- more certainty over the long-term future of the program, allowing more commitment and planning (although this is out of the program’s control).

In addition, stakeholders identified two key issues that relate to the program’s objectives and intent. Firstly, it was noted that despite the large scale of the program, it is still too small to make a meaningful impact at a national population level. Secondly, some stakeholders felt that the program should be more specifically targeted at children who are inactive, or not involved in structured physical activity.
Based on the findings thus far, the AASC program has demonstrably benefitted many of the participating children, participating schools and OSHCS, program deliverers and local communities. The evaluators recommend that this benefit could be further enhanced, and experienced by many more children, if the ASC can implement strategies to:

> **Increase longevity in the program** in terms of ensuring that schools and OSHCS continue to offer the AASC program (thus ensuring minimal drop-out at the school and OSHCS level), and ensuring that individual children participating in the AASC program continue to do so for as many terms as possible.

> **Increase the frequency with which children participate in the program.** In the first instance, investigations should be carried out to see what could be done to encourage schools and OSHCS to offer the AASC program more days per week. In the second instance, investigations should be undertaken to determine what could be done to encourage children to participate in the AASC program more frequently.

> **Conduct qualitative research with parents whose children drop out of the AASC program and/or with parents whose children decrease structured physical activity.** The program is benefiting those who participate in it, and stay in it, but it is important to understand, in depth, why children are dropping out and what can be done to prevent this from happening. It is equally important to fully understand why the program is not working for some children — that is, children who decrease their participation levels in structured physical activity — and what can be done to make the program more effective for them.

> **Increase awareness of the AASC program and its benefits** among parents of participating children in particular, and possibly more parents generally depending on the ASC’s ability to meet any resultant demand. Throughout the evaluation, the researchers observed that there is low awareness of the AASC program among parents of participating children; most commonly, parents know that their child is participating in after-school sport, but not of the involvement of the ASC. Increased awareness and knowledge of the AASC program, and the ASC’s role in providing the program, may facilitate greater recognition among parents of the impacts the AASC program may be having on their children.

> **Consider mapping demand** so that any future expansion of the AASC program is targeted at areas where unmet demand is greatest.

> **Communicate directly with parents** that the AASC program provides free, supervised, structured physical activity, and that it operates in the after-school timeslot. This may help minimise barriers to children participating in the AASC program. The decision to undertake such communication activities, of course, needs to be made in the context of the ability of the AASC program to meet any demand that may result.

> **Better link schools, OSHCS, deliverers and sporting clubs.** Evidence suggests that linkages and pathways are starting to be successfully established, which allow children to move from the AASC program to the local club structure. However, in keeping with the notion of continuous improvement, more direct communication with children and parents about relevant sporting clubs and/or communication with relevant sporting clubs about the AASC program may help promote development of these pathways.

> **Explore and understand the reasons** why there is a consistent difference observed between school-based and OSHCS-based delivery of the AASC program.
Promote a better transition from the program to local sporting clubs and associations.

Better target inactive children.

Consider stakeholder feedback and suggestions on additional improvements to program delivery. These included having:
- even more deliverers
- more activities
- increased communication among participating schools and OSHCS to share ideas and resources
- updated information on what deliverers can offer
- more incentives for schools, OSHCS and deliverers.

Consider whether any of the deliverer suggestions as to how the AASC program could be improved are viable. The most frequently mentioned were:
- further and different training options
- more funding for resources
- more variety and flexibility of activities
- better communication and links across the AASC program and communities
- more advertising, marketing, media and merchandise.

Communicate the evaluation results to stakeholders. All stakeholders — that is, parents of participating and non-participating children, participating children, school, OSHCS and AASC staff, and deliverers — need to know that the program works, is safe and is fun. The key messages (and communication channels) will obviously need to be tailored to each target audience in order to be effective. Assuming the key messages can be communicated effectively, it is anticipated that the ASC would see further improvements to the evaluation results and maximum uptake of the available program places.

During the creation of the evaluation design, the ASC also identified some lessons learnt from the CBSR evaluation for consideration in the evaluation of the next phase.

