Westfield Health British Transplant Games 2025: Impact Report

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Executive Summary

The Westfield Health British Transplant Games, held annually for over 40 years, brings together the transplant community for a four-day celebration of life through inclusive sporting competition. Organised by MLS in partnership with Transplant Active, the Games aim to raise awareness of organ donation, promote active lifestyles among transplant recipients, and honour donors and their families, despite lacking national-level funding.

The British Transplant Games 2025 (BTG25), held in Oxford, brought together over 3,000 attendees, including 1,054 competitors, 1,352 spectators, 195 living donors and families, and 200+ volunteers. Physical activity, social support, and enjoyment are essential for transplant recipients, playing a crucial role in helping people regain strength and confidence. Strong social connections improve adherence to treatment and boost emotional wellbeing through shared experiences and peer support, while activities that are fun and enjoyable enhance recovery, especially for children and young people.

This report represents the first impact analysis of its kind for the BTG, and lessons learnt will inform future analyses. This evaluation aimed to measure short-term, individual-level outcomes and test an approach for future evaluations. Data was collected through pre- and post-event surveys (n=237 and n=485 respectively) and 20 on-site interviews.

Findings demonstrate that BTG25 delivered significant positive outcomes across all stakeholder groups. For transplant recipients, 86% reported feeling very proud of participating, 88% made new friendships, and 83% felt happier. Fun and enjoyment were key motivators for attendance, though some sports people desired more competitive formats. Interview feedback reinforced these results, highlighting increased confidence, pride, and inspiration to adopt new physical activities. Families of recipients echoed these experiences, with 94% feeling more connected and 84% forming new friendships, describing the event as transformative in reducing isolation and bringing joy.

Living donors reported extremely positive experiences too. 70% cited fun and enjoyment as a motivator, 75% built new friendships, and 97% felt happier, with some finding reassurance about life post-donation. Families of organ donors described the Games as deeply affirming, offering emotional safety, validation, and active remembrance of loved ones, with 90% forming new connections and emphasising the profound meaning of seeing the life-saving impact of donation.

Volunteers described various emotional rewards, with 90% reporting increased happiness or purpose. Many expressed feelings of humility and pride in contributing to an event that visibly brings happiness, valuing opportunities to raise awareness and support families despite challenges around volunteer role clarity.

Motivating factors across all groups were consistent: supporting others in the transplant community, fun and enjoyment, and building social connections ranked highest. Barriers and blockers included cost, logistical challenges, and accessibility issues. General feedback praised the Games' emotional impact but highlighted areas for improvement including geographical spread of venues, transport, communication, inclusivity, welfare facilities, and affordability. Rising costs and organisational inefficiencies were raised as significant blockers to participation and experience.

The evaluation concludes that BTG25 successfully delivered its intended outcomes, defined as increased physical activity, improved emotional wellbeing, enhanced social connection and active remembrance, while also creating a unique sense of community and celebration.

The evaluation approach was feasible but requires refinement for future events, including a broader set of outcome measures, tailored surveys, improved response rates through better engagement communications, and structured qualitative data collection. Future evaluations should incorporate societal and economic impacts, involve the transplant community in defining outcomes, and allocate greater resources for data collection.

Recommendations for 2026 include addressing cost barriers, improving logistics and communication, enhancing competitive and social formats, expanding remembrance opportunities, and strengthening volunteer training. Growing the event's scale and profile through additional funding and public engagement is critical to sustain and amplify its impact.

Despite operational challenges, BTG25 remains a singular, powerful initiative that brings joy and connection within the transplant community, with considerable potential for future growth, influence and impact.

Introduction

Running for over 40 years, the Westfield Health British Transplant Games are a celebration of life. Taking place in different host cities every Summer, the games see teams from across the UK come together to compete in a medley of sports. The 4-day event attracts around 1,000 transplant athletes and more than 1,700 supporters. Transplant recipients including children as young as five can compete in more than 25 sports.

Transplant Active are the inventors and custodian of the Games, which are organised by MLS – a major sports events company – in partnership with the charity. Transplant Active's aim is to raise awareness of the need for organ donation, encourage transplant recipients to lead active lifestyles, and show appreciation for, and remember their donors and their families.

There is anecdotal evidence that the Games have an impact on the individuals who participate in them, as well as their families and the organisers and volunteers involved. However, none of these impacts have been evaluated in the past due to lack of resource and funding.

In addition to this, there is hope and expectation that the Games has an impact on wider society, in terms of raising public awareness of clinical, social and economic issues associated with organ and stem cell transplant, development of laws and policies associated with organ and stem cell transplant, and national health services which develop and deliver medical care.

There is currently no national level investment or funding for the Games. A key concern is the sustainability of the event, given the important role it plays for the transplant community as a whole.

The rationale for the British Transplant Games

The experience of organ transplant recipients is complex, encompassing physical, psychological, and social dimensions. While transplantation restores physiological function and improves quality of life, the process of recovery extends beyond the medical procedure itself. Evidence highlights that physical activity, social connection, and opportunities for enjoyment are central to successful adaptation and long-term wellbeing.

Physical activity plays a critical role in post-transplant recovery. Movement not only helps rebuild strength and endurance but also builds confidence in the body.

Engaging in exercise or active leisure supports cardiovascular health, reduces stress, and builds mental resilience. It offers recipients a sense of vitality, reinforcing the sense that they are able to live more fully and independently post-transplant.

Equally important are strong social connections. Social support has been shown to influence transplant recipient outcomes, with patients who are integrated into family, peer, or community networks reporting better adherence to medical treatments, reduced emotional distress, and higher quality of life. Supportive relationships help recipients process complex emotions such as gratitude, guilt, or anxiety. Shared experiences within peer groups or family-based interventions provide a sense of belonging, reduce isolation, and strengthen coping strategies.

Fun and enjoyment are recognised as cornerstones of recovery. Engaging in enjoyable, shared activities builds social capital and helps recipients adapt to their new reality with optimism. For children and young people in particular, playful and social experiences aid emotional development and encourage positive lifestyles. For adults, fun provides a buffer against stress, creating opportunities to reconnect socially and rediscover happiness in everyday life.

