



National Institute for Public Health
and the Environment
Ministry of Health, Welfare and Sport

Research for Policy (R4P)

A reflection tool for researchers
to enhance contributions to
policymaking

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National Institute for Public Health and the Environment

www.rivm.nl

- Independent knowledge institute
- Research and knowledge integration
- Public health, nutrition, safety and environmental management
- Support of governmental organizations



Contributions to health policy

- Not as obvious as often expected and difficult to achieve
- Interaction between researchers and policymakers is crucial

Project Improving Knowledge Utilization:

How can we enhance our knowledge contributions to health policy?



Improving Knowledge Utilization

- 3 case studies of RIVM projects: Risk Model, DHCPR-2010 and PHSF-2010
- Analysis of the research processes: Contribution Mapping (Kok & Schuit 2012)
- Identification of areas for specific alignment efforts
- Development of a reflection tool to support researchers

Area for alignment	Issues
1. Goal	Formulation knowledge question; exploration origin, 'question behind the question' and need for the knowledge products
2. Tasks and authority	Input actors (both researchers and policy-makers); responsibilities, knowledge and data exchange during process; final authority over knowledge products
3. Quality	The research method; conceptual framework, methods and data used in the research project
4. Consultative structure	Consultative structure of the project; the sharing of relevant information; the relationships between actors; double-role actors

Area for alignment	Issues
5. Vertical alignment	Interaction between hierarchical levels within the organizations; embedding of project
6. Organizational environment	Environment of research project; external conditions influencing the relationships; incidents, media events; relationships with other organizations; changing priorities and actors
7. Relevance and timing	Formulation and wording of research results; timing of delivery and presentation of knowledge products
8. Presentation	Design and structure of knowledge products; tools for the extension strategy



Conclusions

- All phases of the research process require alignment efforts
- Alignment has to be organized
- Vertical alignment is crucial
- The R4P tool offers useful alignment guidance
- The R4P tool may provide a basis for dialogue between researchers and policy-makers
- Due to the focus on the process, the R4P tool is applicable in other domains and organizations



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Thank you for your attention

The Health and Sport (HASE) Engagement Project:

Turning Evidence into Impact in a Collaborative- Partnership Project

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Content

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- 3 HASE: impact and impact timelines
- 4 HASE: Is this impact?

1. HASE: a research-policy-practice partnership

Project Aim

The HASE project aims to improve the *evidence* base for the role sport plays in engaging inactive people, and to produce information of value to those commissioning public health programmes that could potentially include sport.



Extensive Formative Involvement



HASE : A Research-Practice-Policy Partnership



From design to tailored delivery: community sport for health



2. Evidence building and pathways to impact

HASE Outcome (effectiveness) Measures

Repeated Measures, Before & After Intervention + 12 month follow up

Outcome measures

Levels of Physical Activity	IPAQ short form (SIM screening)
Levels of Sport	Single item sport measure (trial)
Health Status	EQ5D
Wellbeing	Annual Population Survey Questions

Demographic and Costs Monitoring and Evaluation

Gender, age, ethnicity, disability, socio-economic status, costs, resources

The Health and Sport Engagement Project Lifestyle Survey

HASE Process Evaluations: People, Places, Planning, Participation

Processes	Evaluation method
Understanding inactivity	Focus groups with target inactive groups <i>(32 x 1 hour focus groups, more than 250 potential participants)</i>
Understanding health knowledge of sport sector	Observations of health training for sport delivery personnel <i>(RSPH level 2 Understanding Health Improvement, MakeSportFun Workshops, on-line disability, UsGirls)</i>
Understanding community sport knowledge of public health sector	Observations of community sport training for public health delivery personnel <i>(MakeSportFun Workshops, Knowledge Exchange Activities)</i>
Understanding what works and doesn't in delivering community sport for health	Interviews (3 phase, 30 minutes telephone and one-one with deliverers and participants) and on-going observations and knowledge exchange workshops (costs / resources)

Partnership working for evidence and impact

	Researchers	Commissioners & Policy Makers	Professional Deliverers	Participants
Formative Phase (18 months) Project ideas & bid	X	X	X	X
Phase 1 (6 months) Planning Training Designing	X	X	X	X
Phase 2 (12 months + follow-up) Recruitment Delivery Evaluation	X	X	X	X

2. HASE Impact and Impact Timelines

RCUK

<http://www.rcuk.ac.uk/innovation/impacts/>

Academic impact

The demonstrable contribution that excellent research makes to academic advances, across and within disciplines, including significant advances in understanding, methods, theory and application.

