Intersectoral action for positive youth development through sport

Niels Hermens

Propositions

1. Actors in intersectoral action are not a victim of the societal and political context, but can influence this context so that it becomes favourable to the intersectoral action.
   (this thesis)
2. In intersectoral action between youth-care and sports clubs, it is the youth-care organisations' responsibility to build the conditions conducive of life skills development in sports.
   (this thesis)
3. It's nonsense that findings from single case studies are irrelevant for other setting than where the research is conducted.
4. Research protocols are useless because all research should be iterative.
5. Theoretical knowledge is a prerequisite for doing good practice-oriented research.
6. Having young children is both a burden and a blessing in finalising a PhD.

Propositions belonging to the thesis, entitled
'Intersectoral action for positive youth development through sports'

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Intersectoral action for positive youth development through sport

A mixed method study on collaboration between youth-care organisations and community sports clubs

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Chapter 1

General Introduction

Introduction

Socially vulnerable youth in high-income countries are youths that face stressors in their everyday life (Feinberg, Jones, Greenberg, Osgood, & Bontempo, 2010; Hawkins, Catalano, & Arthur, 2002). These stressors, including income poverty, poor family management, low housing quality, and peers being involved in problem behaviour, may lead to feelings of incompetence, social disconnectedness, a lack of ambition, and negative experiences with societal institutions, such as family, school, and healthcare (Haudenhuyse, Theeboom, & Skille, 2014; Vettenburg, 1998). To promote positive development in socially vulnerable youth, policymakers, researchers, and field workers increasingly recognise sport as a means to do so (Coalter, 2007; Fraser-Thomas, Côté, & Deakin, 2005; Schulenkorf, Sherry, & Rowe, 2016; Turnnidge, Côté, & Hancock, 2014). This trend follows research that shows that sports participation is associated with improved youth development outcomes, such as social and emotional well-being (Eime, Young, Harvey, Charity, & Payne, 2013), academic achievement (Hill et al., 2010; Trudeau & Shephard, 2008), executive functioning (Diamond & Lee, 2011), and improved self-regulation skills (Jonker, Elferink-Gemser, & Visscher, 2011).

However, socially vulnerable youth participate less frequently in sports than their average peers (Breedveld, Bruining, van Dorsselaer, Mombarg, & Nootebos, 2010; Vandermeerschen, Vos, & Scheerder, 2015; Wicker, Hallmann, & Breuer, 2012), and hence there is a need for novel approaches to include socially vulnerable youth in sports. One such novel approach is intersectoral action between youth-care organisations and community sports clubs (Super, Hermens, Verkooijen, & Koelen, 2014). Intersectoral action represents collaborative efforts involving organisations from two or more sectors (Jackson et al., 2006; Kickbush & Bucket, 2010; Koelen, Vaandrager, & Wagemakers, 2009). Despite the advocacy for intersectoral action between youth-care organisations and community sports clubs, little is known about how these organisations can best collaborate. This is the area to which this thesis aims to contribute.

This thesis is part of the research project, Youth, Care and Sport, that aimed to (1) explore the relationship between sports participation and the positive development of socially vulnerable youth and (2) provide insights into how youth-care organisations and community sports clubs can best collaborate (Super et al., 2014). This thesis addresses the second aim of the research project. The relationship between sports participation and the positive development of socially vulnerable youth has been addressed in a doctoral thesis by Sabina Super (Super, 2017).

In the remainder of this chapter, four issues are discussed. First, the policy trends in the Dutch youth-care and sports sectors are described. Second, more information is provided about intersectoral action between youth-care organisations and sports clubs, including a definition of intersectoral action and the rationale for this study. Third, the conceptual framework is explained. Fourth, the scope of this thesis is delineated by the research aim, research approach, and research questions.

Policy trends in the youth-care and sports sectors in the Netherlands

Youth-care organisations in the Netherlands provide services to socially vulnerable youths and their families (Hilverdink, Daamen, & Vink, 2015). In 2017, in the Netherlands, 405,180 youths between 0 and 18 years received support from one or more youth-care organisations; this represents around 12% of all youths in this age group (NJI, 2018). Examples of the services

provided by youth-care organisations include school social work, counselling, foster care, more specialised (mental) healthcare, and residential care for youths who face complex psychosocial or mental problems or whose home situation is unsafe. No distinction is made between the different types of services in this study of intersectoral action between youth-care organisations and community sports clubs.

Over the last decade, increasing healthcare costs and cuts in health and social care budgets drove national and local policymakers in the Netherlands to search for more efficient ways to organise and implement the services provided by youth-care organisations (Schuitmaker, 2013). One way in which national and local policymakers try to improve the efficiency of the youth-care sector is by increasingly expecting youth-care organisations to transform their way of working from a largely curative approach to a more preventive and empowering approach. Intersectoral action between youth-care organisations and community organisations, including sports clubs, is a core element of this approach. It is assumed that this intersectoral action supports youth-care professionals in discovering problems in youths at an early stage and empowering youths to participate in leisure-time activities. Along with the transition to a more preventive and empowering approach in the Dutch youth-care sector, responsibility for youth services was decentralised to local governments in the Netherlands (Ministerie van Veiligheid en Justitie, 2014). This decentralisation was grounded in the belief that local governments, compared to national governments, are more familiar with the local context where youths grow up and hence may more adequately and effectively (a) reach and include socially vulnerable youths and (b) encourage intersectoral action between youth-care organisations and community organisations.

Community sports clubs are the main provider of sports in the Netherlands; around 1,400,000 youths (0–18 years old) participate in a sports club (Tierolf, Gilsing, & Steketee, 2017). This corresponds to 74% of all youths aged 6–11 and 58% of all youths aged 12–18 participating in one or more community sports clubs (Tiessen-Raaphorst & Van den Broek, 2016). The most popular sports among youth in the Netherlands are football, gymnastics, field hockey, tennis, and martial arts (Elling, Schootemeijer, & Van den Dool, 2017; NOC*NSF, 2017). A notable characteristic of community sports clubs in the Netherlands is that almost everyone involved in their management and organisation is an unpaid volunteer (Waardenburg, 2016).

Until the end of the twentieth century, Dutch sports policies focused merely on an equal distribution of sports facilities over the Netherlands and on facilitating sports participation for the general population (Breedveld, Van der Poel, & Eling, 2012). Over the last decade, the wider social role of sports has gained attention in the Dutch national and local sports policies (Hermens, de Meere, & Los, 2014; Leenaars, 2017; Waardenburg, 2016). For example, policymakers started to see sports clubs as a setting for positive youth development, for the inclusion of the long-term unemployed, and for serving people facing health problems. This policy trend in the Netherlands aligns with policy trends in other countries where sports clubs are increasingly assumed to be settings where wider social goals can be addressed (Geidne, Quennerstedt, & Eriksson, 2013; Kokko, 2014; Meganck, Scheerder, Thibaut, & Seghers, 2015; Whitley et al., 2018).

Intersectoral action involving youth-care organisations and sports clubs

Multiple terms are used for collaborative efforts involving organisations from two or more sectors, including intersectoral action, cross-sector collaborations, partnerships, networks, alliances, and coalitions (Bryson, Crosby, & Stone, 2006; Gillies, 1998; Green, Daniel, & Novick, 2001; Koelen, Vaandrager, & Wagemakers, 2012; Provan & Milward, 2001; Roussos & Fawcett, 2000; Turrini, Cristofoli, Frosini, & Nasi, 2010). For the sake of simplicity, the terms intersectoral action and co-ordinated action are used interchangeably in this thesis. Following Bryson et al.'s (2006) definition, intersectoral action between youth-care organisations and community sports clubs is defined as the linking or sharing of information, resources, activities, and capabilities by youth-care professionals and community sports club representatives to achieve jointly an outcome that could not be achieved by these organisations separately (Bryson et al., 2006, p. 44). This encompasses bringing sports clubs as settings for positive youth development to the attention of youth-care professionals, connecting youth-care professionals and sports clubs, integrating sports in the support that youth-care professionals deliver to their clients, and developing and implementing sports interventions serving socially vulnerable youth (Super et al., 2014).

Successful intersectoral action is (a) synergetic, (b) sustainable, and (c) effective in reaching community outcomes (Bryson et al., 2006; Roussos & Fawcett, 2000; Turrini et al., 2010; Zakocs & Edwards, 2006). This means that intersectoral action between youth-care organisations and community sports clubs is successful when (a) the perspectives, knowledge, and skills that are brought into the intersectoral action by the youth-care organisations and sports clubs reinforce one another (Lasker, Weiss, & Miller, 2001), (b) the intersectoral action is long term, stable, and self-supporting (Pucher, Candel, Boot, & de Vries, 2017), and (c) the intersectoral action leads to the inclusion of socially vulnerable youths in sports.

However, successful intersectoral action is not easy. The youth-care professionals and the sports club representatives have to get used to new relationships, procedures, and structures (Lasker et al., 2001). Moreover, intersectoral action is complex because of the different sectoral backgrounds of the participating youth-care organisations and community sports clubs (Bryson et al., 2006; Koelen et al., 2012). These sectoral backgrounds guide the thoughts and behaviours of field workers, managers, researchers, and policymakers in a certain sector, as well as the rules and ways of working in different sectors (Fuenfschilling & Truffer, 2014; Thornton & Ocasio, 1999). Because the sectoral backgrounds of the youth-care and the sports sector in the Netherlands are dissimilar, the beliefs, rules, and ways of working in these sectors are different. This can make successful intersectoral action between youth-care organisations and community sports clubs in the Netherlands complicated. Research on how these organisations can best collaborate contributes to the implementation of successful intersectoral action and hence to the inclusion of socially vulnerable youth in sports.

Rationale for this study

In general, intersectoral action in the health promotion field is advocated because improvements in population health cannot be achieved by the health sector alone and because organisations have to work together in order to achieve their own goals (Koelen et al., 2009). National and local policymakers in the Netherlands advocate intersectoral action between the youth-care and sports sectors because it is assumed that these two sectors can promote positive youth development more adequately together than alone – for example, by cooperatively developing and implementing sports programmes that aim to facilitate positive youth development in socially vulnerable youth. Furthermore, intersectoral action can support youth-care organisations and community sports clubs in achieving their own goals. For youth-care organisations, investing in intersectoral action with sports clubs is a way to apply the more preventive and empowering approach. It may support youth-care professionals to encourage socially vulnerable youths to participate in a leisure-time activity, and information exchange with sports coaches may help youth-care professionals to discover at an early stage which youths and families need support. The sports sector may benefit from intersectoral action with youth-care organisations because such action may support sports clubs in including socially vulnerable youth. Also, information exchange with youth-care professionals may provide sports club volunteers with the knowledge needed to create a positive socio-pedagogical sports climate.

Research on how youth-care organisations and community sports clubs can best collaborate may support these organisations in dealing with their mutual differences and in aligning their strengths in order to promote the inclusion of socially vulnerable youth in sports. In addition, this thesis will contribute to the existing knowledge about intersectoral action in the broader organisational sciences (e.g., Provan and Milward, 2001; Bryson et al., 2006) and health promotion literature (e.g., Corbin, 2017; Koelen et al., 2012; Roussos & Fawcett, 2000). It is particularly interesting to study intersectoral action between youth-care organisations and community sports clubs because these two sectors differ on many aspects, thereby making intersectoral action challenging. One simple example of a difference between youth-care organisations and community sports clubs is the difference in opening hours; community sports clubs are open in the evening and at the weekend, but most youth-care professionals are not used to arranging activities at these times (den Hartog, Wagemakers, Vaandrager, van Dijk, & Koelen, 2014). Another example is the difference in organisational structure: whereas most community sports clubs build upon trust and informal agreements (Shaw & Allen, 2006), most youth-care organisations work with formalised procedures. Furthermore, because the organisational structure of most sports clubs is based on unpaid volunteers, sports clubs may experience difficulties regarding a scarcity of skilled and dedicated managers, sports coaches, and other volunteers (Casey, Payne, & Eime, 2009; Doherty, Misener, & Cuskelly, 2014; Wicker & Breuer, 2011). Consequently, sports club managers may need to focus on short-term goals, such as finding new staff and making sure that all planned sports activities continue. Such short-term goals may challenge the long-term goals of youth-care organisations pertaining to positive youth development and health promotion as their main responsibility (Casey, Payne, & Eime, 2012). By studying how youth-cate organisations and community sports clubs can best collaborate, this thesis may provide novel insights into how to manage intersectoral action involving organisations that are very dissimilar.

Conceptual framework

Multiple scholars have developed frameworks that help to understand, facilitate, and evaluate intersectoral action. Examples from the public management field include frameworks of determinants for network effectiveness (Provan & Milward, 1995; Turrini et al., 2010), a framework for understanding cross-sector collaborations (Bryson et al., 2006), and a framework for examining partnership working (Turrini et al., 2010). As intersectoral action has also been widely adopted in the public health sector (Irwin et al., 2006; Jackson et al., 2006; Nutbeam, 1998), researchers have developed frameworks for intersectoral action in this field, such as the Bergen Model of Collaborative Functioning (Corbin & Mittelmark, 2008) and the Healthy ALLiance (HALL) framework (Koelen et al., 2012). All the frameworks for intersectoral action state that the sectoral backgrounds of the participating organisations and individuals influence the extent to which intersectoral action can be successful. The existing frameworks also state that there are ways to overcome the possible hurdles in intersectoral action and to facilitate the participating organisations in achieving more through intersectoral action than they can achieve alone (Axelsson & Axelsson, 2006; Bryson et al., 2006; Corbin & Mittelmark, 2008; Koelen et al., 2012).

The HALL framework (Koelen et al., 2012) has been adopted as the conceptual framework for this thesis. This framework acknowledges that intersectoral action is an interplay among the institutional and personal backgrounds of the participating organisations and people. In addition, it acknowledges that the way in which differences in participating organisations and people are managed may influence the extent to which intersectoral action is successful. Although most of the other frameworks also acknowledge the interplay among institutional, personal, and managerial aspects of intersectoral action, the HALL framework was considered most useful for reducing the complexity in studying intersectoral action.

The HALL framework was developed stepwise in participatory research projects in which health policy professionals needed guidance in organising intersectoral action in health promotion (Vaandrager, Koelen, Ashton, & Revuelta, 1993). These projects resulted in a list of dilemmas and challenges for collaboration in health promotion (Koelen, Vaandrager, & Colomér, 2001) and a tool for partnerships to facilitate and evaluate intersectoral action in community health promotion (Wagemakers, Koelen, Lezwijn, & Vaandrager, 2010). In conjunction with experiences in community health promotion programmes and review studies on collaborative processes, the results of the participatory research projects formed the basis for the HALL framework (Koelen et al., 2012). Recently, Blok, Wagemakers, van Leeuwe, and Scholten (2014) and den Hartog et al. (2014) have adopted the HALL framework to study intersectoral action between care and sports organisations.

Three clusters of elements influencing the success of intersectoral action

The HALL framework visualises three clusters of elements that may influence the success of intersectoral action: institutional, personal, and organisational elements (see Figure 1.1). The institutional elements pertain to the organisations participating in the intersectoral action, such as these organisations' policies, planning horizons, and funding mechanisms. The personal elements pertain to the people participating, such as their attitude towards the intersectoral action, their personal relationships, and their competencies. The organisational elements relate to how the intersectoral action is managed.
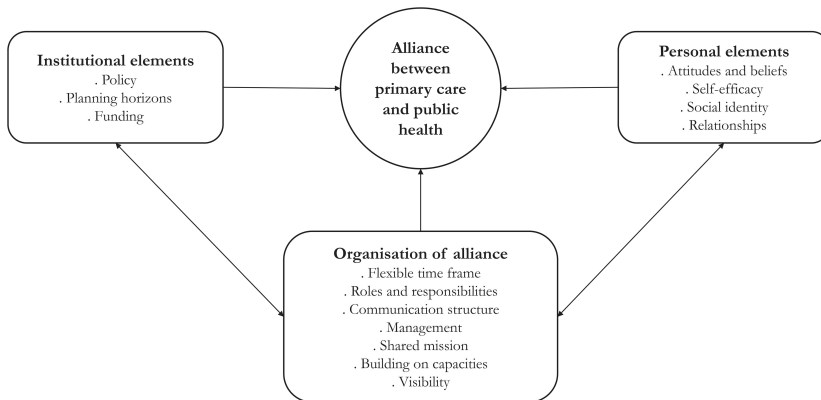

Figure 1.1 The Healthy ALLiances Framework (adopted from Koelen et al., 2012).

The institutional elements relate to the sectoral backgrounds of the different organisations. Because of the differences in these backgrounds, the organisations involved in intersectoral action bring various goals, criteria for success, planning horizons, and working procedures into an intersectoral action. One example of differences in institutional elements that may cause hurdles in intersectoral action between youth-care organisations and sports clubs is that their goals are very different; the main aim of most community sports clubs is to organise competitive sports activities, whereas the main aim of youth-care organisations is to support positive development in socially vulnerable youth. This difference in goals may cause hurdles in the intersectoral action, for example because an emphasis on competition in sports clubs may hinder the inclusion of socially vulnerable youth in sports clubs and the positive development of this youth group through sports (Bean, Fortier, Post, & Chima, 2014; Haudenhuyse et al., 2014). Furthermore, the previously mentioned differences in opening hours and in organisational structures may cause challenges in intersectoral action between youth-care organisations and community sports clubs.

The personal elements in intersectoral action relate to the ambitions, competencies, and past experiences of the individuals participating (Corbin & Mittelmark, 2008; Koelen et al., 2012). Examples of personal elements are the extent to which the individuals (a) perceive the intersectoral action and its aims as valuable, (b) feel that their participation in the intersectoral action can make a difference for the team, (c) possess the competencies needed for collaboration with other sectors, and (d) have trusting relationships with the other people participating (Koelen et al., 2012). Trust in the relationships may be of particular importance for intersectoral action

involving sports clubs because sports club representatives are accustomed to loose and informal agreements rather than formalised contracts (Misener & Doherty, 2013; Shaw & Allen, 2006).

Organisational elements can be adopted to (a) deal with challenges that arise from the differences between the organisations and the people participating in intersectoral action and (b) align the resources that the participating organisations and people bring into the intersectoral action (Koelen et al., 2012). The HALL framework includes seven of these organisational elements: a flexible time frame, clear roles and responsibilities, a clear communication structure, usage of the expertise and capacities of the involved organisations, a shared mission, the visibility of the intersectoral action and its results, and a neutral and empowering management of the intersectoral action. Concerning the management of intersectoral action, Turrini et al. (2010) described good managers as being able to solve tensions between the participating organisations and people to create an environment in favour of trusting relationships, and to steer collaborative processes in terms of decision making, activating participants, and creating legitimacy for the intersectoral action in the societal and political context in which it operates. Williams (2013) defined managers of intersectoral action as needing to be boundary spanners who function as a bridge between the organisations representing the different sectors in intersectoral action and who possess good communication, co-ordination, mediating, and entrepreneurial skills. Not only formalised coordinators, but also informal leaders, such as the initiators of the intersectoral action or frontline workers participating in the intersectoral action, can act as boundary spanners in intersectoral action (Bryson et al., 2006; Williams, 2013).

Scope and outline of this thesis

The aim of this thesis is to provide insights into the organisational context of inclusion of socially vulnerable youth in sports by exploring elements of successful intersectoral action between youth-care organisations and voluntary sports clubs. To address this broad study aim, an iterative mixed-method research approach has been adopted.

In iterative research processes "research questions may be changed over time based on material collected and … research strategies, data collection, and analysis methods and tactics should fit the (changing) research questions and process phases" (Kerssens‑van Drongelen, 2001, p. 503). This means that the studies conducted for this thesis are set up in multiple rounds. Following Jolley's community-based health promotion evaluation model (Jolley, 2014), the findings of each study formed the basis for successive and more specific research questions regarding intersectoral action between youth-care organisations and community sports clubs. An iterative research approach was needed because intersectoral action between youth-care organisations and community sports clubs was a relatively new and understudied phenomenon, and this made it impossible to formulate concrete research questions at the start of this research. Nonetheless, two initial broad research questions were formulated.

Research Question 1. What is the evidence on life-skill development in sports programmes serving socially vulnerable youth from both quantitative and qualitative studies?

Research Question 2. Which aspects of intersectoral action between youth-care organisations and community sport clubs make these collaborations successful?

Eventually, this thesis was composed of five studies. One study addressing Research Question 1, three studies addressing Research Question 2, and one study addressing a third research question formulated on the basis of the findings from the studies that addressed Research Question 2.

Research Question 3. What mechanisms underlie the process of how intersectoral action between youth-care organisations and community sports clubs evolves and becomes embedded in local social policies?

The three studies conducted to answer Research Question 2 addressed different sub-questions that were formulated throughout the research process. The research questions and research methods are presented in Table 1.1. In-depth descriptions of the research methods adopted per study are provided in Chapters 2–6.

Table 1.1. Overview of the research questions and research methods

Research Question	Study	Method
1. What is the evidence on life-skill development in sports programmes serving socially vulnerable youth from both quantitative and qualitative studies?	Study A	Systematic literature review
2. Which aspects of intersectoral action between youth-care organisations and voluntary sport clubs make these collaborations successful?		
2.1 What, according to youth-care professionals and volunteers from community sports clubs, are the factors that contribute to intersectoral action between youth-care organisations and community sports clubs?	Study B	Open in-depth interviews with youth-care professionals (n=5) and open in-depth focus groups with sports club representatives (n=20)
2.2. According to the participants in intersectoral action between youth-care organisations and community sports clubs, what are the performance indicators for this intersectoral action? 2.3 According to the participants in intersectoral action between youth-care organisations and community sports clubs, what are the facilitators of, and barriers to, this intersectoral action?	Study C	Semi-structured in-depth interviews with youth-care professionals (n=9), sports club representatives (n=9), and boundary spanning professionals (n=5)
2.4 What is the relative importance of institutional, (inter)personal, and organisational elements for the success of intersectoral action between sports and public health organisations?	Study D	Cross-sectional quantitative study among participants in partnerships between sports and public health organisations (n=86)
3. What mechanisms underlie the process of how intersectoral action between youth-care organisations and community sports clubs evolves and becomes embedded in local social policies?	Study E	Case study based on content analysis of policy documents and in-depth interviews with policy officers, managers, and field workers operating in the fields of youth-care and sports in a large Dutch city

Chapter 1

Description of the iterative research process

Research question 1 was addressed with a systematic literature review on the evidence for life-skill development in sports programmes serving socially vulnerable youth. This review examined whether sports settings have the potential to promote life-skills development in socially vulnerable youth. In addition, the review study provided insights into the social conditions that may be conducive to life-skills development in sports programmes serving socially vulnerable youth. These conducive conditions may steer the activities conducted in the intersectoral action between youth-care organisations and community sports clubs.

Throughout the iterative research process, *Research Question 2* was operationalised into four sub-questions that were addressed in three studies (Studies B, C, and D). *Research Question 2.1* "What, according to youth-care professionals and volunteers from community sports clubs, are the factors that contribute to intersectoral action between youth-care organisations and community sports clubs?", was addressed in Study B. This was done through open interviews with youth-care professionals and focus groups with sports club representatives. *Research Question 2.2* "According to the participants in intersectoral action between youth-care and sports, what are the performance indicators for this intersectoral action?", and *Research Question 2.3* "According to the participants in intersectoral action between youth-care and sports, what are the facilitators of, and barriers to, this intersectoral action?" were formulated to generate more insights into facilitators of, and barriers to, successful intersectoral action between youth-care organisations and community sports clubs. These research questions were addressed in Study C through semi-structured interviews with youth-care professionals, sports club representatives, and paid professionals who co-ordinated intersectoral action between youth-care organisations and sports clubs. The interview guides for the semi-structured interviews were partly based on the results from Study B.

Research Question 2.4 "What is the relative importance of institutional, (inter)personal, and organisational elements for the success of intersectoral action between sports and public health organisations?" was developed after Studies B and C. This question was addressed through Study D, which was a cross-sectional survey study among public health professionals and sports club volunteers participating in intersectoral action between these two types of organisations. This study examined the relationships between the perceived success of intersectoral action and the different institutional, personal, and organisational elements. The questionnaire developed for Study D included measures for three indicators of the success of the intersectoral action derived from the answer to Research Question 2.2, and for nine elements of intersectoral action derived from the answers to Research Question 2.1 and Research Question 2.3.

The findings from Studies B and C hinted at elements of intersectoral action that may be of particular importance for its evolution and embedding in the wider societal and political context. To unravel what these elements are, *Research Question 3* was addressed in Study E. This was a single case study into the evolution and embedding of intersectoral action between youth-care organisations and community sports clubs in the local policy of a large Dutch city. The case study was based on analysis of policy documents and in-depth interviews with policymakers in the youth-care and sports sectors, and managers of youth-care and sports organisations.

Outline of this thesis

The remainder of this thesis is structured along the research questions. **Chapter 2** answers Research Question 1 by describing the evidence for life-skill development in sports programmes serving socially vulnerable youth. **Chapters 3, 4, and 5** present the three studies that addressed Research Question 2, and **Chapter 6** describes the case study undertaken to answer Research Question 3. **Chapter 7** integrates the findings from the different studies and provides recommendations for successful intersectoral action between youth-care organisations and community sports clubs.

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Chapter 2

A systematic review of life skill development through sports programs serving socially vulnerable youth

Abstract

Purpose: Despite the strong belief in sports programs as a setting in which socially vulnerable youth can develop life skills, no overview exists of life skill development in sports programs serving this youth group. Therefore, the present systematic review provides an overview of the evidence on life skill development in sports programs serving socially vulnerable youth, and, insofar as this was investigated in the included studies, of the conditions conducive to life skill development in these sports programs. *Method*: Potentially relevant studies published between 1990 and 2014 were identified by a search in seven electronic databases. The search combined terms relating to (a) sport, (b) youth AND socially vulnerable, and (c) life skills. Eighteen of the 2,076 unique studies met the inclusion criteria. *Results*: Each included study reported that at least one life skill improved in youth that participated in the studied sports program. Improvements in cognitive and social life skills were more frequently reported than improvements in emotional life skills. Only a few of the included studies investigated the conditions in the studied sports programs that made these programs conducive to life skill development. *Conclusions*: Sports programs have the potential to make a difference in the life skill development of socially vulnerable youth. This conclusion needs to be treated with some caution, because the studies experienced many challenges in reducing the risk of bias. Several alternative research strategies are suggested for future studies in this field.

Introduction

This systematic review provides an overview of the evidence on life skill development in sports programs serving socially vulnerable youth. Socially vulnerable youth represent a broad group, ranging from youth living in areas of low socio-economic status (SES) to youth receiving residential care or non-residential counselling. A common denominator is that they face stressors in their everyday life, such as income poverty, poor family management, low housing quality, and peers involved in problem behavior (Feinberg, Jones, Greenberg, Osgood, & Bontempo, 2010; Hawkins, Catalano, & Arthur, 2002). These stressors may lead to feelings of incompetence, social disconnectedness, negative experiences with societal institutions (e.g., family, school, and health care), a lack of ambition (Haudenhuyse, Theeboom, & Skille, 2014; Vettenburg, 1998), and a reduced chance of participating in meaningful activities, such as sports (Turnbull & Spence, 2011; Vandermeerschen, Vos, & Scheerder, 2013). Programs aiming to support youth in dealing with stressors of everyday life are often grounded in the Positive Youth Development (PYD) perspective, which emphasizes that youths, including those who are socially vulnerable, have the potential to develop the life skills that they need to deal with the stressors they face (Damon, 2004; Lerner, et al., 2005). Moreover, life skills are important predictors of youths' future well-being, academic performance, and job satisfaction (Converse, Piccone, & Tocci, 2014; Ridder, Lensvelt-Mulders, Finkenauer, Marijn Stok, & Baumeister, 2012; Zins, Weissberg, Wang, & Walberg, 2004).

Life skills, defined as "those skills that enable individuals to succeed in the different environments in which they live, such as school, home and in their neighborhoods" (Danish, Forneris, Hodge, & Heke, 2004, p. 40), can be divided into emotional, cognitive, and social skills (Lerner, et al., 2005; Turnnidge, Côté, & Hancock, 2014). Emotional life skills pertain to one's internal sense of well-being and self-worth (Lerner, et al., 2005). The development of emotional skills is particularly important for socially vulnerable youth because they face mental health problems more often than non-vulnerable youths do (Reiss, 2013; Wille, Bettge, & Ravens-Sieberer, 2008). Cognitive life skills pertain to abilities such as self-regulation, decision making, and impulse control (Lerner, et al., 2005). Such cognitive skills are shown to be protective factors for the stressors that socially vulnerable youth face in their everyday life (Lösel & Farrington, 2012). Social skills pertain to skills that can be used in interpersonal relationships, such as communication skills, conflict resolution, and prosocial behavior (Lerner, et al., 2005). The development of social skills is important for socially vulnerable youth because those skills may help them to decrease social disconnectedness, which is one of the major indicators for social vulnerability (Haudenhuyse, et al., 2014).

Sports programs (i.e., formally structured activities that take place for a specific time-period and in the presence, or under the instruction, of adults (E. Bean, Whitley, & Gould, 2014; Fuller, Percy, Bruening, & Cotrufo, 2013; Ullrich-French, McDonough, & Smith, 2012)), are believed to provide youths with settings for life skill development (Fraser-Thomas, Côté, & Deakin, 2005). It is argued that positive experiences in sports programs lead to improved emotional life skills, such as increased self-worth or reduced depressive symptoms (Eime, Young, Harvey, Charity, & Payne, 2013). A suggested mechanism for the development of cognitive life skills is the goal-setting behaviour required in the sports setting, giving young people the opportunity to hone their cognitive skills (Jonker, Elferink-Gemser, & Visscher,

2011). Moreover, the sports setting is an environment rich in feedback, which is considered to be a prerequisite for the development of cognitive life skills such as self-regulation skills (Jonker, et al., 2011). Besides these social and psychological mechanisms, physiological mechanisms are suggested for the relationship between sports participation and emotional and cognitive outcomes. For instance, it has been shown that physical activity leads to changes in neurotransmitters associated with improved well-being (Lubans, Plotnikoff, & Lubans, 2012), self-esteem (Cerin, 2010), and executive functioning (Diamonds & Lee, 2011). Finally, Bailey, Hillman, Arent, and Petitpas (2013) suggest that, as many sports programs take place in a social setting, such programs provide youths with opportunities to develop social skills such as communication skills, conflict resolution, and empathy.

In order to develop and run sports programs serving socially vulnerable youth, policymakers and social professionals will benefit from an overview of what is known about life skill development in such programs. In a systematic review of the psychological and social benefits of participation in sport for children and adolescents, Eime, et al. (2013) found that improved self-esteem, social interaction, and fewer depressive symptoms were the most commonly reported psychological and social benefits of sports participation. However, the possibility of generalizing their findings to socially vulnerable youth is limited, because their overview did not distinguish between socially vulnerable and non-vulnerable youth. Such a distinction is needed, because the mechanisms underlying life skill development through sports may differ for these two youth groups (Haudenhuyse, et al., 2014). Also, Eime, et al. (2013) did not distinguish between studies on sports programs and so-called sports-for-development programs or sport plus programs. Sports-for-development programs are sports programs intentionally structured to serve socially vulnerable youths' sports participation and/or life skill development (Coalter, 2015). Only Lubans, et al. (2012) systematically reviewed studies on the benefits of sports programs serving socially vulnerable youth. The authors provide an overview of quantitative studies published between 1990 and 2011 on the impact of outdoor activity programs, sport and skill-based programs, and physical fitness programs (e.g., aerobics and circuit training) on the social and emotional well-being of socially vulnerable children and youths aged 4 to 18. On the basis of six studies that examined the benefits of sports programs, Lubans, et al. (2012) concluded that sports programs potentially have beneficial outcomes for socially vulnerable youth, but that their findings should be treated with caution because of the low number of included studies.

It is useful to expand Lubans, et al. (2012) work with more recent studies for several reasons. First, to our knowledge, additional quantitative studies that examined life skill developments in sports programs serving socially vulnerable youth have been published since Lubans et al.'s review (e.g., (D'Andrea, Bergholz, Fortunato, & Spinazzola, 2013) and (Terry, Hahn, & Simjanovic, 2014)). Second, it is useful to expand Lubans, et al. (2012)work with qualitative studies that have described sports coaches', parents', and youths' perceptions of life skill development in these programs, such as the studies by (Beaulac, Kristjansson, & Calhoun, 2011) and (Riley & Anderson-Butcher, 2012). A final reason for conducting the present review is that previous reviews in this field ignored the conditions conducive to life skill development that were investigated in the included studies. This is unfortunate, because it has been shown that sports programs need to meet certain conditions in order to provide a setting that supports life

skill development (Coalter, 2015; Fraser-Thomas, et al., 2005), such as positive peer relationships and sports coaches creating a task oriented sports climate (Haudenhuyse et al., 2014; Newton, et al., 2007; Smith, Smoll & Cumming, 2007). Conducive conditions seem to be particularly important in sports programs serving socially vulnerable youth. For instance, because the emotional baggage of these youths may lead to negative sport experiences and mechanisms of exclusion in sports settings that emphasize competition and masculinity (C. N. Bean, Fortier, Post, & Chima, 2014; Haudenhuyse, et al., 2014). Such exclusion in sports and negative sports experiences have been found to increase feelings of rejection and social isolation that can further push these youths down the spiral of vulnerability (Super, Wentink, Verkooijen & Koelen, 2017)

Study Aim

To summarize, despite the increased attention on sports programs as a setting for life skill development in socially vulnerable youth, no recent overview exists of quantitative and qualitative studies investigating the life skill development in sports programs serving this group. Therefore, the main aim of the present review is to describe the evidence on life skill development in sports programs serving socially vulnerable youth from quantitative and qualitative studies. As previous systematic reviews did not address conditions conducive to life skill development that were investigated in studies on life skill development in sports programs, an additional aim of this review is to describe what is known about conducive conditions from studies on life skill development in sports programs serving socially vulnerable youth. Accordingly, the following two research questions were formulated: (1) What is the evidence on life skill development in sports programs serving socially vulnerable youth from both quantitative and qualitative studies? and (2) What is known about conducive conditions for life skill development from these studied sports programs? By addressing these two research questions, this review supports the knowledge base that will help policymakers and practitioners to select and develop sports programs serving socially vulnerable youth, and that will support researchers to develop new studies in this field.

Methods

To identify relevant studies, the first author developed a search in continuous deliberation with the other authors. The search combined terms relating to (a) sport, (b) youth AND socially vulnerable, and (c) life skills. In line with Turnnidge et al. (2014), the major outcome variables were terms related to emotional, cognitive, and social life skills. The full search is available in Appendix A. We did not add search terms for research question 2, because we aimed to explore what is known about conducive conditions for life skill development in studies included to answer research question 1. The search was carried out in seven electronic databases (Scopus, SportDiscus, PsycINFO, SOCindex, Psychology and Behavioral Sciences Collection, Pubmed, and Web of Science), resulting in a set of 2,674 records. After removing 598 duplications, the titles and abstracts of 2,076 unique studies published between 1990 and 31 December 2014 were screened by the first and second author (see Figure 2.1).