Firstly, regarding one of the sub-evaluation objectives — ‘increase in fundamental motor-skill development of inactive children’ — the CBSR evaluation collected some information in this area through attitudinal research, but a change in fundamental motor skills cannot be adequately measured through this method alone. It would be very costly and time-consuming to collect physical measurements of the ‘increase in fundamental motor-skill development of inactive children’, and specialised testing techniques would be required to objectively assess this impact. This would not be achieved within the allocated budget without compromising other primary evaluation objectives. It was also recognised that this sub-evaluation objective was not an explicit outcome that was intended or required of the AASC program. Therefore, it is recommended that this program sub-evaluation objective be dropped from the future evaluation design to clearly delineate what the program is actually trying to change.

Secondly, the definition of inactive children in the CBSR evaluation focused on children’s time spent on sport or structured physical activity. However, it was recognised that a child can participate in sport or physical activity in an unstructured or structured way, and may participate at different levels of intensity — low, moderate or vigorous — and for longer or shorter periods of time. The Australian Physical Activity Recommendations advise that children aged 5–12 years should participate in ‘At least 60 minutes (and up to several hours) of moderate to vigorous intensity physical activity every day’. Therefore, in future evaluations the definition of ‘inactive children’ needs to be redefined, and the type and intensity of the activity undertaken needs to be taken into account.
## Appendix A

**List of traditional and non-traditional structured physical activities being delivered under the Active After-school Communities program**

<table>
<thead>
<tr>
<th>Activity</th>
<th>Activity</th>
<th>Activity</th>
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<tbody>
<tr>
<td>Abseiling</td>
<td>Frisbee</td>
<td>Rugby union</td>
</tr>
<tr>
<td>Aerobics</td>
<td>Futsal</td>
<td>Sailing</td>
</tr>
<tr>
<td>Aquatics</td>
<td>Gaelic football</td>
<td>Scooter hockey</td>
</tr>
<tr>
<td>Archery</td>
<td>Golf</td>
<td>Scuba diving</td>
</tr>
<tr>
<td>Athletics</td>
<td>Gymnastics</td>
<td>Self-defence</td>
</tr>
<tr>
<td>Australian football</td>
<td>Gymnastics — rhythmic</td>
<td>Skateboarding</td>
</tr>
<tr>
<td>Badminton</td>
<td>Handball</td>
<td>Skating</td>
</tr>
<tr>
<td>Baseball</td>
<td>Hockey</td>
<td>Snorkelling</td>
</tr>
<tr>
<td>Basketball</td>
<td>Ice hockey</td>
<td>Snow skiing</td>
</tr>
<tr>
<td>Beach tennis</td>
<td>Ice-skating</td>
<td>Softball</td>
</tr>
<tr>
<td>Beach volleyball</td>
<td>Indoor cricket</td>
<td>Squash</td>
</tr>
<tr>
<td>Billy-carting</td>
<td>Inline hockey</td>
<td>Surfing</td>
</tr>
<tr>
<td>BMX</td>
<td>Inline skating</td>
<td>Surf lifesaving</td>
</tr>
<tr>
<td>Bocce/pentanque</td>
<td>Judo</td>
<td>Swimming</td>
</tr>
<tr>
<td>Boomerang</td>
<td>Jump rope</td>
<td>Table tennis</td>
</tr>
<tr>
<td>Broomball</td>
<td>Karate</td>
<td>Taekwondo</td>
</tr>
<tr>
<td>Callisthenics</td>
<td>Kite flying</td>
<td>Tai chi</td>
</tr>
<tr>
<td>Canoe/kayak</td>
<td>Korfball</td>
<td>Teeball</td>
</tr>
<tr>
<td>Capoeira</td>
<td>Lacrosse</td>
<td>Tennis</td>
</tr>
<tr>
<td>Cheerleading</td>
<td>Lawn bowls</td>
<td>Tenpin bowling</td>
</tr>
<tr>
<td>Circus skills</td>
<td>Martial arts</td>
<td>Touch football</td>
</tr>
<tr>
<td>Cricket</td>
<td>Mountain bike</td>
<td>Traditional Indigenous games</td>
</tr>
<tr>
<td>Croquet</td>
<td>Multi-skill</td>
<td>Trampolining</td>
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<tr>
<td>Cycling</td>
<td>Netball</td>
<td>Triathlon</td>
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<tr>
<td>Dance</td>
<td>Orienteering</td>
<td>Vigoro</td>
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<tr>
<td>Darts</td>
<td>Oztag</td>
<td>Volleyball</td>
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<tr>
<td>Dodgeball</td>
<td>Pilates</td>
<td>Water polo</td>
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<tr>
<td>Equestrian</td>
<td>Pool lifesaving</td>
<td>Wheelchair sports</td>
</tr>
<tr>
<td>Fencing</td>
<td>Rock climbing</td>
<td>Wrestling</td>
</tr>
<tr>
<td>Fitness/circuit</td>
<td>Rollerblading</td>
<td>Yoga</td>
</tr>
<tr>
<td>Floorball</td>
<td>Rowing</td>
<td></td>
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<tr>
<td>Football (soccer)</td>
<td>Rugby league</td>
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### Appendix B
Active After-school Communities pilot programs

