

## **COMMUNITY SPORT – THE DEVELOPMENT OF A MONITORING AND EVALUATION FRAMEWORK AND BASELINE**

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### **Context**

The Sports Council for Northern Ireland (SCNI), the Department for Culture, Arts and Leisure (DCAL) and Community Evaluation Northern Ireland (CENI) have developed a monitoring and evaluation framework and a baseline for a pilot Community Sports Programme. The broader strategies for the development of culture and society in Northern Ireland recognise that participation in sport is one way of combating social disadvantage and reducing social exclusion. More resources are being targeted at programmes and activities that address both sporting and social needs. In this context, SCNI and DCAL developed the Community Sports Programme (CSP), seeking to improve the health, well being and social development of children, young people and adults through participation in sport and physical activities. So combining sporting and social development outcomes.

In 2003, funding from DCAL was secured for a pilot Community Sport Programme, as part of a wider government Reform Plan. It enabled the appointment of Community Sports Development Officers and Co-coordinators to work in targeted areas of great social need throughout Northern Ireland, and with people with a disability. Needs, and the pilot target areas, were identified using the Noble Index of Multiple Deprivation.

Data on the levels and impact of participation in sport and physical activity within Northern Ireland is limited, so both sponsors recognised that ongoing evaluation of the programme would provide valuable learning on its short and long term impact of the programme.

### **Project/Partners**

The Community Sport Programme has been developed and delivered in consultation with the community and voluntary sector within each target area/community, DCAL, Department of Health (DHSSPS) and local authorities.

### **Results**

SCNI has developed a monitoring and evaluation framework, which provides a mix of qualitative and quantitative measures with the aim of providing a rounded and objective evidence base to demonstrate the impact of the programme.

In the absence of local area information in relation to participation in sport and physical activity, SCNI chose a combination of primary and surrogate data collection methods, including use of the Continuous Household Survey, census data, and primary research into levels of social capital in each targeted area. The data was used to provide a profile for each project relating to participation against the general population statistics.

Some key findings were:

- the age distribution within each area shows that Ballymena and Derry have population concentrations in the under 16 age group (more than a quarter in each case), while in Moyle and Belfast about one in five of the population is aged 60 years or more
- participation rates were likely to be low because of relatively larger numbers of elderly. All five areas were found to have concentrations of the occupational social groups least likely to participate, though the concentration was higher in some (e.g. Derry/Londonderry)
- participation by limiting long-standing illness, frequently used as a proxy for disability, also pointed to lower participation in sport and physical activity
- census (2001) data indicated the number of individuals with limiting long-term limiting illness for both wards and census output areas: the percentage of individuals varied from just over 20% to almost 30%, with Belfast, Derry and Newtownabbey displaying the highest rates

- additionally, the census provided data on people's perception of their own health. Higher percentages of those in Belfast, Derry/Londonderry and Newtownabbey reported their general health was 'not good' compared to Ballymena and Moyle. In Belfast; this amounted to one in five of the population. These data suggest there is scope for health gain in these areas, and
- levels of social capital in the target areas varied; scores assigned by local representatives suggested relatively high levels of social capital in Derry/Londonderry, Newtownabbey and Belfast, while Ballymena had the lowest overall scores. These results correspond to earlier work on areas of weak community infrastructure (LRDP Ltd, 1999).

### **Discussion/implications**

SCNI felt the overall monitoring processes used have been broadly successful and innovative. Their collaborative and inclusive dimension provided a very effective learning mechanism, which could inform measurement of future programmes. Some key conclusions and lessons identified were:

- a key factor in the successful development of the framework was the range of partnerships established between DCAL and the SCNI and local organisations
- the collaborative and participative approach of the key stakeholders provided a learning process at individual, organisational and inter-organisational levels. However, it was important to be realistic about the skills, commitment and time required for such an approach
- the level of consultation, engagement and accountability with programme staff and other agencies produced effective data collection tools and a sense of ownership in the monitoring process
- the role and engagement of DCAL and SCNI as key stakeholders in developing the Monitoring and Evaluation Framework and Data Collection Toolkit was identified as a model of good practice
- for programme staff, there is a need to balance commitment to monitoring and evaluation tasks with the demands of implementing and delivering the programme. They also need to be supported and guided in implementing frameworks and customising tools to collect data particular to their projects
- there is a need to respect relationships between programme staff and project users in collecting data. There can be friction between the need to measure its impact on programme users with successfully delivering the programme, particularly in the context of a community development approach
- the benefits of incorporating in-depth informal consultation with key members of the community provided added value in relation to interpreting the local demographic profiles, particularly those with weak community infrastructure, and
- the lack of research on participation in sport and physical activity in Northern Ireland, particularly for people with disabilities.

### **References**

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