Facilitators and barriers for successul partnerships between youth care and community sports clubs

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Aim and research question

Socially vulnerable youths are youths who face one or more difficulties related to income poverty, an unhealthy lifestyle, negative experiences with institutions, and feelings of incompetence and rejection. Sport participation has shown to be a promising activity to improve the life skills of these youths that they need to deal with these difficulties (Lubans, Plotnikoff, & Lubans, 2012). Hence, a growing number of youth care organisations in the Netherlands have started to collaborate with community sports clubs. Such collaboration, or so-called coordinated action, is needed for community sports clubs to function as settings for youth development and health promotion (Meganck, Scheerder, Thibaut & Seghers, 2015; Geidne, Quennerstedt & Eriksson, 2013). However, little is known about the factors that facilitate or hinder coordinated action between these organisations. Therefore, we conducted a study to answer the following question: What are, according to stakeholders, facilitators for and barriers to successful coordinated action between youth care organisations and community sports clubs?

Theoretical background

To study the barriers and facilitators of coordinated action between youth care organisations and community sports clubs the Healthy ALLiances (HALL) framework (Koelen, Vaandrager & Wagemakers, 2012) was used. According to the HALLframework, outcomes of coordinated action are influenced by factors related to the organisations and the people participating in it (Koelen et al., 2012). It describes three clusters of such factors: (1) institutional factors (i.e. policies and funding mechanisms of participating organisations); (2) (inter)personal factors (i.e. attitudes and beliefs of participants and relationships between participants); and (3) organisational factors (i.e. how the coordinated action is organised, including leadership (style), and communication structure). Often, organisational factors can be used to deal with challenges that arise from institutional and (inter)personal differences that are brought into a coordinated action.

Methodology

Between March and November 2015, in-depth interviews were carried out at five purposefully selected locations. In total, 23 interviews were conducted: 5 interviews with professionals who facilitated the coordinated action, (one at each location), 9 interviews with youth care workers, and 9 interviews with representatives from community sports clubs. The interviews started with open questions about what the participants liked and disliked about the coordinated action. Furthermore, open questions were used to ask what factors they thought had

facilitated or hindered the coordinated action. Hereafter, interviewees were asked if the factors in the HALL framework in any way had facilitated or hindered the coordinated action.

Data analysis

Data analysis took place from a bottom-up perspective. First, parts of the interviews in which the interviewees spoke about factors that facilitated the coordinated action were coded as 'facilitator', and factors mentioned as barriers were coded as 'barrier'. Second, all parts about the facilitators and barriers were read again to identify and code specific types of facilitators and barriers. Third, clusters of higher order categories for facilitators and barriers were created. Factors that were believed to influence the coordinated action between youth care organisations and community sports clubs were then mapped against the factors from the HALL framework to further develop the framework and to describe factors that are of specific relevance for coordinated action between youth care organisations and community sports clubs.

Results

The most frequently mentioned facilitators for coordinated action between youth care organisations and community sports clubs were: personal relationships, the participation of someone who facilitates the coordinated action, clear roles and responsibilities, empathy among the participants, community sports clubs that know how to deal with socially vulnerable youths, and an informal communication structure. The most frequently mentioned barriers were: no time or budget available for youth care workers to get in contact with sports clubs and for sport coaches to develop skills to deal with socially vulnerable youths, a (lack of) personal interests (in sports) of the youth care workers, and a lack of overviews of community sports clubs that are willing to collaborate with youth care organisations.

Conclusion and discussion

In the conclusion the most frequently mentioned facilitators and barriers will be mapped against the factors from the HALL framework in order to discuss the relevance of the framework for coordinated action between youth care organisations and community sports clubs. Furthermore, factors that were believed to influence the coordinated action at different stages will be discussed, as well as the implications of the study results for the local management of community sports clubs as settings for youth development.

References

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