<table>
<thead>
<tr>
<th>State</th>
<th>Region</th>
<th>Pilot school/OSHCS</th>
</tr>
</thead>
<tbody>
<tr>
<td>ACT</td>
<td>ACT 1</td>
<td>YMCA North Ainslie After School Care</td>
</tr>
<tr>
<td>NSW</td>
<td>North Coast</td>
<td>Wollongbar Public School</td>
</tr>
<tr>
<td>NSW</td>
<td>North West Sydney</td>
<td>Gladesville Putney Before and After School Care</td>
</tr>
<tr>
<td>NT</td>
<td>Top End 2</td>
<td>Jingili Primary School</td>
</tr>
<tr>
<td>NT</td>
<td>Central</td>
<td>Larapinta YMCA OSHC</td>
</tr>
<tr>
<td>NT</td>
<td>Katherine/Barkly</td>
<td>Katherine South Primary School After School Care</td>
</tr>
<tr>
<td>QLD</td>
<td>Gold Coast North</td>
<td>Gullivers SwimGym OSHC</td>
</tr>
<tr>
<td>QLD</td>
<td>Ipswich</td>
<td>Redbank Plains OSHC</td>
</tr>
<tr>
<td>SA</td>
<td>Eyre Peninsula</td>
<td>Streaky Bay Area School</td>
</tr>
<tr>
<td>SA</td>
<td>Mid North/York Peninsula</td>
<td>Port Pirie West Primary School</td>
</tr>
<tr>
<td>SA</td>
<td>Metro North 1</td>
<td>Le Fevre Primary School</td>
</tr>
<tr>
<td>TAS</td>
<td>South 3</td>
<td>New Town Primary School</td>
</tr>
<tr>
<td>TAS</td>
<td>South 1</td>
<td>St Therese’s Primary School</td>
</tr>
<tr>
<td>TAS</td>
<td>North</td>
<td>Norwood Primary School</td>
</tr>
<tr>
<td>TAS</td>
<td>North West</td>
<td>Spreyton After School Care/Spreyton Primary School</td>
</tr>
<tr>
<td>VIC</td>
<td>Gippsland</td>
<td>Longwarry Primary School</td>
</tr>
<tr>
<td>VIC</td>
<td>Gippsland — Morwell</td>
<td>Heyfield Primary School</td>
</tr>
<tr>
<td>VIC</td>
<td>Metro Eastern 1</td>
<td>Kew Primary School/OSHCS</td>
</tr>
<tr>
<td>WA</td>
<td>Swan 1</td>
<td>Girrawheen Primary School</td>
</tr>
<tr>
<td>WA</td>
<td>Fremantle</td>
<td>Communicare OSHCS</td>
</tr>
<tr>
<td>WA</td>
<td>Great Southern</td>
<td>Spencer Park Primary School</td>
</tr>
</tbody>
</table>
Computer-assisted telephone interviewing survey of parents of participating and non-participating children

Due to the various complexities involved — namely the broad range of children's ages and budget limitations — it was determined that parents would act as the proxy report for their child's participation. The subsequent approach involved a pre and post-measure, which was undertaken for parents of participating and non-participating children. The purpose of this approach was to determine whether any changes in activity levels occurred following the child's participation in the AASC program, in addition to other changes in attitudes towards structured physical activity. Comparisons of these two groups were then undertaken.