To be included, studies had to meet three initial criteria. The study population had to be *socially vulnerable youth* aged 10–23, the setting had to be a *sports program* serving this youth group, and *life skill development* had to be reported. Studies were excluded if they did not present primary

data, were not published in English or Dutch, and/or if they were published before 1990. Both authors started to screen titles and abstracts independently. After one day of screening, when each author had screened the titles and abstracts of 67 studies, they compared their decisions. The inter-rater reliability of the decisions between the two authors was strong: 0.96 (McHugh, 2012). Having discussed the three studies on which they decided differently, the authors agreed to exclude studies at this screening stage only if it was very obvious that the study did not meet the inclusion criteria. The remaining articles were divided between the two authors to screen titles and abstracts, and 147 studies remained for full text assessment after this screening process.
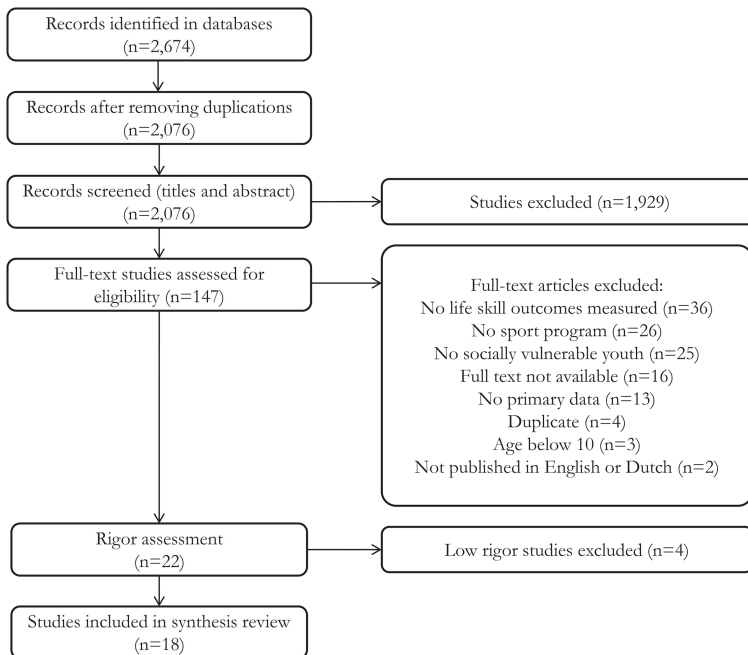


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Records identified in databases
(n=2,674)
        │
        ▼
Records after removing duplications
(n=2,076)
        │
        ▼
Records screened (titles and abstract)    →    Studies excluded (n=1,929)
(n=2,076)
        │
        ▼
Full-text studies assessed for            →    Full-text articles excluded:
eligibility (n=147)                             No life skill outcomes measured (n=36)
                                                No sport program (n=26)
                                                No socially vulnerable youth (n=25)
                                                Full text not available (n=16)
                                                No primary data (n=13)
                                                Duplicate (n=4)
                                                Age below 10 (n=3)
                                                Not published in English or Dutch (n=2)
        │
        ▼
Rigor assessment                          →    Low rigor studies excluded (n=4)
(n=22)
        │
        ▼
Studies included in synthesis review
(n=18)
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Figure 2.1 Flowchart of the review process

The first and second author read the full texts of all 147 studies and independently considered the inclusion of the studies. At this stage, two exclusion criteria were added. We excluded studies if the sports activity was not the core element of the program but merely one of the program elements among several other non-sports elements. We also excluded studies if they only reported on outcomes directly related to the sports context, such as physical activity efficacy or teamwork in the sports setting. If the authors disagreed, the third author read the study and discussed with the first and second author whether it should be included or excluded. After the full text assessment, 22 studies remained.

The last inclusion criterion was that the study had to be of medium or high rigor. In order to exclude studies of low rigor, we assessed the rigor of the 22 studies using 10 criteria derived from the TAPUPAS framework (Pawson, Boaz, Grayson, Long, & Barnes, 2003). The TAPUPAS framework was chosen to develop the rigor assessment criteria, because it contains general quality criteria that can be applied to both quantitative and qualitative studies. The 10

criteria were: Clear description of study aim; Appropriate size of sample; Sound selection/sampling of sample; Appropriate description of the context of the study and of the study participants; Conclusions supported by the data; Sound description of limitations; Sound data; Appropriate analysis to answer the research question; Logical, traceable, and clear documentation of the research process; Sound extrapolation of conclusions to theoretical population. To assess the rigor of the studies, the first two authors independently scored the studies on each of the 10 criteria: 1 point if a study satisfied a criterion, 0 points if a study did not. Hence, in total, studies could be assigned 10 points: one for each criterion. When the first and second author disagreed about the rigor assessment of a study, this was discussed with the third author, who also read all 22 studies. Studies that received fewer than five points were assigned low rigor, studies that received five to seven points were assigned medium rigor, and studies that received eight or more points were assigned high rigor (van Dillen, van Binsbergen, Koelen, & Hiddink, 2013). At the end of this stage, we excluded four studies because they were of low rigor, leaving 18 studies in the synthesis.

To synthesize the data, the first author extracted data from the included studies regarding the type of sports program, the participants, the study design and methods, and the study results. Thereafter, the first author wrote summaries of the extracted data and had ongoing discussions on the synthesis of the data with the second author. The four authors discussed the summaries and synthesis several times in the review process.

Results

This section starts with an overview of the studied sports programs and a brief summary of their designs and methods. Thereafter, the findings of the studies are presented along the three major outcomes: emotional life skills, cognitive life skills, and social life skills. Finally, we give an overview of what the studied sports programs tell us about conditions conducive for life skill development.

Sports Programs

Table 2.1 gives an overview of the 18 sports programs studied. The programs were conducted in urban areas in six countries, but mostly in the USA (n=10) or Canada (n=3). The settings in which they were conducted were schools in low SES areas (n=9), summer camps serving socially vulnerable youth (n=4), community centers or community sports clubs in deprived areas (n=3), and residential care (n=2). In most of the programs, youths participated voluntarily. In some of the programs in the school setting, youths were selected for participation by a school staff member. Twelve of the 18 programs included PYD principles (see Table 2.1). In line with PYD theory (Damon, 2004), these programs aimed to foster positive development. Some of these programs included PYD principles by building upon the Teaching Personal and Social Responsibility (TPSR) Model, which is based on the idea that youths can develop effort and teamwork skills, self-direction and goal setting, leadership and helping skills, and respect for others if they play an active role in coaching the sports activities (Hellison, 2003). Other PYD principles included in the sports programs were a mastery sports climate (e.g., Beaulac et al., 2011), a positive peer and coach–youth relationship (e.g., Bean E. et al., 2014; Ullrich-French, et al., 2012), and facilitating positive sports experiences (e.g., Holt et al., 2012; Terry et al., 2014). In

addition to the sports programs based on PYD principles, four programs included principles that should empower youths to engage in program development and in decision-making processes in the sports activities. For instance, the program studied by Bruening et al. (2009) was based on theories of engagement and free-choice learning, and the program studied by Bonhauser et al. (2005) involved youths in deciding which sports were offered in the sports program. Finally, one program was based on therapeutic procedures (D'Andrea et al., 2013) and one study did not mention the program's theory base (Hasanpour, et al., 2014). The six programs that were not based on PYD principles aimed to increase physical activity and physical fitness, rather than foster positive developments (see Table 2.1).

Table 2.1. Aims, target groups, settings, and content of the sports programs

Study	Setting	Theory base	Aim sports program	Participants sports program	Selection and background participants	Program content
Anderson-Butcher et al. (2014)	Summer camp	Positive youth development principles and the TPSR Model	Foster social competence	Boys and girls aged 9–16	Voluntary participation of youths from deprived area	Summer camp of 19 successive workdays. Each day included one hour of play-based social skills instruction and three hours of sports instruction.
Armour & Duncombe (2013)	School	Positive Youth Development, Elite role models	Support teachers to work with young people who experience difficulties in school life	Boys and girls aged 10–19	Teachers selected pupils based on their professional judgements about who could benefit from the program	Weekly sports activities for 8 to 12 weeks. The type of sports (e.g., football, skate boarding, rugby, judo) varied among schools. In half of the schools, elite sports people (i.e., role models) visited three of the sessions.
Armour & Sandford (2013)	School	Positive Youth Development	Contribute to local community, aid the personal, social, and educational development of participants, and re-engage pupils in education	Boys and girls aged 13–14	Teachers selected youth based on their professional judgement about which youths were disengaged	One full week of outdoor sport activities and one additional weekend for pupils most in need.

Table 2.1 - continued

Study	Setting	Theory base	Aim sports program	Participants sports program	Selection and background participants	Program content
Bean, E. et al. (2014)	Community sports club	Positive Youth Development, emphasizing positive coach–youth relationship	Develop life skills and character	Boys and girls aged 10–18	Voluntary participation of youths from deprived area	Organized practices and scheduled competition. Sports coaches received training on how to build relationships with the participants and how to act as a mentor.
Beaulac et al. (2011)	Community recreation centre	Positive Youth Development	Respond to an identified need for pro-social, structured, and accessible physical activity programs	Boys and girls aged 11–16	Voluntary participation of youths from a deprived area	Weekly free dance classes, for 13 successive weeks.
Bonhauser et al. (2005)	School	Adult learning approach	Improve physical fitness	Boys and girls around age 15	Compulsory physical activity classes for all ninth graders at two schools in a deprived area	Weekly sports sessions of 1.5 hours for a full school year. Each session comprised stretching, arm, leg, and trunk movement, fast walking, running and jumping, and sports practice.
Bonnette et al. (2001)	Summer camp	Indirect teaching methods for critical thinking	Not reported	Boys aged 10–13	Voluntary participation of youths from financially challenged families could participate	Sports-based summer camp of three weeks. Each day included 40 min of sports skills instruction. The teachers of half of the groups were encouraged to promote critical thinking in the youths.
Bruening et al. (2009)	Community centre	Theories of engagement and free-choice learning	Promote healthy life choices in preadolescent girls of color	Girls aged 9–13	Voluntary participation of girls who experienced problems in several areas (e.g., family, school)	Two 2-hr sessions a week. Each session included sports instruction, life skills instruction, and a dinner including a nutrition lesson.

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Table 2.1 - continued

Study	Setting	Theory base	Aim sports program	Participants sports program	Selection and background participants	Program content
D' Andrea et al. (2013)	Residential treatment setting	Therapeutic procedures of the Attachment, Regulation and Competency framework	Not reported	Girls aged 12–21	Voluntary participation of traumatized girls in residential treatment with histories of severe emotional and behavioral problems	For a period of five months, one basketball game each week against a team of girls from another residential treatment setting. Also, a basketball skills clinic every sixth week.
Fuller et al. (2013)	School	Positive Youth Development	Provide experiences that increase opportunities for positive youth development	Boys aged 10–13	Selection by the school family resource counsellors at schools where 95% of the pupils are eligible for free/reduced-price meals	Twenty-four weeks of daily 2-hr sessions, including sports (basketball, football, floor hockey, and soccer) and other physical activities, life skills programming, and pertinent nutrition lesson.
Hasanpour et al. (2014)	Pseudo-family centre	Not reported	Not reported	Girls aged 13–19	Random selection of orphan girls in pseudo family centres	Twenty-four aerobic sessions (10 min warming-up, 40 min exercise, 10 min cooling-down) in two months.
Hellison & Wright (2003)	School	Positive youth development principles and personal–social responsibility model	Use basketball to teach youth to take responsibility for coaching, helping, and leading the sports activities	Boys and girls aged 10–14	Voluntary participation of pupils that were selected by teachers because they showed discipline problems at school	Once a week basketball activity.
Holt et al. (2012)	School	Positive Youth Development	Contribute to positive development of youth	Boys and girls aged around 12	Voluntary participation of students at a school in a deprived inner-city area	Three times a week lunchtime sport activities for a full school year.
Laberge et al. (2012)	School	Social marketing principles	Stimulate lunchtime physical activity at impoverished middle and secondary schools	Boys and girls aged 13–14	Voluntary participation of students	Diverse lunchtime physical activity activities of at least 45 min, for 16 successive weeks on three to five days a week.

Table 2.1 - continued

Study	Setting	Theory base	Aim sports program	Participants sports program	Selection and background participants	Program content
Riley & Anderson-Butcher (2012)	Summer camp	Positive youth development principles and the TPSR Model	Increase social competence, self-control, effort, teamwork, and social responsibility	Boys and girls aged 9–16	Voluntary participation of youths from a deprived area	Nineteen successive workdays, four hours each day including one hour of play-based social skills instruction and three hours of sports instruction.
Terry et al. (2014)	School	Focus on physical fitness, enjoyment, and safety (PYD principles)	Increase participation in sports clubs and build fitness, technical skills, and positive social attitudes	Boys and girls aged 11–12	Voluntary participation	Nineteen 50-min boxing sessions (warm-up, physical and technical part, warm-down) spread over eight weeks.
Ulrich-French et al. (2012)	Summer camp	Positive Youth Development	Address personal and social assets and environmental barriers to healthy living	Boys and girls aged 9–16	Voluntary participation of low-income youths	Four weeks of daily (Monday–Friday) physical activity activities.
Walsh et al. (2010)	School	Positive youth development principles and the TPSR model	Improve responsibility skills	Boys and girls aged 9–11	Voluntary participation of youngsters from a school in a low-income and minority neighborhood	One hour of basketball practice every week for a period of two school years. The first eight sessions were used to establish norms, from the ninth session focus on self-direction, goal setting, leadership, and helping. Games led by the participants themselves.

Chapter 2

Designs and Methods

The study designs and methods varied greatly between studies, ranging from experimental quantitative studies to qualitative interview studies (see Table 2.2). Most of the quantitative studies applied validated instruments to assess youths' life skills, but different instruments were used to assess the same life skill across studies. For instance, to assess self-esteem, Bonhauser et al. (2005) used the Tennessee Self-Concept Scale, Laberge et al. (2012) the Rosenberg global self-esteem scale, and Hasanpour et al. (2014) the Coppersmith self-esteem inventory. In addition to youths, the participants in the qualitative studies involved parents and program staff members.

Table 2.2. Description of the included studies and study results

Study	Design	Method	Instrument	Sample size	Emotional life skills	Cognitive life skills	Social life skills
Anderson-Butcher et al. (2014)	Pre-post test	Quantitative	Survey including a scale for social responsibility	287 youths			Increase in *social responsibility*, i.e., helping others; stronger increase for youth with low scores at t0 and for youth with strong sense of belonging to sport program
Armour & Duncombe (2013)	Quasi-experimental	Quantitative	Pupil profiles written by teachers (quantified for the analysis)	5,253 pupils: 2,701 in sports program including elite sports role models, 2,552 in sports program without		Perceived improvements in *self-esteem*	Perceived improvements in *social skills*
Armour & Sandford (2013)	Quasi-experimental	Mixed	Pupil profiles written by teachers (quantified for the analysis), interviews, and focus groups	Profiles of 560 pupils: 440 experimental group and 120 comparison group; Interviews: 19 mentors, 9 school staff, 5 program staff; Focus groups: 20 pupils, 8 mentors		Perceived improvements in *self-confidence*, i.e., willingness to try new things	Perceived improvements in *communication skills*, *teamwork skills*, and *empathy*
Bean, E. et al. (2014)	Post-test	Qualitative	Semi-structured interviews	23 youths who participated in the program for at least three years		Perceived improvements in *self-motivation* and *future focus*	Perceived improvements in *social interaction* and *conflict resolution skills*

Table 2.2 - continued

Study	Design	Method	Instrument	Sample size	Emotional life skills	Cognitive life skills	Social life skills
Beaulac et al. (2011)	Post-test	Qualitative	In-depth interviews and focus groups	14 youths, two focus groups with parents, and one focus group with program staff	Perceived improvement in *mood*	Perceived improvements in *self-confidence* (trying new activities)	Perceived improvements in *respect for diversity*
Bonhauser et al. (2005)	Quasi-experimental	Quantitative	Survey including the Hospital Anxiety and Depression Scale, and the Tennessee Self-Concept Scale	198 youths: 98 from two experimental schools and 100 from two comparison schools	Decrease in *anxiety symptoms*. No change in *depressive symptoms*	Increase in *self-esteem*	
Bonnette et al. (2001)	Quasi-experimental	Quantitative	Survey including the New Jersey Test of Reasoning Skills and the Self-perception Profile for Children	80 youths: 36 in a Sport Skills Instruction+ group and 44 in a Sport Skills Instruction group	No change in *global self-worth*	Increase in *critical thinking*, stronger increase in Sport Plus group than in Sport group	
Bruening et al. (2009)	Case studies	Qualitative	Open interviews	5 cases, for each case two interviews with the youth and two with a parent			Perceived increase in *prosocial involvement*; Few examples of improvement in *behavioral competences*.
D' Andrea et al. (2013)	Quasi-experimental	Quantitative	Survey, including Achenbach's Child Behavior Checklist	88 girls: 62 in intervention group receiving sport activities in addition to treatment as usual and 26 in comparison group receiving treatment as usual	Decrease in *internalizing symptoms*, i.e., anxiety, depression, withdrawal, and somatic complaints		

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Table 2.2 - continued

Study	Design	Method	Instrument	Sample size	Emotional life skills	Cognitive life skills	Social life skills
Fuller et al. (2013)	Case studies	Qualitative	Open interviews	8 cases, for each case one interview with the youth and one with a parent		Perceived improvement in *self-efficacy, resistance skills,* and *self-concept*	Perceived improvement in *ability to communicate* and a*bility to resolve conflict*
Hasanpour et al. (2014)	RCT	Quantitative	Survey, including the Coppersmith self-esteem inventory	66 *girls*		Increase in *self-esteem*	
Hellison & Wright (2003)	Post-test	Quantitative	Retention data from attendance records and self-report data from evaluation surveys with open-ended questions	43 (out of 78) youths			43 youths perceived improvement in *social responsibility in the sports program,* of whom five perceived improvement in *responsibility skills in other settings*
Holt et al. (2012)	Post-test	Qualitative	Open interviews	59 youths and 8 school staff members			Perceived improvement in *empathy,* i.e., understanding and caring
Laberge et al. (2012)	Quasi-experimental	Quantitative	Survey, including the Conners-Wells Adolescent Self-Report Scale, the Rosenberg global self-esteem scale, and a self-developed scale for interethnic relationships	222 youths: intervention group of 131 grade 8 students and comparison group of 91 grade 7 students from the same school		Increase in *concentration/attention*; No change in *self-esteem* and *self-control*	No change in *social competence* and *interethnic relationships*
Riley & Anderson-Butcher (2012)	Post-test	Qualitative	Semi-structured interviews	10 parents		Perceived improvements in *confidence*, *self-esteem, discipline, initiative*, and *taking responsibility for own actions*	Perceived improvements in the *ability to deal with conflicts, ability to adapt to different people*, and *communication skills*

Table 2.2 - continued

Study	Design	Method	Instrument	Sample size	Emotional life skills	Cognitive life skills	Social life skills
Terry et al. (2014)	Quasi-experimental	Quantitative	Survey, including the Brunel Mood Scale and the Strengths and Difficulties Questionnaire	51 youths: 26 in intervention group and 25 in comparison group receiving a well-established non-physical social development program	No change in *mood*		Short-term (but not sustainable) decrease in *total difficulties score*
Ulrich-French et al. (2012)	Pre-post-test	Quantitative	Survey, including the Self-Perception Profile for Children, and the Children's Hope Scale	197 youths	Increase in *global self-worth* (only for youth that participated more than one summer); No change in *hope*		Increase in *social competence* (only for girls)
Walsh et al. (2010)	Post-test	Qualitative	Semi-structured interviews and field notes	13 youths and 3 staff members		Perceived improvements in *effort*, *self-direction*, and *goal-setting*	Perceived improvements in *respecting others*, *teamwork*, *leadership,* and *helping others*

Chapter 2

Overview of the Study Results

Emotional Life Skills

Six of the included studies reported on emotional life skills, of which four reported improvements (see Table 2.3). Overall, the findings presented below give some indications that sports programs serving socially vulnerable youth are settings where internalizing symptoms decrease. However, the findings regarding the development of other emotional life skills (e.g., global self-worth, mood, and hope) were mixed. An interesting observation is that improvements in emotional life skills were more frequently reported in quantitative studies than in qualitative studies.

Decreases in internalizing symptoms were reported in two quantitative studies (Bonhauser, et al., 2005; D'Andrea, et al., 2013), which were conducted in two very different settings. D'Andrea, et al. (2013) assessed whether participation in basketball activities in addition to treatment as usual affected internalizing symptoms (i.e., depression, anxiety, withdrawal, and somatic complaints) in traumatized girls in a residential treatment center. The authors found that internalizing symptoms in the girls that participated in the basketball activities decreased, as compared to a comparison group of girls who received treatment as usual (D'Andrea et al., 2013). Bonhauser, et al. (2005) reported that anxiety symptoms, but not depressive symptoms, reduced for youths who participated in weekly sports sessions at secondary schools in a deprived area.

The studies that reported on other emotional life skills provide a mixed picture. First, whereas Beaulac, et al. (2011) reported an improved mood in youths participating in weekly dance classes in a community recreation center, Terry, et al. (2014) reported no change in mood in youths participating in 19 boxing sessions at schools. A possible explanation for this difference in findings is the difference in sports settings. Another possible explanation is the difference in research methods: Beaulac, et al. (2011) interviewed youths and their parents, whereas Terry, et al. (2014) conducted a quantitative quasi-experimental study. Second, Ullrich-French et al. (2012) reported an improvement in global self-worth in youth participating in a sports-based summer camp, but Bonnette, McBride, and Tolson (2001) did not. An explanation for these mixed results may be that the sports coaches in the summer camp studied by Ullrich-French, et al. (2012) received training on how to provide a supportive atmosphere and positive coach–youth connection, whereas the sports coaches in the program studied by Bonnette et al. (2001) did not seem to pay specific attention to positive youth–coach relationships. Ullrich-French, et al. (2012) also assessed developments in hope, defined as belief in the ability to find routes to goals, but they found that it did not improve.

Table 2.3. Summary of the study results

Study	Life skill	Finding
	Emotional life skills	
D'Andrea et al. (2012)	Internalizing symptoms, including anxiety and depression	-
Bonhauser et al. (2005)	Anxiety	-
Bonhauser et al. (2005)	Depressive symptoms	0
Ullrich-French et al. (2012)	Global self-worth	+
Bonnette et al. (2001)	Global self-worth	0
Beaulac et al. (2011)	Mood	+
Terry et al. (2014)	Mood	0
Ullrich-French et al. (2012)	Hope	0
	Cognitive life skills	
Bean, E. et al. (2014)	Self-motivation	+
Walsh et al. (2010)	Effort	+
Bean et al. (2014)	Future focus	+
Walsh et al. (2010)	Goal-setting	+
Walsh et al. (2010)	Self-direction	+
Bonnette et al. (2001)	Critical thinking	+
Fuller et al. (2013)	Self-concept, i.e., ability to realize strengths and weaknesses	+
Fuller et al. (2013)	Self-efficacy	+
Fuller et al. (2013)	Resistance skills	+
Laberge et al. (2012)	Concentration/attention	+
Laberge et al. (2012)	Self-control	0
Riley & Anderson-Butcher (2012)	Taking responsibility for one's own actions	+
Riley & Anderson-Butcher (2012)	Discipline	+
Riley & Anderson-Butcher (2012)	Initiative	+
Armour & Duncombe (2012)	Self-esteem	+
Bonhauser et al. (2005)	Self-esteem	+
Hasanpour et al. (2014)	Self-esteem	+
Laberge et al. (2012)	Self-esteem	0
Riley & Anderson-Butcher (2012)	Self-esteem	+
Armoud & Sandford (2013)	Self-confidence, i.e., willingness to try new things	+
Beaulac et al. (2011)	Self-confidence, i.e., trying new activities	+
	Social life skills	
Armour & Duncombe (2012)	Social skills	+
Laberge et al. (2012)	Social competence	0
Ullrich-French et al. (2012)	Social competence	+
Bruening et al. (2009)	Prosocial involvement	+
Terry et al. (2014)	Total social difficulties	0
Anderson-Butcher et al. (2014)	Social responsibility, i.e., thoughts about helping others	+
Walsh et al. (2010)	Helping others	+
Armour & Sandford (2013)	Empathy	+
Holt et al. (2012)	Empathy	+
Beaulac et al. (2011)	Respect for diversity	+
Walsh et al. (2010)	Respecting others	+
Riley & Anderson-Butcher (2012)	Ability to adapt to different people	+
Armour & Sandford (2013)	Teamwork	+
Walsh et al. (2010)	Teamwork	+
Walsh et al. (2010)	Leadership	+
Hellison & Wright (2003)	Social responsibility	+/-
Bean, E. et al. (2014)	Social interaction	+
Armour & Sandford (2013)	Communication skills	+
Fuller et al. (2013)	Communication skills	+
Riley & Anderson-Butcher (2012)	Communication skills	+
Bean et al. (2014)	Conflict resolution skills	+
Fuller et al. (2013)	Conflict resolution skills	+
Riley & Anderson-Butcher (2012)	Conflict resolution skills	+

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Cognitive Life Skills

Eleven studies reported on development of cognitive life skills, which can be divided into two categories: self-regulation skills and self-esteem/self-confidence (see Table 2.3). Overall, each study that reported on such skills found that at least one cognitive life skill improved. Qualitative and quantitative studies were equally represented in the 11 studies.

The self-regulation skills that were reported as improving were very diverse (i.e., self-motivation, effort, future focus, goal-setting, self-direction, critical thinking, self-concept, self-efficacy, resistance skills, concentration/attention, self-control, taking responsibility for one's own actions, and discipline). The settings of the sports programs in which youths were reported as developing self-regulation were diverse as well. For instance, one program comprised competitive sports activities at a community sports club (Bean E. et al., 2014), whereas another program was a sports-based summer camp in which program staff tried to create a mastery-oriented environment (Ullrich-French, et al., 2012). Four of the programs in which participants were reported as developing self-regulation skills were based on PYD principles (E. Bean, et al., 2014; Fuller, et al., 2013; Riley & Anderson-Butcher, 2012; Walsh, Ozaeta, & Wright, 2010). One example of a PYD-based sports program that strengthened the development of self-regulation (i.e., self-efficacy, self-concept, and resistance skills) was a program that tried to create a supportive and empowering environment (Fuller, et al., 2013). Other examples were a program in which sports coaches encouraged and supported youths to coach the sports activities (Walsh, et al., 2010), a program in which coaches conducted a mastery-oriented coaching style (E. Bean, et al., 2014), and a program that focused on respect, effort, self-direction, and caring in the sports program context (Riley & Anderson-Butcher, 2012). From interviews with youths, their parents, and program staff, (E. Bean, et al., 2014)), (Riley & Anderson-Butcher, 2012)), and (Walsh, et al., 2010) reported that these were settings where youth developed self-regulation skills like discipline, initiative taking, effort, self-direction, goal-setting, self-motivation, and future focus. An interesting observation is that most studies that reported improvements in self-regulation were qualitative studies. The two studies that quantitatively assessed self-regulation skills reported improvements in attention/concentration (Laberge, Bush, & Chagnon, 2012) and critical thinking (Bonnette, et al., 2001). In contrast to these positive results, self-control was not found to increase in the study by Laberge, et al. (2012).

Improvements in self-esteem and self-confidence were reported in multiple studies. These studies were again very diverse in terms of the setting of the sports programs and the research methods. For instance, improvements in self-esteem were reported in a randomized control trial on the impact of aerobic sessions on orphan girls' self-esteem (Hasanpour, Tabatabaei, Alavi, & Zolaktaf, 2014), in a quasi-experimental study on the impact of weekly sports sessions at schools in deprived areas (Bonhauser, et al., 2005), in interviews with parents of youths who participated in a sports-based summer camp (Riley & Anderson-Butcher, 2012), and in pupil profiles written by teachers (Armour & Duncombe, 2012). Self-confidence, defined as willingness to try new things, was reported as improving in disengaged youths selected by school teachers to participate in a one-week outdoor sports activities program (Armour & Sandford, 2013) and in youth that participated in weekly dancing classes in a community recreation center (Beaulac, et al., 2011). On the basis of interviews with parents and program staff, Beaulac, et al. (2011) offered a possible explanation for growth in self-confidence, which

was that the dancing classes were a setting in which youths could experience feelings of success, which in turn may have increased their confidence in trying new activities in non-sports settings. In contrast to these positive findings on self-esteem and self-confidence, Laberge, et al. (2012) did not find that self-esteem improved in a quasi-experimental quantitative study on 16 weeks of lunchtime sports sessions at schools in deprived areas. The authors suggest that self-selection bias (i.e., youths high in self-esteem were more likely to participate than youths low in self-esteem) may be a reason why they did not find an increase in self-esteem (Laberge, et al., 2012).

Social Life Skills

Fourteen studies reported on developments in social life skills, of which twelve reported improvements. Most of these reported social life skills can be divided into two broad categories (i.e., social responsibility skills and social interaction skills). Besides these two broad categories, several other social skills were examined in the studied sports programs. An interesting observation was that all seven qualitative studies reported improvements in social life skills, whereas only 5 out of 11 quantitative studies did.

Improvements in social responsibility skills were reported in seven studies. Five of these programs were based on the previously mentioned TPSR model, which aims to develop personal and social responsibility. The authors suggested several possible explanations for why participation in the sports program could have led to improvements in social responsibility, many of which refer to elements of the TPSR model. One example of such an explanation was that the sports coaches continuously discussed the transference of self-direction and goal setting from the sports setting to other settings (Anderson-Butcher, Riley, Amorose, Iachini, and Wade-Mdivanian, 2014; Walsh et al., 2010). Other authors suggested that improvements in social responsibility may be explained by the involvement of caring sports coaches (Hellison & Wright, 2003), the inclusion of a life skill education part (Riley & Anderson-Butcher, 2012), and the presence of negative events, like injuries, that provide opportunities to develop empathy (Holt, Sehn, Spence, Newton, & Ball, 2012). Besides studies on sports programs based on the TPSR model, two other studies reported improvements in social responsibility skills. A possible mechanism suggested for the improvement experienced in these sports programs was that the sports program may be a setting where youths notice that different people have different competences, and this in turn may increase respect for diversity (Beaulac, et al., 2011). Armour and Sandford (2013) did not provide an explanation for the improvement in empathy.

Two social interaction skills (i.e., communications skills (Armour & Sandford, 2013; Fuller, et al., 2013; Riley & Anderson-Butcher, 2012) and conflict resolution skills (E. Bean, et al., 2014; Fuller, et al., 2013; Riley & Anderson-Butcher, 2012)) were reported as improving. An interesting observation is that the four studies that reported improvements in social interaction skills were qualitative studies.

In addition to the studies on social responsibility and social interaction, five studies reported on developments in other social life skills, with mixed results (see Table 2.3). A positive finding was that social skills improved in youths who participated in weekly sports activities at schools in a deprived area ((Armour & Duncombe, 2012). Laberge, et al. (2012) and Ullrich-French, et al. (2012), however, provided a mixed picture regarding developments in social competence. A possible explanation for this mixed picture is that social competence was

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operationalized differently in these two quantitative studies. Ullrich-French, et al. (2012), who reported a growth, operationalized social competence in a way that overlaps with social interaction skills, whereas Laberge, et al. (2012), who did not report a growth, operationalized social competence in a way that overlaps with social responsibility skills (i.e., respecting others and being polite). The findings from the work by Bruening (2012), who conducted a qualitative case-study, were less positive. Although the researchers reported a growth in prosocial involvement in African American and Latina girls who participated in weekly sports sessions and life skills sessions, they only provided a few examples of improvements in behavioral competences (Bruening, 2012). Terry, et al. (2014) reported no positive findings on social skills either, as they found that behavioral problems in youths who participated in school-based boxing sessions did not decrease. A final observation was that the studies on the sports programs based on PYD principles reported improvements in social life skills, whereas none of the studies on non-PYD-based sports programs reported or assessed improvements in social life skills.

Conducive Conditions

Although many of the included studies referred to program elements as possible explanations for improvements in life skills, only 5 of the 18 studies incorporated research strategies to investigate whether certain program elements were conducive to life skill development. First, on the basis of a quasi-experimental quantitative study, Bonnette, et al. (2001) reported that critical thinking skills increased more for youths participating in a sports program in which the youths themselves had to find solutions for challenges in the sports activities than for youths participating in a sports program where the coaches prompted these solutions. Second, Anderson-Butcher, Riley, Amorose, Iachini, and Wade-Mdivanian (2014) found that increased sense of belonging (i.e., feeling comfortable and feeling part of the program) increased the chance of youths developing positive attitudes towards helping other people. Third, according to the parents interviewed by Riley and Anderson-Butcher (2012), the inclusion of a life skill education element, the opportunities for peer interactions, the active and diverse nature of the program, and sports instructors who were caring, personable, and outgoing had caused or strengthened life skill development. Positive peer and youth–adult/coach relationships during the sports activities were also reported to be conducive to life skill development by the teachers and sports coaches interviewed by Armour and Sandford (2013). Another conducive condition that was investigated, but that did not make a difference for the development of life skills, were visits of elite sports role models to the sports program's activities (Armour & Duncombe, 2012).

Discussion

The main aim of this systematic review was to describe the evidence from qualitative and quantitative studies on life skill development in sports programs serving socially vulnerable youth. This review showed that remarkably few studies have been published in this field and that many of the included studies experienced a high risk of bias. Therefore, the results of this review need to be treated with some caution. However, overall, the findings show that sports programs serving socially vulnerable youth are settings where socially vulnerable youth can develop life skills, thereby confirming the findings of Lubans et al.'s (2013) review. Each of the 18 included studies reported that at least one life skill improved in the youths who participated in the studied

sports program. In contrast to these positive findings, 5 out of 11 quantitative studies reported on life skills that did not improve, and some of the qualitative studies cast doubt on the transfer of improved skills to other settings. This current review expanded on Lubans et al.'s work by including qualitative studies and more recent quantitative studies. As a result, we found that improvements in cognitive and social life skills were more frequently reported than improvements in emotional life skills. Finally, this review shows that the studies on life skill development in sports programs serving socially vulnerable youth are very diverse in terms of setting, study design, research method, and reported life skills. However, it seems that the setting in which a sports program is conducted (i.e., school, summer camp, community, and residential care) does not make a difference for whether and which life skills are reported as improving.

The finding that improvements in emotional life skills were reported in fewer studies than improvements in social and cognitive life skills is contrary to the findings from Eime, et al. (2013) review. Their review, in which no distinction was made between socially vulnerable and non-vulnerable youth, included many studies that found a positive relationship between sports participation and emotional life skills. Examples of emotional outcomes that were found to be associated with sports participation, but that were not assessed in the studies in this current review, are reduced suicidality, reduced mental illness, and increased life satisfaction (Eime et al., 2013). There may be several possible explanations for the low number of studies in this current review that assessed or reported improvements in emotional life skills. First, most of the studied sports programs were based on PYD principles, one of which is to foster cognitive and social competences (Lerner, et al., 2005). Therefore, quantitative research on PYD-based sports programs may more frequently assess cognitive and social skills than emotional skills, and qualitative research may be focused on the program aims when interview data are being coded. For instance, the qualitative studies into sports programs based on the TPSR model (E. Bean, et al., 2014; Riley & Anderson-Butcher, 2012; Walsh, et al., 2010) reported improvements in self-regulation and social responsibility, which are aims of the TPSR model, whereas none of these studies reported improvements in emotional life skills.

An interesting observation was that different life skills were reported as improving in studies using different research methods. Developments in emotional life skills were more frequently reported in quantitative than in qualitative studies, developments in cognitive life skills were equally reported in quantitative and qualitative studies, and developments in social life skills were more frequently reported in qualitative studies. This difference in findings may be caused by the different approaches and research methods, which might steer the researchers' focus towards specific domains of outcomes. Quantitative studies tend to measure the life skills that researchers, policymakers, and/or program staff expect to improve through the sports program. This can lead to a bias whereby specific domains of life skills are omitted. In contrast, in qualitative studies, researchers tend to start with an open mind and attempt not to prompt for specific life skill developments in respondents. However, this may lead to bias as well, because youths and their parents participating in qualitative studies may more easily notice and explain developments in social and cognitive skills (e.g., social interaction and self-regulation) than developments in emotional skills (e.g., global self-worth and anxiety).

The second aim of this review was to investigate what is known about conditions conducive for life skill development as identified from the sports programs studied. The

conditions that were found to be conducive in the included studies are a positive youth–coach relationship, sports coaches that encourage youths to deal with challenges that arise in the sports activity, a sense of belonging to the sports program, and the inclusion of a life skills education element. However, as only five of the included studies investigated conditions that may be conducive to life skill development in the sports program, it is not possible to draw firm conclusions regarding the second research aim.

A final major point from this review is that, although more and more research is being done in the sport-for-development field (Schulenkorf, Sherry & Rowe, 2015), relatively few studies have been published that investigate life skill development in sports programs serving socially vulnerable youth. One possible explanation is simply that not much research has been done in this field. Another possible explanation may be the many challenges that researchers in this field have to face, such as high attrition rates, youth workers having priorities other than research, and obtaining parental consent (Whitley, Forneris, & Barker, 2014). Such challenges resulted in increased risk of bias in many of the studies included in this current review. For instance, most quantitative studies lacked a sound comparison group. The comparison group in almost all the quasi-experimental studies comprised youths who themselves decided not to participate in the sports program. Such a selection bias makes it difficult to compare developments between groups (e.g., Laberge, et al. (2012). In addition, when youths themselves decide whether or not to participate in the sports program, this may result in different group sizes. D'Andrea, et al. (2013), for instance, compared life skill developments in an experimental group of 62 girls who voluntarily enrolled in the program with life skill developments in a comparison group of 26 girls who decided not to enroll in the program. The qualitative studies included might experience selection bias as well, because youths with negative experiences in the sports program may have dropped out. Consequently, as most interview studies were conducted at the end of a sports program, most of the youths interviewed may have had positive experiences in the sports program.