Together, physical activity, social connection, and fun through events represent essential components of recovery, enabling transplant recipients to thrive physically, emotionally, and socially.

About the British Transplant Games 2025

The British Transplant Games 2025 (BTG25) took place over four days in Oxford in August 2025. The event comprised competitions in 24 sports, with five social events and a large-scale donor run. 1,054 competitors attended, with 1,352 spectators, 200+ volunteers, and 195 living donors and their families, for a total of around 3,000 people in attendance. Over 2,500 medals were awarded in the donor run, with a further 2,000 medals awarded for the sports events themselves.

Key stakeholders

Transplant Active – event owner

Transplant Active (formerly Transplant Sport) is the UK's leading charity dedicated to promoting active recovery for transplant recipients and raising awareness of the life-saving importance of organ donation. The organisation encourages individuals to share their donation wishes with family and friends, supporting

higher consent rates and the NHS Organ Donor Register. Through sport and social events, including the flagship British Transplant Games, Transplant Sport inspires recipients to embrace fitness, celebrate renewed health, and connect with others who share similar experiences. The charity also honours donors and their families, demonstrating the transformative impact of organ donation and the happiness of life after transplant.

MLS – event organiser

MLS is a well-established Sports Consultancy and Event Management organisation with over 100 years of collective experience. Founded by Gerry Montgomery after the successful World University Games in 1991, MLS has grown into a respected international team delivering professional, community, para sport, and multi-sport events. With passion, expertise, and integrity, MLS maximises the impact of sport across athletes, volunteers, spectators, and communities, creating meaningful experiences that demonstrate the true value of sport at every level.

Westfield Health – event sponsor

Westfield Health has sponsored the British Transplant Games since 2008 and is passionately committed to the cause of Transplant Active. A not-for-profit mutual, Westfield Health has a long-standing commitment to community support through its inclusive giving strategy. In 2024–25, the organisation donated and volunteered the equivalent of £1 million to initiatives addressing health and wellbeing inequalities. Key channels include strategic committees, colleague-led giving, rapid-response funding, volunteering, and resource sharing. Westfield Health contributes at least 1% of annual revenue to impactful causes, reinforcing its mission to improve quality of life for its customers and communities through meaningful, sustainable change.

Methodology

The purpose of this evaluation was:

1. To understand the extent to which individual-level, short-term outcomes of interest were experienced by participants in the 2025 Games

2. To test the evaluation approach to understand resource and capability needs for future event evaluations.

The evaluation was conducted by Westfield Health employees, specifically:

- Kate Platts, Group Director of Research & Innovation
- Hope Zelly, Community Ambassador

With support from colleagues at Westfield Health and MLS.

Project scope

Discussions between key stakeholders in the initial phases of the project aligned all parties on the scope and purpose of the evaluation, and provided initial information about stakeholder groups, outcomes of interest, and resources available. It was decided at this stage that outcomes of interest would be focused at the individual level due to the exploratory nature of the project and the resources available. Due to the vulnerable nature of event participants, ethical concerns and safeguarding were discussed and addressed.

Evidence review and Theory of Change development

A brief evidence review (appendix A) exploring the experience of transplant recipients and their families was used to further refine outcomes of interest and stakeholder groups, as well as inform development of a draft Theory of Change.

The Theory of Change articulates the challenge and vision for the future. It creates a logical framework that connects the BTG to its desired long-term outcomes and impact. This is a work in progress that will be further refined over the coming years, to extrapolate connections, remove assumptions, and improve the impact of the Games for all stakeholder groups.

Development of evaluation outcomes

Individual level outcomes were defined and finalised so appropriate data collection tools for before, during and after the BTG25 could be developed. Table 1 shows short-term outcomes measured at BTG25.

Group	Short-term outcome
Transplant recipients (organ/stem cell recipients)	• Increased participation in physical activity • Sense of achievement/pride • Experience of fun and enjoyment • Making new friendships/social connections • Increased happiness
Families of transplant recipients	• Building supportive social connections • Active remembrance of donors • Experience of fun and enjoyment
Living donors	• Experience of fun and enjoyment • Making new friendships/social connections • Increased happiness
Families of organ donors	• Building supportive social connections • Active remembrance of donors
Volunteers	• Increased sense of worthwhileness • Increased sense of happiness

Data collection

Pre-event survey

A pre-event *British Transplant Games Survey* was developed, and an online questionnaire was distributed in June 2025 to all individuals on the MLS database who had registered to attend in 2025 or previous Games (n=2,600). The purpose of the pre-event questionnaire was to create a baseline of understanding about motivations, drivers and barriers to participate in the Games, as well as to gather demographic information, and data on physical activity levels and participation behaviour. Free text questions in the survey asked, "*What has been the most rewarding aspect of your/your child's involvement in the British Transplant*

Games?", "*What challenges have you/your child faced, if any, in engaging with the British Transplant Games?"* and "*Do you/your child have any suggestions for improving opportunities in the British Transplant Games?"*

Post-event survey

A post-event *British Transplant Games Experience Survey* was developed, and an online questionnaire was distributed in September 2025 to all individuals who had attended the BTG25 (n=2,600). The purpose of this questionnaire was to gather data on attendee experience with direct reference to outcomes, and to ascertain to what extent desired outcomes had been achieved. Free text questions in the survey asked, "*What would help improve your/your child's experience at the British Transplant Games next year?"* and "*Do you have any further feedback or suggestions for the British Transplant Games that you would like to share?"*

On-site interviews

A set of interview guides were developed, segmented by stakeholder group, to support face-to-face interviews with attendees at the BTG in August 2025. The purpose of the interviews was to understand participant experience, emotions and attitudes to the Games. Interviews were not pre-arranged and interviewees were selected at random according to participant availability and willingness to be interviewed. Interviews were carried out by HZ and KP. Verbal consent to be interviewed was given by all interviewees, and where children were interviewed, they were accompanied by their parent or guardian who gave consent on their behalf. A total of 20 interviews were completed.