Economic and societal impacts

The demonstrable contribution that excellent research makes to society and the economy. Economic and societal impacts embrace all the extremely diverse ways in which research-related knowledge and skills benefit individuals, organisations and nations.

Impact Challenges: Time and Type

“....current conceptions of ‘impact’ are problematic. The term implies one-way dissemination, a paternalistic approach to a passive public and an easily measurable phenomenon” (King and Rivett, 2015 p. 3)

“...an emphasis on demonstrating impact may actually hijack or subjugate the process of achieving impact and potentially even dilute or inhibit the positive effects of research” (Watermeyer, 2012 p. 362)

capturing “...mainly direct and relatively short-term impacts
....low emphasis on the processes and interactions through which indirect impacts may occur” (Greenhalgh and Fahy, 2015 p. 1)

ATTITUDES TO SPORT	EXPERIENCING PHYSICAL ACTIVITY	MEMORIES OF PHYSICAL ACTIVITY	SPORT HOOKS / TRIGGERS
<i>Sport has to be competitive (60+ M)</i>	<i>I've had swimming lessons when I'm older but I don't like it – [I'm afraid] (60+, F)</i>	<i>My dreadful memory is of school sports day where I always came last or fell over (60+, F)</i>	<i>Make sure there's tea (60+, M and F)</i>
<i>What do you mean by sport? it's only competitive isn't it (60+ F)</i>	<i>Because I can't swim...I'm scared of others jumping in or passing me (60 + F)</i>	<i>I was sporty when I was younger, football, cricket and played golf 4 x a wk. great but not now (60 + M)</i>	<i>Something where someone helps us (60 + , M)</i>
<i>I don't like the pain (60+, F)</i>	<i>I worried about looking out of place, arthritis, confidence, body-conscious and age. My husband died ..I was depressed (60+ F)</i>	<i>I loved swimming. I loved being able to do it. The water supports you (60+ F) at school I did it ..but then I was active working and raising 3 children (60 + F)</i>	<i>I'd be keen to do more .. a range of different things ... I'd be nervous (60+ F & M)</i>
<i>You aren't going to get us doing football and netball are you? (60 + M and F)</i>	<i>this is fun ...a good challenge and it's good to try something out. (60+F) breathing - it feels nice, the air going in (60+ F)</i>	<i>I did loads of sport in school ...enjoyed it ...but it's the age thing maybeI am keen to get back to it (60 +F)</i>	<i>Find me a partner ... (60 +M)</i>

RSPH Level 2 Award in Understanding Health Improvement

Raising awareness of public health issues

It just gave me some space to think about health ...and how what I do can link to public health issues (Sport Deliverer)

I hadn't thought about health in this way before (Sport Deliverer)

Tailoring training to local needs

.....tailored locally (it can) help provide an understanding for the person who hasn't had much involvement in health or the health sphere (Health & Wellbeing Commissioning Manager)

The Hounslow portion of that training was amazing, that was brilliant, I really liked it. I thought that it was crazy that people in Chiswick ward live on average, four years longer than people that live you know in like other parts of Hounslow for example. I'm now able to talk to kids about health in general (Sport Coach)

MAKESPORTFUN Workshops

Planning &
design
sport for health

The workshops gave us proper planning time and help
(Project Lead)

One of the key things, was being in the mix with so many people from different sports, that everyone had different stories to talk about, different experiences to share (Project Volunteer)

Knowledge
exchange

I just didn't know all these people were doing this kind of thing that's so relevant to what I do (Sport Deliverer)