Given the results of this review, a number of suggestions for further research are offered. First, researchers might consider alternative research approaches to investigate the outcomes of sports programs serving socially vulnerable youth. One alternative might be to adopt a life course perspective to assess the role of a sports program in youths' lives. This perspective focuses on how the life history of groups or individuals in society may explain differences in well-being. In-depth interviews based on the life course perspective may encourage adults to explain how they dealt with the challenges they faced in childhood or adolescence, and whether and how sports programs or sports participation helped them to deal with these challenges (Haudenhuyse, Theeboom, & Nols, 2013; Wethington, 2005). Second, researchers might gather longitudinal data from parents, teachers, or program staff members in order to reduce attrition rates and difficulties around parental consent. An example of such a study was that by Armour and Sandford (2013), who asked teachers to write pupil profiles at several points between the start of a sports program and more than a year after its completion. Third, in order to increase the comparability of future quantitative studies in this field, researchers may benefit from using general youth development surveys, such as the survey and measurement frameworks developed by Lopez, Yoder, Brisson, Lechuga-Pena, and Jenson (2014) and Vierimaa, Erickson, Côté, and Gilbert (2012). These instruments provide a more holistic picture of youths' development than

questionnaires designed to study one individual outcome. This may also reduce the risk of bias that may result from research tending to measure only the life skills that are expected to improve in youths in a particular sports program.

To study the conditions conducive to life skill development in sports programs, we would recommend that researchers encompass these conducive conditions in their research questions and study designs. In qualitative research, for instance, this could be achieved by asking the interviewees about the elements of the program that they think have led to the life skill development (e.g., (Riley & Anderson-Butcher, 2012). In quantitative research, for instance, this could be achieved by comparing the life skill development of youths in a sports program that pays attention to a specific conducive condition with the life skill development in two comparison groups: one group in the same sports program where attention is not paid to this condition, and one group not participating in a sports program (e.g., Bonnette et al., 2001). Such quantitative studies provide the opportunity to assess which elements of existing frameworks are conducive to life skill development in sports programs. Examples of elements that might be studied are the implicit versus the explicit approach to the transfer of life skills to other settings (Turnnidge et al., 2014), informal versus organized sports activities (Eime et al., 2013), and collaborative efforts of policymakers, sports organizations, coaches, and parents versus sports programs run by a single organization (Fraser-Thomas et al., 2005).

Limitations

This review is not without limitations. First, although a wide variety of terms related to sports programs, life skills, and socially vulnerable youth were included in the search, the inclusion of additional search terms might possibly have identified more studies. Second, the search terms for life skill development were based on three major life skills (i.e., emotional, cognitive, and social skills) which we chose on the basis of the life skill developments that Turnnidge, et al. (2014) linked to sports participation. Other scholars, however, may have categorized life skills in different major categories. Also, whereas we consider responsibility skills to be social skills because they pertain to relationships with other people, others might consider them cognitive skills because they overlap slightly with self-control. Third, the search did not include terms pertaining to conditions conducive to life skill development, whereas we looked, as a secondary aim, for conducive conditions within the studies that examined life skill development. Consequently, we may have missed studies that investigated solely conducive conditions for positive sports experiences.

What Does This Article Add?

This review of both quantitative and qualitative studies showed that sports programs are settings where socially vulnerable youth can develop diverse life skills. Improvements in cognitive and social life skills were more frequently reported than improvements in emotional life skills. This review also showed that only a few of the included studies investigated the conditions of the studied sports programs that were conducive to life skill development. Finally, we found that still not much research has been published that investigates life skill development in sports programs serving socially vulnerable youth, and that the research that has been published is diverse in terms of setting, research methods, and reported life skills. In order to provide a better picture of

life skill development in sports programs serving socially vulnerable youth, we recommend that researchers in this field consider alternative research approaches, such as adopting a life course perspective in qualitative studies and using general youth development surveys in quantitative studies.

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Chapter 2

Appendix A. Search term

(sport OR physical act* OR exercise*) AND ((youth OR adolesc* OR young people OR young person* OR young adult* OR teens OR teenager* OR boy* OR girl*) AND (vulnerab* OR at risk* OR disaffect* OR youth work* OR youth care* OR social work* OR social care* OR underserv* OR deprived ORminorit* OR low SES)) AND (prosocial OR pro social OR antisocial OR anti social OR wellbeing OR well being OR social behavio* OR social skill* OR Sense of Coherence OR emotional stab* OR mental health OR self esteem OR selfesteem OR anxiety OR emotional problem* OR depress* OR mood* OR self regula* OR selfcontrol OR self-control OR life skill* OR reflection OR planning OR monitoring OR self effic* OR effort OR self evaluat* OR locus of control OR assets OR emotional outcome* OR social outcome* OR pedagogical outcome* OR emotional development OR social development OR pedagogical development OR empower*)

Chapter 3

Intersectoral action to enhance the social inclusion of socially vulnerable youth through sport: An exploration of the elements of successful partnerships between youth work organisations and local sports clubs

Abstract

Research shows that participation in sport is positively related to self-esteem, self-regulation skills, and social inclusion. As socially vulnerable youngsters participate less frequently in sports activities than their average peers, youth work organisations try to guide their clients (i.e., socially vulnerable youngsters) to local sports clubs and inclusive sports activities. Inclusive sports activities, however, cannot be provided by youth work organisations alone. Therefore, in the Netherlands, intersectoral action involving both youth work organisations and local sports clubs has emerged. Because youth workers and stakeholders in local sports clubs are not used to collaborating with each other, we explored the factors that contribute to the quality and performance of such intersectoral actions. On the basis of five open interviews with youth workers and three focus groups with stakeholders in local sports clubs, we described factors relating to the organisation of intersectoral action among youth workers and local sports clubs that are preconditions for the success of this specific type of intersectoral action.

Introduction

Socially vulnerable youngsters face (temporary) difficulties in one or more domains in their life. Examples of these difficulties are income poverty, low parental education and negative experiences with institutions such as the family and school. These (temporary) difficulties may result in a low self-esteem and a disconnection from social institutions (Vettenburg, 1998). Trying to increase participation in organised sports clubs is seen as a promising strategy for improving the self-esteem of these youngsters and rebuilding their sense of social inclusion (Feinstein, Bynner, & Duckworth, 2005; Haudenhuyse, Theeboom, & Coalter, 2012; Petitpas, Cornelius, Van Raalte, & Jones, 2005). On average, however, socially vulnerable youngsters tend to participate less frequently in local sports clubs than their peers (Breedveld, Bruining, Van Dorsselaer, Mombarg, & Nootebos, 2010; Vandermeerschen, Vos, & Scheerder, 2013).

The lower sport participation among socially vulnerable youngsters is due to social, financial, emotional, and/or physical reasons (Downward, 2007; Wicker, Hallmann, & Breuer, 2012). Because of these many factors influencing sport participation by socially vulnerable youngsters, intersectoral action by youth work organisations and local sports clubs is needed to increase sport participation among these youngsters. Rütten, Abu-Omar, Frahsa, and Morgan (2009) and Hartog, Wagemakers, Vaandrager, Dijk, and Koelen (2013) for instance, found that intersectoral action is also required to increase the physical activity of other socially vulnerable groups such as immigrant women and primary care clients. Kelly (2013) found that partnerships of practitioners (e.g., youth workers and volunteers at local sports clubs) are important because they can lead to shared resources and referral pathways. If strategic partners and community members are also included in such partnerships, access to funding increases, opportunities to influence policymaking grow, and possibilities to publish the results of the partnership arise (Kelly, 2013).

Several Dutch local sports clubs have the ambition to organise communal activities (e.g., trying to increase socially vulnerable groups' participation in sport through inclusive sports activities) in collaboration with social sector organisations such as primary care and youth work organisations. However, many social workers and stakeholders in local sports clubs lack experience with this type of intersectoral action. Thus, research is needed to gain insights into factors that contribute to the quality and the results of intersectoral action involving such groups. Unfortunately, to date few studies have investigated factors that improve the quality and outcomes of intersectoral action (Akkerman & Torenvlied, 2013; Williams, 2013), especially regarding the collaboration between professionals and volunteers (Harris, Mori, & Collins, 2009; Hartog et al., 2013). Hence, the aim of this article is to explore and describe factors that may contribute to the performance of intersectoral action involving youth work organisations and local sports clubs.

Intersectoral action and intersectoral partnerships have been studied in several social domains such as education (Akkerman & Torenvlied, 2013), crime (Chavis, 1995), and health promotion (Roussos & Fawcett, 2000). In this study, the starting point is a framework for intersectoral partnerships in the field of health promotion, the Health Alliances (HALL) framework. The HALL framework aims to contribute to the facilitation of successful alliances. It was developed stepwise in a participatory research project in which the participants needed guidance in organising alliances working on health promotion (Vaandrager, Koelen, Ashton, &

Revuelta, 1993). One result of this research project was a list of dilemmas and challenges for collaboration in health promotion (Koelen, Vaandrager, & Colomér, 2001). Combined with experiences and studies in several applied settings in the Netherlands, and with review studies on collaborative processes, these dilemmas and challenges led to the HALL framework (Koelen, Vaandrager, & Wagemakers, 2012). As the youth workers and the stakeholders in the local sports clubs lack experience in collaborating with each other, the HALL framework seems to be a useful framework to investigate the presence or absence of factors that contribute to the intersectoral action of youth workers and stakeholders in local sports clubs. Therefore, it may be a useful framework from which to derive recommendations for the involved organisations. Blok, Wagemakers, Leeuwe, and Scholten (2014) and Hartog et al. (2013) have previously used the HALL framework to synthesise data from qualitative studies on collaboration between care and sport.

The HALL framework identifies three clusters of factors that hinder or facilitate the success of intersectoral partnerships (see Figure 3.1). These three clusters are institutional factors, personal factors, and factors relating to the organisation of the partnership (Koelen et al., 2012). Institutional factors include targets of the involved organisations, organisational values, cultures, and rituals, and funding possibilities. Personal factors are attitudes towards the intersectoral action, experience of collaborative work, and the feeling of being able to affect the results and performance of the intersectoral action (i.e., self-efficacy). Factors relating to the organisation of intersectoral action help to deal with the institutional and personal factors that stakeholders bring into the partnership. Hence, factors relating to the organisation of intersectoral action may increase the quality and performance of the partnership (Koelen et al., 2012; Provan, Fish, & Sydow, 2007). Koelen et al. (2012) described seven of these factors relating to the organisation of intersectoral action: a flexible time frame, clear roles and responsibilities, a clear communication structure, the use of the specific expertise and capacities of the organisations involved, a shared mission, visibility of (the results of) the partnership, and a neutral and empowering management of intersectoral action. Williams (2013) argues that boundary spanners might be such neutral and empowering managers. Boundary spanners work in collaborative environments and possess the communication, co-ordination, mediating, and entrepreneurial skills required to deal with tensions and differences that occur within partnerships. Boundary spanners are, for instance, initiators of collaborations, partnership coordinators, and frontline workers collaborating with frontline workers from other organisations (Williams, 2013).
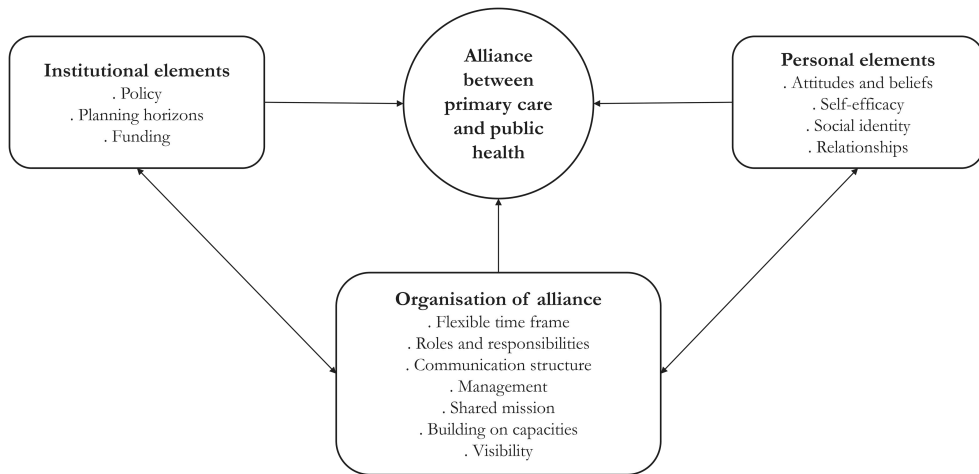
Figure 3.1 The healthy alliances (HALL) framework (Koelen, Vaandrager, & Wagemakers, 2012)

Research Setting and Methods

Research Setting

The current study took place in the context of two research projects. The first research project is Youth, Care and Sport, which was initiated in 2013 and will come to an end in 2017 (Super, Hermens, Verkooijen, & Koelen, 2014). The research project Youth, Care and Sport has four aims: first, to explore the causal relationship between participation in sport and life prospects (e.g., social inclusion) of socially vulnerable youngsters; second, to study the life experiences of these youngsters in the context of sport; third, to explore the social conditions for participation in sport that have a positive effect on life prospects; fourth, to investigate the elements of successful intersectoral action between youth work organisations and local sport clubs. The second research project is an evaluation study of the Sports Plus Programme. This evaluation study was carried out by the Verwey-Jonker Institute. The Sports Plus Programme is an initiative of Rotterdam Sportsupport, an organisation that supports local sports clubs in initiating and organising communal activities. The local sports clubs participating in the Sports Plus Programme have the ambition and the capacity to organise inclusive sports activities for specific target groups such as socially vulnerable youngsters. One of the aims of the Sports Plus Programme is to promote collaboration among social work organisations and local sports clubs.

Intersectoral action, involving youth work organisations and local sports clubs, has taken place at several locations in the Netherlands (Buysse & Duijvestijn, 2011; Hermens & Gilsing, 2013). One example is intersectoral action between FlexusJeugdplein, a large youth work organisation in Rotterdam, and Rotterdam Sportsupport. Alongside other forms of care, FlexusJeugdplein aims to increase the social inclusion of socially vulnerable youngsters by guiding them to new communal activities and new social networks. Hence, youth workers in this organisation—together with every youngster who starts a care programme—set goals relating to the youngsters' leisure-time activities during the care programme. Rotterdam Sportsupport

supports the administration of local sport clubs in managing the club, recruiting volunteers, and organising communal activities. One example of these communal activities is inclusive sports activities (i.e., sports activities targeting socially vulnerable groups). Rotterdam Sportsupport also employs four pedagogues who support sport coaches in ensuring a positive socio-pedagogical climate at the sports club. FlexusJeugdplein and Rotterdam Sportsupport have appointed a Care Sport Connector (CSC) who encourages youth workers to guide clients to local sports clubs. This CSC also aims to connect youth workers with local sports clubs.

Methods

Adopting a qualitative research approach and using the HALL framework's three clusters of factors, we explored the intersectoral action of youth work organisations and local sports clubs in the two research projects. This exploration took place from the perspective of both the youth workers and the local sports clubs.

Two researchers (NH and SS) interviewed five youth workers from FlexusJeugdplein. The purpose of these semi-structured interviews with the youth workers was twofold: first, to explore whether and how youth workers promote sport participation among socially vulnerable youngsters; and second, to find out what support they need to guide their clients to local sports clubs. To represent different types of youth workers, we purposefully sampled five from a list of 20 randomly selected youth workers. We interviewed two pedagogical professionals at a residential centre for youngsters (two different locations), one ambulant youth worker, one school youth worker, and one ambulant youth worker for youngsters living in foster families. The interviews with the youth workers (four women, one man) were conducted in October 2013 and took around 45 minutes. Five topics were discussed in the interviews: (i) useful daytime activities for clients of the youth work organisation, (ii) sport as a useful daytime activity, (iii) methods of encouraging youngsters to participate in local sports clubs, (iv) preconditions that strengthen possible positive effects of sport participation, and (v) the contact between youth workers and stakeholders in local sports clubs. The interviews were held at the youth workers' workplace.

We held three open focus group discussions with representatives of local sports clubs in Rotterdam. These focus groups had two purposes: to investigate what support local sports clubs need to organise communal activities, and to explore the preconditions for successful intersectoral action among stakeholders in the local sport clubs and social workers. Hence, local sports clubs that were already involved in intersectoral action were purposefully sampled for the focus groups. The focus groups took place in June 2014. In total, 20 people representing 14 local sports clubs participated in the three focus groups. Most of the participants were part of the management of the local sports club. Three topics were discussed during the focus groups: (i) the type of communal activities at the local sports clubs, (ii) the support local sports clubs need to organise and carry out these communal activities, and (iii) experiences of intersectoral action with social work professionals. The focus group discussions took around an hour and a half and were held at the location of one of the local sports clubs participating in the focus group.

The interviews and focus groups were audiotaped with the permission of the interviewees and the participants. The interviews were transcribed intelligent verbatim style. Summaries of the focus groups were written by a research assistant. Without being prompted,

the participants in the interviews and focus groups mentioned personal factors, institutional factors, and factors relating to the organisation of the coordinated action. Factors that are a reality in these organisations and factors that the participants wished to be present, were mentioned. We analysed the data using a deductive approach, with the HALL framework functioning as a starting point in order to describe the personal factors, the institutional factors, and the factors relating to the organisation of the coordinated action that were spontaneously mentioned by the interviewees and participants. The different factors were hand-coded by one researcher (NH).

Results

The results for the youth workers and the local sports clubs are presented separately. For both, we have structured the results according to the three factors of the HALL framework.

Youth Workers

Institutional Factors

During the interviews, the youth workers mentioned two of the three institutional factors from the HALL framework: their organisation's policy and funding. According to the youth workers, it is their organisation's policy to prevent severe and chronic problems by empowering their clients (i.e., socially vulnerable youngsters) to participate in leisure-time activities and by increasing their clients' experience of social inclusion. Hence, the management of the youth work organisation wants the youth workers to guide youngsters to new social networks, such as local sports clubs. One of the youth workers, for example, said: "It is how this organisation wants to work….Empowering youngsters and their families, and involving clients in neighbourhood activities….I think they [the management] also want to work this way because in the future the local government wants youth work organisations to work like this".

The youth workers mentioned funding in two ways. First, youth workers can apply for the Youth Sports Fund to overcome the financial barriers that the youngsters face when they receive care from youth workers. This Youth Sports Fund pays a sports club membership fee for youngsters living in families with an income below 120 percent of the Dutch minimum income. Three youth workers mentioned the Youth Sport Fund. Two of these three youth workers were positive about this fund, but also mentioned that money is not the most important factor hindering their clients' participation in sports. One youth worker, for instance, said: "We can apply for the Youth Sports Fund. That is very important. For continued sport participation, however, teammates and coaches have to keep encouraging our youngsters to go to the local sports club. This is necessary because they are not used to any kind of structure in their lives". The youth workers also mentioned economic cuts in their field. For instance, one of the youth workers said: "All of our residential care homes will be closed in a couple of months. In fact, this is the youth work organisation's last residential care home. In the future, the youngsters who live here will be placed in a foster home or will receive short-term crisis care because those types of care are cheaper than residential care". The youth workers mentioned that such uncertainties make it difficult to spend time and energy on new forms of intersectoral action with local sports clubs.

Chapter 3

(Inter)personal Factors

In the interviews, the youth workers mentioned aspects relating to three of the four (inter)personal factors of the HALL framework: attitude towards intersectoral action, self-efficacy, and relationships.

In general, the youth workers had a positive attitude towards intersectoral action with local sports clubs. Four of the five youth workers mentioned participation in sport as an activity where youngsters can develop in a positive way. Youth workers, for instance, said: "It is very important that the youngsters have the opportunity to relax…that they have some kind of distraction from their problems….And sport is also important because youngsters come into contact with other people"; "Sport is a communal activity, it helps youngsters to think about something else. And it's healthy as well. All these things together make me think that participation in sport is important for our youngsters". Such a positive attitude towards the possible effects of participation in sport is, of course, a prerequisite for intersectoral action involving both youth workers and local sports clubs.

Youth workers did not say anything about their self-efficacy regarding intersectoral action with local sports clubs. They did, however, mention several things about their self-efficacy regarding their possibilities to increase socially vulnerable youngsters' participation in sport. They felt that they lacked time to invest in contacting stakeholders in local sports clubs. One youth worker, for instance, said: "I even do not have enough time to apply for the Youth Sports Fund". The youth workers also think that other factors, which they cannot influence, hinder the youngsters' continued participation in sports. The next two quotes from youth workers show two of these factors: "And the parents…they don't do sport themselves. They do not have a clue about the importance of participation in sport so they will not encourage the youngster to go to sports activities"; "The youngsters in our caseload are not used to the routine of going to a sports club. And no-one in their environment encourages them to go". Thus, youth workers think that the youngsters' social environment has a stronger impact on participation in sport than the youth workers themselves have.

The youth workers want to have personal relationships with stakeholders in local sports clubs that have an appropriate socio-pedagogical climate. One youth worker described such a socio-pedagogical climate: "They [volunteers at local sports clubs] do not have to treat our youngsters differently. They only need to know that our youngsters sometimes behave differently than youngsters living in regular families….Our youngsters, for instance, are not used to structure and are therefore easily late. When they are late, a sports coach should not argue with this youngster because this will not motivate the youngsters to be on time. It is better if the sports coach just says that it is good that the youngster is present, and that he/she should try to be on time for the next activity". Three of the youth workers said that they had links with local sports clubs with an appropriate socio-pedagogical climate. One, for instance, said: "Nowadays, I know a couple of sports clubs with a socio-pedagogical climate that want to include socially vulnerable youngsters in their activities". These three youth workers also found personal relationships with stakeholders in the local sports clubs important when they actually guide one of their clients to a sports club. According to one of them, these personal relationships are important because sport coaches need to be introduced to the background of the youngster and because it helps them to stay informed about the development and the behaviour of the

youngster in the local sports club. One youth worker, for instance, said: "Sometimes local sports clubs have trouble with our youngsters. No big trouble, but we can help sports coaches to anticipate specific behaviour from certain youngsters".

Organisation of the Partnership

During the interviews, three of the five youth workers mentioned factors relating to the organisation of intersectoral action among youth workers and local sports clubs. These three youth workers mentioned two of the seven organisational factors described in the HALL framework: visibility and the management of intersectoral action. Concerning visibility, one youth worker, for instance, said: "If I knew that my organisation had contact with several local sports clubs, and I knew with which sports clubs, then I would probably more frequently try to guide youngsters to these sports clubs". Another youth worker also found it important that the results of intersectoral action involving youth workers and local sports clubs were visible because this could increase their chance of getting financial support. This youth worker said: "Research into the influence of participation in sport on the life prospects of our youngsters is a good idea...really. It gives us an instrument to show why participation in sport is important for our clients. This may possibly persuade local governments to invest in inclusive sports activities".

Two youth workers mentioned a specific aspect of the management structure of intersectoral action. According to them, the youth work organisation needs someone who connects youth workers with local sports clubs. This person might also help youngsters to integrate into local sports club and support the local sports clubs in including the youngsters in their activities. One youth worker, for instance, said: "We need somebody who has the time to accompany the youngsters to the sports clubs the first couple of times. They can build up contacts within local sports clubs, some kind of network".

When the youth workers mentioned factors relating to the organisation of intersectoral action, they mentioned these as being wishes. Thus, it seems that the management of the youth work organisation and Rotterdam Sportsupport have already arranged a partnership, but that concrete intersectoral action among youth workers and local sports clubs is still evolving. The next quote by a youth worker illustrates this: "I cannot do more than try to guide youngsters to a sports club and to motivate parents to support their children to participate in sports. Our management, however, is able to create coordinated action with local sports clubs and must call on us [the youth workers] to motivate sport participation among our youngsters".

Local Sports Clubs

Institutional Factors

The local sports clubs stakeholders who participated in the focus groups mentioned all three institutional factors described in the HALL framework. All 14 local sports clubs represented in the focus groups participate in the Sports Plus Programme. Hence, they all have the ambition and the policy to organise inclusive sports activities. One respondent, for instance, said: "We, as the administration of this local sports club, want to do something for society". These stakeholders agreed that, in addition to aiming for intersectoral action, local sports clubs require a sound organisational structure and a policy plan if they want to successfully organise inclusive sports activities through such action. One stakeholder, for instance, said: "To organise

communal activities, a local sports club has to have sound accommodation and management, and cannot have any financial troubles". According to the respondents, a sound organisational structure is also an important precondition for participating in intersectoral action, especially for local sports clubs as they are managed by volunteers.

The local sports clubs stakeholders mentioned funding as a precondition for successful inclusive sports activities and intersectoral action involving social work organisations and local sports clubs. One respondent said: "A grant makes it easier to start inclusive sports activities in cooperation with a public sector organisation. Especially at the start of such a project. After two years for example, when people are familiar with the sports activity, we can search for other ways to finance the project". To increase participation in sport among socially vulnerable groups in the Netherlands, some funding organisations give local sports clubs—together with social work organisations—the possibility to apply for a fund to develop and organise inclusive sports activities targeting these groups. One of the local sports clubs that participated in the focus groups has received a grant to organise sports activities for socially vulnerable youngsters for the next two years. These sports activities are specifically designed to improve the self-esteem and self-regulatory skills of these youngsters.

One specific institutional factor of local sports clubs that may hinder intersectoral action with youth work organisations is that they are open in the evening and at weekends. The stakeholders in these local sports clubs interpreted these opening hours as a problem for collaboration with professionals: "Social workers generally do not work in the evenings and at weekends, so we cannot meet or contact them at the times we are present on the site of the sports club". On the other hand, other stakeholders in local sports clubs thought that the specific opening hours of the clubs presented an opportunity for intersectoral action involving local sports clubs and social workers. One manager of a local sports club, for instance, said: "During the day, until five in the afternoon, our site is completely empty. During this time, it is possible for social work organisations to use our facilities for sports activities with their clients".

(Inter)personal Factors
In the focus groups, the stakeholders from local sports clubs all mentioned one of the four (inter)personal factors of the HALL framework. They had found that having a personal relationship with someone from the social work organisation had been very important to the success of intersectoral action. A volunteer from one of the local sports clubs, for instance, said: "I have to know who I can contact at the social work organisation if I have any questions. It is also important that his or her workplace is close to the sports club site, so we can meet easily".

Organisation of the Partnership
In the focus group interviews, the stakeholders from the local sports clubs mentioned four of the seven factors in the HALL framework that relate to the organisation of intersectoral action. These stakeholders agreed that they needed some support to organise communal activities and inclusive sports activities. The sports clubs receive such support, because they partake in the Sports Plus Programme. One of these stakeholders, for instance, explained: "The support we receive helps us to initiate inclusive sports activities and to create a structure in which we can organise and carry out these activities. The person who assists us also helps to maintain contacts

with social workers". Other factors relating to the organisation of intersectoral action were not mentioned by more than one of the local sports clubs stakeholders. The need to have a flexible time frame, a shared mission, and specific roles and responsibilities were not mentioned at all.

The manager of one local sports club mentioned the importance of visibility, communication structure, and building on the capacities of the organisations involved in the context of one specific partnership between a local sports club and a youth work organisation. For this specific partnership, a youth work organisation and the local sports club signed a contract which represents this visibility. They also received funding to organise the activity. The following quote shows how the organisations involved tried to build on each other's capacities: "Youth workers guide clients to our sports club. Here [at the sports club], these youngsters participate in specific activities for a couple of weeks. After that, the aim is for the youngsters to become members of the sports club. In addition, if during the regular activities one of our sports coaches notices that a youngster has behavioural problems, we ask a youth worker how to support them. To make these activities structural, we meet with the organisations involved every couple of weeks". This quote also shows how a communication structure can be formed.

Discussion

The purpose of this article was to explore factors that contribute to successful intersectoral action involving youth work organisations and local sports clubs. Exploration of the preconditions for such successful intersectoral action is necessary because neither youth work organisations nor local sports clubs can develop and organise inclusive sports activities alone. The HALL framework was used to structure the data. Hence, we explored and described factors pertaining to the organisations (institutional factors) involved in such intersectoral action, those pertaining to the individuals (personal factors) involved, and those pertaining to the organisation of this specific type of intersectoral partnership (organisational factors).

Youth workers and stakeholders in local sports clubs mentioned several institutional factors that may influence the intersectoral action of FlexusJeugdplein and local sports clubs in Rotterdam. First of all, the management of both the youth work organisation and Rotterdam Sportsupport want to facilitate collaboration between youth workers and local sports clubs. FlexusJeugdplein wants youth workers to try to increase sport participation among the youngsters that receive care from this youth work organisation. The managements of the local sports clubs participating in the Sports Plus Programme want to organise communal activities. The youth workers and local sports clubs to whom we spoke are able to apply for several types of national and local funding that help to reach the aims of both institutions. If organisations that collaborate have different funding possibilities and can apply for funds that only help them to reach their own organisational target, intersectoral action will be difficult. It is, therefore, important that there are funding possibilities available for which youth work organisations and local sports clubs can apply together. Local sports clubs, for instance, can apply for a two-year fund to develop and organise inclusive sports activities targeting socially vulnerable groups. Also, youth workers can apply for the Youth Sport Fund to pay for their clients' sports club membership fees. This ability to successfully apply for funds might be a result of the involvement of Rotterdam Sportsupport. Kelly (2013), for instance, found that involving

strategic partners (e.g., Rotterdam Sportsupport) may increase possibilities to acquire local funding.

Regarding personal factors, we found that both youth workers and stakeholders in local sports clubs have positive attitudes towards collaborating with each other. Volunteers in the local sports clubs that partake in the Sports Plus Programme have the ambition to help reach social policy goals such as the social inclusion of socially vulnerable youngsters. In addition, youth workers have positive attitudes towards increasing sport participation. They want to use it to increase social inclusion and consider the local sports club a place where socially vulnerable youngsters can develop in a positive way. The youth workers believe that their clients can develop their self-esteem and certain skills through sports activities. Although research indeed shows that sport participation by youngsters is associated with several beneficial outcomes such as social inclusion (Feinstein et al., 2005), academic achievement (Bailey, 2006), and social and emotional well-being (Eime, Young, Harvey, Charity, & Payne, 2013), no consensus has been reached on the evidence for a causal relationship. In addition, the mechanisms that explain how sport programmes positively affect life skills of socially vulnerable youth remain unclear (Lubans, Plotnikoff, & Lubans, 2012). Interestingly, the youth workers are only positive towards intersectoral action with local sports clubs if these pay attention to a positive socio-pedagogical climate and to the social skills of the coaches. A positive socio-pedagogical climate and good coaching skills strengthen the possible positive effects of sport participation on socially vulnerable youngsters (Haudenhuyse et al., 2012; Smith, Cumming, & Smoll, 2008). A second personal factor that was mentioned by the youth workers and the local sports clubs stakeholders was self-efficacy in relation to increasing socially vulnerable youngsters' participation in sport. Both groups say that they lack the time to build and maintain the personal relationships that are necessary for intersectoral action and inclusive sports activities. Moreover, some youth workers lack the self-efficacy that would give them the confidence that they could influence socially vulnerable youngsters' participation in sport. Some youth workers find that other factors such as the youngsters' family and peers have a stronger impact than they themselves do on these youngsters' sport participation. As Hunter, Neiger, and West (2011, p. 527) noticed as well, "some local health professionals may feel powerless in addressing the social determinants of health. It is daunting to consider disparities in income, educations, or housing quality".

Only two of the seven factors relating to the organisation of the partnership were mentioned by the youth workers and the local sports clubs stakeholders. First, Rotterdam Sportsupport makes the communal ambitions and activities of the local sports clubs that participate in the Sports Plus Programme visible through a signed contract and a small billboard in each sports club. This contract and billboard made the communal actions "real" for the stakeholders in the local sports clubs. Second, a CSC functions as a neutral leader—or boundary spanner (Williams, 2013). This CSC tries to create contacts between youth workers and local sports clubs and collaborates with the Rotterdam Sportsupport pedagogues to help local sports clubs in creating a positive socio-pedagogical climate.

In addition to the factors relating to the organisation of intersectoral action that are currently present, youth workers and local sports clubs stakeholders also mentioned factors that they would like to be present. Youth workers want to increase the visibility of local sports clubs with which the youth work organisation has contact. In addition, both youth workers and the

local sports clubs stakeholders need some operational support for intersectoral action. Thus, there is a need for people (i.e., boundary spanners) who can manage the intersectoral action. According to Williams (2013), these boundary spanners also play an important role during decentralisation processes and policy reforms. For instance, boundary spanners can manage tensions that occur through new relationships between organisations that possibly coincide with these decentralisation processes. Hence, an exploration of the possible role of these boundary spanners during the coming reforms in Dutch local social policies deserves attention.

This study has two limitations. First, we explored the factors that contribute to intersectoral action involving youth work organisations and local sports clubs from open interviews and focus groups about communal activities of local sports clubs and collaboration between youth workers and local sports clubs in general. We did not specifically ask about all the factors in the HALL framework. The interviewees and participants nevertheless mentioned several of the factors without being prompted. In future research, it is necessary to find out whether the other factors that, were not mentioned in the interviews and focus groups, are relevant for this specific intersectoral action. Second, the data presented in this study are limited and relate to one case, the city of Rotterdam. However, as Rotterdam is investing in the social value of sport and intersectoral actions involving social sector organisation and local sports clubs in a programmatic way, the results of this study can be helpful for other cities that want to invest in this type of intersectoral action. A final important point is that inclusive policies and activities will only be successful if the target groups (e.g., socially vulnerable youngsters) want to participate themselves. Thus, sport participation is a way to increase the social inclusion of these youngsters only if participating in a local sports club fits with the physical and psychological abilities and with wishes of the youngsters.

Conclusion

This article shows that youth workers believe that sport participation is important for the development of socially vulnerable youngsters. This article also shows that some of the interviewed local sports clubs and volunteers in those clubs want to organise inclusive sports activities. Unless these clubs and their volunteers have positive attitudes towards the social value of sport and have the ambition to organise inclusive sports activities, many of the factors relating to the organisation of intersectoral action presented in the HALL framework will not be present in the desired intersectoral action involving youth workers and local sports clubs. It seems that identifying "what to do" (i.e., inclusive sports activities through intersectoral action) is easier than finding out "how to do it" (i.e., actually guiding socially vulnerable youngsters to local sports clubs through collaboration between youth workers and local sports clubs) (Koelen, Vaandrager, & Wagemakers, 2009). There seems to be a missing link that might be filled by—as Williams (2013) calls them—boundary spanners. Future research is needed to further explore the factors that fulfil the potential of intersectoral action involving youth workers and local sports clubs stakeholders, and how to manage this specific intersectoral action.

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Chapter 3

Chapter 4

Co-ordinated action between youth-care and sports: Facilitators and barriers

Abstract

In the Netherlands, youth-care organisations and community sports clubs are collaborating to increase socially vulnerable youths' participation in sport. This is rooted in the idea that sports clubs are settings for youth development. As not much is known about coordinated action involving professional care organisations and community sports clubs, this study aims to generate insight into facilitators of and barriers to successful coordinated action between these two organisations. A cross-sectional study was conducted using in-depth semi-structured qualitative interview data. In total, 23 interviews were held at five locations where coordinated action between youth-care and sports takes place. Interviewees were youth-care workers, representatives from community sports clubs, and Care Sport Connectors who were assigned to encourage and manage the coordinated action. Using inductive coding procedures, this study shows that existing and good relationships, a boundary spanner, care workers' attitudes, knowledge and competences of the participants, organisational policies and ambitions, and some elements external to the coordinated action were reported to facilitators or barriers. In addition, the participants reported that the different facilitators and barriers influenced the success of the coordinated action at different stages of the coordinated action. Future research is recommended to further explore the role of boundary spanners in coordinated action involving social care organisations and community sports clubs, and to identify what external elements (e.g., events, processes, national policies) are turning points in the formation, implementation, and continuation of such coordinated action.

Introduction

Socially vulnerable youths face one or more stressors in everyday life. Examples of these stressors are income poverty, an unhealthy lifestyle, feelings of incompetence and rejection, and negative experiences with institutions such as the family and school (Andrews & Andrews, 2003; Turnbull & Spence, 2011; Vettenburg, 1998). Youth-care organisations in the Netherlands support youths to deal with these stressors. As part of this support, they increasingly introduce youths into settings that are assumed to nurture life-skill development. As community sports clubs are shown to be such youth development settings (Geidne, Quennerstedt, & Eriksson, 2013; Lubans, Plotnikoff, & Lubans, 2012; Meganck, Scheerder, Thibaut, & Seghers, 2015), more and more Dutch youth-care organisations are trying to increase the sports participation of youths under their supervision. At some locations in the Netherlands, Care Sport Connectors (CSCs) have been appointed to increase sports participation of socially vulnerable youths. One of their main activities is to stimulate and facilitate coordinated action, (i.e., exchanging information and altering activities to achieve a common goal (Himmelman, 2002)), between youth-care organisations and community sports clubs. The CSCs can be seen as boundary spanners who can contribute to coordinated action if they are able to bridge diverse cultures, share resources and power, are trustworthy and credible, and can communicate (Lasker, Weiss, & Miller, 2001; Mizrahi & Rosenthal, 2001; Williams, 2013).

