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Protocol

Professional and Personal Experience through Lifelong Learning and Regular Sport (PROPELLERS)—A Study Protocol

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Abstract: Physical inactivity (PI) and sedentary behaviours constitute a global health problem that has negative consequences for health and is also considered the fourth leading risk factor for global mortality. A European project named 'Professional and Personal Experience through Lifelong Learning and Regular Sport' aims to encourage voluntary participation in sporting activities to achieve its benefits on health. First, a report will be carried out on the effects of physical activity (PA) or inactivity on health, which is often linked to school failure, obesity, self-esteem, etc. The data will be obtained through a completely anonymous online sport and health questionnaire, addressed to all profiles. The data collected through this survey will serve as a basis for understanding the reality of Europeans in terms of quality of life, demographics, physical fitness, and other factors. It is also intended to design a handbook with recommendations for improving health holistically through PA. Finally, the goal is to translate this project into a teaching system for sports professionals, so that they can transfer this knowledge as educational methods to improve people's health, while adapting it to the particularities of each country, i.e., to provide these sports professionals with tools to train other people.

Keywords: daily behaviour; fitness; global health; learning; learning by doing; lifestyle; physical activity; physical inactivity; sedentarism; sociodemographic

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1. Introduction

Physical inactivity (PI) and sedentary behaviours constitute a global health problem that have negative consequences at different levels (physical, mental and social) [1,2]. It is also considered the fourth leading risk factor for global mortality [3]. Thus, the insufficient practice of physical activity (PA) (understood as any bodily movement produced by skeletal muscles that require energy expenditure) increases the risk of all-cause mortality, disability, and people predisposition to suffer different non-communicable diseases; such as obesity, hypertension or type 2 diabetes mellitus; among others [1,4,5]. Previous studies have reported that being physically active results is essential to physical, psychological/mental, social, and cognitive health for all populations [6–8]. Therefore, it is not surprising that PA constitutes one of the main challenges in the current society.

Focusing on Europe, one in five people takes little or no PA, with higher levels of inactivity in eastern countries (e.g., Bulgaria, Greece, Croatia or Poland). Concretely, in the European Union (EU), two-thirds of the adult population does not reach recommended levels of PA [9]. More specifically, Bulgaria, Greece and Portugal presents the highest levels of physical inactivity (68%), while the Nordic countries (Finland, Sweden and Denmark, shows the small proportions of respondents who never exercise or play sport (13–20%) [10].

1.1. European Regulations to Prevent Physical Inactivity

To address this problem, governments and main institutions have oriented and focused their efforts and policies to attend this issue and promote PA. Thus, the European Commission published the White Paper on Sport in 2007, being the first policy document that addressed sport on behalf of the EU [11]. Then, the Lisbon Treaty [12] introduced, in 2009 a specific article that gave the EU a new supporting competence for sport. In 2011, the European Commission adopted a Communication entitled "Developing the European Dimension in Sport" providing for specific actions regarding the societal role of sport, sport's economic dimension and the organization of sport [13]. Based on this Communication, the Council adopted a Resolution on an EU Work Plan for Sport 2011–2014, which further strengthened European cooperation on the sport by setting priorities for EU level work engaging the EU Member States and the Commission. In 2012, the Council adopted conclusions on promoting health-enhancing PA and on strengthening the evidence-based for sport policy-making [14]. Currently, the last efforts and actions directed to combat this issue through sport, as it is collected on The 2030 Agenda for Sustainable Development, signed in 2015 by the Heads of State and Government of the member countries of the United Nations, under the motto of "leaving no one behind", is the heir to the previous Millennium Development Goals [15]. However, most of these policies are usually focused on traditional sport (structured and competitive activities) rather than towards PA (less structured and recreative and without the need to involve competition), which could appeal to a larger percentage of the population [11–14].

1.2. Eurobarometer Survey Results

Despite the growing importance attached to the promotion of PA in the EU Member States, the Eurobarometer survey (focused on people aged over 14 years old) in 2009 already identified alarmingly high rates of PI in the EU and found that most Europeans (60%) never exercise or play sport. This trend continued on the Eurobarometer survey in 2014 [16], since 41% of Europeans exercise or play sport at least once a week, while 59% of EU citizens never or seldom do so; and the last Eurobarometer survey 2017 [10] that revealed that almost half of respondents (46%) never exercise or play sport; the 40% of Europeans practice at least once a week; and only the 7% do so regularly (at least five times per week). Thus, the levels of participation have not changed substantially since 2013. Hence, close to half of Europeans never practice exercise or play sport, confirming the continuation of the gradual increase of this proportion in recent years and since 2009.

Focusing on specific data of project-involved countries, the Eurobarometer 2017 [10] states that a large proportion of the respondents who never exercise or play sport can be found in Bulgaria (68%), Greece (68%) and Italy (62%). Moreover, Poland (56%), Croatia (56%) and Spain (46%) also show worrying proportions of the population that never exercise nor play sports. When comparing the results with the previous survey (Eurobarometer 2014) [16], there has been a moderate increase in the proportion of the population which never plays sport has increased in several partner countries (Croatia + 27 percentage points (pp); Greece + 9 pp; Poland + 4 pp; Italy + 2 pp; Spain + 2 pp). In contrast, the proportion of Bulgarians who never practice experienced a decrease (−10% pp) [10].