Data analysis

Data from the pre- and post-event surveys was analysed using MS Excel and MS Copilot. All output from AI-supported analysis was double-checked by a human. Onsite interview data was collated and analysed manually.

Results

Pre-event survey

Demographics

A total of 237 people responded to the pre-event survey, a 9% response rate.

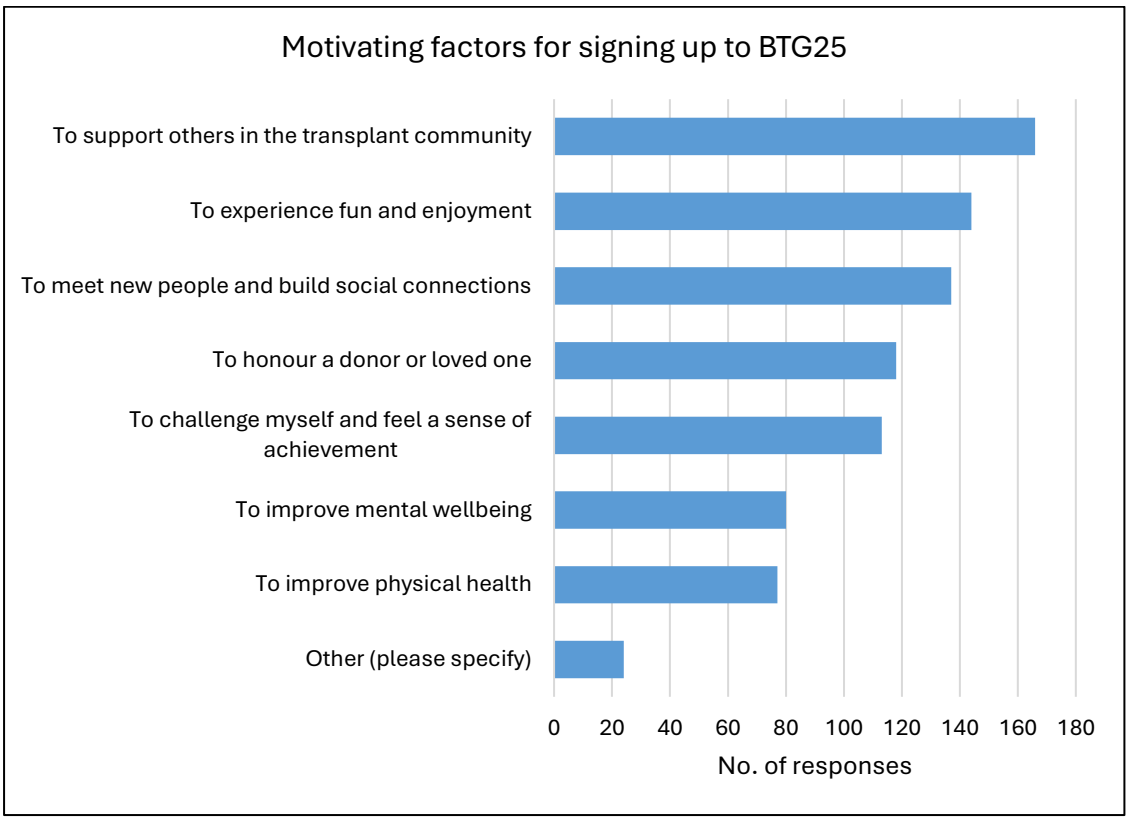
Transplant recipients made up over 50% of respondents, of which 87% were adults, and 17% children.

Respondents were 94% of white ethnicity, with 6% of respondents from Asian, Black, Mixed or Multiple ethnic groups.

For 17% of respondents, 2025 was their first British Transplant Games. 31% had been attending the Games for more than six years.

69% of transplant recipients said they engaged in frequent physical activity, while the remaining 31% said participation was once a month or less.

Motivating factors



Overall, supporting others in the transplant community, fun & enjoyment, and to meet new people and build connections, were the top-cited motivating factors for respondents in signing up to participate in BTG25.

Amongst transplant recipients, the most frequently motivating factors stated were 'to experience fun and enjoyment', and 'to challenge myself and feel a sense of achievement'.

Improvement of physical and mental health were the least frequently cited motivating factors for all categories of respondent.

Barriers to participation

While 38% of respondents cited no barriers to participation, 24% said that the cost of attendance at the Games was a barrier. Physical limitations, lack of confidence and lack of time were also cited as barriers.

'More information and awareness' was cited by 39% of respondents as a factor that would encourage further participation, while 'opportunities for beginners' and 'support groups/mentors' were also cited.

Post-event survey

Demographics

A total of 485 people responded to the post-event survey, a response rate of 19%.