Doing sport
differently

I didn't realise sport could be different (Public Health Professional)

Signposting /
referring to
community
sport for health

We need to get a working referral approach in place
(Public Health Professional)

4. HASE: is this Impact?

Partner	Impact?
Policy makers	<p><i>YES</i></p> <ul style="list-style-type: none"> • to increase participation numbers • produce best practice case studies • support the link between sport and public health
Researchers	<p><i>YES</i></p> <ul style="list-style-type: none"> • for funding, publications, conferences • for research-policy-practice collaborations
Sport coaches	<p><i>YES</i></p> <ul style="list-style-type: none"> • for (medium term) funding • knowledge / skill development
Public health professionals	<p><i>POSSIBLY</i></p> <ul style="list-style-type: none"> • raised awareness of community sport for health • improved sign posting to community sport
People living in London Borough of Hounslow	<p><i>FOR SOME</i></p> <ul style="list-style-type: none"> • increased supported opportunities to take part • questions of sustainability • health and wellbeing outcomes?

The Health and Sport Engagement (HASE) Intervention and Evaluation Project: protocol for the design, outcome, process and economic evaluation of a complex community sport intervention to increase levels of physical activity

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ABSTRACT

Introduction: Sport is being promoted to raise population levels of physical activity for health. National sport participation policy focuses on complex community provision tailored to diverse local uses. Few quality research studies exist that examine the role of community sport interventions in raising physical activity levels and no research to date has examined the costs and cost-effectiveness of such provision. This study is a protocol for the design, outcome, process and economic evaluation of a complex community sport intervention to increase levels of physical activity, the Health and Sport Engagement (HASE) project part of the national Get Healthy Get Active programme led by Sport England.

Methods and analysis: The HASE study is a collaborative partnership between local community sport delivers and sport and public health researchers. It involves designing, delivering and evaluating community sport interventions. The aim is to engage previously inactive people in sustained sporting activity for 1x30 min a week and to examine associated health and well-being outcomes. The study uses mixed methods. Outcomes (physical activity, health, well-being costs to individuals) will be measured by a series of self-report questionnaires and attendance data and evaluated using interrupted time series analysis controlling for a range of sociodemographic factors. Resource use will be identified and measured using diaries, interviews and records and presented alongside effectiveness data as incremental cost-effectiveness ratios and cost-effectiveness acceptability curves. A longitudinal process evaluation (focus groups, structured observations, in-depth interview methods) will examine the efficacy of the project for achieving its aim using the principles of thematic analysis.

Ethics and dissemination: The results of this study will be disseminated through peer-reviewed

Strength and limitations of this study

- The first mixed-method evaluation of a complex community sport intervention aiming to engage inactive people in sustained sporting activity to promote physical activity, health and well-being.
- A rigorous comparative evaluation and the inclusion of economics, both rare in evaluating sport interventions.
- A strong quasi-experimental design providing high policy interest in the findings.
- Brunel University investigators co-developed the intervention and will evaluate the project requiring continual work to ensure that close observations by those most invested in the project are balanced with the level of independence required for high-quality evidence production.
- The study does not include a control group.

publications, academic conference presentations, Sport England and national public health organisation policy conferences, and practice-based case studies. Ethical approval was obtained through Brunel University London's research ethics committee (reference number RE23-12).

INTRODUCTION

In the aftermath of the London 2012 Olympic and Paralympic Games, the sport sector is currently one priority area for increasing population rates of physical activity for health.¹ The Moving More, Living More governments group includes representation from Sport England, the Department of Health and Public Health

Sport England Get Healthy Get into Sport

Health & Sport Engagement (HASE) Project

Good Practice Guidelines Case 1

Older Age Swimming

Aim: to encourage and support previously inactive 60+ age groups to participate in swimming

FOCUS ON ACTIVE AGEING

Community sport has the potential to support active ageing by optimising opportunities for physical activity and social interaction, and enhancing health and wellbeing as people age. Swimming has much to offer older age groups (60+ years). It is a physical activity that is low impact but with potential for building cardio-respiratory function, muscle strength and flexibility. Additionally swimming offers older people a therapeutic and rehabilitative form of sport.