A link also appears between education and the frequency of exercise or sport done. The majority (73%) of people who left the education system by 15 years old or earlier say they never exercise or play sport. It falls to 52% of those who ended education at 16–19; and 31% of those who finished education at 20 years old or over. People in some socio-

professional categories are also more likely to exercise or play sport with some regularity: 63% of students do so, compared to 46% of managers, and 40% of other white collars people. Respondents who never exercise or play sport are more likely those not in paid work: 67% of house persons, 63% of retired respondents, and 49% of manual workers and unemployed people [10]. A clear interconnection seems to exist between the previous mentioned aspects since people who leaves before from the educational system appear to reduce their possibilities to get a remunerate or well-paid work; what may influence into their possibilities to participate in sports or activities that require a payment or the simple fact to buy or acquire the basic equipment needed to practice some activities. According to 2015 Eurostat data [17], Bulgaria (22%) is the country with the highest number of 'Not in Education, Employment or Training' people (NEETs) among the partner countries. Disability represents also a factor indicated by 13% of respondents as discouraging their active participation in Sport or PA in general. Based on these data, it seems that it is needed to focus on the promotion of voluntary participation in Sports activities among individuals who belong to disadvantaged categories, with a particular reference to those who are NEETs or affected by physical/mental disability. All abovementioned might indicate that the message about the importance of sport and PA for an individual's health and wellbeing has not yet got through to significant segments of the EU population.

1.3. Professional and Personal Experience through Lifelong Learning and Regular Sport (PROPELLERS) Project

A multi-partners collaboration under the frame of an ERASMUS PLUS European project entitled "Professional and Personal Experience through Lifelong Learning and Regular Sport" (PROPELLERS) emerges to act directly on this problem. The project involves eight partner organizations from six different EU countries (Poland, Italy, Bulgaria, Croatia, Greece, and Spain) that will carry out different activities to promote voluntary participation in Sports activities and awareness of the importance of health-enhancing physical activities following the holistic model of health among the general EU population, with a particular focus on disadvantaged categories (NEETs, people with disabilities . . .). The following of a holistic approach to health will allow to address the leading cause of physical inactivity rather than just the possible factors that can influence on this problem. Even more, knowing the impact of physical activity as one of the most cost-effective methods to improve overall health, including fitness and mental aspects. It considers everything and encourages people to take charge of their health and well-being, as well as, it is essential to prevent illnesses and find long term solutions for existing illnesses. The final of this holistic model idea is to appraise as a whole.

It is undeniable the educational role of sport and its potential to play an important role in the personal, social and professional development of individuals [18]. In this regard, project partners will give numerous opportunities for individuals to participate in and personally experience the abovementioned special functions of sport. On the one hand, this project includes partners with huge experience in Non-formal Education as we believe the methodology of NFE can combine relevant activities which are adapted to the needs of the learners and are aimed at achieving practical outcomes. On the other hand, it also aims to emphasize and promote the importance of the health-enhancing effects of sport and PA. It is well-proven that sport and physical exercise have a variety of positive effects on health [19]: helping people to stay physically fit, reducing body fat [20], controlling body weight [20], increasing stamina, strengthening bones [21] and improving balance and flexibility [22]. Furthermore, engaging in regular PA reduces coronary mortality [23], the likelihood of Type 2 Diabetes [24] and the probability to suffer Alzheimer's disease in older age [25]. Sport and physical exercises could also help to prevent other chronic diseases including cardiovascular disease [26], cancer [27], hypertension [28], and osteoporosis [29]. Moreover, regular PA could be helpful and beneficial when addressing several psychological disorders since previous studies have shown that moderate-intensity exercise and PA can positively

influence depression, anxiety, self-worth, self-esteem, and body image; as well as reduce stress, improve mood, and help to form general wellbeing [30–32].

The evidence base provided by these findings calls for deploying a sustainable policy effort to address the identified key challenges in a sustainable long-term perspective. For this reason, the main aim of the current project is to contribute and to act proactively to promote voluntary participation in Sports activities and raise awareness of the importance of health-enhancing physical activities through increased participation in and equal access to sport for all. Specifically, the project aims (1) to achieve an overview of sport and PA participation, physical and mental health across a variety of target groups (children, youngsters, adults, and disadvantaged individuals) that allow the design of strategies and politics for meeting the individual needs of each population and, (2) to educate about the im-portance of PA on health-enhancing from the holistic view of health. For that purpose, theoretical and practical information will be provided and experience on the bio-psycho-social model of health (an inter-disciplinary model that examines the interconnection be-tween biology, psychology, and socio-environmental factors and the role that these aspects play to human development, focusing on the dimension of Education by Sport to increase participation in physical activities and sport).

2. Materials and Methods

2.1. Project Design

The European project PROPELLERS involves 8 partner organizations from 6 different countries of the European Union (Poland, Italy, Bulgaria, Croatia, Greece, and Spain) that will operate and collaborate for 30 months. The study design is cross-sectional. There is no pre-test and post-test evaluation since all activities are open to the society of each country and are not focused on specific individuals. The project idea originated based on the Eurobarometer 2014; thus, the project collects several partner organizations into a Consortium that operate in the countries that showed the lowest level of participation in physical activities in the last year. The groups that are more frequently living a sedentary lifestyle were also examined. Data on PA from different waves of the Eurobarometer survey have been provided to show that: (a) most EU citizens never or seldom do exercise or play sport, and (b) that the proportion of the population which never plays sport has increased in all partner countries of the consortium, (c) an inverse link with education level has been shown among those who never or seldom do exercise or play sport.

