

The effect of community sport on health, social capital and sport participation

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Aim of abstract

This study wants to give an empirical answer to the question whether community sport has an effect on sport participation, social capital, physical activity and mental health for adults (18-56) in the community.

Theoretical background

Physical activity, social and health-related issues have taken a strong position in our welfare society, which expand the traditional view on sport. They call for a collaboration between the sport sector, the social sector and the health sector. Policy makers realize that intersectoral collaborations are needed to resolve these problems, but find little research to base their decisions on. Most interventions focus on the internal validity of the intervention (Klesges, Dzewaltowski, & Glasgow, 2008).

This study wants to contribute to the body of knowledge by investigating the effectiveness of community sport in Flanders (i.e., the Dutch-speaking part of Belgium). Community sport is a community-wide campaign which involves many community sectors as recommended by the center for disease control and prevention (CDC, 2011).

Methodology, research design and data analysis

This study uses the RE-AIM –model as theoretical framework to measure the effectiveness of community sport. Two communities will be compared, one with an intensive community sport activity the other with no or little community sport activity. The communities were objectively chosen on the ground of their comparability for number of inhabitants, sex, age, work, education, ethnic origin. The sport initiatives

offered in these communities are characterized by its collaboration between the health, the social and the sport sector. Therefore goals from every sector will be measured with a questionnaire constituted of five parts. In the first part general information will be questioned. The second part measures sport participation. The third part examines physical activity with the IPAQ (Craig et al., 2003) The fourth social capital (Okayasu, Kawahara, & Nogawa, 2010) and the fifth mental wellbeing (Goldberg et al., 1997) All people living in the neighbourhood between 18-56 years are part of the sample frame. All respondents will be ad random selected, To reach a power of 0.80, 335 inhabitants of each community need to fill in the questionnaire.

Conclusions and future research

For EASM 2012 we will present the theoretical framework of interactions between the social, the sport, and the health sector. The methodology and different questionnaires that will be used to measure the different outcome variables will also be further clarified.

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