

## Impact case study (REF3)

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| <b>Institution:</b> University of Birmingham   |                                  |  |
| <b>Unit of Assessment:</b> 24 - Sport and Exercise Sciences, Leisure and Tourism   |                                  |  |
| <b>Title of case study:</b> Digital Youth: Changing policy and practice to improve physical activity education   |                                  |  |
| <b>Period when the underpinning research was undertaken:</b> 2015 - 2019   |                                  |  |
| <b>Details of staff conducting the underpinning research from the submitting unit:</b>   |                                  |  |
| <b>Name(s):</b>  | <b>Role(s) (e.g. job title):</b> | <b>Period(s) employed by submitting HEI:</b> |
| Dr Victoria Goodyear   | Senior Lecturer                  | 2015–present                                 |
| Professor Kathleen Armour  | Pro Vice Chancellor (Education)  | 2010–present                                 |
| Dr Kyraki Makopolou  | Lecturer                         | 2009–present                                 |
| Dr Mark Griffiths  | Lecturer                         | 2009–present                                 |
| <b>Period when the claimed impact occurred:</b> 2015 - 2020  |                                  |  |
| <b>Is this case study continued from a case study submitted in 2014?</b> No  |                                  |  |
| <b>1. Summary of the impact</b> (indicative maximum 100 words)   |                                  |  |
| <p><b>Changes to online safety legislation, education and teacher/coach professional training</b> have led to young people optimising the benefits of digital technologies and social media for physical activity and being protected from accessing unsafe digital material. We have <b>stimulated and informed policy change</b> which has led to the appointment of a national online regulator as well as an <b>overhaul of the national school curriculum</b> for Personal, Social and Health Education (PSHE). The impact is national, extending to over 7 million youth, c.4000 physical activity and health organisations and c.100,000 international teachers and coaches. Furthermore, working collaboratively with key organisations (e.g., ukactive, The Football Association), <b>professional standards and best practices have been revised</b> by the creation of new guidelines, professional training programmes and safeguarding practices.</p>   |                                  |  |
| <b>2. Underpinning research</b> (indicative maximum 500 words)   |                                  |  |
| <p>Our body of work has provided robust scientific evidence on the benefits and harms of the digital age for young people. <b>The original contribution is that the findings are, for the first time, grounded in evidence of youth perspectives.</b> The specific and novel focus was on co-producing new knowledge with youth to explain what and how they learn in digital health contexts, and, in turn, the offline educative support they require from relevant adults to maximise benefits and mitigate risks. Overall, the research enhances adults' abilities to make informed decisions about how to protect youth from health-related risks and maximise the benefits of the digital age.</p> <p>The main empirical research was undertaken between 2015–2019 in collaboration with: (i) <b>young people</b> (n=1691; age 13–18; across the UK) to examine the types of physical activity, diet/nutrition and body image information young people access and use from social media, apps and wearable devices, and why; (ii) <b>practitioners/professionals</b>, within a network of 35</p> |                                  |  |

international researchers, teachers, health and technology professionals, and policy makers to understand how relevant adults can provide support; (iii) 2 **national professional development providers** to influence the content and design of teacher and coach professional development.

### **Key Findings**

#### **Young People**

1. **The data revealed new evidence on how digital spaces educate young people:** 5 forms of digital content influenced young people's learning in digital spaces: peer content (e.g., selfies); reputable accounts (e.g., 'celebrities', government); recommended content (e.g., YouTube); commercial content and 'likes' influenced young people to engage with health information in different ways. [R1]
2. **In contrast to previous evidence and popular opinion, findings showed that young people are critical and highly self-aware users and generators of digital mediums:** Most young people could evaluate the types of content that were relevant to their needs and disregard content that had the potential to lead to harm. Young people were highly self-aware of their own vulnerabilities and recognised that digital engagement can magnify those vulnerabilities, posing additional health-related risks. The context in which social media is used is important, where peers, family members and schools are powerful influencers. [R2]

#### **Practitioners/Professionals**

3. **New evidence is provided on what support young people want and need in schools:** Personal, Social and Health Education (PSHE) and Physical Education (PE) were identified as primary contexts in which to provide media literacy education that helps young people to navigate age-appropriate content, and in a way that reaches all young people (from diverse contexts). [R3]
4. **Digital Technology Companies/Social Media were identified as essential for offering online support, and this is often lost in discourse about support and risk:** Social media/technology companies provide online education and include filters and restrictions to protect the safety of younger users. [R4]