We will follow the wheel theory of behaviour change, which consists in a model that seeks to capture both the factors that affect behaviours, and the different types of interventions that can be used to change behaviours [33]. The project has only an initial assessment of data from all countries on the results obtained in this initial assessment, interventions will be made, and materials will be designed. No post-intervention evaluation will be performed since these are interventions aimed at society as a whole and the materials will be openly available, so it is not a study on a previously selected sample. The project will be conducted by each of the entities that make up the Erasmus Plus project consortium in each country. Details on indicators and measures can be found in Tables 1–3. The collaborating entities will oversee conducting the foreseen activities, adapting them to the context and socio-cultural reality of each country. The project is aimed at the general population of the participating countries. The project will use three behaviour change techniques: (1) “Information about health consequences”, (2) “Persuasive communication”, and (3) “Habit formation”.

Table 1. Assessment of impact on partner organizations.

No.	Indicator	Benchmark	Measure
1	Development of internal capacities in the implementation of integrated approaches of Education Trough Sport and Education by Sport employing a holistic approach to health.	At least 1 activity of Sports education focused on fostering health and PA in a holistic perspective per target group implemented by each partner within 1 year from project completion.	Questionnaire circulated online among partner organizations after 1 year from project completion.
2	Increased involvement and proficiency in the implementation of awareness-raising events targeted at differentiated audience of participants.	At least 1 large-scale awareness-raising event involving a differentiated audience of targets implemented by each partner within 2 years from project completion.	Questionnaire circulated online among partner organizations after 2 years from project completion.
3	Improvements in Dissemination activities.	Increased proficiency in Dissemination activities as perceived by partners' staff.	Questionnaire of self-evaluation circulated among partners' staff after 1 year from project completion.
4	Improvement in project Management capacities.	Enhancement in the capacities of Project Management at the European/international levels as perceived by the leading staff of partner organizations.	Self-evaluation questionnaires circulated among partners' leading staff after 1 year from project completion.
5	Increased visibility of partner organizations.	At least 10% increase in contacts on partners' Websites and Social Media within 1-year form project completion.	Report on the online visibility of the organization to be delivered by each partner after 1 year from the completion of the project.
6	Use of project Outputs (Health SportEnBook and Comprehensive Booklet on Holistic Health and Education by Sport, PROPELLERS Web Platform).	At least 3 activities employing project Outputs at the different levels after 2 years from the end of the project.	Analysis of existing activities/initiatives at the national level detailed in a Report delivered by each partner after 2 years from the end of the project.
7	Development of international Network of partners.	At least 15 new NGOs and stakeholder organizations operating in the field of Sport and physical activities embedded in the network of each partner organization within 1 year from the end of the project.	Report being delivered by each partner after 1 year from project completion.

Table 2. Assessment of impact on participants.

No.	Indicator	Benchmark	Measure
1	Increased participation in Sport and improvement of PA levels in participants.	At least 70% of participants in project local awareness-raising activities improving their participation in Sport and PA levels.	Online questionnaires (differentiated per each target category) circulated among participants to participants in local awareness-raising activities after 1 year from the end of the project.
2	Increased level of holistic well-being in participants (local awareness-raising activities).	At least 70% of participants increased their level of physical, psychic, and social wellbeing.	Online questionnaires (differentiated per each target category) delivered to participants after 1 year from the end of the project.
3	Increased involvement of participants in educational programs delivered through Education by Sport, Education Through Sport and Non-Formal Education methodologies.	At least 40% of participants in project awareness-raising activities are participating or intentioned to take part in educational programs delivered through Education Through Sport, Education by Sport and/or Non-Formal Education.	Target-specific online questionnaires were delivered to participants after 1 year after the end of the project.

Table 3. Assessment of impact on target audiences.

No.	Indicator	Benchmark	Measure
1	Increased interest in the field of Sport, physical activities, and holistic wellbeing in target audiences.	Improvement in the levels of participation in sport and general health as well as PA at the level of target categories within the communities of the establishment of partner organizations.	Delivery of focus groups with 5 representatives per target category in each community of partners' establishment after 2 years from the end of the project.
2	Increased number of Trainers and Coaches operating in the field of Education by Sport employing Education Through Sport methodologies and Non-Formal Education Methods with target audiences.	At least 60% of respondents in focus groups with Education by Sports operators implemented by each partner at the national level employing Education through Sport and Non-Formal Education methods with target audience within 1 year from the end of the project.	Delivery of online questionnaire to respondents after 1 year from project completion.
3	Increased number of organizations operating in the fields of Sport, Sports Education and PA applying for funding in the Erasmus Plus program.	At least 60% of stakeholders involved in specific focus groups by each partner organization within 1 year from the end of the project having applied or being considering applying for funding in Erasmus Plus.	Delivery of focus groups to 5 stakeholders per country after 1 year from the end of the project.
4	Enhanced visibility and discussion on project topics.	at least 6 academic articles across Europe dealing with topics of Sport, PA and health referring to PROPELLERS and its methodologies within 1 year from project completion.	Analysis of existing academic literature in each partner country detailed in a report to be delivered by each partner after 1 year from project completion.
5	Development of new policy strategies and synergies at the local, regional, national, and European levels in the fields of Sport, health, education, training, and youth.	At least 1 integrated strategy among policies and bodies at the different levels addressing project topics.	Analysis of existing policies and best practices at the national level enshrined in a Report to be delivered by each partner after 2 years from project completion.
6	Increased knowledge, experience, and the use of the outcomes of the project by youth organizations, institutions, companies, NGOs, general population, policy-makers) on all levels.	at least 3 initiatives of stakeholder institutions employing project methods within 2 years from project completion, as assessed through evaluation questionnaires circulated by each partner among stakeholders	Analysis of existing initiatives and best practices at the national level enshrined in a Report to be delivered by each partner after 2 years from project completion (same report as I5).