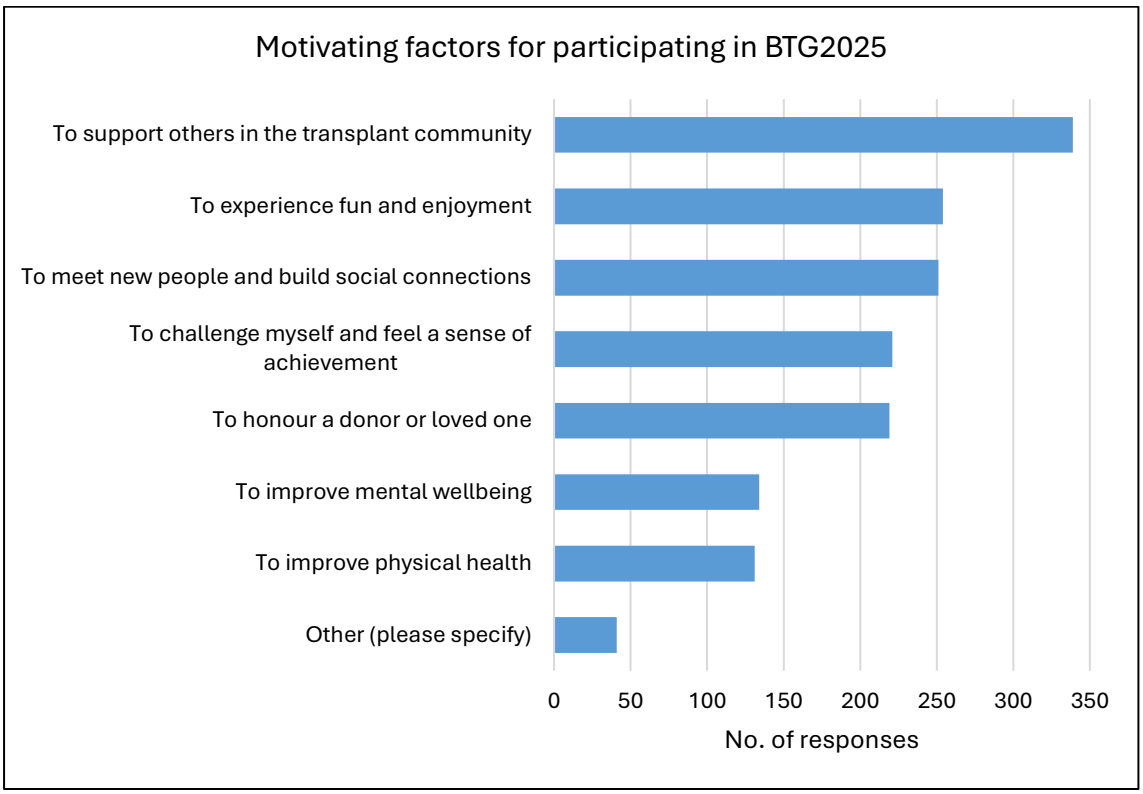
Transplant recipients made up 54% of respondents, with family members of recipients making up 20% of respondents, volunteers 11% and living donors 7%. The remaining 8% were made up on family members of donors, future transplant recipients, team managers and NHS staff.

Of the transplant recipients who responded, 9% were children, 33% were aged 18-45, and 58% were aged over 46. 71% of transplant recipients who responded said they did physical activity weekly or more, while 20% said they never or rarely did physical activity.

Respondents were 95% of white ethnicity, with 5% of respondents from Asian, Black, Mixed or Multiple ethnic groups.

For 26% of respondents, 2025 was their first British Transplant Games. 41% had been attending for 1-6 years, and 32% had attended the Games for more than six years.

Motivating factors



As found in the pre-event survey, supporting others in the transplant community, fun & enjoyment, and to meet new people and build connections, were the top-cited motivating factors for respondents participating in BTG25.

Transplant recipients' most cited motivating factor was to 'challenge myself and feel a sense of achievement'.

As found in the pre-event survey, improvement of physical and mental health were the least frequently cited motivating factors for all categories of respondent.

Outcomes evaluation

A key purpose of this evaluation project was to understand the extent to which individual-level, short-term outcomes of interest were experienced by participants in the 2025 Games. Table 2 (below) shows an overview of post-event survey data relating to outcomes.

Group	Short-term outcome	Survey data result
Transplant recipients (organ/stem cell recipients) (n=242)	Increased participation in physical activity	No survey data
	Sense of achievement/pride	86% said they felt very proud about participating
	Experience of fun and enjoyment	63% said fun was a key motivator for participating
	Making new friendships/social connections	88% said they made new friendships and connections
	Increased happiness	83% said the Games made them feel happier
Families of transplant recipients (n=88)	Building supportive social connections	94% said they felt more connected to people who had similar experiences to their own; 84% said they made new friendships
	Active remembrance of donors	No survey data
	Experience of fun and enjoyment	53% said fun & enjoyment was a motivating factor for joining the Games
Living donors (n=33)	Experience of fun and enjoyment	70% said fun & enjoyment was a motivating factor for joining the Games
	Making new friendships/social connections	75% said that they made friendships and new social connections at the Games
	Increased happiness	97% said they were happier as a result of the Games
Families of organ donors (n=10)	Building supportive social connections	90% said they built new friendships and connections

		90% said the Games helped them feel more connected to people with similar experiences to their own
	Active remembrance of donors	No survey data
Volunteers (n=52)	Increased sense of worthwhileness	90% said they felt an increased sense of purpose or happiness
	Increased sense of happiness	

1. Transplant recipients

Increased participation

Data from the pre- and post-event surveys suggests that the majority of transplant recipient respondents are engaging in physical activity on a regular basis (weekly or more). According to survey data, none of the age groups were engaging in more physical activity than others. It is not possible to conclude from the survey data whether the Games contributed to a general increase in physical activity in transplant recipients in 2025, however feedback from the on-site interviews suggests that it has had an effect on physical activity levels over time:

> *"I wouldn't have been swimming if not for this event. I was inspired to take up swimming by another competitor that I met here."*

> *"I have done Archery, 200m, and the donor walk – I am very active now, the Games show how important this is. I used to watch TV 12 hours a day pre-transplant. I have been to the gym 19 times last month for 2 hours to prep for the Games and get my strength up."*

Sense of achievement / pride

According to survey data, 86% of transplant recipients who responded (n=242) said that participating in the 2025 Games made them feel 'very proud'. 11% said they felt neutral or mixed emotions, with only one person reporting that they did not feel a sense of pride as a result of their participation.

Interview data strongly supports the finding that the Games contribute to a sense of achievement and pride:

"It has built my confidence to be here with people my age and ability. I am proud to be part of the World Games now and am winning competitions!"

"Being in the competition makes me feel a sense of achievement and I love the donor runs. The opportunity to compete and be part of something special makes me feel proud."

"You can really see the gift of a transplant [here] and the positive impact it has on families."

Experience of fun and enjoyment

63% of transplant recipients who responded to the post-event survey said that fun and enjoyment was a motivating reason for participating in the Games. Most enjoyment appears to stem from the social elements of the Games, and the inclusivity of the events. However, some participants felt that it didn't offer a competitive enough environment for the sportier participants, which undermined a sense of enjoyment.

"The most fun part of the event is the social part. When you're not participating in sport you can just hang out with friends."

"What's the most fun part for me? Winning!"