Research in several areas indicates that coordinated action improves community outcomes (Akkerman & Torenvlied, 2013; Koelen, Vaandrager, & Wagemakers, 2012; Roussos & Fawcett, 2000). However, the participating people and organisations have to get used to new relationships, procedures, and structures (Koelen, et al., 2012, p. i26; Lasker, et al., 2001). This seems especially true for coordinated action between youth-care and sports, because these two types of organisations have very different aims and cultures. Youth-care organisations in the Netherlands provide services to youths who are (temporarily) experiencing problems in their personal development, for example because they have learning or behavioral problems or because their parents are incapable of providing proper care (Hilverdink, Daamen, & Vink, 2015), whereas community sports clubs' general aim is to organise sports activities (Waardenburg, 2016). Furthermore, most youth-care workers are paid professionals who work during daytime, whereas sports coaches and community sports clubs' leaders work for their club largely on a voluntary basis in the evening or at weekends. Nonetheless, both organisations may benefit from coordinated action. It may facilitate youth-care workers to increase sports participation among socially vulnerable youths, and it may provide sports clubs a platform to fulfil communal ambitions and to find new members (Hermens, Super, Verkooijen, & Koelen, 2015).

As most existing studies on coordinated action involving sports clubs are focused on collaboration with other sports clubs (Casey, Payne, Brown, & Eime, 2009; Cousens, Barnes, & MacLean, 2012) not much is known about coordinated action involving professional care organisations (e.g., youth-care) and community sports clubs. To fill this knowledge gap, this study aims to generate insight into facilitators of and barriers to coordinated action between youth-care and sports. To fully interpret the facilitators and barriers, first information is needed about how the participants in the coordinated action define its success, i.e. performance

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indicators (Johnson, Zorn, Tam, Lamontagne, & Johnson, 2003). Hence, this study answers two questions:

1. According to the participants in coordinated action between youth-care and sports, what are the performance indicators for this coordinated action?

2. According to the participants in coordinated action between youth-care and sports, what are facilitators of and barriers to this coordinated action?

Theoretical framework

To facilitate successful coordinated action, Koelen, et al. (2012) developed the Healthy ALLiances (HALL) framework. This framework was developed based on broad experience with research on collaborative processes in health promotion (Koelen, Vaandrager, & Colomér, 2001; Koelen, Vaandrager, & Wagemakers, 2009; Vaandrager, Koelen, Ashton, & Revuelta, 1993). The framework visualises three clusters of elements that may influence the success of coordinated action: institutional, (inter)personal, and organisational elements. The institutional elements relate to the policies, planning horizons, and funding mechanisms of the organisations participating in the coordinated action. The (inter)personal elements relate to the participating people, such as their attitude toward the coordinated action, their personal relationships, and their competences. The organisational elements relate to how the coordinated action is organised. Examples are leadership type and the communication structure. The organisational elements can be used to deal with challenges that arise from the institutional and (inter)personal elements (Koelen, et al., 2012). In the present study, the HALL framework is applied to interpret the data.

Methods

This study is part of the research project Youth, Care and Sport that aims to (1) explore the relationship between sport participation and life prospects of socially vulnerable youth, (2) study the life experiences of the youths in the sport context, that may contribute to skill development, (3) explore the social conditions for a positive effect, and (4) provide insights on how youth-care organisations and community sport clubs can best collaborate (Super *et al.* 2014). The present study addresses the fourth research aim. In another study, we have explored the opinions of youth-care workers and sports club representatives about increasing sports participation of socially vulnerable youth and their collaboration. As the aim is to explore the coordinated action between youth-care and sports, we use an unstructured mode of inquiry. The research project Youth, Care and Sport has been approved by the Medical Ethical Committee of Wageningen University (protocol number: NL47988.081.14) and has been registered with the Dutch Trial Register (NTR4621).

Data collection

To identify facilitators of and barriers to successful coordinated action between youth-care and sports, we conducted a cross-sectional study using qualitative interview data. The data was collected at five locations in the Netherlands where coordinated action between youth-care organisations and community sports clubs takes place, and where CSCs have been appointed to

form and manage the coordinated action. These CSCs brought sports clubs as a youth development setting to the attention of youth-care workers, motivated and trained these professionals to integrate sports in the care they deliver, and connected youth-care workers and sports clubs with each other.

At each location, we aimed to conduct five face-to-face interviews: one with the CSC, two with youth-care workers, and two with representatives from sports clubs, such as sports coaches and sports club leaders. Interviewees were purposefully selected to ensure they had experience with the coordinated action. First, we invited the CSCs for an interview. All were willing to participate. At the end of the interview, we asked the CSCs to identify two youth-care workers and two representatives from sports clubs that participated in the coordinated action. These selected interviewees were invited for an interview. Only one candidate did not want to participate, citing lack of time. Two interviews were stopped after approximately ten minutes because it turned out that the interviewees lacked sufficient experience in the coordinated action. In these cases, the CSCs were successfully requested to select another interviewee. In one location, only one sports club representative was interviewed because, at that location, this participant organised activities at several sports clubs and no other sports club representative participated in the coordinated action. At this location also, only one youth-care worker was interviewed, because it was difficult to reach youth-care workers at this location. Because data saturation took place after 23 interviews, no additional efforts were committed. Thus, in total 23 interviews were conducted: five with CSCs, nine with youth-care workers, and nine with sports club representatives. The youth-care workers worked in non-residential care (n=4), residential care (n=3), school counselling (n=1), or the coordination of meaningful daytime activities. The sports that were represented were tennis, football, boxing, outdoor activities, and fitness. Before the interview, interviewees were asked to give informed consent on the understanding that they had the right to leave the study at any time without giving a reason, that the interviews would be tape-recorded, and that their anonymity would be guaranteed.

The interviews were semi-structured, took place between March and August 2015, and were conducted by the first two authors. They started with open questions about the interviewees' role in the coordinated action, and what they liked and disliked about the coordinated action. Such a start to interviews tends to increase interviewees' openness in the rest of the interview (Wagemakers, Van Husen, Barret, & Koelen, 2014). After these questions, we asked interviewees how they would define successful coordinated action between youth-care and sports, and what they perceived as facilitators of and barriers to the coordinated action. We also asked whether and what problems arose during the coordinated action, and whether and how these problems were overcome. In the second part of the interview, we asked whether and how the elements from the HALL-framework that were not mentioned by the interviewees themselves influenced the coordinated action. To increase the comparability of the interviews conducted by the two researchers individually, the first interview and an interview halfway through the data collection were conducted by both researchers. All interviews were audiotaped and transcribed verbatim style.

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Analysis

The data were analysed in four phases, starting from an inductive perspective in order to ascertain whether elements other than HALL-framework elements were reported to influence the coordinated action between youth-care and sports. First, all data segments in which interviewees spoke about what they perceived as indicators for successful coordinated action were coded as 'performance indicator', all data segments about elements that had improved or that would improve the coordinated action were coded as 'facilitator', and all segments about elements that had hindered it were coded as 'barrier'. After the initial inductive coding, conducted by the first author, the third author read five of the interviews to discuss the types of facilitators and barriers mentioned by the participants. Second, all data segments about the facilitators and barriers were read again by the first author to code specific facilitators and barriers. All these coding procedures were carried out in Atlas.ti. Third, the performance indicators, facilitators, and barriers were clustered by the first author to identify higher order categories. To ensure appropriate clustering, the third author read and coded data segments about performance indicators, facilitators, and barriers from ten interviews as well. The two researchers' clustering was discussed with the fourth author. Fourth, the HALL-framework was applied top-down to analyse how the reported facilitators and barriers related to facilitators and barriers found in other studies.

Findings

This section covers how the interviewees defined successful coordinated action and what they reported as facilitators of and barriers to successful coordinated action. The facilitators and barriers fall into four clusters (Figure 4.1).
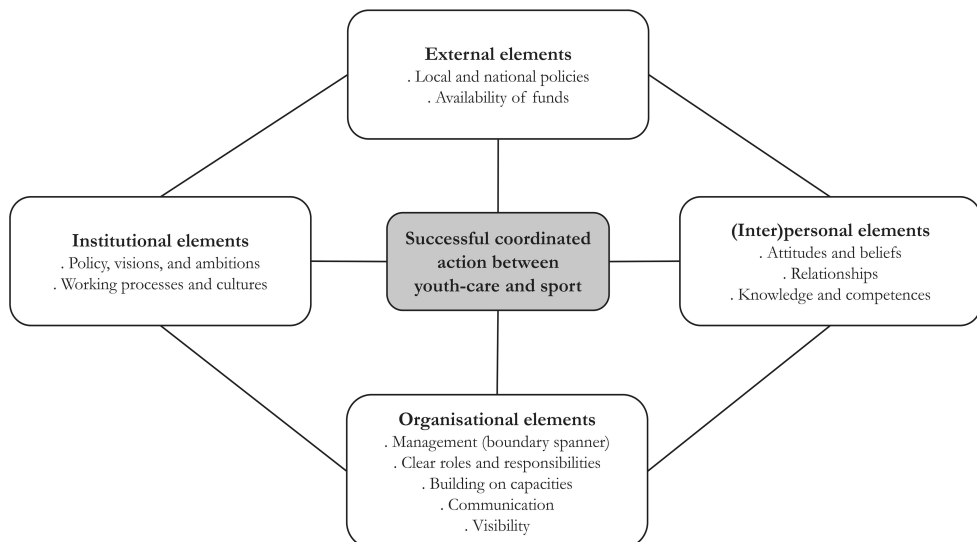

External elements
. Local and national policies
. Availability of funds

Institutional elements
. Policy, visions, and ambitions
. Working processes and cultures

Successful coordinated action between youth-care and sport

(Inter)personal elements
. Attitudes and beliefs
. Relationships
. Knowledge and competences

Organisational elements
. Management (boundary spanner)
. Clear roles and responsibilities
. Building on capacities
. Communication
. Visibility

Figure 4.1 Clusters of facilitators and barriers

Performance indicators

The interviewees mentioned three performance indicators. The first was increased sports participation among socially vulnerable youth, both in sports clubs and in sports programs specifically serving this group. The second was positive developments in youths who started to participate in sports. The interviewees mentioned improved self-regulation and willpower, increased self-esteem, and improvements in quality of life and health as examples of desirable developments. The third performance indicator, reported only by CSCs and youth-care workers, was sustained coordinated action, in particular when it would be institutionalised in the youth-care organisations.

> "*The aim is that youths are going to start and keep participating in sports.*" (Sports5)

> "*The coordinated action is successful if youth-care organisations can optimally use sports as a method for positive youth development and if participation in sports help youths to improve physical fitness, mental health and social skills.*" (YC2)

> "*It is successful if it sustains for a couple of years, if it's more than one event or project.*" (CSC2)

Facilitators and barriers

Existing and good relationships

Existing and good relationships were the most frequently reported facilitators of successful coordinated action. Existing relationships were reported to be important for its formation. For instance, at one location, coordinated action between a tennis club and a youth-care organisation was initiated by a youth-care worker who was a member of this tennis club. Subsequently, the tennis activities led to programs at other sports clubs as well. Good relationships, which the interviewees defined as informal and face-to-face, were reported as crucial for the coordinated action in practice.

> "*The first contact is important. (…) if that is good, then there is some kind of trust. Than it is easy for youth-care workers to contact coaches, and for sports coaches to contact youth-care workers if they have questions about youths in their team.*" (CSC5)

Furthermore, sports coaches in programs specifically serving socially vulnerable youth mentioned that they need good relationships to get information about the youths' background and developmental aims in order to support their life-skill development.

> "*Youth-care workers have to deliver information on the background and care aim of every youngster, otherwise we don't know what to do in the sports program.*" (Sports7)

Finally, good relationships were reported as necessary to continue the coordinated action, in particular from the sports clubs' perspective. For instance, some sports club representatives reported that they needed a specific contact person at the youth-care organisation who knew how to deal with the cultures and working processes of sports clubs.

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Attitudes and beliefs

The most frequently reported barrier to coordinated action was that many youth-care workers do not perceive sports clubs as a youth development setting.

> "*Because youth-care workers think traditionally. Like, 'we can solve problems via predefined steps that we are used to'. (...). And when following those steps, youth-care workers don't think about sports.*" (CSC4)

On the other hand, when youth-care workers believe that sports clubs are youth development settings, this was reported to facilitate the coordinated action because these youth-care workers tended to stimulate youths to participate in sports.

> "*If youth-care workers think sport is important for health, it's more likely that they will ask youths in their caseload to participate in sports.*" (YC7)

At four of the five locations, one or more youth-care workers were assigned to encourage positive attitudes toward sports. At each of these locations, this was initiated by an individual youth-care worker who believed that sports clubs were youth development settings. Hence, personal engagement in the coordinated action was crucial for its formation and implementation.

A barrier relating to attitudes and beliefs reported by three CSCs and one sports club leader was that some sports clubs hesitate to collaborate with youth-care because of fear and unfamiliarity with youth under the supervision of youth-care organisations. Some, for instance, believed that these youths would behave in a way sports coaches could not handle.

> "*There are sports clubs that say they already face many problems and consequently do not want more youth with behavioural problems because the sports coaches cannot handle that. These sports clubs are not convinced about what the coordinated action could mean for them.*" (CSC5)

Knowledge and competences

Specific knowledge and competences, or lack thereof, were reported to influence the coordinated action. First, youth-care workers and CSCs reported that they preferred to collaborate with sports coaches who knew how to deal with youths that receive youth-care. For instance, because many youths in youth-care experience difficulties in peer or adult-youth relationships and/or are not used to participating in structural activities. Several youth-care workers reported that they hesitate to assign youths to sports clubs if they doubt the sports coaches' competences. Concurrently, all types of interviewees reported that youth-care workers and sports club representatives need to know that parents of many of the youths under the supervision of youth-care do not motivate their children to participate in sports. They reported that such knowledge is important because they had experienced that disappointing experiences with youths not maintaining sports reduced the youth workers' and sports clubs' motivation to collaborate.

> "*We try to stimulate all youths to participate. But that's hard because they face problems in meeting expectations. They are already happy if they succeed in going to school. Besides... Their parents are not concerned about their sports participation.*" (YC5)

In addition, youth-care workers and sports club representatives reported that limited knowledge among youth-care workers about how sports clubs are organised and where they are located, hindered the coordinated action.

"*I think there aren't many youth-care workers who know how sports clubs work. (...)They just say 'this boy wants to play soccer, but I really don't know anything about soccer'.*" (Sports8)

Policies, visions, and ambitions
At all five locations, youth-care workers and CSCs reported that the youth-care organisation's management perceived sports participation, among other leisure settings, as settings for youth development. Such a vision was reported as crucial for the coordinated action. In addition, youth-care workers and CSCs mentioned that assigning one or more youth-care workers the task to initiate coordinated action with sports and to inform colleagues about what sports participation could mean for the youths' personal development facilitated the coordinated action. On the other hand, lack of such employees was reported to hinder it.

All types of interviewees reported that, for successful coordinated action, the sports club needs to aspire to function as a youth development setting. The youth-care workers and the CSCs mentioned that it is especially important that such ambitions are shared by different stakeholders in the sports clubs, particularly the coaches and the sports clubs' leaders. They also reported, however, that only few sports clubs have such ambitions.

"*There has to be a certain basis. (...) Because if sports coaches want to collaborate but the leaders don't, or the other way around, it is not going to happen.*" (CSC4)

In addition, sports clubs' leaders and CSCs reported that many sports clubs were too weakly organised to participate in coordinated action with youth-care.

"*If you want to collaborate but there are no volunteers to open the dressing rooms, canteen, etcetera. Then you simply lack the resources.*" (Sports1)

Work processes and cultures
Although occasionally reported in the interviews, the pattern emerged that contradictory work processes and cultures hindered successful coordinated action. These barriers relate, for instance, to different timetables: sports clubs being open in the evening and youth-care working on workdays in working hours. Also, youth-care workers and sports club representatives reported that the different preferred ways of communication in both organisations could hinder the coordinated action.

"*Well, I always contact sports clubs via e-mail during the day. But the people from the sports clubs don't have time to reply. Instead, they want me to visit the sports club during evenings.*" (YC7)

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Another challenge relating to work processes and cultures was the protocols with which youth-care organisations work. If increasing sports participation was not part of these protocols, or if youth-care workers were not facilitated to spend time on promoting sports, this was reported to be a barrier. All types of interviewees reported that, being paid professionals, youth-care workers were the key to overcoming these barriers through a flexible and empathetic approach toward unpaid sports club volunteers.

"We have to create the right preconditions for youth-care workers to collaborate with sports clubs. For instance, sport has to be a mandatory subject in the first conversation with a youngster." (CSC4)

Participation of a boundary spanner
Almost all interviewees reported that a boundary spanner in the form of a CSC was crucial for successful coordinated action, for example because they organised meetings where youth-care and sports could meet each other. Youth-care workers mentioned that the CSCs were especially valuable for them when they were employed at the youth-care organisation. They reported that this helped them to find sports clubs that matched the wishes of youths under their supervision, and to get in contact with funds that support youths of low socio-economic status to pay membership fees.

"I think the CSC is really important for our organisation when it comes to sports because of his large network. If there is a waiting list at a sports club, he knows other places (...). Also, he knows how to acquire funds for sports club memberships. And he negotiates if it takes time until a sports club receives money from these funds, so youths can already start participating." (YC8)

The CSCs themselves mentioned that they facilitated the continuation of the coordinated action because they developed new ways of coordinated action and new sports programs serving socially vulnerable youth. Sports club representatives reported that the CSCs facilitated information exchange with youth-care. Furthermore, they reported that, being a stable factor, the CSCs were important for the continuation of the coordinated action.

"At the moment we are trying to find out how to organise the coordinated action if the CSC stops. This is important because you never know what is going to happen in such large organisations like youth-care organisations." (Sports7)

Clear roles and responsibilities and building on capacities
Some youth-care workers and CSCs mentioned that agreements on roles and responsibilities, and on the youths' developmental goals, might be a bridge too far for sports clubs.

"Because the people from the sports clubs are unpaid volunteers, we have to act pragmatically. If we say, we will evaluate this, we will do this and that, they will be discouraged." (CSC1)

In contrast, some sports club representatives and one CSC reported that formal agreements about the roles and responsibilities of both organisations facilitated coordinated action because they created a basis for sports clubs to spend time on it.

> *"If you make some kind of a contract, the sports clubs know what the coordinated action means for them. For instance, that they are expected to do a weekly sports lesson for socially vulnerable youth."* (CSC2)

In relation to roles and responsibilities, the interviewees reported that building on the capacities of both organisations facilitated successful coordinated action. More precisely, youth-care workers reported that sports coaches were experts in organising fun activities and therefore should not explicitly work on youth-care objectives.

> *"The youths already speak a lot about care objectives. And as we want them to engage in sport to show it is fun and to experience a setting not focusing on their problems, the sports coach doesn't mention these care objectives. Instead, they work with very basic objectives, such as playing together with teammates."* (YC5)

Communication and visibility
Two aspects related to communication were reported to be barriers. First, too many meetings were reported as slowing down the coordinated action. Second, at some locations, the coordinated action was applied mainly at management level, but not yet transferred to the workers and the sports coaches.

> *"I receive too little information regarding how to increase the youths' sports participation. The CSC does a lot and has a large network. But, his efforts do not reach the workers. We receive a lot of information about sports possibilities, but we need something more concrete."* (YC6)

On the other hand, some interviewees reported that coordinated action at management level was crucial to maintain it, particularly because it helped to increase its visibility. Youth-care workers reported that visibility of the coordinated action and its results had motivated them to collaborate with sports. In addition, the visibility of the results was reported as helpful for the acquisition of financial resources.

> *"Because of financial cuts it becomes more important to show the results of the coordinated action, that we can show how we can help youths with our sports care tracks."* (Sports3)

External elements
Two elements external to the coordinated action were reported to facilitate or hinder it. First, a recent paradigm shift in Dutch youth policies was reported to encourage youth-care organisations to collaborate with sports clubs because these policies stimulated them to encompass youths' social networks in the care they deliver, and to support youths to participate in meaningful activities. To do this, youth-care organisations assigned youth-care workers specific geographical areas to work in. According to the interviewees, this has led to more good relationships between youth-care workers and sports club representatives because it reduces the

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number of sports clubs to only those in the youth-care workers' working area. In some cases, the paradigm shift was also reported to hinder the coordinated action. Youth-care workers and CSCs reported that adopting the new paradigm and reorganisations related to the paradigm shift resulted in limited time to invest in coordinated action with sports.

"Yes, we now have the task to increase collaboration between sports clubs and social organisations. So, for each area in the city we discuss with the social workers what the sports clubs in that area can do for socially vulnerable groups." (CSC2)

Second, the availability of funds was reported to influence the coordinated action. For instance, the interviewees reported that the possibility of acquiring financial resources to set up new sports programs serving socially vulnerable youth facilitated coordinated action. Also, subsidies to develop sports coaches' socio-pedagogical skills were reported to be a facilitator. Furthermore, youth-care workers and CSCs mentioned that funds for membership fees for youths of low socio-economic status were a precondition for youth under their supervision to participate in sports.

"Some years ago there were financial resources that we could use to pay lessons for sports coaches on how to deal with youth with behavioural problems and to pay sports coaches for the extra hours they spent on communication with youth-care workers. That helped a lot." (Sports8)

Discussion

This study investigated coordinated action between youth-care and sports. According to the interviewees, and in line with other research on outcome indicators of coordinated action in health (Lasker et al., 2001), this coordinated action is successful if more socially vulnerable youths participate in sports, these youths develop life skills when participating in sports, and the coordinated action is sustained. In addition, the findings of this study reveal important facilitators of and barriers to successful coordinated action between youth-care and sports. In line with previous studies (Casey, et al., 2009; Huijg, et al., 2013), these facilitators and barriers seem to influence successful coordinated action at different stages. Below, we discuss four major findings.

First, the participation of a boundary spanner appeared an important facilitator. Although boundary spanners were not found to facilitate coordinated action in other studies involving sports organisations (Casey, et al., 2009; Huijg, et al., 2013; Leenaars, Smit, Wagemakers, Molleman, & Koelen, 2015), this finding is consistent with studies on coordinated action in public health (Cramm, Phaff, & Nieboer, 2013; Mizrahi & Rosenthal, 2001). In line with findings of Axelsson and Axelsson (2006), our study shows that boundary spanners can play a role at different stages. Thus, based on our findings, we recommend youth-care organisations and governmental organisations that aim to increase sports participation of socially vulnerable youth, to acquire a boundary spanner for the formation of coordinated action between youth-care and sports. In addition, these boundary spanners could play a role in the implementation and continuation of the coordinated action through facilitating good relationships and information exchange, embedding the coordinated action in both organisations' policies and cultures, helping

sports coaches to facilitate positive sports experiences, and through applying funds for sports activities serving socially vulnerable youths. As the work of the boundary spanners at our study locations was rooted mainly in the aims and culture of youth-care, we would recommend setting up research that further explores how boundary spanners can best pay attention to and build upon the sports clubs' aims and cultures, and to investigate what kind of support sports clubs require in order to be a youth development setting.

Second, this study showed that coordinated action between youth-care and sports is largely rooted in the aims and perspectives of youth-care. For instance, the performance indicators are more consistent with the youth-care organisations' aims than with the sports clubs' aims. Also, elements of governmental youth policies were reported to influence the coordinated action but not elements of sports policies. Furthermore, only youth-care workers and CSCs, and not the representatives from sports clubs, mentioned that institutionalisation of the coordinated action in their organisation's protocols and policy facilitated its success. Such an institutionalised form of managing coordinated action was found to be successful in child protection care and child development programs (Johnson, et al., 2003; Lalayants, 2013), but it is criticised when community sports clubs are involved (Harris, Mori, & Collins, 2009; Østerlund, 2013; Thiel & Mayer, 2009). For example, Harris, et al. (2009) found that governmental expectations often do not suit sports clubs' interests, and that many sports clubs lack the physical, financial, and human resources to meet these expectations. Despite these criticisms, the present study as well as previous research (Hermens et al. 2015), show that some sports clubs aspire to serve as a youth development setting for socially vulnerable youths. Therefore, we recommend that local governments find out which sports clubs have such ambitions, link youth-care to these clubs, and support information exchange between both organisations.

Third, as personal elements such as existing relationships, youth-care workers' attitudes, and knowledge and competences among participants were reported to facilitate the formation and implementation of the coordinated action, it seems that successful coordinated action strongly depends on individuals in both youth-care and sports. This is consistent with other studies in the Netherlands, that showed that positive attitudes of public health professionals toward sports and sports coaches possessing specific knowledge and skills facilitated its implementation (Huijg, et al., 2013; Leenaars, et al., 2015). Hence, youth-care organisations that aspire coordinated action with sports clubs may want to employ one youth-care worker who strongly believes in sports as a youth development setting and who has a network in sports. At the locations where this study was conducted, such youth-care workers were eventually employed as CSCs who had a boundary spanning role between youth-care and sports.

Fourth, we found an additional cluster of elements (i.e., external elements) that influences coordinated action besides the elements of the HALL framework. Two external elements that were mentioned in this study are governmental policies and possibilities to acquire funds. Mizrahi and Rosenthal (2001) and Kegler, Rigler, and Honeycutt (2010) also described the relevance of such elements. However, not much is known about what specific processes or events are turning points in the formation, implementation, and continuation of coordinated action between care and sports. To support governmental organisations, youth-care, and sports to successfully manage and facilitate such coordinated action, research is needed that identifies the most critical external elements.

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This study is not without limitations. First, the interviewees were purposefully selected because we needed interviewees experienced in coordinated action between youth-care and sports. Consequently, they may have positive attitudes regarding the coordinated action. Second, the researchers were familiar with the HALL framework before they started the study. Despite the efforts to minimise bias, this may have influenced the way questions were posed and the way the data was coded.

Conclusion

The present study expands the body of knowledge regarding coordinated action between professional care and community organisations. Existing and good relationships, a boundary spanner, care workers' attitudes, knowledge and competences of the participants, organisational policies and ambitions, and some elements external to the coordinated action are facilitators of and/or barriers to coordinated action. In addition, it shows that different elements were reported to be important at different stages of the coordinated action. Future research is recommended to further explore the role of boundary spanners in coordinated action between health and social care organisations and community sports clubs, and to identify what external elements (e.g., events, processes, national policies) are turning points in the formation, implementation, and continuation of such coordinated action.

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Chapter 5

Associations between partnership characteristics and perceived success in Dutch sports-for-health partnerships

Abstract

To reach and include socially vulnerable people through sport, it is important to create partnerships between sports organisations and public health organisations (i.e., sport-for-health partnerships). Working in sport-for-health partnerships is challenging however, and little is known about how to manage such partnerships. To discern predictors of successful sport-for-health partnership, we administered a questionnaire among 86 participants in Dutch sport-for-health partnerships. The questionnaire included measures pertaining to three indicators of successful inter-sectoral partnership (i.e., partnership synergy, partnership sustainability, and community outcomes) and nine partnership elements that may predict its success. Step-wise regression was performed to identify the partnership elements that best predict partnership success. The bivariate results showed that all nine partnership elements in the conceptual model are related to all three indicators of partnership success. However, the multivariate results showed that (1) partnership synergy is best predicted by communication structure and building on the partnership participants' capacities, (2) community partnership outcomes are best predicted by partnership visibility and task management, and (3) partnership sustainability is best predicted by partnership visibility. Hence, we would recommend actors in sport-for-health partnerships to pay particular attention to communication structure, building on capacities, visibility, and task management. Future research should elaborate on our findings by unravelling the mechanisms underlying the relationships between these four partnership elements and partnership success.

Introduction

Socially vulnerable people are people who confront more challenges that threaten their health and well-being than do non-vulnerable, advantaged people (Braveman & Tarimo, 2002; Irwin et al., 2006). They face stressors in their everyday lives, such as income poverty, poor family management, low housing quality, and peers involved in problem behaviour, that may lead to feelings of incompetence, social disconnectedness, a lack of ambition, and negative experiences with societal institutions, such as family, school, and healthcare (Haudenhuyse, Theeboom, & Skille, 2014; Hawkins, Catalano, & Arthur, 2002). As sports participation and physical activity are associated with improvements in socially vulnerable people's physical, emotional, and social health (Eime, Young, Harvey, Charity, & Payne, 2013; Herens, Bakker, Van Ophem, Wagemakers, & Koelen, 2016; Hermens, Super, Verkooijen, & Koelen, 2017), policymakers and researchers increasingly recognise sport as a tool that helps to address socially vulnerable people's social problems and public health issues (Schulenkorf, Sherry, & Rowe, 2016). However, the stressors that socially vulnerable people face are associated with a reduced chance of participating in sports activities (Vandermeerschen, Vos, & Scheerder, 2015).

To reach and include socially vulnerable people through sports, inter-sectoral partnership between sports and public health organisations is advocated. Gillies (1998) defined partnership for health promotion as "a voluntary agreement between two or more partners to work cooperatively towards a set of shared health outcomes" (p. 101). Hence, partnerships between sports and public health organisations, which we define as sport-for-health partnerships, represent voluntary agreements between sports organisations and public health organisations to work towards health outcomes. Sports organisations include non-profit sports clubs, community-based sports programmes, and commercial sports centres. Public health organisations include primary care, youth work, social work, elder care, and residential care. An example of a sport-for-health partnership is a youth-care organisation collaborating with voluntary sports clubs in order to increase socially vulnerable youths' sports participation, which should lead to improved physical, emotional, and social health for these youth group. The basic idea underlying inter-sectoral partnership is that "partners can achieve more by working together than they can on their own" (Corbin, Jones, & Barry, 2016, p. 2). For example, if sports organisations want to contribute to socially vulnerable people's health, they may want to collaborate with public health organisations to gain the required expertise for creating inclusive and health-promoting sports settings (Casey, Payne, & Eime, 2012; Hermens, de Langen, Verkooijen, & Koelen, 2017; Kokko, 2014).

Despite the advocacy of sport-for-health partnership, it is a relatively understudied topic. Hence, participants in sport-for-health partnerships mainly have to rely on partnership knowledge from the broader health promotion literature (i.e., Butterfoss & Kegler, 2012; Corbin et al., 2016; Koelen, Vaandrager, & Wagemakers, 2012), which is mainly based on qualitative studies (Corbin, 2017). We contribute to this area of scholarship by quantitatively exploring associations between different partnership elements and the perceived success of sport-for-health partnerships. The results of this study may support financiers, leaders, and participants in sport-for-health partnerships to build, manage, and maintain partnership processes successfully. In addition, our research serves as an example of the challenges in executing quantitative

partnership research and may hence be valuable for other scholars adopting a quantitative approach in this field.

Background

To explore the determinants of perceived sport-for-health partnership success, we first examine what is meant by a successful inter-sectoral partnership. Researchers have distinguished between three general indicators of partnership success. The first indicator pertains to the community outcomes of the work undertaken in a partnership (Roussos & Fawcett, 2000; Zakocs & Edwards, 2006). An increase in physical activity among socially vulnerable groups or improved well-being of participants in sports programmes are some examples of community outcomes in sport-for-health partnerships. A second indicator pertains to sustainability. A partnership is sustainable if it is long-term, stable, and self-supporting (Cramm, Phaff, & Nieboer, 2013; Pucher, Candel, Boot, & de Vries, 2017). It is important to consider partnership sustainability as an indicator of partnership success because it may take years before public health outcomes from partnerships become noticeable (Roussos & Fawcett, 2000). In addition to community outcomes and partnership sustainability, several scholars, including Lasker, Weiss, and Miller (2001) and Zakocs and Edwards (2006), point to partnership synergy as another indicator of its success. Partnership synergy represents the sum of perspectives, knowledge, and skills that are brought into the partnership by the people and organisations participating. Partnerships need to be synergetic to be more effective than single organisations or persons in reaching community outcomes (Zakocs & Edwards, 2006).

Working in inter-sectoral partnerships is not easy however, and many hurdles have to be overcome to become successful. It is a process that "requires relationships, procedures, and structures that are quite different from the way many people and organisations have worked in the past" (Lasker et al., 2001, p. 180). This process is influenced by multiple resources that are brought into a partnership by the individuals and organisations participating (Corbin et al., 2016; Green, Daniel, & Novick, 2001; Koelen et al., 2012). According to Koelen et al. (2012), the resources brought into a partnership by individuals represent personal elements, and the resources brought into a partnership by organisations constitute institutional elements. Besides the personal and institutional elements, Koelen et al. (2012) distinguished organisational partnership elements, which pertain to the governance of partnerships. Organisational elements support partnerships in dealing with the difficulties that may arise from differences in personal and organisational backgrounds brought into a partnership (Koelen et al., 2012; Lasker et al., 2001; Roussos & Fawcett, 2000). Concurrently, the organisational elements can facilitate the exchange of expertise, knowledge, and networks between partners (Corbin, 2017).

The aforementioned personal, institutional, and organisational partnership elements have been put together by Koelen et al. (2012) in the Healthy ALLiances framework (HALL framework). As the HALL framework acknowledges that the success of inter-sectoral partnership relies on the personal and institutional backgrounds brought into a partnership and on how the differences in background are managed, we have adopted it as the conceptual model for this study (see Figure. 5.1).
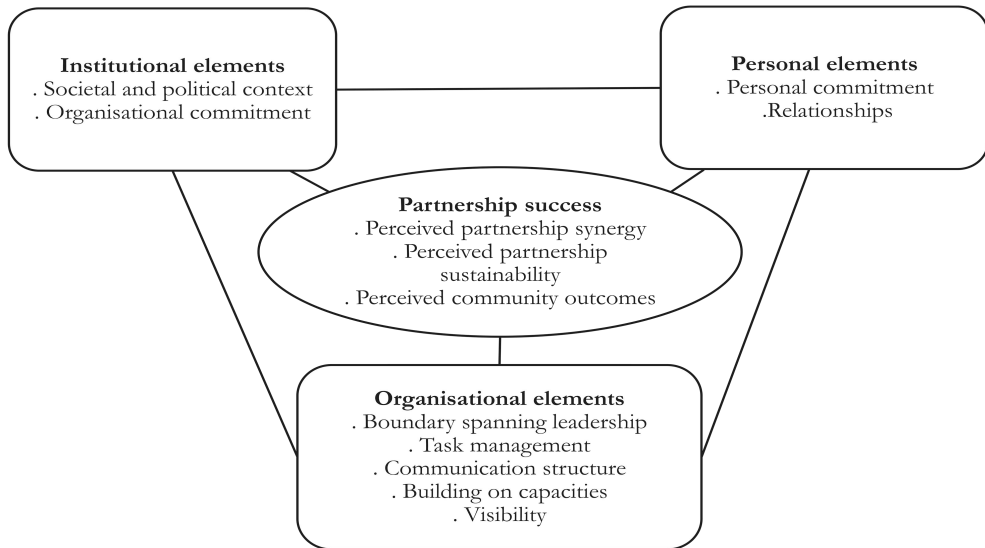
Figure 5.1. Conceptual model for this study. Adapted from Koelen et al. (2012)

Personal elements

Two personal elements are important for the success of sport-for-health partnerships: personal commitment to the partnership and relationships. Multiple scholars have reported that personal commitment, which can be defined as the degree to which participants believe that the partnership is valuable for society and in their personal interest, influences the degree to which they are willing to invest in it. One example of the role of personal commitment comes from interviews with youth-care professionals in the Netherlands, where Hermens, Super, Verkooijen, and Koelen (2015) reported that the degree to which they collaborate with sports clubs depends on the degree to which the individuals think that sports participation is valuable. Furthermore, Baker, El Ansari, and Crone (2017), who according to our knowledge conducted the only quantitative study on the functioning of sport-for-health partnership, found that the benefits that participants perceive from sport-for-health partnerships in England is related to perceived synergy. Personal commitment may need special attention in sport-for-health partnerships because the majority of people in sports organisations are unpaid volunteers whose main interest is conducting sports activities, and hence they do not perceive health promotion as their main responsibility (Casey et al., 2012). Regarding relationships, Misener and Doherty (2013) found that trustful and engaged relationships facilitate successful partnership processes in sports organisations' inter-organisational relationships. Relationships may be of particular importance in sport-for-health partnerships because many such partnerships are based on loose agreements rather than formalised contracts (Shaw & Allen, 2006).

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Institutional elements

Existing research shows that two institutional elements are important for the success of sport-for-health partnerships: the societal and political context in which a partnership operates and organisational commitment to the partnership. The societal and political context in which sport-for-health partnerships operate are important for their sustainability. Participants in sport-for-health partnerships reported that their partnership could only be maintained when local and national policies were in favour of the partnership's work and goals, and when external funding was available (Hermens, de Langen et al., 2017; Parent & Harvey, 2017). A favourable societal and political context may be especially important for sport-for-health partnerships, because many sports organisations operate in unstable funding environments (Jones, Edwards, Bocarro, Bunds, & Smith, 2017). Regarding organisational commitment, Casey, Payne, and Eime (2009) found that the stronger the commitment of organisations to sport-for-health partnerships, the more likely they were to commit resources.

