



Community Work Through Football:

To what extent do football-based interventions for adults with social care related needs connect with a community social work approach

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Overall objectives of this study:

To address:

- Football-based interventions approach to supporting adults with social care related needs.
- The overlap between these interventions and community social work approaches.
- Football-based interventions relevance to health and social care policy and practice.



Reason for researching this topic:

Previous research conducted by academics from health, mental health nursing, psychology, sport and leisure, and social policy have focused on:

- Mental health football teams (Friedrick and Mason, 2018)
- Community football teams for adults with learning difficulties (White *et al.*, 2017)
- Football reminiscence for adults with dementia (Carone *et al.*, 2016)
- Walking football for older adults (Loadman, 2019)
- Football programmes for adults in recovery from substance misuse (Magee and Jeanes, 2011)
- Plus literature on football programmes focused on wider social inclusion, community cohesion, and anti-discrimination.

...there is a lack of literature which addresses this work in the context of social care policy and practice.



What does 'football-based intervention' mean?

Interventions involving activities such as:

Grass roots football teams

Walking football sessions

Health and wellbeing programmes

Personal development programmes

Peer support groups

Reminiscence programmes

Community cohesion initiatives

Fan-led community projects

Typically run by organisations like:

Football in the Community (FitC)

Grass roots football clubs

Charities

Fan-led organisations



Approaches to community social work:

<p>BASW's (2014) <i>Code of Ethics:</i></p>	<p>Local assets</p> <p>Community organisation</p> <p>Activity for social and political change</p>
<p>Bank's (2011) three models of community work:</p>	<p>Community service planning</p> <p>Community development</p> <p>Community organisation/action</p>
<p>Teater and Baldwin's (2012) theories and concepts associated with community social work:</p>	<p>Systems approaches</p> <p>Social constructionism</p> <p>Strengths perspective and empowerment approaches</p> <p>Social goals group work</p> <p>Social capital</p> <p>Anti-oppressive practice</p>



Research Methods:



Methodology: Qualitative, cross-sectional.



Recruitment: maximal variation sampling. Emails sent to FitC schemes, grass roots football clubs, charities, and fan led groups. Twelve stakeholders were recruited via this method.



Design: semi-structured telephone interviews (30-60mins), with questions focused on the stakeholders' intervention, the groups and communities who they work with, and any links between the intervention and local health and social care agencies.



Analysis: Thematic analysis, using Braun and Clarke's (2006) 6 step approach.



Table of participants and the interventions they run:



Organisation	Participants	Interventions:
Football in the Community (FitC) programmes	6	Mental health programmes, walking football, health and wellbeing programmes, football reminiscence, older adults social groups, personal development and employment programme, offenders project, refugee and asylum seeker programme, military veterans group
Homelessness charities	3	Walking football, street football programmes, health and wellbeing programmes
Non-profit community organisation	1	Walking football, refugee and asylum seekers group, carers group, women's football group, community cohesion initiatives
Grass roots football club	1	Community project focused on supporting homeless people and tackling food poverty, community cohesion initiatives
Fan-led community project	1	Community outreach in partnership with local charities and organisations (e.g. homelessness charities, women's' shelters, and migrant rights groups)

Four core themes emerged:

- Football as a tool of engagement
- Football for developing individual wellbeing
- Football for social change
- Football's interface with health and social care



1. Football as a tool of engagement

Stakeholders referred to assets within football which can be used to engage participants:

Identity and
belonging

“I would say at least 60% of them are absolutely avid fans, love the football club, so being able to wear our shirt every single week, it's hugely important to them, **they feel part of the club.**” (P4)

Team environments

“To me the biggest thing is the anticipation...as you are walking down the street, **it's like the fan experience, that excitement, that hope, will [the club] win today?**” (P5)

Problematic
elements of football



2. Football for developing individual wellbeing

Stakeholders referred to multiple benefits for participants attending football-based interventions:

Physical health

Mental wellbeing

Social development

"So that's a 12 week health intervention, which tries to engage groups of hard to reach men in topics or into health interventions...And we cover all aspects of health. **So it's not just mental, physical or social, it incorporates all three of them.**"
(P1)



The importance of social capital:

Social capital – can lead to social networks of trust and reciprocity in communities (Putnam, 2000)

Bonding capital

“...they’ll lean on each other, they’ll understand their experiences. We do get a lot of personnel with PTSD and issues from what they’ve seen or experienced. **So it’s allowing like minded individuals to help support each other, like peer mentoring really.**” (P3)