"I like how not competitive my events have been."

"It is very inclusive for non-sporty people; however, there is a lack of competitiveness here for the sportier people."

Making new friendships/social connections

According to survey data, 88% of transplant recipients who participated in the Games made new friendships or connections at the event, with 45% saying they made 'many' new friends. 63% said that the event made them feel significantly more connected to others with similar experiences, while a further 32% said that the event made them feel somewhat more connected.

Making friends and social connections, and a sense of community, appears for many – especially the children – to be the most appealing factor of the Games, demonstrated in statements they made onsite at the event:

"I've definitely made friends here – we mainly meet up at the Games now, it's a great opportunity to see your friends and do sport together."

"I've made lots of like-minded friends through the events here. It's very special for anyone who's had a transplant."

"I am here to cheer on my friends this year, but they are connections I made at the Games and they are so valuable to me."

"Next year we are all driving up together – this is so important to me as we all met here at the Games."

"When I'm here I'm not on my own. At school I'm the only one doing sports. It's full of people you know here, and very welcoming."

Increased happiness

55% of transplant recipients said in the survey that the 2025 Games made them 'much happier', while a further 28% said the Games made them feel 'somewhat happier'. 15% said they experienced no change in happiness, and 2% said they felt less happy after the Games.

2. Families of transplant recipients

Building supportive social connections

According to survey data, 94% of family members of transplant recipients (n=88) said that the Games helped them feel more connected to people with similar experiences to their own, while 84% said they had built new friendships and connections at the Games.

"This event has been hugely important for us as a family. It was a very isolating journey, but through this event we started to connect. It's been massively important. We feel elation and joy being able to connect with donors. Every time we come here it is social and chaotic! But we come back every year to see familiar faces – it's more about connection for us than anything else. We don't have anything like this back home. Thank you- I feel huge joy and gratitude." (mother of young transplant recipient)

"There is nobody back home who understands our family's experience. Before this event we only spent time with doctors and nurses. It's our fourth

year, and it's great to meet friends from other families here. We meet friends every year." (mother of young transplant recipient)

Active remembrance of donors

Some attendees spoke about the importance of donor presence at the event.

"Our donor is here and takes part in events. He loves it!"

Experience of fun and enjoyment

53% of respondents in this group said that fun & enjoyment was a motivating factor for joining the Games. For the families of young transplant recipients, seeing the children having fun and being inspired by their efforts was a key factor in their enjoyment of the event.

"Watching the little ones in the obstacle course is the most enjoyable element of this event for me. They just go for it! Everyone's cheering them on. Seeing them happy – it's so inspiring."

"This event is amazing all round. The kids look forward to it. It brings everyone together as a community."

"This is so inspiring; it gives you goosebumps. The kids are putting their heart into these games."

3. Living donors

Experience of fun & enjoyment

70% of living donors who responded to the survey (n=33) said in the survey that fun & enjoyment was a key motivating factor for taking part in the BTG.

Making new friendships/social connections

75% of living donors who responded to the survey said that they made friendships and new connections at the Games.

"Making lifelong friends from the Games are so important - we are quite isolated [where we live], but here you find everyone who has the same

journey so you can let your guard down. My son is friends with his doubles partner now – this event offers great peer support."

"It's lovely how big of an event this is, and socialisation with the community is key."

Increased happiness

97% of living donors who responded to the survey (all but one person) said that they were happier as a result of participation in the Games, with 59% saying they were 'much happier'.

"It is very reassuring being here – I was concerned after donating about my life and job; I had a very physical job and wondered how I would cope afterwards."

4. Families of organ donors

Building supportive social connections

90% of family members of organ donors who responded to the survey (n=10) said they built new friendships and connections, and 90% said the Games helped them feel more connected to people with similar experiences to their own. Family members of organ donors described a deeply emotional and affirming experience rooted in shared understanding, connection, and validation. They expressed a sense of belonging and emotional safety, where they could speak openly about grief and loss without needing to explain themselves.

"You don't have to explain how you are feeling as everyone feels the same. It is so freeing to speak candidly about death with others who have been through the same. The bonds and connections are amazing – we have a WhatsApp group which is honest and funny. I have found my tribe."

"It's an overwhelming feeling. Recipients make me feel like I've saved lives. It's an acknowledgement and validation of your decision and it's so special. Makes you feel that you've done a good thing."

Active remembrance of donors

Remembrance of donors was a crucially important element of the Games for family members.

"The games are an amazing way to celebrate my daughter's life."

"Donors just want to hear from the families of recipients. They want to hear 'thank you, it worked' – it means the world to come here and see what difference your actions have made – it's overwhelming."

"I always carry her with me, and it's nice to be here as people are familiar with the language – is (not was) is very important."

5. Volunteers

Increased sense of happiness / worthwhileness

90% of volunteers who responded to the survey (n=52) said they felt an increased sense of purpose or happiness. Volunteer statements onsite highlighted experiences of humility, emotional impact, and deep appreciation for the resilience of transplant recipients and their families, although survey feedback described a varied experience, with some feeling underused or poorly briefed, despite the overall meaningfulness of their roles.

Volunteers onsite expressed being profoundly moved by the courage and joy of children who have endured significant medical challenges, as well as the strength of their siblings. There was a strong sense of personal fulfilment and pride in contributing to an event that brings visible happiness and healing to the transplant community. The experience is described as both emotionally intense and rewarding, with volunteers valuing the opportunity to raise awareness about organ donation and make meaningful connections.

"This is my first Games, and first time working with the wider transplant community, but I have done a lot of medical volunteering in the past (for a liver charity). I have found it very humbling, and you can see the impact on the families."

"I am very proud to be able to be a part of this, and my employer's involvement in this is really important to me – you can see what these Games mean to the transplant community."

"I'm very humbled – these kids have been through so much and come out of the other side. It's a rollercoaster of emotions!"

“The event is quite humbling, but very rewarding to see the children, especially the skills they have developed from going through such a traumatic experience – as this will have meant that they missed school time. Makes you think about their siblings and what they have been through.”