Organisational elements

Existing studies on sport-for-health partnership have revealed five organisational elements that are important for the success of these partnerships. First, multiple scholars have addressed a need for boundary spanning leadership. Boundary spanning leadership represents coordinating and facilitating collaborative processes between organisations and individuals with different backgrounds, values, and interests (Williams, 2013, p. 19). In sport-for-health partnerships, such leadership has proved crucial for managing tensions that may arise from the differences in personal and institutional backgrounds represented in the partnership; for example, by supporting communication between partners and creating mutual understanding of the differences in cultures and work processes (Babiak & Thibault, 2009; Misener & Doherty, 2013; Parent & Harvey, 2017). Second, task management, which includes creating a shared mission and role clarity, is important in sport-for-health partnerships in different settings. Casey et al. (2009), for example, found that sport-for-health partnerships that signed agreements about the different partners' roles and responsibilities had more success in implementing sports programmes than partnerships that did not sign such agreements. Conversely, Frisby, Thibault, and Kikulis (2004) reported that poor task management (e.g., role ambiguity, absence of formal agreements, and lack of evaluation procedures) caused difficulties in Canadian sport-for-health partnerships. Third, creating a partnership that builds on the capacities of the individuals participating can facilitate successful sport-for-health partnerships. For example, in partnerships between youth-care organisations and sports clubs in the Netherlands, capacity building supported the exchange of expertise between partners in order to achieve more than the organisations could on their own (Hermens, de Langen et al., 2017). Fourth, the communication structure in sport-for-health partnerships plays an important role in their success. Misener and Doherty (2013) found that open communication had helped community sport organisations to create trustful relationships with other sports and non-sports organisations. Fifth, a few scholars have reported that visibility of the activities and the outcomes of sport-for-health partnership is important for success – not only because visible results motivate partners to put effort into the partnership (den Hartog, Wagemakers, Vaandrager, van Dijk, & Koelen, 2014), but also because they may help to gain additional external funding (Kelly, 2013).

Method

Research setting

We conducted a cross-sectional quantitative study to explore associations between different partnership elements and the perceived success of sport-for-health partnerships in the Netherlands. The Dutch national sports policy department increasingly encourages sports and public health organisations to build local partnerships that develop, implement, and run sports activities serving socially vulnerable groups (Leenaars, 2017). Simultaneously, an increasing number of societal organisations and regional and local governments in the Netherlands are providing financial and personnel resources for sport-for-health partnerships at local level. Hence, the number of sport-for-health partnerships in the Netherlands is rising.

We gathered data from leaders and participants in multiple local sport-for-health partnerships in the Netherlands. These partnerships shared some key characteristics. First, in each partnership, one or more public health organisations and one or more sports organisations were collaborating. Besides voluntary sports clubs, which are the main provider of sports in the Netherlands, the sports sector was also represented by community sports organisations that organise activities in public spaces. Second, all partnerships targeted a socially vulnerable group and aimed to address a public health issue. For example, one partnership aimed to improve long-term unemployed people's physical health by offering them opportunities to participate in sports. Another partnership aimed to improve elderly people's social well-being through physical activity activities where they could meet one another. Third, all partnerships received support from one of four umbrella organisations, to which we refer as umbrella organisations A, B, C, and D. The umbrella organisations were two societal organisations and two regional governmental organisations that support sport-for-health partnerships in the Netherlands. This support included temporary financial resources, evaluation and knowledge transfer activities – such as conferences and action research –, and support in applying for novel funding through fund-writing training sessions.

Study population and data collection

We collected data from 32 sport-for-health partnerships. In total, we invited 39 partnership leaders and 83 partnership members to fill out an online questionnaire; of these, 32 leaders and 54 members participated in the study.

To contact the study participants, we obtained the local partnership leaders' email addresses and telephone numbers from the programme coordinators of the four umbrella organisations. After the programme coordinators had informed the local partnership leaders about the research, we sent 39 partnership leaders an email, including an introduction explaining the research and a hyperlink to the online questionnaire. In the email, we also requested the partnership leaders to provide contact details for the other partnership members. If partnership leaders did not reply to our request within 14 days, we sent them a reminder via email, and, if they did not reply to the reminder, we tried to contact them by telephone.

After receiving the contact details of 83 partnership members, we sent them an email, including an introduction explaining the research and a hyperlink to the online questionnaire. Two weeks thereafter we reminded the non-responders to complete the questionnaire, and, if

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they did not respond two weeks after the reminder, we reminded them by telephone. Each participant could log on to the online questionnaire via a personalised login code and password that referred to the partnership in which they were participating. To increase response, each participant who filled out the questionnaire could chose a charity foundation to which €5 would be donated from the research budget.

Instrument development

We developed a questionnaire to measure the nine partnership elements and the three indicators of partnership success (see Fig. 5.1). First, we looked in the literature for existing measures. For 9 of the 12 concepts (i.e., societal and political context, organisational commitment, relationships, boundary spanning leadership, task management, communication structure, visibility, perceived partnership synergy, and perceived partnership sustainability), we found existing measures. One of these measures – Jones and Barry's (2011) synergy scale – had to be translated from English into Dutch. The other existing measures were found in three Dutch instruments: the Short version of the Partnership Self-Assessment Tool, developed by Cramm, Strating, and Nieboer (2011) to evaluate partnership synergy; the Diagnosis of Sustainable Collaboration (DISC) questionnaire, developed by Leurs, Mur-Veeman, Van Der Sar, Schaalma, and De Vries (2008) for comprehensive monitoring of public health partnerships; and the Coordinated Action Checklist, developed by Wagemakers, Koelen, Lezwijn, and Vaandrager (2010) as a tool for building, managing, and evaluating community health promotion partnerships. Most measures could be readily applied; others needed small adaptations to fit the context of the current study. One such an adaptation was that the items adopted from the DISC-questionnaire needed to be rephrased for sport-for-health partnerships since the DISC-questionnaire was originally developed to evaluate partnerships between schools and public health organisations. For example, the original item "the aims of the partnerships fit within the policy of the schools participating" was rephrased into "the aims of the partnership fit with the policies of the organisations participating". In addition, although most of the existing scales used a 5-point answer scale, we decided to use 7-point answer scales for all our measures for the sake of consistency. In addition, 7-point scales allow for more variance in responses. Although this adaptation may have affected the psychometric properties of the validated scales, researchers have shown that rating scales using 5- or 7-point scales tend to yield the same results (Krosnick & Presser, 2010).

Self-developed measures

For three concepts (i.e., building on capacities, personal commitment, and perceived community outcomes), we did not find existing measures. Hence, we needed to develop measures for these concepts by combining items from existing instruments and by developing completely new items. For building on capacities we adopted two items from the Coordinated Action Checklist and two items from the Partnership Self-Assessment Tool. For personal commitment we adopted two items from the Coordinated Action Checklist (Wagemakers et al., 2010). We added one self-developed item because we thought that the two items adopted did not completely cover personal commitment to a partnership. The self-developed item was inspired by an existing item for organisational commitment from Leurs et al.'s (2008) the DISC-questionnaire

(i.e., "the aims of the partnership fit with the aims of my organisation") and reads as "the aims of the partnership match with my personal norms and values." For perceived community outcomes, we self-developed three items based on the results from a qualitative study by Hermens, de Langen et al. (2017), who found that youth-care professionals and sports club volunteers in the Netherlands perceive their cross-sectoral collaboration as successful when it results in (a) increased sports participation by socially vulnerable youth, (b) positive physical, emotional, and social development in these youths, and (c) increased legitimacy for sport as a method to promote health in socially vulnerable youth. Hence, we formulated items that measured the degree to which the study participants think that the sport-for-health partnership they participate in reaches these three types of results. The self-developed items for perceived community outcomes and personal commitment were developed by Niels Hermens and slightly reformulated during a discussion among all three authors.

All twelve measures were tested during a pilot-test of the instrument. Due to the exploratory nature of this study we determined an item was good when the pilot test participants experienced it understandable and clearly formulated. Finally, we tested the internal consistency of the measures by calculating the Cronbach's Alpha.

Pilot test of the instrument
A first version of the questionnaire was tested with two partnership leaders and four partnership members. They filled out a hardcopy of the questionnaire and afterwards discussed with the first author whether or not the items were clearly formulated. The pilot test showed that almost all items were easily understandable. Only the items from the Partnership Self-Assessment Tool (Cramm et al., 2011) needed some small linguistic adaptations.

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Measures

Table 5.1 provides an overview of the measures.

Table 5.1. Overview of the measures, including bivariate correlations between partnership elements and indicators of successful sport-for-health partnerships

Scale (no. items)	N	α	Scale development	M	SD	Perceived community outcomes	Perceived synergy	Perceived sustainability
Institutional elements								
1. Organisational commitment[1] (2)	86	.65	Adopted from Leurs et al. (2008)	6.19	1.06	.355**	.414**	.270*
2. Societal and political context (4)	86	.77	Adopted from Leurs et al. (2008)	5.90	0.89	.366**	.454**	.552**
Personal elements								
3. Personal commitment (3)	84	.88	Based on Wagemakers et al. (2010), one item self-developed	5.88	1.18	.458**	.553**	.327**
4. Relationships (4)	84	.90	Adopted from Wagemakers et al. (2010)	5.55	1.14	.531**	.650**	.342**
Organisational elements								
5. Boundary spanning leadership (4)	81	.91	Adopted from Cramm et al. (2011)	5.54	0.97	.614**	.717**	.400**
6. Task management (3)	83	.89	Adopted from Wagemakers et al. (2010)	5.43	1.15	.551**	.664**	.302**
7. Communication structure (4)	82	.91	Adopted from Cramm et al. (2011)	5.28	1.01	.607**	.759**	.459**
8. Building on capacities (4)	84	.87	Based on Wagemakers et al. (2010) and Cramm et al. (2011)	5.28	1.16	.461**	.728**	.348**
9. Visibility (5)	81	.90	Adopted from Wagemakers et al. (2010)	4.94	1.20	.738**	.580**	.714**
Coalition success								
10. Perceived community outcomes (3)	80	.91	Self-developed based on findings Hermens, de Langen et al., (2017)	5.34	0.91			
11. Perceived partnership synergy (8)	81	.91	Adopted from J. Jones and Barry (2011)	5.34	1.43	.662**		
12. Perceived partnership sustainability (4)	81	.84	Adopted from Wagemakers et al. (2010)	4.52	1.34	.615**	.485**	

*p < .05, **p < .01
[1]Initially three items with Cronbach's α .

Personal elements

Personal commitment was assessed with three items. Two of these three items were adopted from the Coordinated Action Checklist (Wagemakers et al., 2010). An example item is: "I feel involved in the partnership." Responses to the items were structured using a 7-point scale from totally disagree (1) to totally agree (7). The Cronbach's alpha for the three items measuring personal commitment was .88.

Relationships was assessed with four items adopted from the Coordinated Action Checklist (Wagemakers et al., 2010). An example item is: "The partnership partners know how to involve each other when action is needed." Responses were structured using a 7-point scale from totally disagree (1) to totally agree (7) or from very bad (1) to very good (7). The Cronbach's alpha for relationships was .90.

Institutional elements

The two institutional elements were assessed with items adopted from the DISC questionnaire (Leurs et al., 2008). Organisational commitment was assessed with two items. An example item is: "my organisation is investing in the partnership by providing personnel resources." Responses were structured using a 7-point scale from totally disagree (1) to totally agree (7). Initially, we included a third item from the DISC questionnaire (i.e., "the aims of the partnership fit with the aims of my organisation"), but we decided to remove that item from the scale because reliability analysis revealed that Cronbach's alpha was much improved when this item was deleted (i.e., from .46 to .65).

Societal and political context was assessed with four items that pertain to the degree to which the partnership's aims and activities align with societal norms and policy aims. An example is: "the aims of the partnership fit with national and local policies." Responses were structured using a 7-point scale from totally disagree (1) to totally agree (7) or from very bad (1) to very good (7). The Cronbach's alpha for the four items measuring societal and political context was .77.

Organisational elements

Leadership was assessed with four items adopted from the Partnership Self-Assessment Tool (Cramm et al., 2011). The study participants were asked to indicate how they considered certain aspects of partnership leadership in terms of good or bad. An example item is: "Inspiring and motivating the people involved in the partnership." Reponses were structured using a 7-point scale from very bad (1) to very good (7). The Cronbach's alpha was .87.

Task management was assessed with three items adopted from the Coordinated Action Checklist (Wagemakers et al., 2010). An example item is: "There is agreement on the partnership's mission and goal." Responses were structured using a 7-point scale from totally disagree (1) to totally agree (7). The Cronbach's alpha was .89.

Communication structure was assessed with four items adopted from the Partnership Self-Assessment Tool (Cramm et al., 2011). The study participants were asked to indicate how they considered certain aspects of communication structure in terms of good or bad. An example item is: "The coordination of the communication among the partners." Responses were structured using a 7-point scale from very bad (1) to very good (7). The Cronbach's alpha was .91.

Building on capacities was assessed with four items, of which two were adapted from the Coordinated Action Checklist (Wagemakers et al., 2010) and two from the Partnership Self-Assessment Tool (Cramm et al., 2011). An example item is: "To attain the goals of the partnership, the right partners are involved." Responses were structured using a 7-point scale from totally disagree (1) to totally agree (7). The four items showed good inter-item reliability (DeVellis, 2003), and hence the mean score for the four items was taken as a final measure for community outcomes. The Cronbach's alpha was .87.

Visibility was assessed with five items adopted from the Coordinated Action Checklist (Wagemakers et al., 2010). An example item is: "The partnership maintains the external relationships in an accurate way." Responses were structured using a 7-point scale from totally disagree (1) to totally agree (7). The Cronbach's alpha was .90.

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Partnership success

Perceived community outcomes was assessed with three self-developed items. An example item is: "the work of this partnership resulted in an increase in sports participation." Responses were structured using a 7-point scale from totally disagree (1) to totally agree (7). The three items showed good inter-item reliability (DeVellis, 2003), and hence the mean score for the three items was taken as a final measure for community outcomes. The Cronbach's alpha was .86.

Perceived partnership sustainability was assessed with four items adopted from the Coordinated Action Checklist (Wagemakers et al., 2010). An example of an item is: "The partnership takes care of continuation after the project period." Responses were structured using a 7-point scale from totally disagree (1) to totally agree (7). The Cronbach's alpha for the four items was .84.

Perceived partnership synergy was assessed with the 8-item scale for synergy in health promotion partnership that was originally developed by Jones and Barry (2011). As this scale was only available in English, we translated it into Dutch. An example item is: "The partnership is making ongoing progress towards its goals." Responses were structured using a 7-point scale from totally disagree (1) to totally agree (7). The Cronbach's alpha was .91.

Background variables

We gathered information pertaining to six background variables. We assessed partnership, referring to the partnerships' umbrella organisation (i.e., Organisation A, Organisation B, Organisation C, and Organisation D). Furthermore, we asked respondents about their type of organisation (i.e., sports organisation or public health organisation), their role in the partnership (i.e., partnership leader or partnership member), and their type of employment (i.e., paid professional or unpaid volunteer). Finally, respondents' age and sex were assessed.

Analysis

The data analyses were conducted with SPSS version 22. First, descriptive statistics and bivariate correlations were obtained. Subsequently, for each outcome variable (i.e., synergy, community outcomes, and sustainability), a stepwise regression was performed to reveal the relative importance of the partnership elements in predicting partnership success.

Results

Sample characteristics

A total of 86 respondents (response rate: 70%) completed the survey. The sample characteristics are shown in Table 5.2. Two-thirds of the respondents were male (66%), and the mean age was 44.3 years (SD = 11.7). Partnerships supported by Organisation A (see Table 5.2) were best represented by the respondents (n = 39); only eight respondents were members of a partnership supported by Organisation D. About half of the respondents represented a sports organisation and the other half a public health organisation. Almost 35% of the respondents reported having a leading role in the partnership, and about 80% were paid professionals.

Table 5.2. Characteristics of the study participants

	n	*%*	*M*	*SD*	*range*
Sex[a]					
Male	54	66			
Female	28	34			
Age			44.3	11.7	25-71
Umbrella organisation					
Organisation A	39	45.3			
Organisation B	11	12.8			
Organisation C	28	32.6			
Organisation D	8	9.3			
Background organisation					
Sport	35	40.7			
Public health	38	44.2			
Other/unknown	3	3.5			
Role in partnership					
Leader	30	34.9			
Member	56	65.1			
Employment					
Paid professional	68	79.1			
Unpaid volunteer	18	20.9			

[a] Not all participants answered this question

Descriptive statistics and correlations

Table 5.1 shows the means and standard deviations of the studied variables. Mean scores were high for all partnership elements, especially organisational commitment (M = 6.19, SD = 1.09). Perceived sustainability of the partnership scored lowest, with 4.52 (SD = 1.34) on a 7-point scale. Table 5.1 also presents the bivariate correlations between the elements of the conceptual model.

Stepwise regressions

To ascertain which combination of background variables and elements of the conceptual model best explain variation in perceived synergy, perceived community outcomes, and perceived partnership sustainability, we conducted three stepwise regression analyses. The results are shown in Table 5.3. Synergy was positively associated with communication structure and building on capacities. In addition, age and participating in the partnership as a paid employee were positively related to perceived synergy. Together, these four factors explained 74% of the total variance in perceived synergy. Both perceived community outcomes and perceived sustainability were strongly and positively associated with visibility of the partnership. Perceived community outcomes was also positively associated with good task management, and perceived sustainability was positively associated with being supported by umbrella Organisation A.

Table 5.3. Results of the stepwise regression analyses on perceived partnership synergy, perceived partnership sustainability, and perceived community outcomes

Predictor	Perceived partnership synergy		Perceived partnership sustainability		Perceived community outcomes	
	B	p	β	p	β	p
Communication structure	.50	< .001				
Building on capacities	.43	< .001				
Paid professional	.24	.001				
Age	.18	.015				
Task management					.30	.001
Visibility			.73	< .001	.60	< .001
Umbrella Organisation A			.30	.002		
Adjusted R²	.74		.58		.57	

Discussion

In this article, we explored the associations between different partnership elements and the success of sport-for-health partnerships in terms of perceived partnership synergy, perceived partnership sustainability, and perceived community outcomes. The insights from this exploration enrich the existing literature in this field, which is mainly based on qualitative research. From the existing literature on partnership work in health promotion and sport-for-health partnerships, we created a conceptual model including nine partnership elements that have been related to partnership success in qualitative studies. The nine partnership elements form three clusters of partnership elements: personal, institutional, and organisational elements (see Fig. 5.1). Our study suggests that all nine partnership elements in our conceptual model are associated with the perceived success of sport-for-health partnerships. This result is in line with the existing body of knowledge on health promotion partnerships, which describes working in partnerships as a multifaceted process influenced by (a) the institutional and personal backgrounds and differences therein that are brought into the partnership and (b) how the partnership is governed (e.g., Corbin et al., 2016; Koelen et al., 2012). Furthermore, it confirms evidence from a recent quantitative study by Baker et al. (2017) showing that a large variety of partnership elements, including leadership, communication, and trust, correlate with synergy in sport-for-health partnerships.

  Our study complements the existing knowledge about sport-for-health partnership by discerning the partnership elements that may be most important for the perceived success of sport-for-health partnerships. In addition, we discerned partnership elements in sport-for-health partnerships that may be associated with different types of partnership success (i.e., community outcomes, partnership sustainability, and partnership synergy). The findings suggest that communication structure and building on capacities may be the most important predictor of perceived partnership synergy, visibility may be the most important predictor of perceived partnership sustainability, and task management may be the most important predictor of perceived community outcomes. It is interesting to observe that the four partnership elements (i.e., communication structure, building on capacities, visibility, and task management) that seemed most important for the success of sport-for-health partnerships are organisational elements. This observation is particularly relevant because the organisational elements may be easier to manage than the personal and institutional elements as the latter are brought into the partnership by the people and organisations participating. These insights enable us to provide actors involved in sport-for-health partnerships, such as partnership leaders, members, and financiers, with suggestions for how to successfully manage these partnerships.

  As regards the associations between perceived synergy in sport-for-health partnerships and building on capacities and communication structure, actors that want to improve synergy in sport-for-health partnerships may benefit from (a) creating a way of working whereby each participant can contribute to the partnership by using her or his specific competences, expertise, and networks and (b) creating a communication structure that includes a flexible organisation of partnership meetings and the removal of barriers to participation in these meetings. Such an open communication structure has for example been reported as conducive for trust relationships in sport-for-health partnerships (Misener & Doherty, 2013). Trustful relationships, which have been shown to be crucial in all kinds of health promotion partnerships (e.g., Lasker

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et al., 2001; Corbin et al., 2016), may be especially important in sport-for-health partnerships, as the informal and voluntary structure of many sports organisations builds upon trust rather than formal agreements (Shaw & Allen, 2006). Another finding from our study regarding perceived synergy is that paid professionals experienced more synergy than unpaid sports volunteers. Because more and more national and local governments are encouraging public health organisations to collaborate with voluntary community organisations, including sports clubs (Borzaga & Fazzi, 2014; Milbourne, 2009), and because previous research showed that partnership synergy is important for reaching community outcomes (Zakocs & Edwards, 2006), we suggest future research to investigate which partnership elements lead to perceived partnership synergy among unpaid volunteers.

Koelen, Vaandrager, and Wagemakers (2009) offered two explanations for the relationship between perceived sustainability of sport-for-health partnerships and partnership visibility: visibility of partnership activities and outcomes can motivate the participants to continue their work in the partnership, and visibility can gain political and financial support to continue a partnership. Hence, actors in sport-for-health partnerships that want to maintain their collaborative activities may benefit from making the partnership activities and outcomes visible, for example through communication in local media or internal and external evaluations. An interesting finding is that partnerships that were supported by umbrella Organisation A scored higher on perceived partnership sustainability than the other partnerships. This difference may be caused by some dissimilarities in the type of support provided by the umbrella organisations. The support provided by Organisation A differed in two aspects from the support from the other three organisations. First, Organisation A only supported partnerships whose organisations had worked together in previous projects, whereas the other umbrella organisations did not use previous collaborative experience as a criterion when selecting partnerships to support. Second, Organisation A paid more attention to training and developing the partnership participants than the other umbrella organisations. Since a thorough investigation of the different support organisations is beyond the scope of this study, we recommend future studies to further unravel what types of support influence partnership success.

The findings from this study also indicate a positive association between perceived community outcomes of sport-for-health partnerships and visibility, and a positive association between perceived community outcomes and task management. We already discussed the possible role of visibility under sustainability. Regarding task management, this finding suggests that it is important for sport-for-health partnership leaders and members to reach agreement on their mission, aims, and activity plan; to constantly evaluate their activities; and to adapt their activities to internal and external changes. This result is in line with findings from previous qualitative studies by Babiak and Thibault (2009), Casey et al. (2012), and Frisby et al. (2004), in which participants in sport-for-health partnerships reported that role clarity and a shared mission are important for its success. We did not distinguish formal and informal ways of task management. Other scholars have addressed the issue of formal task management in sport-for-health partnerships and argued that it possibly not aligns with the informal structure of many sports organisations (Shaw & Allen, 2006), and hence it may be questionable whether formal management contributes to the success of sport-for-health partnerships. A remarkable finding from our study related to task management in sport-for-health partnerships, is that boundary

spanning leadership does not appear to be a prominent predictor of perceived partnership success. This finding contrasts with previous qualitative studies that concluded that leadership is crucial for the success of health promotion partnerships (Johnson, Zorn, Tam, Lamontagne, & Johnson, 2003; Lalayants, 2013; Lasker et al., 2001) and sport-for-health partnerships (Babiak & Thibault, 2009; Hermens, de Langen et al., 2017; Parent & Harvey, 2017). The difference in findings may be a result of different ways of defining leadership. Whereas we defined leadership in terms of motivating participants to actively participate in the partnership, linking people from different organisations, and encouraging partnership participants to feel responsible for the partnership's work and results, other studies use definitions that are in line with our definition of task management and these results are in line with our findings. Because of the contradictory results on the role of leadership in sport-for-health partnerships, we recommend future research to further differentiate between type of leadership and task management.

Limitations

This study illustrates that quantitative research on partnerships, and particularly quantitative research examining the relationships between different partnership elements and partnership success, is complex. One limitation of this study is the relatively small sample and the specific Dutch context in which the study took place. Consequently, we need to be careful about generalising the findings, especially to sport-for-health partnerships in other cultures. The small sample, and thus limited statistical power, also made it impossible to test the complete model including all predictor variables from the conceptual framework simultaneously. Instead, we performed a stepwise regression to examine which combination of partnership characteristics best predicted partnership success. However, stepwise regression has been criticised for creating over-simplified models (Roecker, 1991), and it should be noted that all predictor variables were positively associated with the outcomes, not only those that appeared most predictive from the stepwise regression. Furthermore, the current study explored *perceived* partnership success on the individual level, without taking in consideration that observations from individuals in one partnership may be more similar than observations from individuals in different partnerships. Hence, future quantitative research on partnerships may wish to adopt a multilevel approach to address not only this dependency between individuals, but also to identify relevant differences in characteristics (objective rather than perceived) at the partnership level.

Conclusion

All nine partnership elements in our conceptual model were associated with the perceived success of sport-for-health partnerships. More importantly, our study showed that four of these nine may be most important. These are: (a) a sound and open communication structure, (b) building upon the participating organisations' and individuals' capacities, (c) visibility of the partnership work and outcomes, and (d) sound task management through creating a shared mission and role clarity. Although it is important to acknowledge the exploratory nature of this study and the unique context in which each sport-for-health partnership operates, these insights are useful for actors in sport-for-health partnerships. They can use the nine partnership elements in our conceptual model as a checklist to identify strengths and weaknesses of their partnership.

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Moreover, the findings suggest that they may pay particular attention to the four organisational elements that are suggested be most important for the success of sport-for-health partnerships.

This study highlights the complexity in doing quantitative research on partnerships, such as the multilevel structure of individuals participating in partnerships, the scarcity of existing validated instruments, the specific context that different partnerships work in, and the challenges in creating large sample sizes. In light of these challenges, we would recommend future research to build upon our findings by developing more robust measures of different partnership elements, and by further examination of relationships between these partnership elements and partnership success. To further unravel how to optimise sport-for-health partnerships, we would recommend future studies to disentangle the processes that underlie the relationships between indicators of partnership success and different partnership elements, and particularly the four partnership elements that appeared most important for partnership success. We recommend following new sport-for-health partnerships over time, because longitudinal case studies will help to gain more insights into the processes and challenges in partnerships than retrospective studies can. Furthermore, we recommend studying specific issues in sport-for-health partnerships, such as the identified role of partnership visibility, the type of support that sport-for-health partnerships need in order to be successful, and the role of interpersonal trust and power relations. Resolving such issues will further broaden and deepen the knowledge base about sport-for-health partnerships, and this will help actors in these partnerships to identify their strengths and weaknesses and to choose the right strategy to improve their success.

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Transitions in social policies: A multilevel perspective on intersectoral action between youth-care organisations and community sports clubs

Abstract

Intersectoral action is advocated as a social practice that can effectively address health inequalities and other social issues. Existing knowledge provides insight into factors that may facilitate or hinder successful intersectoral action, but not much is known about how intersectoral action evolves and becomes embedded in local social policies. This is where this study aims to make its contribution, by unravelling how intersectoral action between youth-care organisations and community sports clubs became embedded in local policies of Rotterdam, a large city in the Netherlands. A single case study was conducted based on content analysis of policy documents and 15 in-depth interviews with policy officers, managers, and field workers operating in the fields of youth-care and sports in Rotterdam. By adopting the multilevel perspective on transitions, this study showed that intersectoral action between organisations on social policy evolves through congruent processes at different levels. Moreover, it emerged that policymakers and other actors that advocate novel social practices can adopt multiple strategies to embed these practices in local social policy.

Introduction

In light of increasing healthcare costs and cuts in health and social care budgets, new and innovative social practices for addressing health inequalities are sought by policymakers worldwide (Borzaga & Fazzi, 2014; Fisher, Baum, Macdougall, Newman, & McDermott, 2016; Johansen & van den Bosch, 2017). However, the evolution and embedding of innovative social practices in local social policies is a complex process influenced by historically and culturally defined practices, paradigms, and rules (Smink, Negro, Niesten, & Hekkert, 2015). This complex process requires social innovation (Ayob, Teasdale, & Fagan, 2016), defined as 'a collective process of learning involving civil society actors aimed to solve a societal need through changes in social practices' (Edwards-Schachter & Wallace, 2017, p. 73).

Intersectoral action has been advocated to address social issues and health inequalities effectively (Bryson, Crosby, & Stone, 2006) and support social innovation (Ayob *et al.*, 2016; Edwards-Schachter and Wallace, 2017); for example, because many determinants of health, such as educational attainment, family income, and social environment, cannot be addressed by public health organisations alone (Graham, 2009). Here, intersectoral action between public health organisations and voluntary community organisations, such as sports clubs and cultural organisations, has proved particularly important in reaching and working with vulnerable groups (Borzaga & Fazzi, 2014; Milbourne, 2009). However, intersectoral action is not self-evident and easy, because it needs to fit with multiple sectors' aims and cultures (Koelen, Vaandrager, & Wagemakers, 2012; Sutherland, Peter, & Zagata, 2015) and because participants have to get used to new relationships, procedures, and structures (Koelen et al., 2012; Lasker, Weiss, & Miller, 2001). To deal with the difficulties in intersectoral action, scholars have developed frameworks that provide insights into the process of intersectoral action and how to manage it (e.g., Bryson et al. (2006); Corbin, Jones, and Barry (2016). These frameworks include recommendations on how to manage the difficulties in intersectoral action, of which building trust relationships between participants in intersectoral action, creating clear roles and responsibilities, and managing conflicts are examples. However, the frameworks on intersectoral action rarely unravel how intersectoral action evolves and how it becomes embedded in local social policies. This is where this study aims to make its contribution.

To unravel the evolution and embedding of intersectoral action in local social policies, we conducted a single case study on how intersectoral action between youth-care organisations and community sports clubs became institutionalised in local policies of Rotterdam, a large city in the Netherlands. Youth-care organisations in the Netherlands provide services to youths who are experiencing problems in their personal development, for example because of learning or behavioural problems or because their parents are incapable of providing proper care (Hilverdink, Daamen, & Vink, 2015). Community sports clubs are the main providers of sports activities in the Netherlands and are characterised by a voluntary organisation structure (Waardenburg, 2016). Collaboration between youth-care organisations and sports clubs has been advocated as crucial for increasing sports participation by socially vulnerable youth and for creating sports settings where youth can develop in a positive way (Fraser-Thomas, Côté, & Deakin, 2005; Super, Hermens, Verkooijen, & Koelen, 2014).

As the evolution and embedding of intersectoral action between youth-care organisations and sports clubs in local social policy can be seen as a transition, we adopted Geels' (2002)

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multilevel perspective on transitions. This perspective is increasingly being used to analyse transitions in social, public health, and healthcare systems (Broerse & Grin, 2017; Dell'Olio, Hassink, & Vaandrager, 2017; Hassink, Grin, & Hulsink, 2018; Johansen & van den Bosch, 2017). The multilevel perspective complements social innovation theories as used so far in the social policies field by acknowledging that social innovation may be hindered by historically defined and stable common-sense thoughts and rules (Geels, 2002).

Analytical approach: the multilevel perspective on transitions

Central to the multilevel perspective on transitions are phenomena at three levels, i.e., regime, landscape, and niches (Geels, 2002). The *regime* level, which is the core level, can be defined as a set of historically established and institutionalised rules and beliefs that guide thoughts and behaviours of actors in a certain societal system, such as the youth-care and the sports sector (Fuenfschilling & Truffer, 2014; Geels, 2002). Regimes are represented by many interdependent actors, including field workers, researchers, policymakers, and politicians. These so-called institutional logics (Fuenfschilling & Truffer, 2014; Smink et al., 2015), defined by Thornton and Ocasio (1999, p. 804) as 'the socially constructed, historical patterns of material practices, assumptions, values, beliefs, and rules by which individuals produce and reproduce their material subsistence, organize time and space, and provide meaning to their social reality' may hinder the institutionalisation of novel practices.

The *landscape* level refers to structural macro-level trends and changes external to regimes (Geels, 2002), such as the international economic situation, public awareness, and major governmental ideas (Fischer & Newig, 2016). One element of the landscape level is so-called game-changers, described by Rauschmayer, Bauler, and Schäpke (2015) as persistent problems that can only be solved with novel solutions. A characteristic of game changers is that they cause tensions leading to changes in the institutionalised rules and beliefs and hence to increased legitimacy for new ways of working (Loorbach, Frantzeskaki, & Avelino, 2017). An example of a game-changer is the global financial crisis at the beginning of the twenty-first century that resulted in new financial policies and in cuts in public health and social care budgets (Avelino et al., 2017). Examples of persistent problems in the public health field include increasing healthcare costs, reducing numbers of people experiencing good health, and increasing sedentary behaviour.

Niches can be defined as settings where organisations and individuals develop, test, broaden, and refine new ways of working (Geels, 2002; Loorbach & Rotmans, 2010). Niches go beyond experiments by single entrepreneurs and embrace learning processes and network-building activities that may slowly influence dominant rules and beliefs (Raven, Van Den Bosch, & Weterings, 2010). Niches may gain a momentum that leads to their becoming embedded in social policies, for example when game-changers cause large tensions within a regime (Loorbach et al., 2017). A final consideration regarding niches is that they can emerge in different ways. They can come from networks of grassroots organisations (such as sports clubs), but they can also be developed top-down when policymakers provide resources for developing new ways of working (Loorbach & Rotmans, 2010).

Loorbach et al. (2017) distinguished four phases through which transitions generally go (see Figure 6.1): a *predevelopment phase* where a basis for the transition is formed, for example

through game-changers or frontrunners developing innovative practices (Loorbach et al., 2017, p. 606); a *take-off phase* where the transition starts; an *acceleration phase* where the transition becomes tangible through novel projects and policy changes; and a *stabilisation phase* where the transition stabilises and novel practices become institutionalised in policies and in common paradigms, practices, and rules (Loorbach et al., 2017).
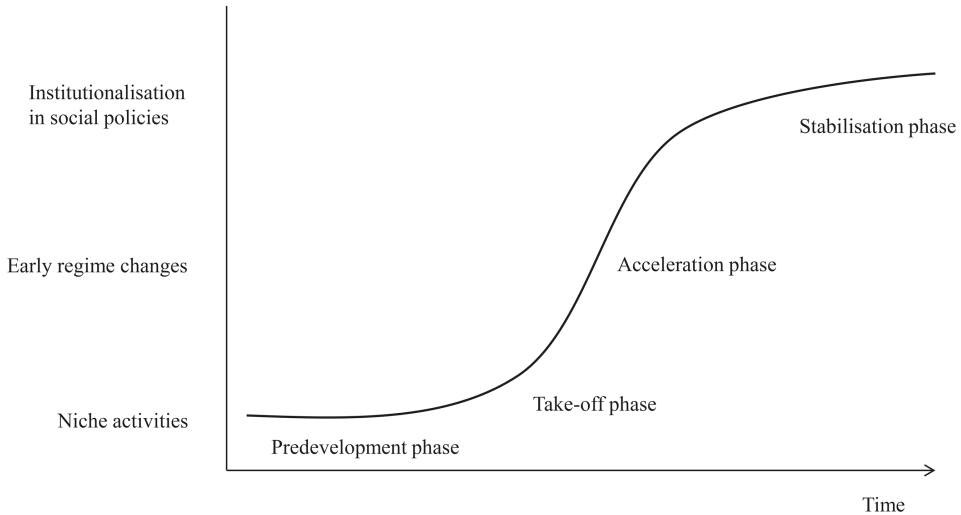

Figure 6.1 The four phases through which transitions generally go. Adapted from Elzen, Van Mierlo, and Leeuwis (2012).

Actor roles in transitions

The concepts of regime and niche refer to constellations of actors, but it is the change agency by particular actors within niches and regimes that drives transitions (Edwards-Schachter & Wallace, 2017; Farla, Markard, Raven, & Coenen, 2012). Different terms have been used for these actors, such as boundary spanners (Smink et al., 2015; Williams, 2013), institutional entrepreneurs (Pacheco, York, Dean, & Sarasvathy, 2010; Westley et al., 2013), and hybrid actors who sit between niche and regime (Elzen et al., 2012). Because all these types of actors share boundary spanning characteristics, the term *boundary spanner* is used in this paper. Boundary spanners can adopt multiple strategies to drive transitions. One strategy that has proved successful in increasing regime support for novel social practices is framing these practices as solutions for societal problems (Pacheco et al., 2010), and the strategy of building networks and advocacy coalitions around novel practices has proved effective in creating countervailing power against a regime (Pacheco et al., 2010; Westley et al., 2013).