To capture data for each year of the AASC program, a new cohort of parents of participating and non-participating children was included in the evaluation, equating to three cohorts in total. Parents of participating children were recruited from lists collated by the ASC from randomly selected participating schools and OSHCS in term 3 of each year. Parents of non-participating children were recruited from the general population through random sampling from the White Pages listings. The criterion for recruitment of all parents was the amount of time their child spent in structured physical activity. In order to establish the comparable sample groups between parents of participating and non-participating children, screening questions were used to restrict the CATI survey to parents whose child had participated in three hours or less of structured physical activity per week in their leisure time, at the time they were interviewed for the first time. This was to ensure this component of the evaluation was targeted at the AASC program's focus of delivering structured physical activities.

Online survey of children

The online survey of children was a fun, interactive, web-based survey designed specifically for children. The survey was conducted quarterly (in each school term) using a random sample of sites drawn from the nationwide pool of schools and OSHCS participating in the AASC program. The methodology employed in 2005, 2006 and 2007 was as follows: during the appropriate school term, the AASC program regional coordinators contacted the randomly selected school or OSHCS sites and invited them to participate in the research. Following this, the regional coordinators scheduled a survey day with the school or OSHCS and arranged for a letter to be provided to parents of participating children, describing the research and seeking their approval for their child to participate in the online survey. On the survey day, the regional coordinators attended the sites and assisted the children to complete the online survey, or printed copies of the survey where an internet connection was not available.

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Online surveys of school and OSHCS staff, deliverers and AASC program staff

All participating primary-school and OSHCS staff, AASC program staff and deliverers were invited to participate in an online survey, which was conducted annually in term 4 (term 3 in Tasmania). Those who did not have access to the internet were sent a hardcopy questionnaire and their results were entered into the database by the researchers within the same fieldwork period. These surveys focused on satisfaction with aspects of the AASC program, effectiveness of processes, satisfaction with other stakeholders and suggestions to improve the AASC program.

Qualitative case studies

A case-study approach was undertaken in order to provide a qualitative understanding of the ways in which the AASC program has influenced or affected the community. Nine carefully selected communities were visited twice by a CBSR qualitative researcher over the course of the evaluation, to allow comparisons over a 12-month period and to explore how effective the AASC program had been in building community capacity from the stakeholders’ perspectives. The methodology used for the case studies included, as appropriate, a mixture of one-on-one interviews with key stakeholders, OSHCS staff and primary-school teachers; and focus groups with parents and children. In addition, all one-on-one interview participants and parents involved in the focus group discussions were asked to carry out a self-completion questionnaire.

Two Indigenous community case studies were also conducted in remote locations. These case studies were less formal in nature and more free flowing, allowing for the different circumstances of each community. Participants were recruited using a snowball method, whereby key members of the community introduced the researchers to potential participants in the community. Face-to-face interviews were the predominant method of information gathering, while a small number of telephone interviews were conducted with government and other stakeholder groups that were not available at the time of the field visit. In addition, focus groups and drawing activities were used with the participating children to help gain an understanding of their experiences of participating in the AASC program.

Appendix D provides interpretive notes for this report, including ratings, reporting scales, weighting and significance testing.

Limitations of the evaluation methods

No physical measurement component for children’s physical activity levels

The body mass index (BMI) is a widely used indicator of overweight or obesity in health literature, due to its intuitive appeal and the ease with which height and weight information can be obtained. BMI and other objective measures of physical activity are also widely used in the area of physical activity research. During the initial program development phase, BMI was considered by the ASC as a measure of effectiveness of the AASC program, among a number of other key measures. However, after consultation and deliberation it was decided that physical measures would not be employed in the evaluation undertaken by the ASC due to the concerns raised by some state and territory departments of education and other stakeholders about taking children’s body measurements, and the potential negative consequences for the children involved, such as body image and the stigma of being considered overweight.

In addition, to ensure a nationally consistent approach was undertaken, that was within the available budget, it was determined that parents would act as the proxy reporters for their child’s physical activity levels, and data was collected through a CATI survey.
Definition of structured physical activity

At the time of the evaluation design in early 2005, there was no consistent or clearly accepted definition of structured physical activity or other physical activity terms. The ASC was therefore required to define structured physical activity and other terms for the purpose of this research and evaluation — refer to the glossary (page 4). Only in 2008 did the Australian Bureau of Statistics release the discussion paper Defining Sport and Exercise: a conceptual model (cat. no. 4149.0).

Qualitative research

It should be noted that qualitative research provides an in-depth understanding of participants’ views, opinions and experiences. However, the findings should be considered as indicative only, and cannot be extrapolated to wider populations with the same degree of certainty that quantitative analysis can.