“I enjoy watching the sports stacking: so much joy and chaos! Seeing the fun they are all having too.”

“I look forward to it every year to see the joy it brings, and glad that we have a small part to play in that.”

“I am happier as a result of being here, but the weekend can be very emotional.”

“The adults are very appreciative of the help we are offering, and it is nice to raise awareness of the importance of organ donation.”

“I enjoy making the siblings of the children who have received a transplant feel special – paying them some attention.”

Conclusion & limitations

This evaluation project set out with two aims:

1. **To understand the extent to which individual-level, short-term outcomes of interest were experienced by participants in the 2025 Games**

The 2025 Games delivered positive changes across all participant groups, including increasing physical activity, boosting emotional wellbeing, and building social connection.

Transplant recipients reported high engagement in exercise, with many inspired by the event to adopt new activities, while 86% felt proud to participate and 55% said the Games made them much happier. Social interaction was critically important, with 88% forming new friendships and valuing inclusivity, though some desired greater competitiveness in the sporting events. Families of transplant recipients echoed these sentiments, with 94% feeling more connected and describing the event as transformative for reducing isolation. These findings are strongly supportive of the conclusion that the Games delivers the outcomes of interest – increased physical activity, sense of connection, fun & enjoyment, pride and happiness – for transplant recipients and their families, although the representativeness of the sample must be considered.

Living donors reported overwhelmingly positive experiences: 70% cited fun and enjoyment as a motivator, 75% built new friendships, and 97% felt happier, with some finding reassurance about life post-donation. Families of organ donors described the Games as deeply affirming, offering emotional safety, validation, and active remembrance of loved ones, with 90% forming new connections and emphasising the profound meaning of seeing the life-saving impact of donation. These findings are supportive of the conclusion that the Games delivers the outcomes of interest – fun and enjoyment, friendships/social connections, happiness, social support, and remembrance – for donors and their families, although again, the representativeness of the sample must be considered.

Volunteers experienced significant emotional rewards, with 90% reporting increased happiness or purpose; many described feelings of humility and pride in contributing to an event that visibly brings happiness and healing, valuing opportunities to raise awareness and support families despite challenges around role clarity.

The 2025 Games created a powerful sense of community and celebration, leaving participants and supporters feeling inspired, connected, and fulfilled, and appears to be the only UK initiative that delivers these participant outcomes at such scale. The implications of these findings are considerable, as the event has the potential to grow significantly in size and profile.

The feedback related to logistical and organisational challenges, as well as rising expenses for participants, describes the key barriers and blockers to individual participation and experience. These elements must be addressed directly at future events in order to continue to have positive impact for the transplant community.

2. To test the evaluation approach to understand resource and capability needs for future BTG evaluations

2025 is the first time an outcomes-based evaluation of the BTG has been undertaken, and the project was approached as a 'test and learn' initiative from commencement.

From project commencement, key stakeholders were well aligned on the need and rationale for this evaluation, although it was acknowledged at the start of the project that resource was limited. Initial conversations between Westfield Health, MLS, and Transplant Active helped to set expectations and limit the scope of the evaluation given available resource. Nevertheless, it was clear from the outset that there was an appetite to consider a much broader range of outcomes at future events.

Outcomes of interest in this evaluation were defined based on a literature review, and clearly an approach to outcome definition that involved the voice of the transplant community directly would have been more robust. Focus groups or interviews with this cohort in advance of future Games would be useful for this purpose.

Data collection related to outcomes was relatively successful. Survey content could have been better tailored to identified groups to eliminate any respondent confusion or overlapping responses. Response rates to participant surveys were relatively low, so results should be viewed with caution, and an understanding that they may not be representative of the transplant community at large. Actions should be taken to boost survey completion (e.g. more frequent communications) in future evaluations.

The post-event survey was particularly comprehensive at nearly 500 responses. This was a response rate of around 19% assuming c.2,600 recipients, although the distribution list was not checked for quality and may include out of date or duplicate email addresses. Email distribution lists should be quality checked for future evaluations to gain a clear understanding of response rates.

Data collection via onsite interviews was moderately successful, with 20 interviews completed. Direct access to event participants onsite at the Games allowed direct data capture, with interviewers able to pursue interesting lines of discussion with competitors, families, donors and volunteers. However, there was limited access to a large and representative number of interviewees given the time pressure that participants were under, moving quickly in and out of venues and not always able to stop for a conversation.

Limited interviewer resource also hampered efforts to engage directly with attendees onsite. In 2026 a structured interview plan with pre-arranged sessions, more experienced interviewers and recorded interviews would considerably improve output. At future events, interviews should be pre-arranged for efficiency and to ensure proper representation – the pre-event survey could be used for people to volunteer for this. Children were overrepresented in interviews in this evaluation compared to the overall composition of the attendees (due to their willingness to engage) but were underrepresented in survey data.

Appendix A – Evidence Review

Experience of organ transplant patients

The experience of individuals who have received donor organs is multifaceted, encompassing physical, psychological, and social dimensions. Research indicates that organ transplantation can lead to significant improvements in quality of life and psychological wellbeing for recipients, although challenges and complexities remain.

One of the primary benefits reported by organ recipients is the enhancement of life quality post-transplant. Recipients often experience a renewed sense of health and vitality, which can be attributed to the restoration of normal physiological functions that were compromised prior to transplantation. For instance, studies have shown that patients receiving organs from Public Health Service Increased Risk (PHS-IR) donors can achieve comparable outcomes to those receiving organs from standard donors, suggesting that the quality of life can be significantly improved regardless of donor status [1,2]. Furthermore, the integration of the transplanted organ into the recipient's body is often perceived positively, with many individuals viewing the organ as a part of themselves rather than a foreign entity [3].

The psychological impact of receiving an organ is complex. Recipients may experience a range of emotions, including gratitude, guilt, and anxiety. The psychological burden can be particularly pronounced in cases where the donor was a living individual, as recipients may grapple with feelings of indebtedness or guilt towards the donor [4]. This emotional complexity is echoed in the literature, where recipients of living donor organs report higher levels of guilt compared to those receiving deceased donor organs [4]. Additionally, the psychological processing of the transplant experience is crucial, as it can influence compliance with post-transplant care and overall mental health [5].