Transitions involving interactions between multiple sectors with their corresponding regimes, such as the transition to embedding intersectoral action in local social policies, are even more complex than transitions in one regime (Hassink et al., 2018; Sutherland et al., 2015). For example, although multi-regime interaction creates mutual benefits, it can also create competition when actors from the different regimes offer similar activities (Raven & Verbong, 2007) and hence may compete for financial resources from similar budgets. In transitions involving

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multiple regimes, boundary spanners need to bridge the gap between representatives from the different sectors, for example through formulating shared ideas, visions, and goals (Westley et al., 2013) and building trust (Hassink et al., 2018). Finally, research shows that successful boundary spanners are familiar with different sectors' institutional logics (Smink et al., 2015) and possess the communication and negotiation skills needed to successfully link actors from different regimes (Hassink et al., 2018; Williams, 2013).

Methods

We conducted a single case study based on content analysis of policy documents and in-depth interviews with policy officers, managers, and field workers operating in the fields of youth-care and sports in Rotterdam. Single case studies help to obtain the detailed and contextualised knowledge needed to unravel complex processes that take place in real-life situations (Flyvbjerg, 2006; Yin, 2003). Following earlier studies on transitions (e.g., Johansen & van den Bosch (2017) and policy changes (Albright, 2011; Pearson et al., 2015), we adopted a timelining method to distinguish the processes and events in the evolution of intersectoral action between youth-care organisations and sports clubs in Rotterdam and its embedding in Rotterdam social policies. In timelining methods, events, actions, and changes in a transition process are plotted against a timeline. Thereafter, the timeline is simplified into a few overall developments underlying the transition in order to unravel the transition studied (e.g.,. Van Raak & De Haan, 2017, p. 56).

Data collection

Policy documents

Rotterdam youth and sports policy documents were gathered via civil servants in the municipality of Rotterdam. We chose to gather policy documents released between 1990 and 2016, because the wider social role of sports attracted attention in Dutch national and local policies from the end of the twentieth century (Leenaars, 2017, p. 9). When we found references to other local sports and youth policy documents with which we were not yet familiar, we asked the civil servants to send us those documents. Appendix 1 provides an overview of the policy documents included.

In-depth interviews

Individual in-depth interviews were conducted with 15 policy officers, managers, and field workers who played a role in the youth-care and sports sectors in Rotterdam between 2000 and 2016. Interviewees were selected through a snowball procedure. Seven interviewees represented the Rotterdam sports regime, of which three were sports policymakers. Five interviewees represented the Rotterdam youth regime, of which four were youth policymakers. Three interviewees were niche actors from the Rotterdam sports (n=1), youth (n=1), and social (n=1) sectors who set up youth sports projects from the grassroots. Although we distinguish interviewees from the regime and the niche level, some interviewees were active in niches as well as in one of the regimes, for example when regime actors were sympathetic towards novelties and therefore tried to facilitate niche activities. Appendix 2 provides a list of interviewees.

The interviews were conducted by the first and the second author and were guided by a timeline on a sheet of A4-size paper. Interviewees were asked to mark periods and moments that

were important for how intersectoral action between youth-care organisations and sports clubs evolved in Rotterdam, and for how it became embedded in local policies. For each period and moment, we asked questions regarding its cause and impact and about the role played by different actors. All interviews were audiotaped and transcribed verbatim style. After the first two interviews, the transcripts of these interviews were discussed among the authors to refine the interview strategy. Most of the interviews lasted 45 to 75 minutes. All interviewees gave informed consent on the understanding that the interviews would be tape-recorded and that their anonymity would be guaranteed.

Analysis

We analysed the data in four steps. First, we coded text segments about sports in the youth policy documents and text segments about social issues, including youth and health issues, in the sports policy documents. Using this information, we plotted the changes in main ideas about the wider social role for sports in Rotterdam youth and sports policies against a timeline, which we used as background information during the interviews and for interpreting the interview data.

Second, we coded text segments in the interviews in which interviewees addressed niche level developments (i.e., novel small-scale sports projects or forms of intersectoral action between youth-care organisations and sports clubs), regime changes (i.e., changes in common thoughts and practices in the Rotterdam youth-care and sports sectors), and landscape developments (i.e., large-scale trends and events that were reported as important for how the intersectoral action came about). We also coded text segments in which interviewees addressed how the sports projects and intersectoral actions at the niche level became embedded in Rotterdam local policies. Two authors coded three interviews and discussed the coding procedures. Thereafter, one author coded the remaining interviews.

Third, we placed the coded text segments in chronological order. Two of the authors discussed these text segments and expanded the initial timeline with the information about the processes and events that were important for how the intersectoral action came about and became embedded in Rotterdam policies. Fourth, the authors discussed several versions of the timeline in order to unravel the major developments whereby intersectoral action between youth-care organisations and sports clubs became institutionalised in Rotterdam.

Findings

In this section, we first describe the main trends in Rotterdam sports and youth regimes between 1990 and 2016 according to the policy documents. Thereafter, using the interview data, we describe how intersectoral action between youth-care organisations and sports clubs evolved in Rotterdam and how it became embedded in Rotterdam social policy. Lastly, we describe the strategies adopted by boundary spanners to spark this social transition.

Trends in Rotterdam youth and sports regimes

Youth regime

Before 2005, the main paradigm in the Rotterdam youth regime was that youth professionals should solve the problems faced by socially vulnerable youths and their families. Since then, this 'curative' approach has slowly changed towards a preventive and empowering approach. An

example of this novel approach in Youth policy document 2 (2007) was that youth professionals were encouraged to exchange information with community organisations on the assumption that this could help to discover and tackle youths' problems at an early stage. In 2008, the financial crisis, which was a game-changing event, caused large tensions in the Dutch youth regime. These tensions encouraged youth regime actors to seek more efficient ways to address youth issues. For example, the Dutch national government tried to improve the youth-care sector's efficiency by decentralising the responsibility for youth services from the national government to the local governments in January 2015. This move was grounded in the belief that local policymakers are more familiar with the local context where youths grow up and hence can more adequately and effectively address the youths' and their families' problems. Along with this decentralisation of responsibilities, the Dutch national and local governments increasingly expected youth-care organisations to encourage youths and their families to ask for support from their family, friends, neighbours, and community organisations. Since 2015, the Rotterdam youth regime has increasingly assigned community organisations a role as a pedagogical setting, as shown in text segments in Youth policy document 4 (2015) about the potential role of sports in reaching educational and developmental outcomes.

Sports regime

The first Rotterdam sports policy, described in Sports policy document 3 (1991), was designed around the idea that the local government should support elite sports talents in becoming professional athletes. This focus on elite sports slowly changed to a focus on sports participation for the general population and eventually to utilising the assumed wider social role of sports. This change of paradigm within the Rotterdam sports policies was reported to be one of the reasons for founding a local organisation (i.e., Rotterdam Sportsupport) that aimed to increase sports participation among diverse groups in Rotterdam. The wider social role of sports has increasingly attracted attention in Rotterdam policy documents since 2009. For example, Sports policy document 6 (2009) included the aim of promoting sports participation in specific groups, such as socially vulnerable youth, long-term unemployed people, and older people, on the assumption that participating in sports facilitates positive development in these groups. The most recent Rotterdam sports policy document, published in 2016, included the aim that sports organisations should become structural partners for public health organisations.

How intersectoral action between youth-care and sports evolved

This section is divided into three subsections that align with the phases through which transitions go (see Figure 6.1). As we observed a large overlap in the processes taking place in the take-off and acceleration phases, these two are described in one subsection. Figure 6.2 summarises the evolution and the embedding of intersectoral action between youth-care and sports organisations in Rotterdam.
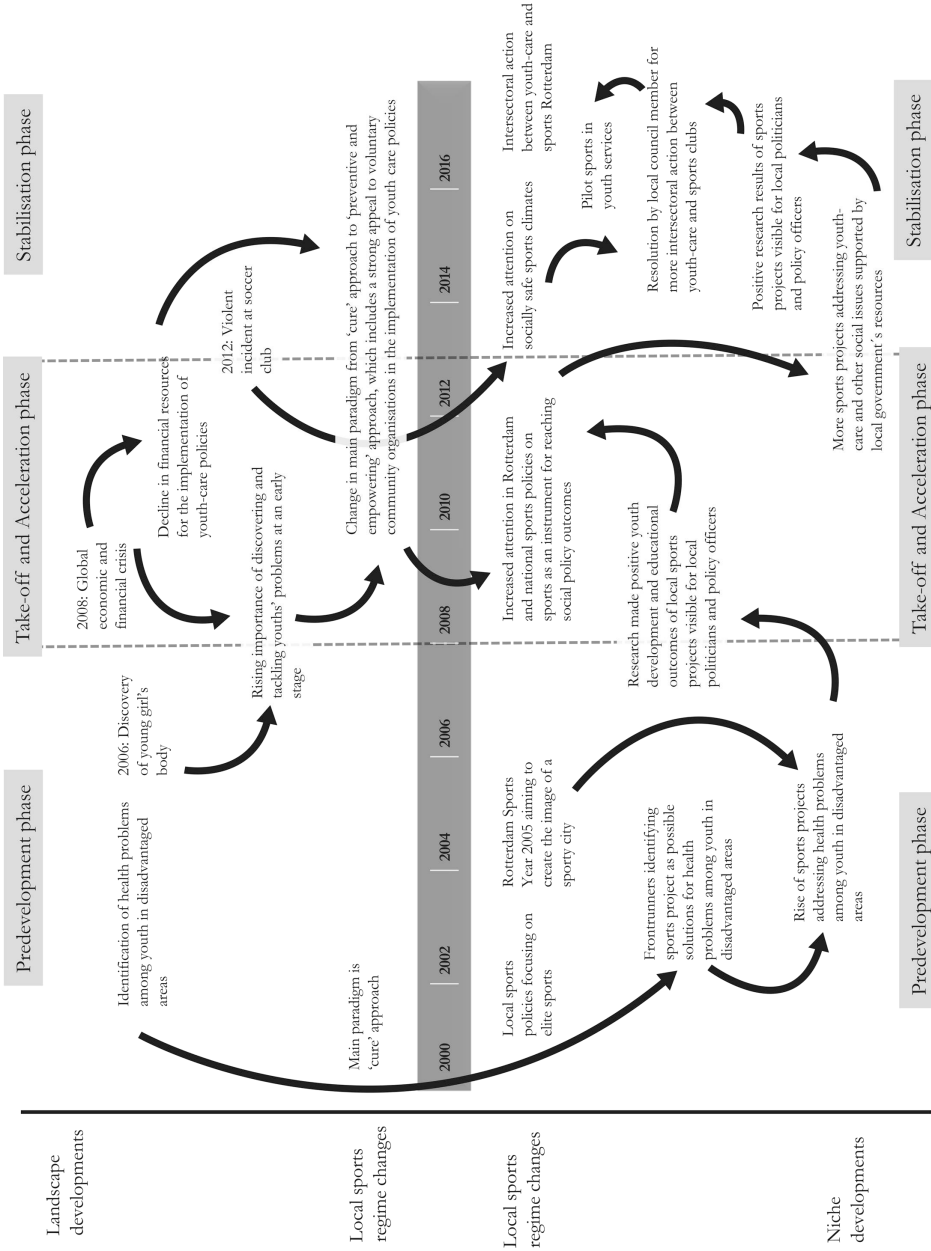
Figure 6.2 Overview of the evolution and embedding of intersectoral action between youth-care organisations and sports clubs in Rotterdam.

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Predevelopment phase (2003–2008)

Between 2003 and 2008, numerous sports projects addressing youth issues were developed in Rotterdam, which many of the interviewees defined as forerunners of intersectoral action between youth-care organisations and sports clubs. According to the interviewees, the early niche activities were a result of numerous processes. At first, a sense of urgency commenced for projects addressing health-related issues relating to an increase in overweight and a decline in physical activity and sports participation rates among youth in the city's socially disadvantaged areas. The interviewees reported that regime actors sympathetic towards these sports projects framed them as solutions for these health-related youth issues, and this persuaded policymakers to increase the financial resources available for developing and implementing youth sports projects. Furthermore, resources available for novel sports programmes increased during the Rotterdam Sports Year 2005, and the foundation of the Rotterdam Youth Sports Fund created possibilities for low income families to acquire resources for sports club membership.

Whereas most of the sports projects that were developed around 2005 addressed health-related youth issues, since 2007 more and more projects have addressed wider youth issues, such as educational attainment and mental and social well-being. The interviewees provided multiple explanations for this. First, research on the sports projects that were developed around 2005 showed that they led not only to improvements in physical health but also to social and educational outcomes, and actors sympathetic towards the sports projects took advantage of this to create more legitimacy for sports projects addressing youth developments issues. At the same time, the increased attention in national policies on the wider social role of sports coincided with rising national funding opportunities for developing and implementing sports projects at local level. One national programme funded Sports Care Tracks, in which youth professionals enrolled socially vulnerable youths in sports clubs and exchanged information with sports coaches about the youths' personal development. According to the interviewees, the Sports Care Tracks were the first activities in which youth-care organisations and sports clubs collaborated. Finally, the interviewees reported one game-changing event as being of particular importance for increasing the legitimacy of intersectoral action: the discovery of a young girl's body in a river in Rotterdam as a result of intra-family violence. According to the interviewees, this signalled the urgency for improved information exchange between youth-care organisations and voluntary community organisations, on the assumption that this creates possibilities to tackle problematic family situations at an early stage.

A development that the interviewees reported as pivotal for the evolution of intersectoral action between youth-care and sport organisations, which was not linked to the increase in national and local resources, was that an employee from a housing corporation identified the fact that many youths in a socially disadvantaged area in Rotterdam lacked a supportive social environment at home. As the housing corporation employee believed that sports clubs could provide youths with an additional supportive environment, the housing corporation recruited a so-called sports pedagogue who supported sports coaches at a sports club in this area in creating a socially safe and supportive sports climate. Multiple interviewees reported that the sports pedagogue was one of the niche projects that formed the basis for the social transition to intersectoral action between youth-care organisations and sports clubs.

Take-off and acceleration phase (2008–2013)

Between 2008 and 2013, intersectoral action between youth-care organisations and sports clubs rapidly gained legitimacy in Rotterdam youth and sports regimes. The interviews revealed that this was triggered by processes at the landscape level (i.e., the changing paradigm in the Dutch youth regime from a cure approach to an empowering approach and the growing belief in the social role of sports) and by niche activities (i.e., visibility of sports projects successfully addressing youth issues). The paradigm change in the youth regime guided youth-care organisations to start collaborating with sports clubs. In addition, sports sector representatives identified the sports policy plan released in 2011 as an opportunity to get the wider social role of sports onto the Rotterdam policy agenda. This was reported to be crucial because it created a political process in which different actors were competing for resources from the same policy budgets. For example, one interviewee explained that disseminating positive social outcomes of existing sports projects and framing sports projects as efficient ways to address social issues were used as strategies to create change in institutional logics and hence obtain new resources from local policy: *'We knew that presenting a research report about successful sports projects a couple of weeks before the local policymakers were deciding about how to divide the sports policy budget had helped to gain support for existing and new sports projects addressing youth issues.'*

A combination of landscape developments and niche level sports projects supported by this sports policy plan was reported to be crucial for the transition to intersectoral action. For example, this policy plan provided opportunities for expanding the sports pedagogue's support to sports clubs in other disadvantaged areas of the city. The interviewees reported that this was an important step in the social transition to intersectoral action in local social policy because it created niche level collaborations between youth professionals and sports clubs in different parts of the city. At the same time, the interviews revealed that youth professionals were open to collaboration with the sports pedagogue because it was a way to put the novel empowering paradigm within Dutch youth policy into practice and because is fitted very well with the identified urgency for information exchange resulting from the discovery of the young girl's body in 2006.

Another element of the sports policy plan released in 2011 that was reported as crucial for the evolution and embedding of intersectoral action was the Sports Plus Programme. This programme, initiated by Rotterdam Sportsupport, had the aim of encouraging sports clubs and social sector organisations to jointly generate and implement sports projects that address social issues. Many of the collaborations that emerged in the context of the Sport Plus Programme were grassroots initiatives from sports club volunteers and/or youth professionals, but the programme also provided opportunities for networking activities with powerful regime actors, such as managers of youth-care organisations, youth and sports policymakers, and Rotterdam Sportsupport. According to the interviewees, these networking activities were crucial for the evolution and embedding of intersectoral action between youth-care organisations and sports clubs in Rotterdam.

Besides opportunities for intersectoral action arising from the sports policy plan released in 2011, the interviewees also reported that the Care Sport Connector role was crucial in creating new niche level collaborations and in expanding existing ones. Care Sport Connectors have been appointed at many locations in the Netherlands to increase everyone's sports participation, and

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particularly socially vulnerable people. The interviewees defined the work of the Care Sports Connector as one of the first institutionalised forms of intersectoral action between youth-care organisations and sports clubs in Rotterdam. A final event that the interviewees reported as crucial in the acceleration phase was a conference organised in 2013. Whereas Rotterdam Sportsupport initially organised this conference to gain legitimacy for pedagogical support for sports clubs by presenting positive findings from a study on the sports pedagogue's work, the conference became relevant for youth and sports regime actors when it was linked to two landscape developments. To youth-care sector representatives, the conference was framed as a setting where they could obtain information about how to put the novel empowering paradigm into practice. A youth policymaker explained how this persuaded him to attend the conference and to embed collaboration with sports organisations in youth policy plans: *'For me, the most crucial moment was the conference [in 2013]. In conjunction with us preparing the upcoming reforms in youth policies, it made me more open to intersectoral action with sports clubs.'* To sports sector representatives, the conference was framed as a setting where they could obtain information about how a sports pedagogue could support them in creating a socially safe sports climate, which was perceived as particularly urgent at that time because of a violent incident during a soccer match in another Dutch city in 2012 during which an assistant referee was beaten to death. The ideas presented at the conference prompted a local council member to submit a resolution that youth-care organisations should support sports clubs in creating socially safer sports climates. According to the interviewees, this resolution started the embedding of intersectoral action between youth-care organisations and sports clubs in Rotterdam social policy.

Stabilisation phase (2014–2016)

The stabilisation phase started in 2014 with a pilot project called Sports in Youth Services in one of the city's 12 areas. Whereas before 2014 the collaborative actions between youth-care organisations and sports clubs were built around often short-term sports projects, Sports in Youth Services had the aim of creating structural networks of youth-care organisations and sports clubs. The partners in the pilot network explored how they could jointly increase socially vulnerable youths' sports participation and improve the sports clubs' socio-pedagogical climate. In addition, they tried to develop and implement sports programmes serving socially vulnerable youth. To support the pilot, the sports and youth aldermen and the managers of the organisations participating in the pilot network signed an agreement in which they committed themselves to the network. According to the interviewees, this regime support was required to create legitimacy for the intersectoral action among the participating professionals and volunteers.

In 2016, Sport in Youth Services networks were formed in all 12 areas of Rotterdam. According to the interviewees, this resulted from multiple processes. First, the leader of the pilot network was reported to be very capable of managing the differences in institutional backgrounds between youth professionals and unpaid volunteers from sports clubs. Second, appointing a youth policymaker as pilot project leader had helped to embed the intersectoral action in novel local youth policies, for example because the pilot leader could frame it in such ways that it fitted with the ideas in novel youth policy plans. *'I knew that [to embed the intersectoral action in youth policy plans] such a pilot needs to link with the youth policy's bigger picture. So, when the new*

youth policy document indicated that intersectoral action is needed for positive youth development, I started negotiating that Sport in Youth Services should be part of the novel youth policy.'' This finding indicates that social transition to novel forms of intersectoral action requires boundaries to be spanned between different sectors *and* between niche activities and regime actors.

Strategies used in the local transition to intersectoral action

The interviewees reported numerous processes and events in the social transition to intersectoral action between youth-care organisations and sports clubs in Rotterdam in which actors' change agency played a crucial role. From the description of the evolution and embedding of the intersectoral action, three strategies emerged that these actors have been using to create changes in the institutional logics in the youth and sports regimes and hence create legitimacy for intersectoral action between youth-care organisations and sports clubs. These strategies are *framing*, *dissemination*, and *network building* (see Table 6.1).

Table 6.1. Strategies used in the transition to intersectoral action between youth-care and sports in Rotterdam

Strategy	Position of actor adopting this strategy	Period
Predevelopment phase		
<u>Framing</u> sports as a solution for social problems identified to obtain national and local financial resources for developing sports projects and for putting the perceived wider social role of sports into practice	Sports regime, but sympathetic towards novelties	2005 –2008
<u>Framing</u> the sports pedagogue's work as a solution for a social problem identified to obtain financial resources to employ the sports pedagogue	Niche actor, i.e., employee housing corporation	2007 –2008
Take-off and acceleration phase		
<u>Dissemination</u> of positive youth development and educational outcomes of sports project (serving socially vulnerable youth) in order to gain legitimacy for these projects and to obtain resources for continuing, broadening, and refining these projects	Sports regime, but sympathetic towards novelties	2009 –2010
<u>Framing</u> the sports pedagogue's work in such a way that it fitted in a national subsidy programme	Sport regime, but sympathetic towards novelties	2010
<u>Building network</u> of powerful actors around the idea that intersectoral action between youth-care organisations and sports clubs is important	Boundary spanner	2011 –2016
<u>Framing</u> intersectoral action as a solution for urgent issues in sports sector (i.e., unsafe sports environments) and youth-care sector (i.e., implementation of empowering paradigm)	Sports regime, but sympathetic towards novelties	2012 –2015
Stabilisation phase		
<u>Building network</u> with regime actor (i.e., a local council member) resulted in a resolution declaring that intersectoral action between youth-care organisations and sports clubs should be expanded in order to resolve urgent issues	Sports regime, but sympathetic towards novelties	2013
<u>Framing</u> the intersectoral action developed in the pilot project as a necessary element of how to put the novel paradigm in youth-care sector into practice	One youth regime actor who is sympathetic towards sports projects, one sports regime actor who is sympathetic towards novelties	2014 –2016
<u>Dissemination</u> of research findings from a study on the impact of sports participation on the life prospects of socially vulnerable youth	One youth regime actor who is sympathetic towards sports projects, one sports regime actor who is sympathetic towards novelties	2014 –2016

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During the predevelopment phase, multiple niche level collaborations between youth-care organisations and sports clubs evolved. At the end of the predevelopment phase and during the take-off and acceleration phase, these novel collaborations were adopted by regime actors who were sympathetic towards these novelties. They used framing and dissemination strategies to create support among other regime actors for intersectoral action between youth-care organisations and sports clubs. For example, the interviewees reported that framing sport projects as solutions for youth-related health and social issues (i.e., landscape developments) had helped to obtain resources for developing and implementing these projects. This strategy appeared to be particularly successful when it was used in conjunction with disseminating positive findings from research on the social and educational outcomes of the novel youth sports projects, for example during the political process in which different actors strove to obtain resources from the sport policy plan released in 2011 (see Figure 6.2). Network building activities were reported to be important in niches as well as in the regimes. Whereas niche actors, such as the Care Sport Connector and the sports pedagogue, built networks at the operational level, regime actors who were sympathetic towards intersectoral action built networks with powerful regime actors. According to the interviewees, building networks with powerful regime actors was of particular importance because it helped to gain support for intersectoral action between youth-care organisations and sports clubs and its embedding in Rotterdam social policy.

Discussion

Existing knowledge about intersectoral action provides insights into the mechanisms and processes underlying successful intersectoral action (e.g., Koelen et al. (2012); Corbin et al. (2016). This study enriches that earlier work with deeper insights about processes underlying the evolution of intersectoral action and its embedding in local social policy, which can be defined as a social innovation or rather a *social transition* process.

Implications for thinking on social innovation in social work

By adopting a multilevel perspective on transitions, this study reveals that the social transition to the embedding of intersectoral action between organisations in social policy evolves through congruent processes at different levels (see Figure 6.3). This enriches existing knowledge on social transitions, which describes these transitions as processes in which novel social relations and new forms of collaborations lead to societal change (Ayob et al., 2016). Indeed, the evolution of intersectoral action between youth-care organisations and sports clubs in Rotterdam started from the grassroots, but this study complements earlier work by showing that landscape developments that create a sense of urgency for novel social practices are also needed for the embedding of these practices in local social policy. For example, most of the niche level intersectoral actions between youth-care organisations and sports clubs evolved as a means to address persistent problems at the landscape level (i.e., increased overweight among youth, reduced social safety at community sports clubs, and the decentralisation in Dutch national youth policies that forced local policymakers to put a novel paradigm into practice).

Adopting the multilevel perspective also helped to reveal not only that social transitions are based on processes of collective learning (Edwards-Schachter & Wallace, 2017), but also that they include political processes in which *boundary spanning actors* try to change a regime's

institutional logics, strive for legitimacy, and compete for resources from local policy budgets. Moreover, from the current study it emerged that boundary spanners used framing, dissemination, and network building strategies to gain support for the evolution and embedding of intersectoral action between youth-care organisations and sports clubs, and hence for sparking a social transition.
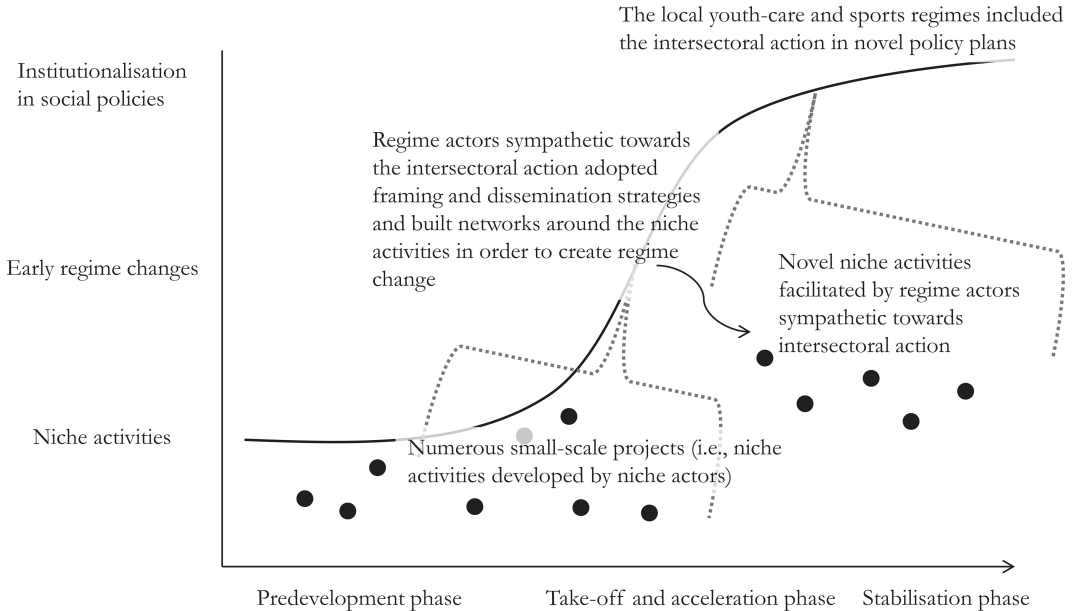

The local youth-care and sports regimes included the intersectoral action in novel policy plans

Institutionalisation in social policies

Regime actors sympathetic towards the intersectoral action adopted framing and dissemination strategies and built networks around the niche activities in order to create regime change

Early regime changes

Novel niche activities facilitated by regime actors sympathetic towards intersectoral action

Niche activities

Numerous small-scale projects (i.e., niche activities developed by niche actors)

Predevelopment phase   Take-off and acceleration phase   Stabilisation phase

Figure 6.3 Summary of the congruent processes leading to intersectoral action between youth-care organisations and sports clubs in Rotterdam

Implications for frameworks on intersectoral action

This study enriches frameworks of elements that underlie successful intersectoral action in the social policy field (e.g., Koelen et al. (2012); Corbin et al. (2016) by indicating which of these elements are of particular importance for the evolution of novel forms of intersectoral action and its embedding in local social policy. Previous research has indicated that visibility is important for the success of intersectoral action, because visibility of activities and their outcomes can motivate participants to continue their collaborative work and because can gain political and financial support to continue a partnership (Koelen, Vaandrager, & Wagemakers, 2009). This study enriches Koelen *et al.*'s finding by showing that the visibility of intersectoral action is especially important for its evolution and embedding in social policy, and that visibility can be created by framing and dissemination strategies.

As regards framing strategies, our findings are in line with findings from other studies on transitions in public health systems (i.e., Hassink et al. (2018) and intersectoral policymaking, the latter indicating that intersectoral policymaking can be facilitated by framing 'health as a means to achieve the objectives of other sectors' (Holt, Frohlich, Tjørnhøj-Thomsen, & Clavier, 2017, p. 885). From the current study it emerged that framing niche level intersectoral action as a solution for persistent problems at the landscape level can create a basis for its embedding in local social

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policy. In terms of dissemination strategies, this study indicates that disseminating positive outcomes from research on niche level intersectoral action persuades regime actors to support its further development. Hence, research may support social transitions not only by facilitating learning processes (Wittmayer, Schäpke, van Steenbergen, & Omann, 2014), but also by making novel practices and their results visible.

The finding that network building strategies were important for the evolution and embedding of intersectoral action between youth-care organisations and sports clubs in Rotterdam social policy indicates that *boundary spanning leadership* is a crucial element in social transitions involving intersectoral action. In line with previous studies on social transitions involving multiple regimes (e.g., Hassink et al. (2018), this study showed that successful boundary spanners need to be familiar with both sectors' institutional logics and need to speak the languages of both sectors, as this helps to create trust relationships between actors from different sectors (Lasker et al., 2001; Williams, 2013). This study broadens existing knowledge by indicating that the evolution and embedding of novel intersectoral actions in social policy also requires boundary spanning leadership that creates connections between niche level activities and regimes and that can support the process of challenging, renegotiating, and reconciling the institutional logics of the different sectors. Our findings indicate that (1) building networks including powerful people and (2) building connections between different niches may help to span such vertical boundaries. Building networks that include powerful people has been found in previous studies to be an effective strategy to spark social transition, because power is needed to be able to influence institutional logics (Pacheco et al., 2010; Westley et al., 2013). Connecting multiple niches has been found to support learning processes in transitions (Smith, Voß, & Grin, 2010), but the current study indicates that connecting niches can also help to gain legitimacy and critical mass and hence to spark changes in institutional logics; for example, by bringing the multiple intersectoral actions to the attention of powerful actors to create awareness of support.

Limitations

Unravelling a single case is a strength and a limitation. On the one hand, it created a thorough understanding of the evolution and embedding of intersectoral action between youth-care organisations and sports clubs in one city. On the other hand, it may be hard to generalise the findings. However, the findings from this study are in line with findings from other studies on social and socio-technological transitions and hence may be transferable to other contexts(Riege, 2003). Nonetheless, although landscape developments in different Dutch cities are likely to be similar, the transition revealed in this study may be limited to Rotterdam. It would therefore be interesting to replicate this study in other cities in The Netherlands or Western Europe, as this would enable comparison of processes in cities with and without such transitions under almost similar landscape conditions, thereby providing insights into the most crucial processes and strategies in social transitions and especially transitions to intersectoral action between youth-care and sports organisations. A second limitation in our study relates to the multilevel perspective on transitions. Although this perspective helped us to unravel the overall process of how intersectoral action between youth-care organisations and sports clubs evolved and became embedded in social policy, we found that it did not help to explain micro-level processes in transitions, such as how boundary spanning actors build relationships with powerful regime actor

or what precise strategies forerunners use to develop and manage niche activities from the grassroots. This is an inherent trade-off recognised in transition studies (Farla et al., 2012).

Conclusion

Adopting a multilevel perspective on transitions to unravel how intersectoral action in the social policy field evolves and becomes embedded in local social policy is unique in this field. We would recommend the adoption of Geels' (2002) multilevel perspective on transitions as an analytical approach for the further study of social transitions and strategies that can spark social transitions. By adopting this perspective, this study indicates that social transitions to the embedding of novel social practices, such as intersectoral action between youth-care and sports organisations, evolve through a mixture of landscape developments, niche actors developing small-scale novel practices from the grassroots, and change agency by boundary spanners sympathetic towards a novel social practice. As regards these boundary spanners, this study shows that the embedding of novel practices requires (1) these practices and their preliminary results to be made visible through framing and dissemination strategies and (2) good boundary spanning leadership through network building strategies. Hence, the findings from this study complement existing frameworks on intersectoral action and how to manage it (e.g., Bryson et al. (2006), Corbin et al. (2016), and Koelen et al. (2012) by highlighting the role of visibility and network building. Whereas previous studies and frameworks on intersectoral action have defined good boundary spanning leadership as facilitating trust relationships between actors from different sectors (Lasker et al., 2001; Williams, 2013), this study adds that boundary spanning leadership in social transitions also includes the spanning of vertical boundaries between niche and regime actors and negotiating and reconciling different sectors' institutional logics. This also highlights the political nature of social innovation, as well as it being a process with co-evolving changes at multiple levels, which are sometimes intentionally induced but can also be serendipitous.

In terms of relevance for policy, although this study shows that many novel social practices evolve from the grassroots, we found that policymakers sympathetic towards a novel practice may benefit from adopting certain boundary spanning strategies. They should actively search for forerunners who believe in a novelty's added value and facilitate these forerunners in developing and implementing small-scale collaborative projects. Furthermore, they may benefit from framing novel practices as solutions for persistent problems by making the novel practices visible, for example by disseminating positive results. Finally, they may benefit from employing boundary spanners who possess the skills needed to link innovations with multiple regimes, having legitimacy in both niche and regime. These skills include linking with powerful actors, creating links between comparable novel social practices, and connecting actors from different regimes.

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Chapter 7

General Discussion

Introduction

Policymakers, researchers, and field workers increasingly recognise sport as a means to promote positive development in socially vulnerable youth (Fraser-Thomas, Côté, & Deakin, 2005; Holt, et al., 2017; Schulenkorf, Sherry, & Rowe, 2016; Turnnidge, Côté, & Hancock, 2014). The overall aim of this thesis is to provide insights into the organisational context of the inclusion of socially vulnerable youth in sport by exploring the elements of successful intersectoral action between youth-care organisations and community sports clubs in the Netherlands. Youth-care organisations, whose employees are paid professionals, provide services to youths and families who experience challenges in their everyday life. Community sports clubs are the main provider of sports in the Netherlands and are characterised by an organisational structure based on unpaid volunteers. By investigating the personal, institutional, and organisational elements of successful intersectoral action between youth-care organisations and community sports clubs, this thesis gains more in-depth insight into the role of these elements and how they are interrelated.

This chapter first provides the answer to the research questions. Thereafter, the added value of this thesis is presented through a reflection on the conceptual framework. Then, the strengths and limitations are considered based on a reflection of the research conducted. Finally, the implications for policy, practice, and further research are provided.

Answers to the research questions

Research Question 1. What is the evidence on life-skill development in sports programmes serving socially vulnerable youth from both quantitative and qualitative studies?

To answer this question, a systematic literature review was conducted that described the existing evidence from qualitative and quantitative studies on life-skill development in sports programmes serving socially vulnerable youth (Study A, Chapter 2). The studies included in the review are very diverse in terms of setting, study design, research method, and reported life skills. Each study reported that at least one life skill improved in youths who participated in the studied sports programme. Improvements in cognitive and social life skills were more frequently reported than improvements in emotional life skills. In some of the included studies, researchers cast doubts on whether the life skills developed in the sports programme were transferred to other societal domains, such as school and work environments. A secondary aim of the review was to summarise what is known about the conditions conducive to life-skill development from the studied sport programmes. The findings indicate that a positive youth–coach relationship, sports coaches who encourage youths to deal with the challenges that arise in the sports activity, activities that improve a sense of belonging to the sports programme, and the inclusion of a life-skills education element are conducive to life-skill development.

In sum, it emerged that sports clubs are settings where socially vulnerable youth can develop in a positive way, particularly when attention is paid to conditions conducive to life-skill development. In light of these findings, the question arises as to how youth-care organisations and community sports clubs can best collaborate to (a) include socially vulnerable youth in sports clubs and (b) realise the conditions conducive to life-skill development in sports clubs.

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Research Question 2. Which aspects of intersectoral action between youth-care organisations and community sports clubs make these collaborations successful?
Research Question 2 is addressed in Studies B, C, and D (see Chapters 3–5). The findings of these studies, summarised in Table 7.1, demonstrate that four institutional elements, four personal elements, and five organisational elements are important for the extent to which intersectoral action between youth-care organisations and community sports clubs is successful.

