



Investing in physical activity and nutrition:

A scoping review of the social value of physical activity and nutrition interventions

Purpose:

The Policy and International Health Directorate, a World Health Organization Collaborating Centre on Investment for Health and Well-being (WHO CC) at Public Health Wales has conducted a series of systematic scoping reviews of peer-reviewed and grey literature to collate evidence on the **social value of physical activity and nutrition interventions**.

Target audience:

public health professionals, public policy makers and commissioners, public finance officers and academia.

What is social value?

Social value is the “quantification of the relative importance that people place on the changes they experience in their lives” [1]. Social Value can be embedded in:



Procurement and commissioning



Investment and resource/budget prioritisation



Assessment and evaluation

Why is social value important?

- There is growing recognition of the need to expand the traditional ‘value for money’ approach and find ways to identify and measure organisational wider social, economic and environmental outcomes, impacts and value.
- International challenges such as COVID-19 have exposed the consequences of under-resourcing of public health and highlighted the clear interdependence between population health, societal well-being, and the economy.
- The case for targeted investment in people’s well-being, health equity and prevention is stronger than ever.
- There is an opportunity to embed social, economic and environmental outcomes into decision-making and budget prioritisation.

How do we measure social value?

Social Return on Investment (SROI) is an outcomes-based measurement framework of principles that can support organisations to understand, capture and quantify the social, environmental and economic value they are creating.



Aim:

This evidence brief outlines a **scoping review of the social value of interventions which aim to increase levels of physical activity and improve levels of nutrition [2]**. The Krlev et al [3] quality assessment criteria was used to assess the quality of all included studies.

[1] Welsh Government (2019). [Valuing our health](#).

[2] Stielke et al. (2024). [The Social Return on investment of physical activity and nutrition interventions – a scoping review](#).

[3] Krlev et al. (2013). [Social Return on Investment \(SROI\): State-of-the-Art and Perspectives, A Meta-Analysis of practice in Social Return on Investment \(SROI\) studies published 2002-2012](#).

Background and context:

There has been a major epidemiological transition from communicable to non-communicable diseases (NCDs) in societies around the world. NCDs are associated with numerous negative health outcomes, including but not limited to; an elevation of cardiovascular diseases (such as coronary heart diseases and strokes), type 2 diabetes, mental illness and certain types of cancers.

In total, 217.6 million diabetes cases and 307 million hypertension cases are attributable to obesity globally [4].



Negative health outcomes associated with excess weight, resulting in overweight and obesity, are leading to significant direct and indirect economic impacts for health systems worldwide as service demand rises.

The economic burden on countries is substantial, with data from 51 countries indicating that around **26% of total health spending is attributable to NCDs** [5].



By 2050, the NHS cost attributable to rates of obesity and overweight in the population are forecasted to reach **£9.7 billion** [6].



Interventions have been developed and implemented which aim to address excess weight and their associated negative health outcomes, which in turn would relieve pressures on health systems resources. Interventions tend to focus on diet, physical activity and behaviour change [7].



In the case of physical activity interventions, most evaluations focus on the health and nutrition benefits [8].



Health benefits



Nutrition benefits

However, societies that are more physically active and use more active travel options generate additional value, including reduced use of fossil fuels, cleaner air and less congested and safer roads [9].



Reduced use of fossil fuels



Cleaner air



Reduced congestion

[4] World Obesity (2020). [Obesity: missing the 2025 global targets. Trends, Cost, Country Reports.](#)

[5] World Health Organization (2021). [Global expenditure on health: Public spending on the rise?](#)

[6] Public Health England (2017). [Health matters: obesity and the food environment.](#)

[7] Gómez Puente, J. M., & Martínez-Marcos, M. (2018). [Overweight and obesity: effectiveness of interventions in adults.](#)

[8] Social Value UK (n.d.). [What is social value?](#)

[9] World Health Organization (2018). [Global action plan on physical activity 2018–2030: more active people for a healthier world.](#)

Key findings:

From the physical activity and nutrition studies identified, the reported SROI ratios varied from **£0.01 to £22.37** of value created per £1 invested.