The mental health of recipients post-transplant has been a focal point of research. Positive psychology frameworks suggest that many recipients experience a relief from psychological conflict, viewing their transplant as a "gift" that alleviates moral burdens associated with organ donation [6]. This perspective aligns with findings that highlight the importance of social support and the psychological dynamics involved in the donor-recipient relationship, which can significantly affect the recipient's emotional state and adaptation to their new reality [7].

Despite the potential for positive outcomes, some recipients face challenges such as anxiety and depression, particularly in the early stages following transplantation. These psychological issues can stem from the stress of surgery, the adjustment to a new lifestyle, and the ongoing need for medical follow-up [5]. It is essential for healthcare providers to address these mental health concerns proactively, ensuring that recipients receive adequate psychological support throughout their transplant journey [8].

The importance of social connection for transplant patients

The importance of social connection for individuals who have undergone organ transplantation is well-documented across various studies, highlighting its critical role in enhancing recovery, psychological wellbeing, and overall quality of life. Social support is not merely beneficial; it is often essential for successful adaptation to the life changes that accompany organ transplantation.

Research indicates that social support significantly influences post-transplant outcomes. Gunn et al. emphasise that inadequate social support can lead to delays in being placed on an organ waitlist and is associated with poorer post-transplant outcomes [9]. Cavallini et al. note that social reintegration is vital for successful adaptation after transplantation, suggesting that the process of social adaptation is gradual and improves over time [10]. The presence of a supportive social network can mitigate the stressors associated with the transplant experience, thereby enhancing recovery and quality of life [9,10].

The emotional connection between recipients and their donors can further reinforce social support perceptions. Harmanci and Bülbüloğlu found that liver transplant recipients who received organs from living donors often feel a deep sense of gratitude, which strengthens their social ties and enhances their perception of support from their community [11]. This emotional intimacy can foster a more robust support system, which is crucial for navigating the challenges of post-transplant life.

The significance of social support extends to specific demographics, including adolescents. Anderson et al. highlight the therapeutic benefits of discussing transplant experiences within peer groups, suggesting that social connections can facilitate emotional healing and coping strategies [12]. This is particularly important for younger recipients, who may face unique challenges in developing social skills and maintaining connections during their recovery process.

Quantitative studies further substantiate the link between social support and health-related quality of life (HRQOL) among transplant recipients. Hwang et al. found that higher levels of social support correlate with improved HRQOL in kidney transplant recipients, indicating that social connections play a mediating role in psychological adaptation and health outcomes [13]. Similarly, Monemian et al. emphasize that social and interpersonal support is crucial in reducing post-transplant stress, thereby enhancing life quality [14].

The implications of social support are not limited to emotional wellbeing; they also extend to practical aspects of post-transplant care. Ladin et al. conducted a systematic review that demonstrated a clear association between social support and medication adherence among transplant recipients, suggesting that robust social networks can facilitate better health management practices [15]. This is critical, as adherence to medication regimens is vital for preventing organ rejection and ensuring long-term transplant success.

The experience of children

Children undergoing organ transplantation experience a complex interplay of physical, emotional, and social challenges that significantly impact their quality of life and psychosocial functioning. The nature of these experiences can vary depending on the type of organ transplanted, the child's age, and pre-existing health conditions.

One of the most critical aspects of the transplant experience for children is the psychosocial impact. Research indicates that children evaluated for heart transplants exhibit the highest psychosocial needs compared to those evaluated for kidney or liver transplants. This heightened need is often accompanied by increased anxiety and emotional distress, which can affect both the child and their family Eaton et al. [16]. The emotional burden is compounded by the chronic nature of the conditions leading to transplantation, which often involves numerous hospital visits and medical interventions prior to the transplant [17].

Post-transplant, children face the reality of lifelong immunosuppressive therapy, which is necessary to prevent organ rejection but can lead to side effects that further complicate their daily lives. Children who have undergone kidney transplantation report ongoing concerns about potential kidney rejection, which can induce anxiety and impact their overall health-related quality of life (HRQoL) [18]. Studies have shown that while transplantation generally improves HRQoL compared to dialysis, children still face significant treatment-related demands that can limit their everyday activities [19].

Furthermore, the quality of life for children post-transplant is often comparable to that of their peers with chronic health conditions, rather than that of healthy children. Paediatric liver transplant recipients report HRQoL that aligns more closely with children suffering from chronic illnesses than with their healthy counterparts [20,21]. This suggests that while transplantation can alleviate some health issues, it does not entirely eliminate the challenges associated with chronic health conditions.

The role of family dynamics and social support is also crucial in the transplant experience. Positive family interactions and perceived social support are associated with better mental and physical health outcomes for paediatric transplant recipients [22,23]. Parents' perceptions of their child's care and their involvement in the treatment process can significantly influence the child's adjustment and adherence to medical regimens post-transplant [24].

Children often experience a range of psychological challenges, including depression, anxiety, and post-traumatic stress disorder (PTSD) following transplantation. These issues can stem from the stress of the surgical procedure, the fear of complications, and the adjustment to a new lifestyle that includes strict medication regimens and regular medical check-ups [25,26]. It is essential for healthcare providers to address these psychological aspects proactively, as they can affect adherence to treatment and overall health outcomes [27].

The experience of families

The experiences of families of individuals who have donated or received donated organs are complex and multifaceted, encompassing emotional, psychological, and social dimensions. These experiences can vary significantly based on whether the family is involved in the donation process or is supporting a recipient.

For families of organ donors, the experience often begins with the trauma of losing a loved one, which can be compounded by the decision to donate organs. Research indicates that families frequently face emotional distress during this period, as they must navigate the grief of loss while simultaneously making decisions about organ donation [28]. Families of Muslim transplant recipients report altered family dynamics post-transplant, suggesting that the emotional landscape is significantly affected by the transplantation process [29]. This alteration can manifest in various ways, including changes in parental and marital relationships, which may require additional support and counselling to address effectively.