The project will include several kinds of activities (Tables 1–3) at the local, national, and international level; to promote voluntary participation in Sports activities and awareness of the importance of health-enhancing physical activities following the holistic model of health among the general EU population, with a particular focus on disadvantaged categories (NEETs, people with disabilities). The main activities will include conferences, study visits, awareness-raising activities, dissemination and multiplier activities, training course and edition of a Report and a Digital Booklet. All of them under the concept of promoting synergies between the field of sport, health, education, training, and youth.

2.2. Participants

For a population of 166,596,703 million people (Poland: 38,350,000; Italy: 59,257,566; Bulgaria: 6,916,548; Croatia: 4,036,355; Greece: 10,682,547; Spain: 47,326,687), with a confidence level of 95%, a precision of 0.5%, a proportion of 5% and an expected loss ratio of 15%, 6167 people are needed. Participants will be involved in an online survey, which measures their level of participation in PA and sport, physical health status, mental health,

and wellbeing. Participants will answer the surveys before starting and at the end of the project activities. Based on Eurobarometer criteria to collect data, this project will also focus on people aged over 14 years old.

2.3. Measures

Before the implementation of local and national awareness-raising activities, an extensive assessment will be carried out through an online survey that assesses the level of participation in sport, physical health state, mental health, and well-being. All surveys will be translated and applied in the official language of every partner country to facilitate participants' understanding depending on their origin. The surveys will include the following:

Socio-demographic data. Participants will be asked about their age, income, disease time of diagnosis, educational level, marital status . . . (Supplementary Material File S1).

15-D questionnaire. This is a 15-dimensional questionnaire that includes five different degrees of response in every dimension to assess health-related quality of life (HRQoL) (Cronbach's alpha = 0.79) [34]. As a result, a final score ranges from 0 (worst possible quality of life) to 1 (best possible quality of life) is obtained from this questionnaire.

International Fitness Scale (IFIS). This instrument consists of a 5-item (overall physical fitness, muscular strength, cardio-respiratory fitness, speed-agility, and flexibility) questionnaire that assess self-perception physical fitness as a 5-Likert scale [35]. The response options are "very poor", "poor", "acceptable", "good" and "very good" (Kappa = 0.45).

The International Physical Activity Questionnaire (IPAQ) short version. This questionnaire provides internationally comparable data on health-related physical activity. The development of an international measure for physical activity began in Geneva in 1998 and was followed by extensive reliability and validity testing conducted in 12 countries [36]. The IPAQ has adequate psychometric properties in all countries included in the study. It proved to be a valid and reliable instrument [37].

2.4. Intellectual Outputs

The project execution will allow to design and develop the following intellectual outputs:

IO1. Health SportEnBook-Report will be conceived as an informational and programmatic input to the following activities of the project and as a general, all-encompassing resource to the wider audience of stakeholders.

IO2. Comprehensive Booklet on Holistic Health and Education by Sport Manual that will be an all-encompassing educational and informational resource targeted at final project beneficiaries.

IO3. Format TC "Holistic Health and Education by Sport"- Educational Methods, an educational Format adaptable to the needs and context-specific characteristics of operators working in the field of Education by Sport, with the target audiences representing the project focus group.

IO4. PROPELLERS Web Platform is an open-access architecture of disclosure of project outcomes and results towards the wide audience of targets and stakeholders, within and beyond partner countries.

2.5. Assessment Mechanisms and Indicators

Specific indicators are set to explore the achievement of expected impact targets, to be further developed in the project Evaluation plan (Tables 1–3).

2.6. Project Activities

The proposal follows a complete, well-organized, and structured project plan, where the improvements of skills and competencies by professionals who are related to the field of health, sport, education, or youth sector are aimed. A high-quality strategy for approaching the general population is also created. In the first year, participation in

physical activities and sport by educational and leisure activities will be promoted and the awareness-raising activities that focus on the promotion of the health-enhancing effects of PA will be conducted in the second year. The schedule has been chosen to maximize the impact that activities can achieve and will be divided into four different phases: Preparation, Implementation, Dissemination and Evaluation. Table 4 presents the detailed schedule planned and its structure:

Table 4. Project activities and target groups.