Non-response bias

Non-response bias occurs in all surveys. It occurs when a large number of people in the survey sample fail to respond, and their response characteristics may differ from those who do respond. During data analysis and reporting, it is assumed that people not responding to the survey have the same response characteristics as the people who do respond. When this assumption is not true, a bias in the estimates is introduced. For example, parents whose child is more physically active may be more likely to agree to participate in the CATI survey than those whose child is inactive.

Different approaches can be used to address the non-response problem, or to demonstrate and evaluate non-response bias effects, such as strategies to increase response rates and surveying the non-respondents.

All of the research and evaluation activities for the AASC program are voluntary. Based on the available resources, different efforts were made to increase the response rates of the CATI and online surveys, such as calling people at an appropriate time and booking an appointment when it suited respondents, introducing a prize draw for those who participated in the survey, and sending a primary approach letter to online survey respondents and a reminder letter a few days before the survey closing time. For the telephone survey, response rates for parents of participating children was 78 per cent or above for the pre-measure and 92 per cent or above for the post-measure. The response rates for parents of non-participating children for the post-measure were also maintained at about 96 per cent for 2006 and 2007. However, the response rate was low in the pre-measure for the first cohort of parents of non-participating children. Thus, the recruitment procedure was revised, which led to an increase in the response rates for the second and third survey cohorts, with response rates increasing by 9 per cent or above. Response rates for the AASC program staff survey were 89 per cent or above during the three years, and response rates for school and OSHCS surveys were between 39 per cent and 56 per cent.

The ASC recognises the value of seeking information from non-respondents to further validate its findings. However, this was not possible within the available budget.

Errors

All surveys are subject to errors. There are two main types of errors: sampling errors and non-sampling errors.

Sampling errors

Sampling errors are those that arise because not every single member of the population was included in the survey. Naturally, it is simply not feasible to survey the whole population to avoid this type of error. One can, however, estimate how big this error component is using statistical theory. This theory indicates that with a sample of 1000 people from a population of 100 000 people or more, the maximum margin of sampling error on an estimate of a proportion is 3.1 per cent.
The way this can be interpreted is as follows. The survey results estimate that 90 per cent of parents of participating children in the post-measure agreed that the AASC program was fun for their child. The maximum margin of error on this estimate of 90 per cent is +/−2 per cent. Hence, one can be 95 per cent confident that the actual proportion of people in the population who agreed that the AASC program was fun for children is between 88 and 92 per cent. In all tables in this report, groups are compared against each other and, where possible, differences are tested for statistical significance at the 95 per cent confidence level.

Efforts were made to reduce the sampling error in the evaluation design, and targets were set to ensure an effectiveness measure within a maximum margin of error of +/−5 per cent at the 95 per cent confidence level for each year of the evaluation. Sample sizes for the CATI survey of parents in the pre-measure were about 936, with the maximum margin of error being +/−2 per cent. This allowed for a reasonable sample size to be maintained — n=635 or more with a maximum margin of error being +/−4 per cent — even after attrition in the post-measure.

Efforts were also made during the recruitment stage. Parents of participating children were recruited randomly from lists collated by the ASC. Non-participating parents were recruited from the general population using random sampling from White Pages listings. The survey of children was conducted quarterly (in each school term) using a random sample of sites drawn from the nationwide pool of schools and OSHCS participating in the AASC program.

Research with deliverers, AASC staff, and school and OSHCS staff was conducted via online surveys. All deliverers, AASC program staff, and representatives from participating schools and OSHCS who had a valid email address were invited to participate in the online surveys. Those school and OSHCS personnel who were unable to access the internet were sent a printed copy of the questionnaire, accompanied by a pre-paid envelope for returning. Reminders were also sent to the people who had not responded to the survey before the closing time.

Non-sampling errors

All surveys, regardless of whether they are sample surveys or censuses, are subject to other types of error, called non-sampling errors. Non-sampling errors include things such as interviewer keying errors and respondents misunderstanding a question.