Families of potential donors often report feeling unprepared for the donation process. Many families experience difficulties during the formal consent process, despite acknowledging its necessity [30]. The emotional burden of making such decisions in the wake of a loved one's death can lead to feelings of confusion and stress, emphasising the need for sensitive communication and support from healthcare professionals during this critical time [30].

Families of organ recipients also face significant challenges. The experience of having a family member undergo transplantation can lead to increased stress and anxiety, particularly regarding the recipient's health and the complexities of post-transplant care. Parents of paediatric transplant recipients often report heightened levels of worry and stress, particularly in the early weeks following discharge from the hospital [31]. This stress is compounded by the need for ongoing medical care, including medication adherence and regular follow-ups, which can disrupt family routines and dynamics [32].

The family environment plays a crucial role in the recovery and adaptation process for transplant recipients. A supportive family environment is linked to improved health-related quality of life (HRQoL) in adolescents following kidney transplants [33]. Interventions that involve family-based support, such as sibling support groups and parent-focused therapy, can enhance the overall experience for both recipients and their families [33]. This highlights the importance of integrating family dynamics into the care plan for transplant recipients.

The relationship between donor families and recipients can be complex. A systematic review that explored the interactions between donor families and transplant recipients, revealed that these relationships are often influenced by various factors, including shared experiences and emotional connections [34]. However, the emotional weight of the donor's death can create a barrier to establishing a comfortable relationship, as recipients may feel a sense of obligation or guilt towards the donor's family [35].

Cultural differences in attitudes to organ transplant

Cultural differences significantly influence attitudes and behaviours regarding organ donation, transplantation, and receipt. These differences manifest in various ways, including religious beliefs, societal norms, and familial attitudes, which can either facilitate or hinder the organ donation process.

In many cultures, religious beliefs play a crucial role in shaping attitudes toward organ donation. For instance, in some Islamic communities, there are concerns regarding the sanctity of the body after death, leading to reluctance toward organ donation. Beliefs about the body being sacred and the fear of losing control over the recipient's use of the organ contribute to hesitancy among Muslim Indo-Asians in the UK [36]. Similarly, in traditional Chinese culture, the body is often viewed as a whole entity that should remain intact after death, which can create barriers to organ donation [37].

Cultural perceptions of death and the afterlife influence attitudes toward organ donation. In cultures where there is a strong belief in an afterlife or reincarnation, individuals may be less inclined to donate organs, fearing that doing so could disrupt their spiritual journey. Traditional Chinese beliefs significantly impact perceptions of organ donation, indicating that cultural context is crucial for understanding attitudes toward organ donation [37]. Family attitudes toward organ donation are deeply rooted in traditional cultural values, affecting the likelihood of voluntary donation [38].

The familial context is essential in many cultures, particularly in Asian societies. A systematic review revealed cultural barriers to organ donation among Chinese and Korean individuals in the United States, noting that discussions about organ donation are often considered taboo within families [39]. This reluctance to engage in conversations about organ donation can lead to a lack of awareness and understanding, further perpetuating the cycle of low donation rates.

In contrast, some cultures exhibit a more favourable attitude toward organ donation. While there are cultural and religious barriers, there is also a growing acceptance of organ donation among some ethnic groups [40]. This acceptance is often facilitated by educational initiatives and community outreach programs that address misconceptions and promote the benefits of organ donation.

The differences in attitudes toward organ donation are not limited to religious or cultural beliefs but also extend to societal norms and practices. In the United States, there is a strong emphasis on individual autonomy and the right to make personal health decisions, which can lead to higher rates of organ donation compared to cultures that prioritise familial decision-making or collective societal norms [41]. South Koreans often perceive discussions about organ donation as culturally inappropriate, which can hinder their willingness to engage in such conversations [41].

Educational interventions can play a significant role in shaping attitudes toward organ donation across different cultures. Culturally tailored educational strategies to improve knowledge and willingness to donate among medical students in India are important, suggesting that understanding cultural contexts can enhance the effectiveness of these interventions [42].

The role of fun in building social connection

The role of fun in building social connections after organ transplantation is significant, as it can enhance emotional wellbeing, facilitate social interactions, and contribute to a supportive community among recipients. Engaging in enjoyable activities can help individuals rebuild their social networks, which is crucial for their overall recovery and quality of life.

Fun activities can serve as a powerful tool for enhancing social capital, which is essential for building and maintaining relationships. Fun, creativity, and social interactions contribute to social capital, suggesting that engaging in enjoyable experiences can strengthen bonds among individuals [43]. For organ transplant recipients, participating in fun activities can provide opportunities to connect with others who share similar experiences, thereby reducing feelings of isolation and loneliness that often accompany the transplant journey.

Social relationships in coping with the challenges of post-transplant life are critical. Individuals who can socially relate to others are better equipped to manage stress and conflict, which is particularly relevant for transplant recipients facing the emotional and physical demands of recovery [44]. Fun activities can act as a buffer against stress, allowing recipients to engage with their peers in a relaxed environment, which can promote emotional healing and resilience.

The integration of fun into the lives of transplant recipients can also enhance their quality of life. Social and interpersonal support is vital in alleviating the stresses associated with transplantation [45]. By participating in enjoyable activities, recipients can create supportive relationships that contribute to their emotional wellbeing. Social function is closely linked to emotional health, indicating that engaging in fun activities can improve overall social adaptation post-transplant [46].

The role of fun extends beyond mere enjoyment; it can also facilitate the development of new social connections. Social adaptation after solid organ transplantation is emotionally demanding, and engaging in fun activities can provide a much-needed respite from the challenges of recovery [47]. By creating

shared experiences, transplant recipients can strengthen existing relationships and forge new ones, which are critical for their long-term adjustment and wellbeing.

The concept of fun can be particularly beneficial for children and adolescents who have undergone transplantation. Engaging in playful activities can help younger recipients navigate their feelings and fears related to their health status, while also promoting social interactions with peers. This is crucial for their emotional development and can lead to improved health-related quality of life [48,49].

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