ENGAGING OLDER AGE PARTICIPANTS

Best practice in provision of sport for older age sport should seek to understand the nature and needs of the participants. Potential swimmers in the 60+ year age group will have different activity needs than their younger peers because they have different sports and life experiences and different sets of motivations for and barriers to participation. Experiences in delivering HASE projects suggest that:

- The best approaches to engaging older people in swimming are face-to-face communication and promotion.
- Older people may need help to overcome concerns that constrain them, such as a lack of water confidence, a complete inability to

Space to include Sport England photograph

swim, fear of falling, and embarrassment about wearing a swimming costume. They may also experience more practical barriers such as difficulty travelling to a pool easily.

- Swimming programming needs to recognise the need to offer swimming opportunities during the day and at times when pools are quiet.
- Older people welcome programmes that include opportunities to socialise with other older people to reduce experience of isolation.

SILVER SWIMMING ACTIVATORS AND AMBASSADORS

The 60+ population respond to the encouragement of key swimming coaches who understand their needs and provide them with relevant swimming activities. 60+ participants are also encouraged to swim by community leaders who promote physical activity in local leisure / recreation facilities and best practice for provision of 60+ swimming should develop effective community sport and physical activity links. A range of volunteer and buddy support mechanisms can be successful for increasing 60+ swimming. 60+ participants respond well to younger swimming activators or ambassadors who champion the positive benefits of swimming, organise and deliver swimming lessons and activities, and listen to their needs.

COMMUNITY PARTNERSHIP WORKING

Community partnership working can be particularly beneficial for effective development and delivery of older age swimming. Best practice shows a need to target partnerships between local housing associations, older age community groups, carer networks, transport providers, local swimming facilities and swimming teaching networks in relation to promoting and delivering older age swimming. Encouraging community partnership working can have positive outcomes for increasing participation in the 60+ age group through befriending, and informal support and encouragement networks from older peers who have had positive experiences of swimming and who share their stories.

ACTIVITY IDEAS

A range of informal, flexible but organised activities that are easily accessible, interesting and fun should be on offer for 60+ swimmers. This group of swimmers need to feel they have support, encouragement and guidance about where and how they can develop swimming specific skills and maintain and improve health and wellbeing.

FACILITIES, EQUIPMENT AND TRANSPORT

Access to local swimming pools, teaching staff and equipment provision can be undertaken in a collaborative way to maximise efficiency in costs and usage. Local leisure providers recognise the potential for encouraging older age swimming as part of a complete swimming service that provides for life long participation in physical activity.

NETWORKS AND CONNECTIONS

The 60+ swimming project for this Sport England Get Healthy Get into Sport campaign was managed and delivered by Hounslow Housing (London Borough of Hounslow) with support from the local leisure provider, Fusion Lifestyle. As well as developing effective working relationships between participants, Hounslow Community Transport and Fusion Lifestyle, key personnel at Hounslow Homes maintained important connections between managers of local sheltered accommodation sites as well as wider older

age community groups for effective weekly participation in swimming. The development of a programme of older age physical activities is one best practice approach to effectively increasing participation of 60+ age groups in swimming specifically and community sport more widely.

EVALUATION: PHYSICAL ACTIVITY, HEALTH AND WELLBEING OUTCOMES

Space to include overview of findings from HASE health, wellbeing and lifestyle survey and commentary on evaluation of project

FUNDING, SCALE AND SUSTAINABILITY

Space to include summary of costs / resources for this project & comment on scalability and sustainability

Impact of Research on Users? (Beresford, 2002)



Conclusion

Developing Impact Potential

**KEY QUESTIONS (Kay, 2016
in press)**

**KEY PROCESSES
(Mansfield, 2016,
forthcoming)**

Partnership, co-production and collaboration for impact

Who is impact for?

Resourcefulness for impact

What sort of impact is it?

A stance of **reciprocity** for impact

How is impact going to occur?

Structured and on-going **reflexivity** on impact

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