Every attempt has been made to minimise non-sampling errors in this evaluation. For example, all of the research instruments have been thoroughly pilot tested, and cognitive testing has been undertaken for the development of the CATI questionnaire for parents. These efforts sought to ensure the right questions were asked and that they were interpreted in the way in which they were intended. However, some types of error are out of the control of the researcher. In particular, the study is reliant on the accurate reporting of behaviours and views by respondents, particularly when parents are the proxy reporters on behalf of their child. For example, a parent may forget that their child played tennis in the time period the research is interested in, and may have failed to report this activity.

Comparability of the data

The data from the AASC research and evaluation is not comparable with data collected through other surveys of children’s participation in physical activity or organised sport. This is due to differences in the scope, methodology and questionnaire design of the various surveys.
Appendix D
Interpretive notes

The findings in this report only reflect the comments and opinions of those who participated in, and responded to, the surveys.

Rounding

Percentages are generally rounded to whole numbers. Some percentages may not add up to 100 per cent due to rounding.

Average duration of participation in structured physical activity or general physical activity is rounded to one decimal place.

Question scales

Some questions in the survey were asked using ten-point scales. These scales were used to indicate the level of agreement or satisfaction. To allow for data analysis and ease of interpretation, all ten-point scales have been collapsed in the following way:

- a score of 1–2 is classified as ‘extremely dissatisfied’ or ‘strongly disagree’
- a score of 3–4 is classified as ‘dissatisfied’ or ‘disagree’
- a score of 5–6 is classified as ‘neither satisfied nor dissatisfied’ or ‘neither agree nor disagree’
- a score of 7–8 is classified as ‘satisfied’ or ‘agree’
- a score of 9–10 is classified as ‘extremely satisfied’ or ‘strongly agree’.

Some responses have been further collapsed as follows:

- a score of 1–4 is classified as ‘dissatisfied’ or ‘disagree’
- a score of 5–6 is classified as ‘neither satisfied nor dissatisfied’ or ‘neither agree nor disagree’
- a score of 7–10 is classified as ‘satisfied’ or ‘agree’.

Reporting of scales

In this report, results are reported using the terms ‘satisfaction or agree’ (a score of 7–10) and ‘dissatisfaction or disagree’ (a score of 1–4). To further highlight results, ‘extremely satisfied or strongly agree’ (a score of 9–10) or ‘extremely dissatisfied or strongly disagree’ (a score of 1–2) are reported.

Weighting

To ensure the survey results are representative of the target population, they were adjusted, or weighted, using population information from the AASC program and the Australian Bureau of Statistics. This is done because the sample data on its own is biased.

In this research, results from the parents’ and children’s online surveys were weighted based on a standard population-weighting approach.
Significance testing

When differences are detected between statistics, it is important to test to determine if the perceived differences are statistically significant or just due to sampling variability. All comparisons made in this report have been tested by significance testing at the 95 per cent confidence level.

Sample sizes

The total samples of records used to produce estimates from each survey are detailed in the following tables. Note that the sample in cohort 3 was greater than that in previous cohorts because it is before the attrition due to the follow-up measure.

**CATI survey of parents**

<table>
<thead>
<tr>
<th></th>
<th>Cohort 1</th>
<th>Cohort 2</th>
<th>Cohort 3</th>
</tr>
</thead>
<tbody>
<tr>
<td>Parents of participating children baseline measure</td>
<td>930</td>
<td>936</td>
<td>936</td>
</tr>
<tr>
<td>Parents of participating children follow-up measure</td>
<td>664</td>
<td>635</td>
<td>598</td>
</tr>
<tr>
<td>Parents of non-participating children baseline measure</td>
<td>944</td>
<td>946</td>
<td>936</td>
</tr>
<tr>
<td>Parents of non-participating children follow-up measure</td>
<td>750</td>
<td>695</td>
<td>660</td>
</tr>
</tbody>
</table>

**Web-based surveys of stakeholders**

<table>
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<tr>
<th></th>
<th>2005</th>
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<th>2007</th>
</tr>
</thead>
<tbody>
<tr>
<td>School and OSHCS staff</td>
<td>542</td>
<td>1157</td>
<td>1790</td>
</tr>
<tr>
<td>Participating children</td>
<td>834</td>
<td>1678</td>
<td>1647</td>
</tr>
<tr>
<td>AASC program deliverers</td>
<td>374</td>
<td>1260</td>
<td>1074</td>
</tr>
<tr>
<td>AASC program staff</td>
<td>148</td>
<td>154</td>
<td>163</td>
</tr>
</tbody>
</table>