No.	Activity	Target Group(s)
1	Preparatory activities (Poland)	Participants of Kick-off meeting, sport managers, NGO-leaders, professors
2	Kick-off meeting (Poland)	Managers from each partner organizations
3	Elaboration IO1: Health SportEnBook	Sport managers, directors of educational institutions, NGO-leaders, youth workers, teachers, educators, youth leaders, youth, Adult targets, disadvantaged targets and public, Researchers and Trainers from each partner organization
4	Transnational Partners' Meeting in Sofia	Researchers and Trainers from all partner organizations
5	Conference in Bulgaria (Sofia)	Sport managers, directors of educational institutions, NGO-leaders, youth workers, teachers, educators, youth leaders, youth, Adult targets, disadvantaged targets and public
6	Implementation of local and national awareness-raising activities (locally by all partners)	Sport managers, directors of educational institutions, NGO-leaders, youth workers, teachers, educators, youth leaders, youth, Adult targets, disadvantaged targets, and general public
7	Intensive dissemination activities (locally by all partners)	The general population in all partner countries
8	Transnational Partners' Meeting in Greece (Volos)	Researchers and Trainers from each partner organization
9	Conference on health bio-psycho-social model (Greece)	Sport managers, directors of educational institutions, NGO-leaders, professors, Trainers, and Researchers from each partner organization
10	Elaboration IO 2: Comprehensive Booklet on Holistic Health and Education by Sport	Trainers, Researchers, and administrators from each partner organization
11	Elaboration IO 3: Format TC "Holistic Health and Education by Sport"	Teachers, educators, youth workers, social workers, coaches, trainers
12	Implementation of local and national awareness-raising activities (in all partner countries)	Sport managers, directors of educational institutions, NGO-leaders, youth workers, teachers, educators, youth leaders, youth, Adult targets, disadvantaged targets, and general public
13	Elaboration IO 4: PROPELLERS Web Platform	Sport managers, directors of educational institutions, NGO-leaders, youth workers, teachers, educators, youth leaders, youth, Adult targets, disadvantaged targets, and general public
14	Assessments. Monitoring the impact of the project (locally by all partners)	The sample (1000 participants per country) who was assessed in output 1.

Table 4. *Cont.*

No.	Activity	Target Group(s)
15	Evaluation of the impact and outcomes of the project. Intensive dissemination and exploitation activities (locally by all partners)	General population
16	PROPELLERS National Events (Poland, Spain, Croatia, and Greece)	Sport managers, directors of educational institutions, NGO-leaders, youth workers, teachers, educators, youth leaders, youth, Adult targets, disadvantaged targets, and general public
17	Final Evaluation Meeting in Italy (Sassari)	Managers and Administrative staff from each partner organization
18	PROPELLERS International Event (Sassari)	Sport managers, directors of educational institutions, NGO-leaders, youth workers, teachers, educators, youth leaders, youth, Adult targets, disadvantaged targets, and general public
19	Evaluation and Reporting	All Partners

2.7. Statistical Analysis

Statistical analyses will be carried out using IBM SPSS Statistics software, version 25 (Armonk, NY, USA). All information collected was tabulated in a database specifically designed for this project. The statistical analysis of that data will be the basis for the comparison of the chosen indicators for the project. They will be assessed and examined at the end of the project cycle again, on the same sample. A descriptive analysis will be carried out based on the data obtained through the survey. Normality and homogeneity of data were checked applying Kolmogorov-Smirnov and Levene's test, respectively. Then, the Chi-square Test will be applied to analyse differences in the different indicators for the total sample and based on country, educational attainment, disability, and employment. The alpha level will be set at $p \leq 0.05$.

3. Discussion

The PROPELLERS European project and its activities will contribute to increased participation in sport and physical activities, which in a long term, can bring important changes in the health status of the individuals as well. The partners' experience and the developed network around the project suppose a guarantee to reach a wide target group internationally and unite the knowledge, experience, practice and ideas among scientific professionals, health professionals, sport managers, coaches, trainers, NGO leaders, youth leaders, youth workers, social workers, teachers, educators, youth, adults, and disadvantaged groups. Moreover, the several activities and intensive presence on different forums aim to reach decision-makers who can make further steps to promote participation in sport and physical activities which is our goal.

This project proposes the implementation and cooperation in several activities that combine sport and learning in an only way, providing an excellent opportunity to learn through very enjoyable, highly emotional, and active-based participation and involvement activities. Furthermore, it is targeted to a very wide population throughout several European countries which showed a low level of participation in physical activities in the last years. Thus, this project is committed to promoting Education through Sport very extensively and intensively in educational institutions, youth organizations, sports organizations and in the general population with a special focus on individuals belonging to disadvantaged categories ('Not in Education, Employment or Training' people (NEETs) and people with disabilities . . .).

A specific element of innovation is integrated into PROPELLERS all-encompassing approach to the value of Sport and PA, in line with the approach of the "bio-psycho-

social" model of health, addressing the underexplored connection between the dimensions of physical, mental, and social enhancement of an individual's life brought about by regular physical exercise. The "byo-psycho-social" model of health is connected to the methodology of "Education by Sport" which the Consortium understands as the health-enhancing dimension of Sport/PA practice which, beyond its direct health-enhancing effects, fosters the development of regular health-enhancing behaviours thereby boosting physical and psychological wellbeing in a long-term perspective. Thus, by organizing a Conference and developing a Format Training Course with the focus on the holistic health concept and bio-psycho-social model of health, this project aims to bring great changes in the connection view of the between sport and health by the intensive dissemination activities after these programs. This purpose is also supported by the creation of the Health SportEnBook report and the Comprehensive Booklet on Holistic Health and Education by Sport which will present the most appropriate and adequate information as well as methodologies about the topic and will be available and downloadable for anyone for further uses.

Additionally, the European approach of the project supposes an added value because the different fields of expertise of partners are connected through a unique partnership which can bring highly valuable knowledge transfer for their present and future work and support them to reach their goals and realize their mission. Likewise, the culturally and educationally different background which every partner bring into the partnership is a great opportunity to learn and share and acquire a different approach and perspective throughout the several phases of the project management process. Communication among the partners contributes to a better understanding of international values. Moreover, the selected partner organizations have different profiles and can greatly benefit from working together.