#### **Professional Development Providers**

5. **Findings furthered the importance of focusing on inclusion in teacher/coach professional development:** Professional development provision should focus on **inclusive practices** to help teachers and coaches engage with the complexity and diversity of young people's digital needs. [R5]
6. **Findings from youth provided new understandings into safeguarding issues:** Safeguarding issues related to young people's engagement will ensure that young people receive appropriate support from adults. [R6]

### **3. References to the research** (indicative maximum of six references)

1. **Goodyear, V.A., Armour, K.M.,** and Wood, H. (2019) 'Young people and their engagement with health-related social media: new perspectives', *Sport, Education and Society*, 24(7): 673–688. DOI: 10.1080/13573322.2017.1423464
2. **Goodyear, V.A., Armour, K.M.,** and Wood, H. (2019) 'Young people learning about health: the role of apps and wearable devices', *Learning, Media and Technology*, 44(2): 193–210. DOI: 10.1080/17439884.2019.1539011

3. **Goodyear, V.A., and Armour, K.M.**, eds (2019) *Young People, Social Media and Health* (London: Routledge) Open Access. <https://www.routledge.com/Young-People-Social-Media-and-Health/Goodyear-Armour/p/book/9781138493957> ISBN: 9781138493957
4. **Goodyear, V.A., Armour, K.M.**, and Wood, H. (2018). 'The impact of social media on young people's health and wellbeing: evidence, guidelines and actions' (Birmingham, UK: University of Birmingham). DOI: 10.13140/RG.2.2.16487.75684
5. **Makopoulou, K.** (2018) 'An investigation into the complex process of facilitating effective professional learning: CPD tutors' practices under the microscope', *Physical Education and Sport Pedagogy*, 23(3): 250–266. DOI: 10.1080/17408989.2017.1406463
6. **Goodyear, V.A.** (2017) 'Social media, apps, and wearable technologies: navigating ethical dilemmas and procedures', *Qualitative Research in Sport, Exercise and Health*, 9(3): 285–302. DOI: 10.1080/2159676X.2017.1303790

#### 4. Details of the impact (indicative maximum 750 words)

Impacts on public policy has led to the regulation of social media companies in the UK

**Policy decisions and changes to legislation** have been informed by our research evidence which was important in drafting and developing the intermediate bill on online harms in the UK in 2020 [R4]. Our contribution to policy development was pivotal as **we were the only academics guiding parliamentarians with evidence co-produced with young people** and on youth perspectives on digital health learning.

Evidence provided by Goodyear to the Chief Medical Officer roundtable on screen time and social media use [R4] was explicitly reported in the preceding White Paper (E1, Box 11). Based on concerns about online safety for young people outlined in E1, the Online Harms Bill called for the appointment of Ofcom as an online regulator for social media. This directly reflects the oral and written evidence [R4] provided by Goodyear in the House of Commons to the All-Party Parliamentary Group (APPG) on Social Media and Young People's Mental Health and Wellbeing [E3, paras 17,18]. This led to the recommendation that social media companies establish a duty of care to include new filters and restrictions on content [E4].

This is a shift in policy debate and interest by government, and is significant because our research **highlighted to parliamentarians a new issue of concern**. Prior to this intervention, social media were regulated under the broad category of the Internet, and there was no regulator or legislation of the practices of social media companies in the UK related to online harms. The change has national reach where it impacts on 71% of young people in the UK (approx. 7.3 million age 10–19; Statista, 2018), who are reported to be active users of social media (Ofcom, 2019).

Impacts on learning by policy changes to the national school curriculum

In 2020, Personal, Social and Health Education (PSHE) was made a mandatory subject in 20,202 UK state schools. Furthermore, the content of the curriculum was changed to include a new focus on age-appropriate digital content, digital literacy, and online safety education — in relation to health, e.g., body image and social media (Department for Education (DfE) 2019). Both these **changes to educational policy were directly informed by our research** [R3] and follow recommendations made by Goodyear to the Science and Technology Committee (STC) in the form of written evidence [E5, para 21], and in responses made during oral evidence in the

House of Commons [E6, Q298–300; E4, paras 19, 145, 153]. Based on this evidence, the STC made the following recommendation:

We recommend that PSHE education be made mandatory for primary and secondary school children in the next parliamentary session and that the PSHE curriculum delivers an age-appropriate understanding of, and resilience towards, the harms and benefits of the digital world. [E4, para 149]

The APPG also made the recommendation that PSHE should be mandatory and include a focus on health-related harms and benefits of social media use [E2, para 5.1]. This statement echoes the oral evidence provided by Goodyear based on R1 to the House of Commons [E2, paras 3–5] and documented in a report from the APPG [E2, key finding, p. 5]. Finally, The Youth Select Committee recommended that media literacy for body image should be taught in PSHE [E7, paras 12, 13], again drawing on written evidence based on R2 provided by Goodyear and Armour.