Table 7.1. Summary of the finding per study that addressed Research Question 2

Study	Research methods	Institutional elements	Personal elements	Organisational elements
B	Explorative interviews with youth-care professionals and focus groups with sports club representatives	- The presence of youth-care organisations perceiving sport as a setting for positive youth development (+) - Funding for developing and implementing inclusive sports projects and for sports club membership fees (+) - Good organisational capacity of the sports clubs (+) - Conflicting opening hours (-)	- Youth-care professionals believing that socially vulnerable youth can develop in a positive way in sports settings (+) - Youth-care professionals perceiving themselves capable of promoting sports participation (+) - Face-to-face relationships (+)	- Boundary spanning leadership (+) - Support to sports clubs in organising inclusive sports activities (+) - Visibility of sport as a means for positive youth development (+)
C	Semi-structured interviews with sports club representatives, youth-care professionals, and boundary spanning actors in the intersectoral action between youth-care organisations and sports clubs	- The presence of youth-care organisations perceiving sport as a setting for positive youth development (+) - Sports clubs where managers, sports coaches, other unpaid volunteers, and members share the ambition to utilise the wider social role of sport (+) - Funding for developing and implementing inclusive sports projects (+) - Differences in ways of communication, opening hours, and degree of formality (-) - Organisational capacity of sports clubs not suited for intersectoral action (-)	- Youth-care professionals trusting that sports coaches are capable of coaching socially vulnerable youth (+) - Knowledge and competences of the individual participating, and particularly the pedagogical knowledge and competences of sports coaches (+) - Informal and face-to-face relationships (+) - Unfamiliarity of sports clubs with socially vulnerable youths (-)	- Clarity about roles and responsibilities (+) - Boundary spanning leadership connecting youth-care organisations and sports clubs (+) - Building on the different organisations' unique capacities (+) - Sharing results of the intersectoral action with the broader societal and political context (+)
D	Cross-sectional survey among participants in intersectoral action between public health and sports organisations	- Organisations' commitment to the intersectoral action (+) - Societal and political context in favour of the intersectoral action (+)	- Personal commitment to the intersectoral action (+) - Personal relationships (+)	- Boundary spanning leadership (+) - Task management (+) - Communication structure (+) - Building on capacities (+) - Visibility (+)

Note. + or - means that this aspect of the intersectoral action was reported as positively (+) or negatively (-) related to the extent to which the intersectoral action is successful

Regarding the institutional elements, the findings first demonstrate that intersectoral action between youth-care organisations and community sports clubs can succeed only if these organisations perceive the intersectoral action as valuable. The *policies* of these organisations are thus important for the extent to which the intersectoral action is successful. This means that there must be (a) youth-care organisations that perceive sports clubs as settings where socially vulnerable youth can develop in a positive way and (b) sports clubs that aspire to utilise the wider social role of sport by including socially vulnerable groups. Second, it emerged that the extent to which the *societal and political context* is favourable towards the intersectoral action is also important for its success. The societal and political context here represents the paradigms, beliefs, and rules in the youth-care and the sports sector and may influence the degree to which youth-care and sports policymakers at the local level are willing to invest time and money in the intersectoral action. Third, the findings show that differences between youth-care organisations and sports clubs in *working processes* (i.e., working in accordance with formalised procedures versus an informal way of working, different opening hours, and different preferred ways of communication) cause hurdles in the intersectoral action. Fourth, *organisational capacity*, which represents "the ability of an organization to harness its internal and external resources to achieve its goals" (Misener & Doherty, 2013, p. 136) proved to be important. In particular, the findings demonstrate that both youth-care organisations and community sports clubs need to possess the capacity in terms of human resources and competences needed to collaborate with organisations from a different sector.

Regarding the personal elements, the findings first demonstrate that the *attitudes and beliefs of the individuals* participating in the intersectoral action are important for its success. For example, if youth-care professionals do not believe that sports participation can lead to positive youth development, they will probably not invest in the inclusion of socially vulnerable youth in sport, and hence will not invest in intersectoral action with sports clubs. Second, the studies revealed that *knowledge and competences* are important, and particularly the degree to which youth-care professionals are familiar with the culture and organisational structure of sports clubs, and the socio-pedagogical competences of sports coaches. Third, the findings demonstrate that informal and face-to-face *relationships* are important for the extent to which the intersectoral action is successful. Fourth, *self-efficacy* appears to be important; this represents the degree to which youth-care professionals and sports club representatives believe that they can make a difference in the intersectoral action.

The findings show that five organisational elements are important for the extent to which intersectoral action between youth-care organisations and sports clubs is successful: first, a *communication structure* based on face-to-face contact and flexibility regarding working hours from both sides; second, the management of the intersectoral action in terms of creating *agreement on the goal of the intersectoral action* and *clarity about the different participants' roles and responsibilities*; third, *building on the capacities* of the individuals and organisations participating, which means that each participant contributes to the intersectoral action by using her or his specific resources in terms of competences, expertise, and networks; fourth, the *visibility* of the intersectoral action and its results, because this (a) encourages youth-care professionals and sports club volunteers to put effort in the intersectoral action and (b) triggers local policymakers and other possible financiers

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to invest in it; fifth, *boundary spanning leadership*, which encompasses building and maintaining connections between youth-care professionals and sports club volunteers.

Research Question 3. What mechanisms underlie the process of how intersectoral action between youth-care organisations and community sports clubs evolves and becomes embedded in local social policies?

This question was addressed with Study E (Chapter 6), which was a single case study. The findings demonstrate that the intersectoral action was initiated in small-scale sports projects developed by sports club volunteers, youth-care professionals, and other social professionals active at the most basic level of their organisations (i.e., grassroots). Individuals and organisations involved in these small-scale projects adopted several activities over time that led to more support (i.e., legitimacy) for the intersectoral action from local policy. From an analysis of these activities, it emerged that two organisational elements are of particular importance here: *visibility* and *boundary spanning leadership.*

The findings presented in Chapters 3–6 demonstrate that the visibility of the intersectoral action and its results may lead to more support for the intersectoral action from the wider societal and political context, and hence trigger its embedding in local policy. Chapter 6 demonstrates that visibility especially triggers embedding in local policy when the intersectoral action is made visible through framing it as a means to achieve wider social goals, such as improvements in population health and positive youth development. It furthermore appears that making the results of the intersectoral action visible to the wider societal and political context triggers its embedding in local policy, in particular when the presented results are based on research findings.

Regarding boundary spanning leadership, three types of activities appear to be important in the evolution of the intersectoral action. These activities encompass (a) connecting actors from the different sectors, (b) managing the tensions that may result from the differences in institutional and personal elements, and (c) building connections between multiple small-scale projects involving intersectoral action between youth-care organisations and sports clubs (Chapters 3, 4, and 6). It was revealed that building connections between small-scale projects can lead to the critical mass needed to gain support from local policy. Another activity that emerged as important for a successful embedding of intersectoral action in local policy is building connections with powerful people (Study E, Chapter 6). Examples of such powerful people are managers of local youth-care and sports organisations and local policymakers in the fields of youth-care and sport, because these people have the power to (a) create the critical mass needed to receive support from local policy and/or (b) provide support for the intersectoral action in terms of time and money.

In summary

The findings from the studies presented in Chapters 2–6 provide a deeper understanding of the organisational context of the inclusion of socially vulnerable youth in sport. The findings are summarised in Figure 7.1. The figure shows that intersectoral action between youth-care organisations and sports clubs can lead to (a) sports clubs implementing the conditions conducive to life-skill development in socially vulnerable youth and (b) the inclusion of these

youths in sport. Furthermore, Figure 7.1 shows that the findings confirm the rationale behind the conceptual framework of this thesis (see Figure 1.1), which is that the success of intersectoral action depends on an interplay between institutional elements, personal elements, and organisational elements (e.g., Bryson, Crosby, & Stone, 2006; Corbin, Jones, & Barry, 2016; Koelen, Vaandrager, & Wagemakers, 2012).
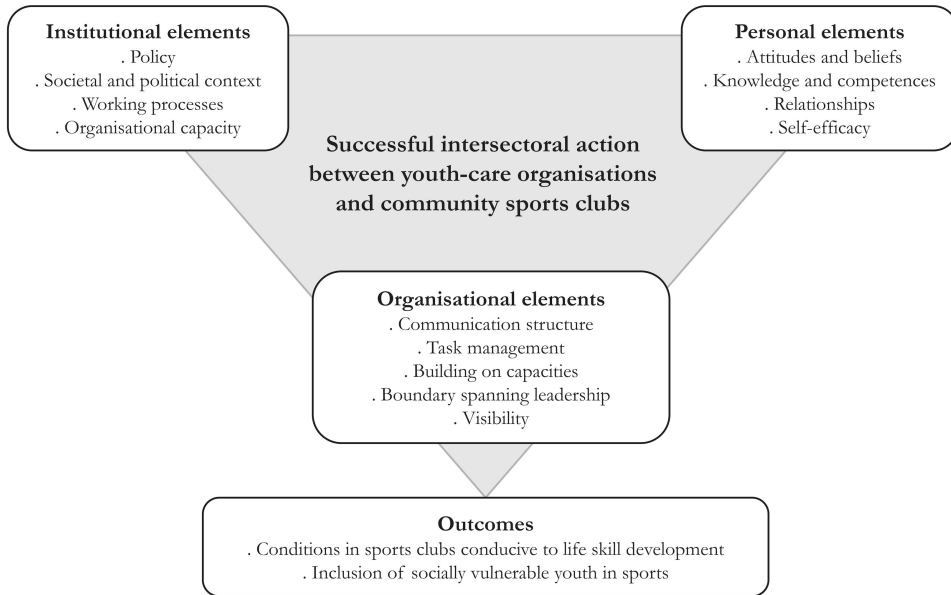

Figure 7.1 Summary of the main findings (adapted from Super, Hermens, Verkooijen, & Koelen, 2014 and Koelen et al., 2012).

Reflection on the findings and the conceptual framework

The findings from this thesis provide additional and more in-depth insights regarding (a) the role of personal, institutional, and organisational elements in successful intersectoral action and (b) the interplay between these elements. These insights are further discussed below.

1. Conditions conducive to positive youth development through sport

The first main insight from this thesis is that sports clubs are settings where socially vulnerable youth can develop in a positive way, particularly if these clubs pay attention to the conditions conducive to life-skill development. This finding follows conclusions by other scholars (Danish, Forneris, Hodge, & Heke, 2004; Fraser-Thomas et al., 2005; Holt et al., 2017). Chapter 2 gives some examples of these conducive conditions, such a positive youth–coach relationship and opportunities for the youths to take part in organising and supervising the sports activity. The findings presented in Chapters 3 and 4 demonstrate that youth-care professionals see an important role for sports coaches in building these conditions – a finding that complements studies that identified the sports coach as the key actor in creating the conditions conducive to life-skill development (Cronin & Allen, 2015; Super, Wentink, Verkooijen, & Koelen, 2017).

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However, the findings from this thesis also demonstrate that the attitudes and beliefs of youth-care professionals and the self-efficacy of sports coaches regarding their capacities and competences to build these conditions cause challenges in the intersectoral action. Many youth-care professionals doubt whether enough sports coaches possess the pedagogical competences needed to deal with vulnerable youths and to build a sports climate conducive to youth development, and therefore hesitate to collaborate with sports clubs. Also, many sports coaches and other sports club volunteers doubt whether they have mastered the competences to supervise socially vulnerable youth and to build the conducive conditions. These findings highlight the important role of sports coaches' pedagogical knowledge and competences in successful intersectoral action. Likewise, it emerged that the degree to which youth-care professionals are familiar with the organisational structure of sports clubs influences the extent to which they are willing and able to collaborate with sports clubs. Following these findings, knowledge and competences are added to the cluster of personal elements in the conceptual framework.

To summarise, the successful inclusion of socially vulnerable youth in sport requires an organisational context in which both youth-care professionals and sports club volunteers reinforce each other in building the conditions conducive to life-skill development. The findings in Chapters 3, 4, and 5 demonstrate that building on capacities can be helpful here. This means that the sports coaches continue to organise the sports activities and should not deliver care. However, this is not to say that sports coaches should not pay attention to conducive conditions at all. Rather, it is the youth-care professionals' responsibility to provide sports coaches with support in building these conditions. The conditions conducive to life-skill development reported in Chapter 2 indicate how sports coaches can do this in a practical way. For instance, sports coaches can give the youths a task in the supervision of training, because this may increase the youths' feeling of belonging (Anderson-Butcher, Riley, Amorose, Iachini, & Wade-Mdivanian, 2014). Another example is for sports coaches to encourage youths to search for solutions to challenges during the sports activity, because this may promote critical thinking skills (Bonnette, McBride, & Tolson, 2001) that may be transferable to other societal domains.

2. The organisational elements are conditional for successful intersectoral action

The findings in Chapters 3–6 demonstrate that the organisational elements are conditional for successful intersectoral action. By way of illustration, the findings from the quantitative Study D (Chapter 5) show that successful intersectoral action in terms of synergy, sustainability, and community outcomes is associated with personal, institutional, and organisational elements, but that these success indicators are best predicted by the organisational elements. Indeed, Study D has some limitations regarding sample size, a lack of pre-validated measures, and the multilevel structure of the data that mean that we need to be cautious about generalising the findings. Nonetheless, the findings from the qualitative studies presented in Chapters 3, 4, and 6 underline the findings from Study D by demonstrating that the organisational elements are important for (a) dealing with the challenges that arise from the differences in institutional and personal elements and (b) aligning the different capacities of the different organisations and individuals participating in order to include socially vulnerable youth in sport. Other scholars have demonstrated the importance of organisational elements for successful intersectoral action

(Bryson et al., 2006; Corbin et al., 2016; Roussos & Fawcett, 2000), but this current research adds to this by asserting that the different aspects of successful intersectoral action (i.e., synergy, sustainability, and community outcomes) may be predicted by different organisational elements. The findings suggest that (a) investing in building on capacities and communication structure leads to more synergy, (b) investing in visibility leads to sustainable intersectoral action and to community outcomes, and (c) investing in task management leads to community outcomes.

One of the organisational elements in the conceptual model is management, and the findings from this research indicate that two types of management need to be distinguished: task management and boundary spanning leadership (see Figure 7.1). It emerged that good task management in intersectoral action encompasses (a) creating agreement on its goal and (b) clarity about the different participants' roles and responsibilities (Chapters 3–5). However, as in previous studies on intersectoral action between public health organisations and community sports clubs, the extent to which agreements about shared goals and roles and responsibilities should be formalised remains unclear (Casey, Payne, & Eime, 2012; Shaw & Allen, 2006). Some findings from Studies B and C suggest that formalised and visible agreements motivate youth-care professionals and sports club volunteers to invest in the intersectoral action, whereas other findings suggest that formal agreements do not align with the informal organisational structure of most community sports clubs. Perhaps some of both is necessary.

Whereas the focus of task management is on creating clarity about the aim of the intersectoral action and the different participants' roles, the focus of boundary spanning leadership is on building and maintaining *connections* between youth-care professionals and sports club volunteers. Hence, boundary spanners are the actors who manage the differences between the people and the organisations from the different sectors. The findings show that boundary spanners can connect youth-care professionals and sports club volunteers by (a) disseminating among youth-care professionals the pedagogical value of sport, (b) supporting sports clubs in creating the conditions conducive to life-skill development, and (c) acquiring financial resources that can be used to develop, implement, and maintain the intersectoral action (Chapters 3 and 4). Finally, the studies show that boundary spanning activities include building and maintaining connections not only at the operational level, but also between politicians, policymakers, and managers from the different sectors.

3. The role of boundary spanners in intersectoral action
A third main observation is that boundary spanners play a crucial role in intersectoral action between youth-care organisations and community sports clubs. This concurs with conclusions from other scholars (Axelsson & Axelsson, 2006; Lasker, Weiss, & Miller, 2001; Williams, 2013), and the current research adds to this that successful intersectoral action requires boundary spanners at two levels: (a) boundary spanners who *manage* the intersectoral action between the youth-care professionals and the sports club volunteers at the operational level and (b) boundary spanners who *build* connections between the sectors at the political, policy, and managerial levels.

The boundary spanners who manage the intersectoral action between the youth-care professionals and the sports club volunteers mainly try to connect these two actors and to facilitate information exchange between them. Chapters 3 and 4 show that this encompasses multiple activities, including bringing sports clubs as a youth development setting to the attention

of youth-care professionals, linking youth-care professionals with sports clubs, organising meetings, facilitating information exchange between youth-care professionals and sports club volunteers, and creating novel sports programmes involving the intersectoral action. Besides facilitating contact and information exchange, an important characteristic of boundary spanners is that they share ideas and power and bridge the different organisations' cultures (Axelsson & Axelsson, 2006; Lasker et al., 2001; Williams, 2013). Chapter 4 demonstrates that the boundary spanners in the intersectoral action between youth-care organisations and sports clubs were focusing merely on how to fit the intersectoral action with the ideas and cultures of the sports clubs. A possible explanation for this is that the rationale for the intersectoral action is largely rooted in the aims and perspectives of the youth-care sector (see Chapters 4 and 6).

Regarding boundary spanning leadership at the managerial, policy, and political levels, Chapter 5 demonstrates that this helps to gain support for the intersectoral action from the different sectors. To be able to gain support from local policy, it appears that boundary spanners acting at this level need to possess in-depth knowledge of the different rules, thoughts, beliefs, languages, trends, and working procedures in the different sectors. The findings in Chapter 6 explain that this knowledge helps boundary spanners to identify so-called windows of opportunity (Kingdon, 1995) for gaining support from the societal and political context. According to Kingdon (1995), such opportunities arise when the dominant paradigm in a sector changes, when an urgent problem evolves, or when novel policy plans are developed. If boundary spanners are aware of these opportunities, they can more easily adopt the previously described activities regarding visibility that are helpful for gaining support.

4. The societal and political context in intersectoral action

The current research adds to the conceptual framework that the societal and political context in which an intersectoral action operates does not necessarily have to be a stable context, but rather a context that individuals and organisations can influence to gain support for the intersectoral action in terms of financial and human resources. A few other studies have shown that actors can influence the societal and political context in favour of the intersectoral action in which they are participating (Downing, 2008; Flood, Minkler, Hennessey Lavery, Estrada, & Falbe, 2015; Koelen, Vaandrager, & Wagemakers, 2009; Vogel, Burt, & Church, 2010). Most of these studies highlight the importance of linking with an influential person who can engage key decision makers (Flood et al., 2015; Vogel et al., 2010). The findings from this thesis add to this that visibility and boundary spanning leadership can be used to influence the societal and political context.

Regarding visibility, it emerged from Chapters 3–6 that making the intersectoral action and its results visible to society and to policymakers can lead to a supportive societal and political context. The findings presented in Chapter 6 demonstrate *how* actors can make the intersectoral action visible for this purpose. It emerged that making the intersectoral action visible through framing it as a means to address urgent issues helps to gain support. Examples of such urgent issues in the context of this research were increasing overweight among youth and the rise of a novel policy paradigm that demanded novel practices. Pacheco, York, Dean, and Sarasvathy (2010) also found that support for novel social practices can be gained by framing them as a means to address societal problems. The findings presented in Chapter 6 add to this that gaining

legitimacy for intersectoral action is particularly complex because it needs to be framed as a means to achieve different goals aspired to by different sectors. By way of illustration, Chapter 6 demonstrates that the intersectoral action between youth-care organisations and sports clubs could become embedded in a local policy only when it was framed as a means to (a) put the novel preventive and empowering paradigm in the youth-care sector into practice *and* (b) create socially safe sports clubs.

A second type of visibility that emerged as effective in obtaining support from the societal and political context is presenting research findings from novel and small-scale projects involving intersectoral action. Two possible explanations for this observation are that (a) policymakers and other powerful actors take intersectoral action more seriously when it is investigated and (b) positive research findings encourage policymakers and other possible financiers to invest in intersectoral action. Thus, conducting research not only supports learning processes in the evolution of intersectoral action or other health promotion practices (Jolley, 2014; Wagemakers, Koelen, Lezwijn, & Vaandrager, 2010; Wittmayer, Schäpke, van Steenbergen, & Omann, 2014), but also helps to gain legitimacy and support from the broader context.

Regarding boundary spanning leadership, it emerged that connecting multiple small-scale projects involving intersectoral action and connecting these projects with actors working at the managerial, policy, and political levels in the different sectors helps to gain legitimacy and support for the intersectoral action (Chapter 6). An explanation may be that these connections result in so-called advocacy coalitions having the authority to create countervailing power against existing policies (Pacheco et al., 2010; Sabatier, 1988; Westley et al., 2013).

5. Trust

A closer look at the personal elements reveals that trust may be the glue for successful intersectoral action between youth-care organisations and sports clubs. Several scholars have underlined the crucial role of trust in intersectoral action (e.g., Axelsson & Axelsson, 2006; Bryson et al., 2006), and in intersectoral action involving sports clubs particularly, as a consequence of the organisational structure based on informality and unpaid volunteers (Misener & Doherty, 2013; Shaw & Allen, 2006).

Chen (2008) distinguished three levels of trust in intersectoral action: (a) interpersonal trust, (b) competence trust, representing the confidence in the capacity and competences of the other organisations and individuals participating in the intersectoral action, and (c) goodwill trust, representing the mutual belief that the different organisations and individuals will continue to invest time and money in the intersectoral action. Regarding interpersonal trust, it emerged that sports club volunteers want to collaborate only with youth-care professionals with whom they have face-to-face contact (Chapters 3 and 4) and that most intersectoral action between youth-care organisations and community sports clubs starts with a youth-care professional and sports club volunteer who know – and trust – each other from previous activities (Chapter 4). Regarding competence trust, it appears that youth-care professionals will try to include socially vulnerable youths in a sports club only when they trust that enough sports coaches have mastered certain pedagogical competences (Chapters 3 and 4). Regarding goodwill trust, the findings indicate that it is important not to ask too much from sports clubs, because the main aim of sports club volunteers is to organise sports, not to promote positive youth development.

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Although the role of trust is not thoroughly studied in the current research, the findings point to new questions that need answers – for example, regarding the previously described role of formal or informal agreements. On the one hand, the findings suggest that formalised agreements possibly do not align with the informal structure of many sports clubs and that hence it is questionable whether formal agreements lead to interpersonal trust. On the other hand, the findings suggest that formal agreements are of particular importance in intersectoral action involving sports clubs, because they create a feeling of commitment and the goodwill trust that the youth-care organisations will honour the agreements. Another example is the role of creating a shared aim. Because the rationale for the intersectoral action is rooted in the aims of the professional youth-care sector, sports club volunteers may have the feeling that they are being used as a means to achieve the goals of the youth-care sector. It may therefore be interesting to investigate whether (a) one single aim for the intersectoral action or (b) formulating one common goal and agreeing to disagree on the other aims leads to more trust in intersectoral action.

Strengths and weaknesses

This study adopted an iterative mixed-methods research approach. In iterative research processes, the different studies are set up in multiple rounds in which the research questions are formulated based on the findings from the previous studies (Kerssens-van Drongelen, 2001; Jolley, 2014). The iterative approach enabled direct investigation of follow-up questions that arose from the different studies. One example is that the quantitative Study D (Chapter 5) elaborated on the findings from the two qualitative Studies B and C (Chapters 3 and 4). The youth-care professionals and the sports club volunteers interviewed for these qualitative studies reported many different institutional, personal, and organisational elements of the intersectoral action as important for its success, and this was the motivation for examining in Study D which of these elements are most important for successful intersectoral action. Also, by unravelling the evolution of intersectoral action between youth-care organisations and community sports clubs and its embedding in local policy, Study E (Chapter 6) builds upon the observation from Studies B and C that the elements of the intersectoral action that may be important for its evolution may differ from the elements important for its implementation.

In this thesis, the HALL framework was adopted as a conceptual framework. Mapping the data against this framework appeared helpful in analysing the data, in reducing the complexity of intersectoral action, and in gaining more in-depth insights regarding the elements of successful intersectoral action and their interrelatedness. Furthermore, the institutional, personal, and organisational elements in the conceptual model appeared to be useful for developing the questionnaire for the quantitative Study D. However, adopting this HALL framework as an instrument to analyse the data has also some limitations. Above all, mapping the data against the framework implies that aspects of intersectoral action that are not part of the conceptual framework may not be found. To overcome this bias, the interviews in the qualitative Studies B, C, and E were very open, and the interview guides did not explicitly include questions referring to the elements in the conceptual model. However, if a more inductive approach had been used, other aspects of successful intersectoral action may have popped up. One example of this is that the studies in this thesis did not pay particular attention to the role of trust in

intersectoral action, because this was not part of the conceptual model. This is unfortunate because, from the overall analysis presented in this chapter, trust appears to be one of the most important aspects of intersectoral action between youth-care organisations and sports clubs.

Another limitation of this thesis relates to the very broad research aim and research questions. These inherently led to mainly general insights about which aspects of intersectoral action are important for its success. With some exceptions, such as the roles of the societal and political context, visibility, and boundary spanning leadership, it was therefore difficult to provide concrete recommendations for policy and practice. Examples of more general findings from this thesis that require further investigation include (a) the role of trust in intersectoral action, (b) the support that sports coaches need and want in order to build the conditions conducive to life-skill development, (c) the role that youth-care professionals can and want to play in providing this support, (d) the role of the different types of managing (task management and boundary spanning leadership) in intersectoral action at the operational level, and (e) the finding that different types of success in intersectoral action may be predicted by different organisational elements.

Because this research was conducted in the Dutch context, care is required in generalising the findings. For example, community sports clubs in the Netherlands are characterised by an organisational structure based on volunteers, and hence other elements may be of importance for successful intersectoral action between youth-care and sport in countries where the sports sector is based on paid professionals. Nonetheless, most of the elements that were found important for successful intersectoral action in this thesis may be transferable to other health-promoting settings where two different organisations collaborate. These settings may particularly benefit from the findings regarding how to gain legitimacy and support for novel forms of intersectoral action.

Another limitation relates to the comparability of the findings from the qualitative Studies B and C and the quantitative Study D. Whereas the participants in Study D belonged to coalitions that aimed to reach public health goals (i.e., promoting positive youth development but also improving the physical health of overweight people or improving life skills of long-term unemployed people) through sport, the participants in the qualitative studies were youth-care professionals and sports club volunteers who collaborated with each other on a more ad-hoc basis. Nonetheless, both the qualitative studies and the quantitative study resulted in insights about the elements of intersectoral action between paid care professionals and unpaid sports volunteers.

Research Question 3 is answered with one single case study. Although the findings from this study corroborate existing evidence and hence may be transferable to other contexts (Riege, 2003), a multiple case study would have allowed for comparison of the evolution (or stagnation) of intersectoral action in different cities and settings, and hence for more in-depth insights into the elements of intersectoral action that are crucial for its evolution. A strength of this case study, however, is the rich and large amount of information available about the origin and progress of the case, over a long period of time and from various sources. Moreover, the use of a multilevel perspective on transitions (Geels, 2002) appears very helpful for unravelling the evolution and embedding of intersectoral action. The successful use of this multilevel perspective sets a path for future research on the evolution of novel intersectoral action and its embedding in

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local and national policy. Because it emerged that the success of intersectoral action depends on an interplay between the intersectoral action at the operational level and the societal and political context, multilevel perspectives seem valuable also for unravelling the processes underlying intersectoral action.

The mixed-methods design was a main strength of this thesis. It helped to gain a fuller understanding of the elements of successful intersectoral action involving youth-care organisations and community sports clubs. Adopting a mixed-methods approach also helped to discover the pros and cons of the different methods for investigating a certain phenomenon. The quantitative Study D illustrates the complexity of conducting quantitative research on intersectoral action. For example, quantitative enquiry on intersectoral action requires a multilevel structure when different coalitions are involved, because observations from individuals in one coalition may be more similar than observations from individuals in other coalitions. Furthermore, instruments assessing elements of intersectoral action and indicators for its success are scarce and often do not align with the context of the particular intersectoral action. It was therefore necessary to self-develop a questionnaire, and this caused limitations regarding the internal validity of this quantitative study. However, future research can build on the findings by developing more robust measures for the various elements of intersectoral action and its success.

Conclusion and implications for policy, practice, and further research

A first main conclusion is that organisational elements are conditional for successful intersectoral action. This has at least two implications. Firstly, financiers and managers of intersectoral action between youth-care organisations and community sports clubs should invest in these elements. More precisely, financiers such as national and local policymakers and funding organisations should first bring together organisations that perceive the intersectoral action as valuable. In the context of the current thesis, these are youth-care organisations that perceive sports clubs as settings where socially vulnerable youth can develop in a positive way and sports clubs that aspire to utilise the wider social role of sport by including socially vulnerable groups. Furthermore, financiers of intersectoral action may benefit from employing one or maybe two leaders for the intersectoral action who are responsible for (a) task management and (b) spanning boundaries at different levels between the participants from the different sectors.

Secondly, managers of intersectoral action between youth-care professionals and sports club volunteers are recommended to pay attention to the five organisational elements: communication structure, task management, building on capacities, boundary spanning leadership, and visibility. A communication structure based on face-to-face contact and flexibility on both sides regarding working hours may enhance interpersonal trust between the youth-care professionals and the sports club volunteers. Regarding task management, which includes creating a shared aim and clarity about the different participants' roles and responsibilities, it is recommended to pay attention to the degree to which agreements are formalised. Building on the capacities of the youth-care professionals and the sports coaches, i.e., the sports coaches being responsible for the sports activity and the youth-care professionals for supporting the sports coaches in building the conducive conditions, may facilitate positive youth development through sport. Regarding visibility, managers of intersectoral action at the operational level may benefit from making short-term process results visible, because this may enhance the

participants' motivation to invest in the intersectoral action and also gain legitimacy for the intersectoral action from the wider societal and political context.

A second main conclusion from this research is that there is a mutual relationship between successful intersectoral action at the operational level and intersectoral action at the managerial, policy, and political levels (i.e., the societal and political context). This relationship is visualised in Figure 7.2. It appears that (a) the extent to which the societal and political context is favourable towards the intersectoral action influences the extent to which the intersectoral action is successful and (b) organisations and individuals participating in the intersectoral action can influence the societal and political context to gain support for the intersectoral action in terms of financial and human resources.
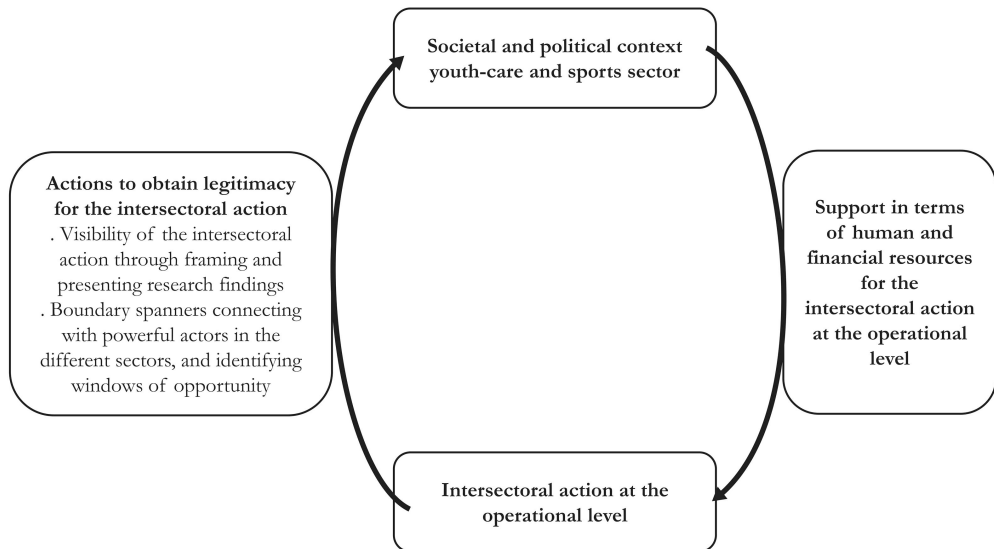
Figure 7.2 The interrelatedness between the intersectoral action at the operational level and its societal and political context, and actions that can be taken to gain support for the intersectoral action

The current research shows that organisations or individuals that want to gain support for intersectoral action should (a) make the intersectoral action at the operational level visible to local policymakers and (b) connect with boundary spanners acting at the managerial, policy, and political levels. Effective ways to make the intersectoral action visible are framing it as a means to address urgent social issues and presenting findings from research on the intersectoral action. Boundary spanners can be effective in obtaining support if they have knowledge of the paradigms, rules, working processes, and policies of the different sectors, and if they possess the capacity to identify opportunities for gaining support for the intersectoral action at the operational level.

According to Corbin (2017), there is a lack of studies that provide insights into how participants in intersectoral action at the operational level can influence actors at the managerial and political levels to increase support for the intersectoral action. The studies presented in this thesis contribute to filling this gap. Because of the importance of the interplay between the operational and the political level for successful intersectoral action, future research should further investigate this interplay. Elaborating on the study presented in Chapter 6, such research

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can be done through the lens of theoretical perspectives that acknowledge the complex interplay between operational level projects and the current thoughts, beliefs, and policies at managerial and political level in different sectors. The multilevel perspective on transitions (Geels, 2002; Loorbach, Frantzeskaki, & Avelino, 2017), which is increasingly being used to study transitions in social, public health, and healthcare systems (e.g., Dell'Olio, Hassink, & Vaandrager, 2017; Johansen and van den Bosch, 2017) and also to study transitions to intersectoral policymaking (Hassink, Grin, & Hulsink, 2018; Smink, Negro, Niesten, & Hekkert, 2015; Sutherland, Peter, & Zagata, 2015), appears very suitable in this regard.

The third main conclusion is that trust is one of the most crucial aspects of successful intersectoral action. To build interpersonal trust, managers in intersectoral action between youth-care organisations and community sports clubs may benefit from task management activities, such as facilitating face-to-face contact, creating a flexible communication structure, and making formal or informal agreements about the roles and responsibilities of the organisations and the individuals participating. To build competence trust, managers in the intersectoral action may benefit from building on capacities and making visible to youth-care professionals the pedagogical competences possessed by sports coaches. However, because the focus of this thesis was not on how to build trust in the intersectoral action and hence the findings regarding trust are not very precise, future research needs to elaborate on these findings. In future research, special attention needs to be paid to the mixed findings about whether formalised and visible agreements contribute to trust in intersectoral action between organisations working with formalised procedures and more informal organisations.

This research shows that boundary spanning leadership in intersectoral action in the public health field is a complex task. It is therefore important to integrate sport as a means to address health issues in the curriculum of study programmes for future professionals in the health, youth-care, and sports sectors. In addition, attention should be paid in these study programmes to boundary spanning leadership, including how to build interpersonal, competence, and goodwill trust. It should also include how to (a) connect different small-scale projects at the very basic level, (b) connect small-scale projects with powerful actors that can create support for the intersectoral action, and (c) connect powerful actors from the different sectors with one another.

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Chapter 7

Summary

Background

Socially vulnerable youth in high-income countries are youths that face stressors in their everyday life, including income poverty, poor family management, low housing quality, and peers being involved in problem behaviour. Policymakers, researchers, and field workers increasingly recognise sport as a means to promote positive development in socially vulnerable youth, but socially vulnerable youth participate less frequently in sports than their average peers.

Intersectoral action (i.e., collaborative efforts involving organisations from two or more sectors) between youth-care organisations and community sports clubs is advocated as an effective approach to reach socially vulnerable youth and include them in sport. Youth-care organisations in the Netherlands provide services to socially vulnerable youths and their families. Community sports clubs, usually run by unpaid volunteers, are the main provider of sports in the Netherlands. Intersectoral action between youth-care organisations and community sports clubs encompasses bringing sports clubs as settings for positive youth development to the attention of youth-care professionals, connecting youth-care professionals and sports clubs, integrating sport in the support that youth-care professionals deliver to their clients, and developing and implementing sports programmes serving socially vulnerable youth.

Intersectoral action between youth-care organisations and community sports clubs is not easy however, as these sectors are very dissimilar. Examples of differences between them include different opening hours, different goals, and different organisational structures based on unpaid volunteers and informal relationships in sports clubs versus paid professionals and mainly formalised procedures in youth-care organisations.

Study aim and research questions

Despite the advocacy for intersectoral action between youth-care organisations and community sports clubs, little is known about how these organisations can best collaborate. Therefore, the aim of this thesis is to provide insights into the organisational context of the inclusion of socially vulnerable youth in sport by exploring elements of successful intersectoral action between youth-care organisations and voluntary sports clubs and how these elements are interrelated. The following three research questions are formulated.

Research Question 1. What is the evidence on life-skill development in sports programmes serving socially vulnerable youth from both quantitative and qualitative studies?

Research Question 2. Which aspects of intersectoral action between youth-care organisations and voluntary sport clubs make these collaborations successful?

Research Question 3. What mechanisms underlie the process of how intersectoral action between youth organisations and sports clubs evolves and becomes embedded in local social policies?

Methods

An iterative mixed-methods research approach was adopted to address the aim of this thesis. This means that the studies conducted are set up in multiple rounds and that the findings of each study form the basis for the successive studies.