At the organizational level, the involved partner organizations can also explore differences and identify similarities among each other's working system and structure, which has the potential to move them towards better functioning, better practices, and policies. Thus, an expected impact of the project is to increase the quality and quantity of participation in sport and physical activities and to inspire further sport and healthy lifestyle promotion activities on the European level. By involving internationally active organizations in the partnership, it can be maximized the publicity and dissemination of results and products obtained through their existing network and affiliations. Moreover, the special inter-sectorial cooperation of the partnership can be a good example to other organizations and promote similar initiations in several Program countries.

In summary, it is expected that PROPELLERS project impact at different levels. On the participating institutions, this project might contribute to (1) increase knowledge on the interrelated fields of sport, PA, holistic health, education, training, targets' needs; (2) enhance knowledge and experience on implementing awareness-raising events, knowledge and practice in dissemination activities (3) improve competences in European project management; (4) increase knowledge on best practices on reaching a target group; (5) obtain a higher level of organizational and managerial skills and competences through the responsibilities and tasks of the organization; and (6) show the experience in working in a multicultural environment, with a multilateral perspective. Likewise, on the participants of the activities, it could increase: (1) knowledge on the importance of health-enhancing effects of physical activities and sports; (2) knowledge on the interconnectedness of the multiple aspects of health (view and understanding of holistic health concept); (3) knowledge in the fields of Education through Sport and Education by Sport; and (4) the experience in non-formal educational methods. Moreover, it offers the opportunity to participate in a higher number of organized physical activities and contributes to enhancing intercultural awareness and a greater understanding of social, linguistic, and cultural diversity.

In the same way that PROPELLERS, there are other European Erasmus Plus initiatives addressed to tackle the problem of physical inactivity in the overall and different specific populations. On the one hand, the European Union Physical Activity and Sport Monitoring

System project (EUPASMOS) pretend to implement a harmonized physical activity and sport monitoring system, developing an integrated and shared methodological process that will allow to collect valid and reliable physical activity and sport participation data and establish comparisons across EU Member States. On the other hand, the Physical Activity Serving Society Project (PASS Project) aims to propose political and strategic actions to promote physical activity in Europe focusing on the costs and consequences of the physical activity crisis in Europe and raising awareness of the physical inactivity crisis to decision-makers. The Promoting Active Cities Throughout Europe (PACTE) project is also an Erasmus Plus initiative focuses on physical activity rates across Europe from a municipal perspective and on the creation of Active Cities. It highlights the important of unveiled physical activity policies at the municipal level as an area deserving much closer consideration since it is remaining a sphere overlooked by physical activity researchers; despite local administration propose more impactful physical activity policies than national ones. Therefore, these projects, just as PROPELLERS, will serve as support for Member States, the European Commission, the WHO and other relevant organizations in the design, promotion, implementation and surveillance of effective, evidence-based HEPA and sport policies and strategies across Europe at different governance levels.

Some limitations should be considered in this project. A convenience sample approach is used due to the difficulties to obtain a representative sample from every country that will take part in the project, but aiming the ensure of collecting representative data from all aimed population groups in every country. The covered of only six countries from all Europe, although it is not easy, also suppose a limitation because the recompiled data and information could be only applied to these countries or another with similar environment and context. Thus, future studies should be addressed to obtain information in a similar way to know the situation and needs of the different kind of populations in the specific environment and context of each country or region and being able adapt the possible strategies and politics based on it. Moreover, the initial implementation of the project has been delayed due to the COVID-19 pandemic.

4. Conclusions

The most expected general impact of the PROPELLERS project expects to increase participation in sport and physical activities, which can contribute to the individuals' better physical, mental, and social health state. Thus, the partnership around PROPELLERS aims to reach an effect on several and all kinds of people, practices, organizations, and systems at local, regional, national, and international levels. This effect could be summarized in the following points:

(1) Better understanding and wider knowledge on the holistic health concept, the connection of health and physical activities, and on the added value of sport with professional, personal, and social development of individuals;

(2) Better understanding and wider use of non-formal educational methods and the knowledge about the funding opportunities provided by the Erasmus + Program;

(3) Generate and facilitate further discussion of the topics addressed by the project;

(4) Encourage new initiations, network, and innovative synergies in the field of sport, health, education, training and youth among local, regional, national, and international policies and bodies;

(5) Increase the knowledge, experience, and the use of project outcomes towards several target groups (youth organizations, institutions, schools, companies, NGOs, general population, policy-makers) at all levels.

If the expected impact is achieved, the results and information obtained depart from this project could help in the design of future strategies and adapted politics, as well as, the proposal of activities to get a more physically active society, individualising by every population's condition needs.

Supplementary Materials: The following supporting information can be downloaded at: https://www.mdpi.com/article/10.3390/su142114161/s1. Supplementary Materials File S1, Sociodemographic questionnaire and sports behaviours survey.