Informed by the research evidence [R3], the **statutory guidelines have changed**, so that they now require that pupils should know about comparisons with others online and how using social media can lead to the development of an unrealistic body image (DfE, 2019, p. 36), how relationships on social media develop (DfE, 2019, p. 36), why age restrictions exist for content and platforms (DfE, 2019, p. 32) and the positive impacts of social media on relationships and health behaviours (DfE, 2019, p. 36). In addition, the need for teaching different content related to social media for primary and secondary school pupils was accepted (DfE, 2019). These changes reached, at a minimum, the 8 million pupils in state school education (DfE, 2019). Pre-2020, PSHE digital literacy and health education were not statutory requirements (PSHE Association, 2018).

#### Influencing professional standards by informing best practice

**Professional bodies have been influenced by our research and have developed best practices and guidelines** for informing and training teachers and coaches who have a responsibility for young people's health and wellbeing.

As an example, ukactive recently **published national guidelines** on healthy lifestyle behaviours, and our evidence [R1, R2] on social media and physical activity education were cited as an example of best practice [E8]. The guidelines were sent to 4,000 ukactive member organisations (i.e., physical activity organisations with a typical minimum membership of 100 individuals), which has subsequently **impacted on how technology is used pedagogically**. For example, the research evidence [R4] informed the development of a mobile gaming app by Rocket Impact — a technology start-up company — to encourage physical activity, which is now commercially available across the UK [E8].

Similarly, our evidence on inclusion [R5] was included in the design of **continuing professional development** with Activity Alliance who changed their professional training/development workshops for teachers to include a focus on inquiry in inclusion [E9]. This has impacted on c.14,500 UK teachers and c.340,000 young people. Guidelines have since been adopted by 30 workshop tutors, who deliver training to c.900 teachers per year; this impacts on c.50,000 young people.

Finally, safeguarding **practices have been changed** at The Football Association (FA) to address potential risks for the online safety of youth sport coaches. The FA stated:

[Griffiths' and Goodyear's] body of work [R6] helped us to [... be] more aware of the need to manage individuals who are over and under 16 in digital spaces [... and] define better working practices with regards to education and digital/online safeguarding principles as they relate to Football. [E10]

This change to practice and has impacted on the learning of over 6,000 international sport coaches from 155 different countries [E10]. The FA have since adopted these safeguarding principles for their online training platform that reaches 80,000 football coaches, with 30,000 working with 5–11 age groups [E10].

#### 5. Sources to corroborate the impact (indicative maximum of 10 references)

- E1. HM Government, [Online Harms White Paper April 2019](#) (CP 57)
- E2. Report from the All Party Parliamentary Group on Social Media and Young People's Mental Health and Wellbeing Inquiry: "Managing the Impact of Social Media on Young People's Mental Health and Wellbeing" – [#NewFilters to manage the impact of social media on young people's mental health and wellbeing](#), 2019
- E3. Written evidence submitted to All Party Parliamentary Group on Social Media and Young People's Mental Health and Wellbeing Inquiry
- E4. Science and Technology Committee, [Impact of social media and screen-use on young people's health](#), 31 January 2019, HC 822, 2017-19
- E5. Written evidence submitted to Science and Technology Committee *Impact of social media and screen-use on young people's health inquiry*, [submitted by the University of Birmingham \(SMH0098\)](#)
- E6. Transcript of oral evidence submitted to Science and Technology Committee *Impact of social media and screen-use on young people's health inquiry*, [questions 214 – 352](#) (including Goodyear)
- E7. British Youth Council – Youth Select Committee 2017, [A Body Confident Future](#)
- E8. Testimonial from ukactive
- E9. Testimonial from Activity Alliance [Dated 21 November 2019]
- E10. Testimonial from The Football Association [Dated 17 February 2020]