- Overall, **21 studies** (with 81% identified as high quality) were included in this review.
- 4 were identified from the academic literature and 17 from grey literature sources.
- The majority of reports included explored **physical activity** interventions.
- This systematic scoping review suggests that physical activity and/or nutrition interventions have **a positive social value and therefore wider value** for both direct (e.g. individuals aiming to improve their health) and indirect beneficiaries (e.g. GP practices decreased demand on services).
- These can range **from improved educational performance, reduced social isolation, improved resilience and self-esteem.**
- It is increasingly important that the holistic impact of nutrition and physical activity interventions and programmes is understood, so that interventions that have the greatest value to people can be developed and implemented.

Examples*:

Healthy Living Wessex

This 2012 study [10] evaluated Healthy Living Wessex's Activate Your Life project, which offers Lifestyle Mentoring for individuals and Family Weight Management for families, delivering personalized weight management support. A total of £209,964 investment created:



£1,100,216
Social Value

- Unit cost (e.g., NHS) savings: **£248,753**
- Improved mental health/well-being: **£573,532**
- Improved social interaction: **£27,820**
- Improved diet: **£98,740**
- Improved physical activity and health: **£151,371**

The reported SROI was **£5.42 of value created per £1 invested.**

Glasgow Health Walks

This 2011 intervention in Scotland [11] aimed to evaluate a walking project. A total of £12,750 investment created:



£74,748.32
Social Value

- Unit cost (e.g., NHS) savings: **£7,559**
- Improved family relationships: **£4,256**
- Improved mental health: **£50,723**
- Improved educational attainment: **£2,512**
- Improved physical health: **£7,066**
- Economic benefits: **£2,632**

The reported SROI was around **£9.00 of value created per £1 invested.**

*Please note examples are not adjusted for inflation and are not meant for comparison.

[10] Jones. (2012). [The Social Value of a Community-based Health Project Healthy Living Wessex Social Return on Investment Report.](#)

[11] Carrick K. (2012). [Glasgow health walks social return on investment analysis: 1st April 2011 to 31st.](#)

Gloucestershire Active Together

This 2017 intervention in England [12] aimed to increase participation in sport and physical activity across Gloucestershire. A total of £2,300,306 investment created:



**£17,002,783
Social Value**

- Improved access to services: **£1,955,634**
- Improved relationships: **£3,283,346**
- Improved educational outcomes: **£751,329**
- Improved mental health and well-being: **£8,211,200**
- Environmental outcomes: **£43,457**
- Improved physical health: **£489,196**
- Unit cost (NHS) savings: **£2,268,622**

The reported SROI was **£7.25 of value created per £1 invested.**

Corporate Social Responsibility

This 2022 intervention in Japan [13] provided a programme where the coaches of professional soccer teams delivered a free 30-minute soccer or physical activity lesson to local school children. A total of £10,134 was created:



**£54,159
Social Value****

- Improved educational outcomes: **£3,341**
- Improved physical health: **£39,907**
- Improved relationships: **£4,667**
- Government resource savings (not health service): **£6,244**

The reported SROI was **£5.30 of value created per £1 invested.**

[12] Baker et al. (2017). [Gloucestershire Active Together Evaluation: Final Report](#).

[13] Oshimi et al. (2022). [Calculating the Social Return on Investment of a Japanese Professional Soccer Team's Corporate Social Responsibility Activities](#).

**The social value figures from source [13] have been converted from US Dollars into GBP using the correct exchange rate for the study's price year (2021).

The Policy and International Health Directorate, WHO CC is creating a diverse and innovative portfolio of products and tools to support the case for sustainable, evidence and value based investment in public health and health equity:

Launching a Social Value Database and Simulator (SVDS) for Public Health (2022): a first of its kind innovative tool, enabling the storage, interactive use and manipulation of health economics (SROI) evidence and data to support decision-making, budget prioritisation and programme improvement.



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ISBN 978-1-83766-276-0 © 2025 Public Health Wales NHS Trust

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