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References

1. WHO. Noncommunicable Diseases Country Profiles 2018. 2018. Available online: https://pesquisa.bvsalud.org/portal/resource/pt/who-274512 (accessed on 1 August 2021).
2. Nielsen, H.D. Increased Physical Activity in a Public Health Perspective. In *Physical Therapy Effectiveness*; IntechOpen: London, UK, 2019.
3. WHO. *Global Recommendations on Physical Activity for Health*; World Health Organization: Geneva, Switzerland, 2010.
4. Peterson, M.J.; Giuliani, C.; Morey, M.C.; Pieper, C.F.; Evenson, K.R.; Mercer, V.; Cohen, H.J.; Visser, M.; Brach, J.S.; Kritchevsky, S.B. Physical activity as a preventative factor for frailty: The health, aging, and body composition study. *J. Gerontol.* **2009**, *64*, 61–68. [CrossRef] [PubMed]
5. Booth, F.W.; Roberts, C.K.; Laye, M.J. Lack of exercise is a major cause of chronic diseases. *Compr. Physiol.* **2011**, *2*, 1143–1211. [CrossRef]
6. Tremblay, M.S.; Kho, M.E.; Tricco, A.C.; Duggan, M. Process description and evaluation of Canadian Physical Activity Guidelines development. *Int. J. Behav. Nutr. Phys. Act.* **2010**, *7*, 42. [CrossRef] [PubMed]
7. Janssen, I.; LeBlanc, A.G. Systematic review of the health benefits of physical activity and fitness in school-aged children and youth. *Int. J. Behav. Nutr. Phys. Act.* **2010**, *7*, 40. [CrossRef] [PubMed]
8. Bouchard, C.; Blair, S.N.; Haskell, W.L. *Physical Activity and Health*; Human Kinetics: Champaign, IL, USA, 2012.
9. WHO. Physical Activity Factsheets for the 28 European Union Member States of the Who European Region. 2020. Available online: https://www.who.int/europe/publications/i/item/EUR-RC71-R14 (accessed on 1 August 2021).
10. European Commission. Special Eurobarometer 472 on Sport and Physical Activity. 2017. Available online: https://www.google.com.hk/url?sa=t&rct=j&q=&esrc=s&source=web&cd=&cad=rja&uact=8&ved=2ahUKEwi6zbPz64b7AhXQSWwGHSR9D4MQFnoECAkQAQ&url=https%3A%2F%2Fwww.europarc.org%2Fwp-content%2Fuploads%2F2020%2F01%2FSpecial-Eurobarometer-472-Sports-and-physical-activity.pdf&usg=AOvVaw02yCIFKNtFFd-0zJwpTVaQ (accessed on 1 August 2021).
11. European Commission. White Paper on Sport (COM (2007) 391 Final). *Bruss. Eur. Comm.* **2007**. Available online: https://www.google.com.hk/url?sa=t&rct=j&q=&esrc=s&source=web&cd=&cad=rja&uact=8&ved=2ahUKEwis9e_F64b7AhUPS2wGHQC5B3QQFnoECA0QAQ&url=https%3A%2F%2Feur-lex.europa.eu%2Flegal-content%2FEN%2FTXT%2FPDF%2F%3Furi%3DCELEX%3A52007DC0391%26rid%3D1&usg=AOvVaw3sjge7BavSu74xHxrZjKCB (accessed on 1 August 2021).
12. Parrish, R.; Garcia, B.G.; Miettinen, S.; Siekmann, R. The Lisbon Treaty and European Union Sports Policy. 2010. Available online: https://www.google.com.hk/url?sa=t&rct=j&q=&esrc=s&source=web&cd=&cad=rja&uact=8&ved=2ahUKEwj_noCl64b7AhVSTGwGHSJyDp4QFnoECAwQAQ&url=https%3A%2F%2Fwww.europarl.europa.eu%2Fmeetdocs%2F2009_2014%2Fdocuments%2Fcult%2Fdv%2Fesstudyeusportspolicy%2Fesstudyeusportspolicyen.pdf&usg=AOvVaw01f9HdxPQiWHPywg73QQHg (accessed on 1 August 2021).
13. European Commission. Communication: Developing the European Dimension in Sport. 2011. Available online: https://www.google.com.hk/url?sa=t&rct=j&q=&esrc=s&source=web&cd=&cad=rja&uact=8&ved=2ahUKEwipiauH64b7AhWfSGwGHWVTBcgQFnoECAwQAQ&url=https%3A%2F%2Feur-lex.europa.eu%2FLexUriServ%2FLexUriServ.do%3Furi%3DCOM%3A2011%3A0012%3AFIN%3Aen%3APDF&usg=AOvVaw0Jkjx1uAWbTAkeKqHHAOdL (accessed on 1 August 2021).
14. Council, E. Conclusions of the Council and of the Representatives of the Governments of the Member States, meeting within the Council, on the participation and social inclusion of young people with emphasis on those with a migrant background. In Proceedings of the 3201st Education, Youth, Culture and Sport Council Meeting, Brussels, Belgium, 26–27 November 2012.