Bridging capital

“Basically we find various ways of bringing people together from different backgrounds and **try and break down barriers using football** in various ways. It’s not our only tool, but our main tool I suppose.” (P9)



3. Football for social change

Responses to discrimination and social inequality varied across the sample:

Anti-discrimination

“it’s beyond just racism and football now, it’s about sport and equality and community cohesion issues, coaching issues, and black history.” (P9)

Social equality

“We’ve quite deliberately gone into areas where you wouldn’t normally expect football supporters to be.” (P11)



4. Interface with health and social care

Stakeholders had varied experiences of working with health and social care professionals:

Collaboration

“Its always great when we have a key worker who is particularly passionate for it, because they tend to be more influential on the people that they are working with.” (P12)

Barriers to integration

“...we guide them to a certain point and actually share that information with their key workers, so that they can then maintain the next appropriate step.” (P2)

Independence

“Especially if they are anti-football, if they are anti-owner of the football club, they can be very much ‘What could you possibly benefit to this meeting?’ and ‘How could you possibly benefit to what we're doing?’” (P1)



Approaches to football-based interventions:



Connection to football clubs can generate shared identities



Neutral space outside the clinical or statutory setting



Accessible sport and physical exercise opportunities



Promotion of social capital (bridging and bonding)



Collaboration with social care agencies and individuals' key workers



Concepts from community social work which are embedded in football-based interventions:

Asset-based approaches	<ul style="list-style-type: none">• Use of football club stadiums and facilities• Capitalisation on people's identification with football and their knowledge of football history
Community organisation	<ul style="list-style-type: none">• Alliances between football fans, community workers, and local groups to tackle social issues• Mobilisation of people and resources to meet local needs
Activity for social and political change	<ul style="list-style-type: none">• Campaigns against racism and homophobia in football and wider society• Support for local organisations: homelessness charities, women's shelters, LGBT groups, and a migrant rights organisation
Social capital	<ul style="list-style-type: none">• Bonding capital - based on shared experience (e.g. experience of mental health difficulties).• Bridging capital – based on building relationships with a diverse range of social groups (e.g. local BAME communities).
Social goals group work	<ul style="list-style-type: none">• Using football groups to bring about social inclusion and community cohesion.



Relevance to social care (a)

Duty to promote individual wellbeing under section 1 of the Care Act (2014)

- Broad principle which includes: physical and mental health and emotional wellbeing; participation in work, training, education or recreation; and social and economic well-being.
- Applies to adults accessing social care and those at risk of developing needs for care and support.
- Bio-psycho-social benefits of football-based interventions are therefore highly relevant.



Relevance to social care (b)

Duty to prevent or delay the development of social care related needs under section 2 of the Care Act (2014)

- Prevention applies to adults with 'eligible needs' and adults who are yet to develop social care related needs (DHSC, 2018).
- Local authorities asked to identify local services, facilities and resources which can support prevention (Care Act, 2014).
- Football clubs and groups are local assets which could be used to support this work.
- Football-based interventions can be situated within primary prevention.



Relevance to social care (c)

Cross-sector collaboration in the Care and Support Statutory Guidance (DHSC, 2018)

- Local authorities asked to work with ‘public health, leisure, transport, and housing services’ (DHSC, 2018).
- Though stakeholders in this study spoke of collaboration, there were also barriers preventing integration with health and social care.
- Cross sector collaboration is also promoted by *Sporting Future* (DCMS, 2015).
- A key practice example in this area is the *Get Yourself Active* programme (Disability Rights UK, 2019).
- From the perspectives of stakeholders in this study, it appears this area of practice is yet to be fully explored.



Implications of this study:

Policy:	<ul style="list-style-type: none">• Initiatives which promote collaboration between adult social care and football clubs, as well as a other sport and leisure providers.• Political and economic support which can resource the prevention agenda.
Research:	<ul style="list-style-type: none">• Development of evidence-based practice.• Studies which involve service users and social care professionals.• Research which includes the voices of members of minority gender, sexuality, and ethnic groups.
Practice:	<ul style="list-style-type: none">• There is a wider participation in sport and physical exercise from people with social care related needs than perhaps is known about.• To widen participation further, cross-sector collaboration between football clubs and adult social care agencies is needed.• Co-production initiatives.



Impact of COVID-19 on football-based interventions:

- Impact of public health restrictions on sport and physical exercise.
- Increased barriers preventing adults with social care related needs accessing activities in the community (including football groups).
- Economic impact, especially on football clubs below the championship.



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Thank you for listening.

Thank you to the NIHR SSCR for
funding this research.

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