Eventually, this thesis was composed of five studies. One systematic literature review addressing Research Question 1, three studies addressing Research Question 2, and a single case study addressing Research Question 3. The three studies conducted to answer Research Question 2 addressed different sub-questions. Two of these three studies were qualitative studies based on interviews and focus groups, and the other was a cross-sectional quantitative study.

Results

Chapter 2 presents the findings from the systematic literature review conducted to describe what was known about life-skill development in sports programmes serving socially vulnerable youth, and, insofar as these were investigated in the included studies, the conditions conducive to life-skill development in these sports programmes. The studies included in the review are very diverse in terms of setting, study design, research method, and reported life skills. Each included study reported that at least one life skill improved in the youths who participated in the studied sports programme. Improvements in cognitive and social life skills were more frequently reported than improvements in emotional life skills. In some of the included studies, researchers cast doubts on whether the life skills developed in the sports programme were transferred to other societal domains, such as school and work environments. Regarding the conducive conditions, the findings indicate that a positive youth–coach relationship, sports coaches who encourage youths to deal with the challenges that arise in the sports activity, activities that improve a sense of belonging to the sports programme, and the inclusion of a life-skills education element are conducive to life-skill development.

In Chapter 3, the elements of successful intersectoral action between youth-care organisations and sports clubs were explored through open interviews with youth-care professionals and sports club volunteers. The findings demonstrated that the following elements were perceived as important for the extent to which the intersectoral action is successful: a societal and political context that provides funding for sports club membership fees for socially vulnerable youth, positive attitudes of youth-care professionals and sports club volunteers towards the intersectoral action, the confidence (i.e., self-efficacy) of the youth-care professionals and sports club volunteers that they are able to include the youths in sports clubs, visibility of the intersectoral action through a signed agreement, and the participation of a paid professional who (a) connects youth-care professionals and sports club volunteers and (b) supports sports clubs in building the conditions conducive to life-skill development.

Based on 23 semi-structured interviews, Chapter 4 provides more insights into (a) the performance indicators for intersectoral action and (b) facilitators of, and barriers to, successful intersectoral action, according to the participants in intersectoral action between youth-care and sports. The findings demonstrate that intersectoral action is perceived as successful when it leads to more socially vulnerable youths participating in sport, life-skill development in these youths through sport, and sustainable intersectoral action. Furthermore, this study indicates that the following elements facilitate or hinder successful intersectoral action: existing and good relationships (or lack thereof), a boundary spanner (or lack thereof), the attitudes of youth-care professionals towards the intersectoral action, the knowledge and competences of the participants, the policies and ambitions of the participating organisations, and some elements external to the intersectoral action, such as local and national governmental policies.

Chapter 5 describes the findings from a cross-sectional quantitative study among participants in coalitions between social-care professionals and sports club representatives. The aim of this study was to discern which elements of intersectoral action may be most important for its success. The bivariate results show that all nine elements (two institutional, two personal, and five organisational) in a proposed conceptual model are related to three indicators of successful intersectoral action (i.e., partnership synergy, partnership sustainability, and community outcomes). However, the indicators for successful intersectoral action were best predicted by organisational elements. Synergy was best predicted by communication structure and building on capacities, sustainability was best predicted by visibility, and community outcomes were best predicted by visibility and task management.

The study presented in Chapter 6, which was a single case study based on content analysis of policy documents and in-depth interviews, unravelled how intersectoral action between youth-care organisations and community sports clubs evolved in a large city in the Netherlands and became embedded in this city's social policy. The findings demonstrate that the intersectoral action was initiated in small-scale sports projects developed by sports club volunteers, youth-care professionals, and other social professionals active at the most basic level of their organisations (i.e., grassroots). Individuals and organisations involved in these small-scale projects adopted several activities over time that led to more legitimacy and support for the intersectoral action from the wider societal and political context, and eventually to its embedding in local policy. These activities were: (a) framing the intersectoral action as a means to achieve wider social goals, (b) making the results of the intersectoral action visible for the wider societal and political context by presenting research findings, (c) building connections between multiple small-scale projects involving intersectoral action between youth-care organisations and sports clubs, and (d) connecting policymakers and other influential actors from the different sectors.

Conclusion

The first conclusion from this thesis is that sports clubs are settings where socially vulnerable youth can develop in a positive way, particularly when attention is paid to conditions conducive to life-skill development (Research Question 1). Second, the thesis revealed that four institutional elements, four personal elements, and five organisational elements are important for the extent to which intersectoral action between youth-care organisations and community sports clubs is successful. The institutional elements are: the *societal and political context* in which the intersectoral action operates, the *policies* of the organisations participating, the *working processes* in the organisations, and the *organisational capacity* of the organisations. The personal elements are the *attitudes and beliefs* of the individuals participating, the *knowledge and competences* of these individuals, the type of *relationships* between them, and the degree to which youth-care professionals and sports club representatives believe that they can make a difference in the intersectoral action (i.e., *self-efficacy*). The organisational elements are a *communication structure* based on face-to-face contact and flexibility on both sides regarding working hours; *task management*, *building on the capacities* of the individuals and organisations participating, which means that each participant contributes to the intersectoral action by using her or his specific resources in terms of competences, expertise, and networks; *visibility* of the intersectoral action and its results; and *boundary spanning leadership*, which encompasses building and maintaining connections between youth-care professionals and sports club volunteers (Research Question 2). Of these organisational elements, visibility and

boundary spanning leadership proved most important for the evolution of the intersectoral action and its embedding in local policy (Research Question 3).

A closer look at the findings provides us with five more in-depth insights regarding the role of personal, institutional, and organisational elements in successful intersectoral action, and the interplay between these elements. First, it emerged that building on capacities may be helpful in building the conditions conducive to life-skill development at sports clubs. This means that the sports coaches should remain focused on organising the sports activities and not on delivering care, and it is the youth-care professionals' responsibility to provide sports coaches with support in building the conducive conditions.

Second, the finding that organisational elements are conditional for successful intersectoral action has at least two implications. Financiers and managers of intersectoral action between youth-care organisations and community sports clubs should invest in these elements. Furthermore, financiers of intersectoral action may benefit from employing one or maybe two leaders of the intersectoral action, who are responsible for (a) task management and (b) spanning boundaries at different levels between the participants from the different sectors.

Third, it was revealed that successful intersectoral action requires boundary spanners at two levels: (a) boundary spanners who *manage* the intersectoral action between the youth-care professionals and sports club volunteers at the operational level and (b) boundary spanners who *build* connections between the sectors at the political, policy, and managerial levels. The boundary spanners who manage the intersectoral action between the youth-care professionals and the sports club volunteers can connect these two actors and facilitate information exchange between them. To gain support for the intersectoral action from the different sectors, boundary spanners require knowledge of the different rules, thoughts, beliefs, languages, trends, and working procedures in the different sectors.

Fourth, it emerged that the societal and political context in which an intersectoral action operates is not necessarily a stable context, but rather a context that individuals and organisations can influence to gain support for the intersectoral action in terms of financial and human resources. Organisations or individuals that want to gain support for the intersectoral action are recommended to (a) make the intersectoral action at the operational level visible to local policymakers and (b) connect with boundary spanners acting at the managerial, policy, and political levels. Effective ways to make the intersectoral action visible include framing it as a means to address urgent social issues and presenting findings from research on the intersectoral action. Boundary spanners can be effective in obtaining support if they have knowledge of the paradigms, rules, working process, and policies of the different sectors, and if they possess the capacity to identify opportunities for gaining support for the intersectoral action at the operational level.

Fifth, the findings indicate that trust may be the glue for successful intersectoral action between youth-care organisations and sports clubs. To build trust, managers in intersectoral action between youth-care organisations and community sports clubs may benefit from (a) building on the capacities of the different participants, (b) making the intersectoral action and its results visible, and (c) task management activities, such as facilitating face-to-face contact, creating a flexible communication structure, and making formal or informal agreements about the roles and responsibilities of the participating organisations and individuals.

Samenvatting

Introductie

Sociaal kwetsbare kinderen en jongeren zijn kinderen en jongeren die meerdere uitdagingen ervaren in hun dagelijkse leven, waaronder armoede, ouders met beperkte opvoedvaardigheden, een slechte woonsituatie en vrienden of familieleden die probleemgedrag vertonen. Steeds meer beleidsmakers, wetenschappers en sociale professionals zien sportverenigingen als contexten waarin sociaal kwetsbare kinderen en jongeren zich positief kunnen ontwikkelen. Echter, de sportdeelname ligt onder deze groep lager dan onder niet-kwetsbare jeugd. Landelijke en lokale overheden in hoge-inkomenslanden zien samenwerking tussen jeugdhulporganisaties en sportverenigingen als een effectieve manier om sociaal kwetsbare jeugd te begeleiden naar een sportactiviteit die past bij hun wensen en mogelijkheden, en daarmee dus om bij te dragen aan positieve ontwikkeling bij deze kinderen en jongeren.

Dit proefschrift gaat over de samenwerking tussen jeugdhulporganisaties en sportverenigingen in Nederland. Jeugdhulporganisaties in Nederland ondersteunen kwetsbare jeugd en de gezinnen waarin zij opgroeien. Sportverenigingen zijn de grootste actor in de Nederlandse sportsector. Een groot deel van de kinderen en jongeren in Nederland is lid van een of meerdere sportverenigingen: van de jeugd tussen de 6 en 11 jaar oud ongeveer driekwart, van de jeugd tussen de 12 en 18 jaar ruim de helft. Een belangrijk kenmerk van sportverenigingen in Nederland is dat zij worden bestuurd door vrijwilligers en dat ook de wedstrijden, trainingen en andere activiteiten worden georganiseerd en begeleid door vrijwilligers.

Samenwerking tussen jeugdhulporganisaties en sportverenigingen is echter niet vanzelfsprekend en eenvoudig vanwege de grote verschillen tussen de jeugd- en de sportsector. Voorbeelden van verschillen tussen deze sectoren zijn verschillen in openingstijden, de doelen en de organisatiestructuur. Ter illustratie: waar de organisatiestructuur van jeugdhulporganisaties is gebaseerd op hoofdzakelijk betaalde professionals en geformaliseerde procedures zijn sportverenigingen gebaseerd op vooral onbetaalde vrijwilligers en informele relaties.

Doel van het onderzoek en onderzoeksvragen

Ondanks de roep om samenwerking tussen jeugdhulporganisaties en sportverenigingen is nog weinig bekend over hoe deze organisaties goed kunnen samenwerken. Het doel van dit proefschrift is daarom om de elementen van succesvolle samenwerking tussen deze twee typen organisaties in beeld te brengen. Hiermee geeft dit proefschrift meer inzicht in de organisatorische context van de inclusie van kwetsbare jeugd in sport. De volgende drie onderzoeksvragen zijn geformuleerd:

Onderzoeksvraag 1: Wat is uit kwantitatieve en kwalitatieve studies bekend over de ontwikkeling van persoonlijke vaardigheden in sport programma's voor kwetsbare jeugd?

Onderzoeksvraag 2: Welke aspecten van de samenwerking tussen jeugdhulporganisaties en sportverenigingen maken deze samenwerking succesvol?

Onderzoeksvraag 3: Welke mechanismen leiden tot samenwerking tussen jeugdhulporganisaties en sportverenigingen op lokaal niveau en tot de institutionalisering van de samenwerking in lokaal sociaal beleid?

Methoden

Dit proefschrift is gebaseerd op een iteratief mixed-method onderzoek. Dit betekent dat de verschillende studies elkaar hebben opgevolgd en dat de bevindingen van iedere studie zijn gebruikt bij het opzetten van de daaropvolgende studies.

Uiteindelijk bestaat dit proefschrift uit vijf studies. Onderzoeksvraag 1 is beantwoord met een systematische literatuurreview, onderzoeksvraag 2 is beantwoord met twee kwalitatieve studies en een cross-sectionele kwantitatieve studie, en onderzoeksvraag 3 met een casestudie.

Resultaten

Hoofdstuk 2 bevat de bevindingen uit een systematische literatuurreview die is uitgevoerd om in beeld te brengen wat al bekend was over de ontwikkeling van persoonlijke vaardigheden in sportprogramma's voor kwetsbare jeugd en, voor zover onderzocht in de geïncludeerde studies, over de condities die bepalend zijn voor of de deelnemende jeugd tijdens het sporten vaardigheden ontwikkelt. De in de geïncludeerde studies onderzochte sportprogramma's zijn zeer verschillend, net als de gebruikte onderzoeksopzetten en onderzoeksmethoden en de persoonlijke vaardigheden waarover uitspraken worden gedaan. Elke studie rapporteerde dat bij de jongeren die deelnamen aan het sportprogramma ten minste één vaardigheid verbeterde. Daarbij viel op dat meer studies rapporteerden over verbeteringen in cognitieve en sociale vaardigheden dan over verbeteringen in emotionele vaardigheden. Bij enkele geïncludeerde studies twijfelen de auteurs of de deelnemende jeugd de vaardigheden die zij ontwikkelen en tonen tijdens het sporten ook gaan gebruiken in andere contexten, zoals thuis of op school. De studies die de condities hebben onderzocht die bepalend zijn voor of de kinderen en jongeren tijdens het sporten vaardigheden ontwikkelen wijzen erop dat vier condities van belang zijn: een positieve deelnemer-coach relatie, sport coaches die de deelnemers aanmoedigen om zelf oplossingen te bedenken voor de uitdagingen die ontstaan tijdens het sporten, activiteiten die het gevoel van betrokkenheid bij het sportprogramma vergroten en de aanwezigheid van activiteiten waarin voor, tijdens of na het sporten expliciet wordt gewerkt aan de ontwikkeling van persoonlijke vaardigheden.

De studie in hoofdstuk 3 is een verkenning van de elementen van succesvolle samenwerking tussen jeugdhulporganisaties en sportverenigingen. Uit de open interviews met jeugdhulpprofessionals en de groepsgesprekken met vrijwilligers van sportverenigingen blijkt dat zij de volgende elementen van de samenwerking als belangrijk ervaren voor het succes ervan: (a) de aanwezigheid van overheden en maatschappelijke organisaties die sociaal kwetsbare kinderen en jongeren financieel ondersteunen om mee te kunnen doen met sportactiviteiten, (b) de aanwezigheid van jeugdhulpprofessionals en vrijwilligers van sportverenigingen die geloven dat de samenwerking waardevol is en die erop vertrouwen dat het ze lukt om sociaal kwetsbare jeugd te includeren in sportverenigingen, (c) de zichtbaarheid van de samenwerking, bijvoorbeeld door een ondertekend convenant en (d) een betaalde professional die jeugdhulpprofessionals en sportverenigingen met elkaar verbindt en sportverenigingen begeleidt bij het verzorgen van de condities die bepalend zijn voor of kinderen en jongeren zich tijdens het sporten positief kunnen ontwikkelen.

Hoofdstuk 4 geeft meer inzicht in de criteria op basis waarvan professionals en vrijwilligers die deelnemen aan de samenwerking tussen jeugdhulporganisaties en

sportverenigingen deze wel of niet als succesvol ervaren, en welke elementen van de samenwerking zij als bevorderend of belemmerend ervaren voor het succes ervan. Uit de 23 semigestructureerde interviews blijkt dat de deelnemende professionals en vrijwilligers de samenwerking allereerst als succesvol ervaren wanneer deze leidt tot een toename van het aantal sociaal kwetsbare kinderen en jongeren dat sport. Daarnaast ervaren zij de samenwerking als succesvol wanneer de kinderen en jongeren zich tijdens het sporten positief ontwikkelen en wanneer de samenwerking blijft bestaan. Elementen die succesvolle samenwerking volgens de professionals en vrijwilligers bevorderen dan wel belemmeren, zijn (a) de mate waarin de samenwerking gebaseerd is op bestaande contacten en goede relaties, (b) de mate waarin professionals betrokken zijn die beide sectoren met elkaar verbinden, (c) de mate waarin de jeugdhulpprofessionals potentie zien in de samenwerking, (d) de kennis en de competenties van de betrokken professionals en vrijwilligers, (e) het beleid van de betrokken organisaties en (f) de mate waarin het lokale en landelijke overheidsbeleid ondersteunend is aan de samenwerking.

Hoofdstuk 5 bespreekt de resultaten van een cross-sectionele kwantitatieve studie onder professionals en vrijwilligers in coalities waarin sociale sector organisaties en sportorganisaties gezamenlijk sportprojecten ontwikkelen en organiseren voor uiteenlopende sociaal kwetsbare groepen. Het doel van de studie was om de elementen van intersectorale samenwerking te onderscheiden die het belangrijkst zijn voor het succes ervan. De bivariate analyses tonen allereerst aan dat alle negen elementen in het veronderstelde conceptueel model samenhangen met de drie gemeten indicatoren voor succesvolle intersectorale samenwerking: de ervaren synergie in de samenwerking, de mate waarin de betrokkenen verwachten dat de coalitie zal blijven bestaan en de ervaren maatschappelijke uitkomsten. De resultaten laten daarnaast zien dat elementen gerelateerd aan de organisatie van de samenwerking belangrijker lijken te zijn voor succesvolle samenwerking dan elementen gerelateerd aan de deelnemende organisaties en personen. De twee beste voorspellers voor de ervaren synergy waren de communicatiestructuur binnen de samenwerking en de mate waarin de capaciteiten van de deelnemende professionals en vrijwilligers worden benut. De beste voorspeller voor de mate waarin de betrokkenen verwachten dat de coalitie zal blijven bestaan was de zichtbaarheid van de samenwerking. De twee beste voorspeller voor ervaren maatschappelijke uitkomsten waren de zichtbaarheid van de samenwerking en de wijze waarop de doelen en taken in de samenwerking worden gemanaged.

De studie in hoofdstuk 6 - een casestudie gebaseerd op een analyse van beleidsdocumenten en diepte-interviews - laat zien hoe intersectorale samenwerking tussen jeugdhulporganisaties en sportverenigingen is ontstaan in een grote gemeente in Nederland, en hoe deze samenwerking een plek heeft gekregen in het lokale sociaal beleid van deze gemeente. De bevindingen tonen allereerst aan dat de samenwerking zich vanuit de praktijk heeft ontwikkeld. Vrijwilligers van sportverenigingen, jeugdhulpprofessionals en andere sociale professionals initieerden kleinschalige samenwerkingsprojecten die als doel hadden om de sportdeelname onder sociaal kwetsbare jongeren te verhogen en/of om het pedagogisch klimaat op een sportvereniging te verbeteren. De organisaties, professionals en vrijwilligers die participeerden in de kleinschalige projecten probeerden het maatschappelijke draagvlak voor de samenwerking te vergroten en er uiteindelijk ook steun voor te krijgen vanuit het lokale sociaal beleid. Om dit te bereiken maakten zij bewust dan wel onbewust gebruik de volgende strategieën: (a) framing van de projecten als een middel voor het bereiken van bredere

maatschappelijke doelstellingen, (b) zichtbaar maken van de resultaten van de projecten voor de lokale samenleving, beleid en politiek, (c) verbinden van beleidsmakers en andere invloedrijke actoren aan de samenwerkingsprojecten en (d) aan elkaar verbinden van de verschillende kleinschalige samenwerkingsprojecten. Door de laatste strategie ontstond de massa die nodig was om de lokale politici en beleidsmakers te kunnen beïnvloeden en dus om draagvlak en financiële steun te krijgen voor de samenwerking.

Antwoord op de onderzoeksvragen

Uit dit onderzoek blijkt allereerst dat sportverenigingen contexten zijn waar sociaal kwetsbare jeugd zich positief kan ontwikkelen, in het bijzonder wanneer aandacht is besteed aan de condities die bepalend zijn voor of kinderen en jongeren zich positief kunnen ontwikkelen (onderzoeksvraag 1). Ten tweede geeft deze thesis meer inzicht in welke elementen van de samenwerking tussen jeugdhulporganisaties en sportverenigingen belangrijk zijn voor het succes ervan. Deze zijn op te delen in vier zogenoemde *institutionele elementen* die gerelateerd zijn aan de samenwerkende organisaties, vier *persoonlijke elementen* die gerelateerd zijn aan de personen die in de praktijk met elkaar samenwerken en vijf *elementen gerelateerd aan de organisatie van de samenwerking* (Onderzoeksvraag 2).

De institutionele elementen zijn:
- De maatschappelijke en politieke context waarin de samenwerking opereert
- Het beleid van de betrokken organisaties
- De manieren van werken van de betrokken organisaties
- Het organisatievermogen van de betrokken organisaties

De persoonlijke elementen zijn:
- Attitude, ofwel de mate waarin de deelnemers de samenwerking zinvol achten
- De kennis en competenties van de deelnemers die samenwerken
- De aard en kwaliteit van de onderlinge relaties
- Eigen-effectiviteit, ofwel de mate waarin de deelnemers het gevoel hebben dat ze een verschil kunnen maken in de samenwerking.

De elementen gerelateerd aan de organisatie van de samenwerking zijn:
- Taakmanagement
- Een communicatiestructuur gebaseerd op face-to-face contact en flexibiliteit van beide partijen ten opzichte van de werktijden van de ander
- De mate waarin de capaciteiten van de participerende individuen en organisaties worden benut
- De zichtbaarheid van de samenwerking en de resultaten
- De mate waarin verbindende leiders betrokken zijn

Van de genoemde elementen gerelateerd aan de organisatie van de samenwerking blijken zichtbaarheid en verbindend leiderschap het belangrijkst te zijn bij de ontwikkeling van de samenwerking en het verkrijgen van een plek in het lokale sociaal beleid (Onderzoeksvraag 3).

Reflectie op de bevindingen

De resultaten van deze studie geven vijf nieuwe en verdiepende inzichten over intersectorale samenwerking tussen jeugdhulporganisaties en sportverenigingen. Het eerste inzicht is dat het voortbouwen op de capaciteiten van de participerende individuen en organisaties kan zorgen voor de condities die bepalend zijn voor of kinderen en jongeren zich tijdens het sporten positief kunnen ontwikkelen. Dit betekent dat de sport coaches zich blijven richten op het organiseren van de sportactiviteiten en geen jeugdhulp gaan verlenen, en dat de jeugdhulpverleners verantwoordelijk zijn voor het ondersteunen van de sport coaches bij het verzorgen van de bepalende condities.

Het tweede inzicht is dat de organisatie van de samenwerking belangrijker lijkt te zijn voor succesvolle samenwerking dan de institutionele en persoonlijke elementen. Dit betekent allereerst dat het voor financiers en managers van samenwerkingen tussen jeugdhulporganisaties en sportverenigingen belangrijk is om te investeren in de organisatie van de samenwerking. De bevindingen laten bovendien zien dat investeren in de organisatie van de samenwerking goed kan door het betrekken van leiders die (a) de doelen van en de taakverdeling in de samenwerking managen en (b) de organisaties en individuen vanuit de verschillende sectoren met elkaar verbinden.

Het derde inzicht is dat samenwerking tussen jeugdhulporganisaties en sportverenigingen baat heeft bij actoren die op twee niveaus verbindingen leggen en onderhouden tussen de verschillende sectoren. De twee niveaus zijn (a) de samenwerking tussen de jeugdhulpverleners en de vrijwilligers van sportverenigingen in de praktijk en (b) de samenwerking tussen beide sectoren op het politieke, beleids- en managementniveau. De bevindingen tonen bovendien aan dat voor het leggen en onderhouden van de verbindingen op de twee niveaus ook twee verschillende typen actoren nodig zijn. Het managen van de samenwerking in de praktijk vraagt om aandacht voor frequente informatie-uitwisseling, voor het benutten van de verschillende capaciteiten die de verschillende partijen inbrengen en voor het opstellen van een werkwijze waarin rekening wordt gehouden met de verschillen in openingstijden, doelen en organisatiestructuren. Om de sectoren ook op het politieke, beleids- en managementniveau met elkaar te kunnen verbinden blijkt het noodzakelijk te zijn om kennis te hebben van de regels, centrale paradigma's, trends, normen, waarden en manieren van werken in beide sectoren.

Het vierde inzicht is dat de maatschappelijke en politieke context waarin de intersectorale samenwerking opereert niet per definitie sturend is aan de praktijk, maar zeker ook een context is die individuen en organisaties kunnen beïnvloeden ten faveure van hun eigen ideeën. Dit proefschrift toont aan dat meer draagvlak en politieke steun voor de samenwerking kan ontstaan door (a) het bij politici, beleidsmakers en managers in beide sectoren zichtbaar maken van kleinschalige projecten waarin jeugdhulporganisaties en sportverenigingen samenwerken en (b) het betrekken van actoren die op het politieke, beleids- en managementniveau beide sectoren met elkaar kunnen verbinden. Effectieve manieren voor het zichtbaar maken van de samenwerking blijken te zijn: framing van de samenwerking als een manier om sociale problemen te helpen oplossen en het presenteren van bevindingen uit onderzoek naar de kleinschalige samenwerkingsprojecten.

Het laatste nieuwe inzicht is dat vertrouwen een cruciale rol speelt in succesvolle samenwerking tussen jeugdhulporganisaties en sportverenigingen. Het gaat dan bijvoorbeeld om

het vertrouwen dat de betrokken professionals en vrijwilligers zelf hebben in de mate waarin zij kunnen bijdragen aan een succesvolle samenwerking maar ook om het vertrouwen in de competenties van de professionals of vrijwilligers uit de andere sector. Om vertrouwen te wekken hebben de managers van de samenwerking mogelijk baat bij (a) het benutten van de capaciteiten van de betrokken organisaties, professionals en vrijwilligers, (b) het managen van de dagelijkse gang van zaken, waaronder het faciliteren van face-to-face contact tussen jeugdhulpverleners en vrijwilligers van sportverenigingen, het verzorgen van een passende communicatiestructuur en het maken van formele of informele afspraken over de rollen en verantwoordelijkheden van de participerende organisaties, professionals en vrijwilligers.

Dankwoord

Dit is hem dan. Vijf jaar lang was dit proefschrift een van de dingen waar ik bijna dagelijks mee bezig was. Dit betekent niet dat ik iedere dag achter mijn bureau heb zitten ploeteren. Integendeel zelfs, maar tijdens allerlei activiteiten speelde het in mijn hoofd. 's Ochtends op de fiets naar het werk bedenken wie nog te interviewen, in de auto onderweg naar het voetbalveld bedenken wanneer er weer wat tijd is te vinden om dat artikel af te schrijven, op een bankje terwijl Jens speelt in de speeltuin nog even nadenken over een conclusie of aanbeveling, of tijdens een etentje met Eefje of met vrienden praten over de voortgang.

Toen ik aan dit 'project' begon dacht ik dat het schrijven van een proefschrift vooral inhoudelijk een grote kluif zou zijn. Niets was minder waar. Hoewel de inhoud natuurlijk niet zomaar op papier stond ervaarde ik het vinden van tijd als veel lastiger, zeker vanwege de combinatie met een andere baan, met het op peil houden van een sociaal leven en later ook met een gezin. Ik heb wel eens tegen mensen gezegd: "Wat ben ik blij dat ik vooraf niet wist hoe pittig ik het vind om al deze dingen te combineren, want dan was ik hier waarschijnlijk nooit aan begonnen."

Het traject dat heeft geleid tot dit proefschrift heeft mij meer gebracht dan enkel dit proefschrift. Allereerst een aantal mooie ervaringen, waaronder de summer course in Rennes en de werkbezoeken naar Bergen en Warschau. Maar ook meer alledaagse dingen waar ik met plezier op terugkijk, zoals de maandagen die ik met Karlijn en Sabina heb mogen doorbrengen in die te kleine kamer aan de Leeuwenborgh. Ik mis het napraten met jullie over de mollen en de boeren op TV nog regelmatig. Daarnaast heeft dit promotietraject geleid tot een uitgebreider netwerk in de jeugd- en sportsector en heb ik via de groep Gezondheid en Maatschappij en andere afdelingen van Wageningen University kennis gemaakt met theoretische perspectieven die mij ook helpen in mijn werk op andere plekken. De samenwerking met Laurens zorgde bijvoorbeeld voor een kennismaking met sociale transitietheorieën. Hieruit volgde een studie waar ik best trots op ben en een thema waar ik de komende periode graag in verder zou werken.

Vaak heb ik vooruit gekeken en verlangd naar het moment dat ik dit dankwoord zou schrijven. Nu het zover is voelt het ook een beetje gek. Natuurlijk voel ik vooral veel blijdschap, maar het betekent ook dat een doel is bereikt en dat datgene wat ik het mooiste vind aan doelen – de weg ernaar toe – achter de rug is. Aan de weg naar dit proefschrift toe hebben heel wat mensen een steentje of een flinke steen bijgedragen.

Allereerst Sabina. Hoewel onze samenwerking moeizaam op gang kwam ben ik ontzettend dankbaar dat ik dit traject samen met jou heb mogen doorlopen. Je stelde vaak de juiste vragen of zei precies die dingen waardoor ik weer een stap verder kwam. Misschien is het beste voorbeeld nog wel dat ik niet zo goed wist welke stellingen ik moest formuleren bij mijn proefschrift, maar dat deze na een kwartiertje sparren met jou ineens op papier stonden. Ik hoop dat we in de toekomst op wat voor manier dan ook blijven samenwerken. Ik beloof dan nu alvast dat ik iets minder chaotisch zal werken en mijn deadlines zal halen, en dat dit misschien ook wel gaat lukken.

Kirsten en Maria, jullie wil ik voor meerdere dingen bedanken maar vooral voor het vertrouwen dat jullie in mij hadden om samen dit traject aan te gaan. Ik herinner me nog goed dat we ergens in november 2012 in een lokaaltje in een donkere Leeuwenborgh met de pizzadozen op tafel de aanvraag aan het afronden waren die de volgende dag bij NWO moest worden ingediend. Ik kijk ook met veel plezier terug op de inhoudelijke discussies over de

General Introduction en Discussion tijdens de ietwat warme zomer van 2018. Deze discussies hebben mijn proefschrift echt naar een hoger plan getild. En verder: Maria, doordat jij altijd bleef hameren op het zo specifiek mogelijk verwoorden van de Methoden stralen mijn artikelen en ook mijn publicaties buiten mijn proefschrift om nu meer kwaliteit en betrouwbaarheid uit. Kirsten, jouw soms wat ongezouten commentaar op conceptstukken was erg bruikbaar bij het meer to-the-point opschrijven van mijn verhaal. Wat het schrijven betreft ook speciale dank aan Catherine voor het redigeren van de teksten.

Bij dit onderzoek waren een groot aantal praktijkpartners betrokken. De kern van deze praktijkpartners waren Sanne, Carola en Nadia vanuit Rotterdam Sportsupport, Harry en Jan vanuit FlexusJeugdplein, Willie vanuit het Kenniscentrum Sport, Lyne, Wilma en Adrie vanuit de gemeente Rotterdam en Carin vanuit Jeugdzorg Nederland. Jullie hebben tijd geïnvesteerd in het opzetten van het onderzoek, het in contact komen met respondenten, het organiseren van verschillende symposia, het helpen interpreteren van bevindingen uit het onderzoek en het verspreiden van de resultaten. Voor dit commitment en jullie enthousiasme voor het thema ben ik jullie zeer dankbaar. Sanne, jou wil ik in het bijzonder bedanken. Ik vind het nog steeds fantastisch dat jij na een telefoontje waarin ik een idee opperde voor een vierjarig onderzoek naar sport in de jeugdzorg de juiste mensen bij elkaar hebt verzameld om dit ook mogelijk te maken. Speciale dank ook aan alle jeugdhulpprofessionals, vrijwilligers van sportverenigingen, Buurtsportcoaches, beleidsmedewerkers en alle andere mensen die ons een inkijk hebben gegeven in de samenwerking tussen jeugdhulporganisaties en sportverenigingen. Jullie hebben in jullie drukke agenda's tijd vrij gemaakt voor interviews of het invullen vragenlijsten. Ten slotte wil ik nog de collega's van het Verwey-Jonker Instituut, USBO en de leerstoelgroep Gezondheid en Maatschappij bedanken voor de korte en langere gesprekken over dit proefschrift. Het grappige is dat juist de opmerkingen die jullie terloops maakten, zoals "maar welk stukje van de puzzel los jij dan eigenlijk op?" en "een goed proefschrift is een af proefschrift", de meeste waarde hadden voor mij.

Omdat er gelukkig nog heel veel meer is dan het schrijven van een proefschrift. Vrienden van de Leidseweg, D.O.T. en Kampong 6, bedankt voor de nodige afleiding tijdens weekenden weg, tijdens avonden eten en in de kroeg, en tijdens heerlijke potten voetbal op zondag. Ik kijk ernaar uit om de komende jaren nog meer van deze dingen te genieten en niet meer te hoeven afzeggen omdat ik 's avonds of in het weekend moet werken aan mijn proefschrift. En Bas, superfijn dat je überhaupt nog wil optreden als paranimf. Volgens mij kon ik afgelopen zomer vanwege dit proefschrift wel acht van de tien keer niet als je vroeg om ergens wat te drinken of met de kinderen op pad te gaan.

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en ruimte die ook jij me met de nodige tegenzin toch hebt gegeven. Jens en Milan, een van de zes stellingen is aan jullie gewijd. Jullie hebben het mij soms best moeilijk gemaakt om dit 'project' tot een goed einde te brengen. Het is gewoon veel leuker om met jullie te zijn dan om zo'n boekwerk te schrijven. Hoe dan ook, wat gaan wij met z'n vieren de komende jaren nog veel mooie ervaringen hebben. En dat zonder steeds dit proefschrift op de achtergrond.

About the author

Niels Hermens was born on 24 November 1982 in Utrecht, the Netherlands. He has spent his childhood in Houten and graduated at the St. Bonifatiuscollege (Utrecht) in 2001. Then, he started the bachelor programme Leisure Management at InHolland University of Applied Sceinces, of which he graduated in 2005. Niels continued with a premaster and master programme in Sociology at Tilburg University, and also studied one semester at Boğaziçi University in Istanbul. In 2008, he graduated from the master Sociology at Tilburg University.

In 2008, Niels started his professional career as a researcher at the Verwey-Jonker Institute in Utrecht. The Verwey-Jonker Institute conducts scientific research on social issues, and much of Niels' research at this institute focused on the social meaning of sports. In 2012, he initiated the research project 'Youth, Care an Sport' which received financial support from NWO, the Dutch Organisation for Scientific Research. To carry out this research project, Niels worked two days a week at the Health and Society Group between 2013 and 2017, which eventually resulted in this PhD thesis. In 2017 and 2018 Niels was employed as a researcher and teacher at the Utrecht School of Governance (Utrecht University). At the end of 2018, he returned to the Verwey-Jonker Institute as a senior researcher.

Niels lives together with Eefje and their two sons Jens and Milan. In his spare time he loves to play football and tennis, and to spend time with his family and friends.

Niels Johannes Hermens
Wageningen School of Social Sciences (WASS)
Completed Training and Supervision Plan

Name of the learning activity	Department/Institute	Year	ECTS*
A) Project related competences			
Writing research proposal	WUR	2012	6.0
'Sport als middel voor een positieve ontwikkeling voor kwetsbare jeugd; een literatuurreview'	Dag van het Sportonderzoek, Nijmegen	2014	1.0
'Sport en jeugdzorg: 1 + 1 = 3 (in de toekomst)?'	Nationale Kennisdag Sport en Bewegen in de Buurt, Den Bosch	2015	1.0
'Facilitators and barriers for successful partnerships between youth care and community sports clubs'	European Association for Sport Management 2016, Warschau	2016	1.0
Valorisatie onderzoeksresultaten via online artikelen en vakbladen	Artikel in Sport, Bestuur en Management en in SportknowhowXL	2014 2015	0.5
Organisatie eindsymposium over onderzoeksproject voor praktijkpartners	Jeugd, Zorg en Sport, Utrecht	2017	1.0
B) General research related competences			
WASS PhD introduction	Wageningen School of Social Sciences (WASS)	2013	1.0
Systematic approaches to reviewing literature	WASS	2013	3.7
Academic Writing	Wageningen in'to languages	2014	1.8
'Mobilising local health promotion systems for equity'	EHESP French School of Public Health, Rennes	2014	8.0
Conceptual Foundations of Public Governance	WASS Masterclass	2016	0.5
C) Career related competences/personal development			
Onderzoekswerk bij het Verwey-Jonker Instituut (schrijven van voorstellen voor verschillende onderzoeken, projectleiderschap en schrijven onderzoeksrapporten)	Verwey-Jonker Instituut, Utrecht	2013-2017	4.0
Persoonlijk coachingstraject bij het Verwey-Jonker Instituut		2014-2016	1.0
Gastcolleges in Health Policy and Action en in HSO-31306	HSO, Wageningen University	2015 2016	0.75
Begeleiding masterscriptie	HSO, Wageningen University	2015	0.5
Total			**31.75**

*One credit according to ECTS is on average equivalent to 28 hours of study load