15. Domínguez Martín, T.; Garrido Pascal, P.; Vernet Perna, B. Deporte, integridad y desarrollo sostenible: La importancia de la integridad en el Deporte en la Agenda 2030. *Encuentros Multidiscip.* **2019**, *63*, 1–9.
16. European Commission. Special Eurobarometer 412 on Sport and Physical Activity. *Sleep Breath* **2014**, *18*, 133–136.
17. European Commission. *Education and Training Monitor 2018. Country Analysis*; Publications Office of the European Union: Luxembourg, 2018.
18. Opstoel, K.; Chapelle, L.; Prins, F.J.; De Meester, A.; Haerens, L.; van Tartwijk, J.; De Martelaer, K. Personal and social development in physical education and sports: A review study. *Eur. Phys. Educ.* **2020**, *26*, 797–813. [CrossRef]
19. Warburton, D.E.; Bredin, S.S. Health benefits of physical activity: A systematic review of current systematic reviews. *Curr. Opin. Cardiol.* **2017**, *32*, 541–556. [CrossRef]
20. Lee, H.S.; Lee, J. Effects of Exercise Interventions on Weight, Body Mass Index, Lean Body Mass, and Accumulated Visceral Fat in Overweight and Obese Individuals: A Systematic Review and Meta-Analysis of Randomized Controlled Trials. *Int. J. Environ. Res. Public. Health* **2021**, *18*, 2635. [CrossRef]
21. Marini, S.; Barone, G.; Masini, A.; Dallolio, L.; Bragonzoni, L.; Longobucco, Y.; Maffei, F. The effect of physical activity on bone biomarkers in people with osteoporosis: A systematic review. *Front. Endocrinol.* **2020**, *11*, 837. [CrossRef]
22. Seco, J.; Abecia, L.C.; Echevarría, E.; Barbero, I.; Torres-Unda, J.; Rodriguez, V.; Calvo, J.I. A long-term physical activity training program increases strength and flexibility, and improves balance in older adults. *Rehabil. Nurs.* **2013**, *38*, 37–47. [CrossRef] [PubMed]
23. Stewart, R.A.; Held, C.; Hadziosmanovic, N.; Armstrong, P.W.; Cannon, C.P.; Granger, C.B.; Hagström, E.; Hochman, J.S.; Koenig, W.; Lonn, E. Physical activity and mortality in patients with stable coronary heart disease. *J. Am. Coll. Cardiol.* **2017**, *70*, 1689–1700. [CrossRef] [PubMed]
24. Balducci, S.; Sacchetti, M.; Haxhi, J.; Orlando, G.; D'Errico, V.; Fallucca, S.; Menini, S.; Pugliese, G. Physical exercise as therapy for type 2 diabetes mellitus. *Diabetes Metab. Res. Rev.* **2014**, *30*, 13–23. [CrossRef] [PubMed]
25. Tokgöz, S.; Claassen, J.A. Exercise as Potential Therapeutic Target to Modulate Alzheimer's Disease Pathology in APOE ε4 Carriers: A Systematic Review. *Cardiol. Ther.* **2021**, *10*, 67–88. [CrossRef]
26. Tian, D.; Meng, J. Exercise for prevention and relief of cardiovascular disease: Prognoses, mechanisms, and approaches. *Oxid Med. Cell. Longev.* **2019**, *2019*, 3756750. [CrossRef]
27. Adraskela, K.; Veisaki, E.; Koutsilieris, M.; Philippou, A. Physical exercise positively influences breast cancer evolution. *Clin. Breast Cancer* **2017**, *17*, 408–417. [CrossRef]
28. Baruki, S.B.; de Lima Montebello, M.I.; Pazzianotto-Forti, E.M. Physical training in outdoor fitness gym improves blood pressure, physical fitness and quality of life of hypertensive patients: Randomized controlled trial. *J. Sports Med. Phys. Fit.* **2021**, *62*, 997–1005. [CrossRef]
29. Alonso Pérez, J.L.; Martín Pérez, S.; Battaglino, A.; Villafañe, J.H.; Alonso-Sal, A.; Sánchez Romero, E.A. An Up-Date of the Muscle Strengthening Exercise Effectiveness in Postmenopausal Women with Osteoporosis: A Qualitative Systematic Review. *J. Clin. Med.* **2021**, *10*, 2229. [CrossRef]
30. Aguiñaga, S.; Ehlers, D.K.; Salerno, E.A.; Fanning, J.; Motl, R.W.; McAuley, E. Home-based physical activity program improves depression and anxiety in older adults. *J. Phys. Act. Health* **2018**, *15*, 692–696. [CrossRef]
31. Mandolesi, L.; Polverino, A.; Montuori, S.; Foti, F.; Ferraioli, G.; Sorrentino, P.; Sorrentino, G. Effects of physical exercise on cognitive functioning and wellbeing: Biological and psychological benefits. *Front. Psychol.* **2018**, *9*, 509. [CrossRef]
32. Klaperski, S.; Koch, E.; Hewel, D.; Schempp, A.; Müller, J. Optimizing mental health benefits of exercise: The influence of the exercise environment on acute stress levels and wellbeing. *Ment. Health Prev.* **2019**, *15*, 200173. [CrossRef]
33. Michie, S.; Atkins, L.; West, R. The behaviour change wheel. In *A Guide to Designing Interventions*, 1st ed.; Silverback Publishing: Great Britain, UK, 2014; pp. 1003–1010.
34. Sintonen, H. The 15D instrument of health-related quality of life: Properties and applications. *Ann. Med.* **2001**, *33*, 328–336. [CrossRef] [PubMed]
35. Ortega, F.B.; Ruiz, J.R.; Espana-Romero, V.; Vicente-Rodriguez, G.; Martínez-Gómez, D.; Manios, Y.; Béghin, L.; Molnar, D.; Widhalm, K.; Moreno, L.A. The International Fitness Scale (IFIS): Usefulness of self-reported fitness in youth. *Int. J. Epidemiol.* **2011**, *40*, 701–711. [CrossRef]
36. Craig, C.L.; Marshall, A.L.; Sjöström, M.; Bauman, A.E.; Booth, M.L.; Ainsworth, B.E.; Pratt, M.; Ekelund, U.; Yngve, A.; Sallis, J.F.; et al. International physical activity questionnaire: 12-country reliability and validity. *Med. Sci. Sports Exerc.* **2003**, *35*, 1381–1395. [CrossRef] [PubMed]
37. Lee, P.H.; Macfarlane, D.J.; Lam, T.H.; Stewart, S.M. Validity of the International Physical Activity Questionnaire Short Form (IPAQ-SF): A systematic review. *Int. J. Behav. Nutr. Phys. Act.* **2011**, *8*, 115. [CrossRef]