Workshop: The broker role in connecting the primary care and the physical activity sector

Annemarie Wagemakers, Gerard Molleman, Karlijn Leenaars & Eva Smit
A Broker role: Care Sport Connector

- The Dutch Ministry of Health, Welfare and Sport introduced Neighbourhood Sport Coaches
- 40% funded by the state; 60% is funded by the municipality or other local organisations
- Care Sport Connectors are a special form
- Defined outcome: residents participating in local sports facilities and being physically active in their own neighbourhood
## Why this research?

<table>
<thead>
<tr>
<th>Intersectoral collaboration is challenging</th>
<th>The Care Sport Connector is a new role</th>
<th>What is the role of the Care Sport Connector?</th>
</tr>
</thead>
<tbody>
<tr>
<td>A broker role is promising</td>
<td>There is no blueprint for the Care Sport Connector</td>
<td>What factors hinder and facilitate the Care Sport Connector?</td>
</tr>
<tr>
<td>Research to the broker role is limited</td>
<td>Not clear what role the CareSport Connector fulfills</td>
<td>How do Care Sport Connectors establish a connection?</td>
</tr>
<tr>
<td>Research on collaboration and impact is limited</td>
<td>Impact of broker role on PA promotion not known</td>
<td>What is the impact of Care Sport Connectors on PA promotion of participants</td>
</tr>
</tbody>
</table>

**Why is this research important?**

- Intersectoral collaboration is challenging.
- A broker role is promising.
- Research to the broker role is limited.
- Research on collaboration and impact is limited.

**Objectives:***

- To explore the role of the Care Sport Connector.
- To understand how Care Sport Connectors establish a connection.
- To identify factors that hinder and facilitate the Care Sport Connector role.
- To assess the impact of the broker role on PA promotion of participants.

**Context:**

- The Care Sport Connector is a new role.
- There is no blueprint for the Care Sport Connector.
- It is not clear what role the CareSport Connector fulfills.
- Impact of broker role on PA promotion is not known.
Research methods

Multiple case study (2014 – 2016)
- 13 Care Sport Connectors
- 9 Municipalities
The role of Care Sport Connectors

1. The referrer
2. The organiser
3. The broker
Different types of brokers
Factors that hinder and facilitate

• The broker role to establish the connection between the primary care and the sport and PA sector is promising
• Factors related to the own sector hinder the connection between both sectors
Factors related to sectors

- Lack of time and money
- Lack of knowledge about the PA offer
- Own interest
- Lack of suitable PA activities
- Lack of awareness of PA activities
- Lack of adequate PA instructors
All CSCs have established a connection between primary care and sports and physical activities.
Integral approach is promising

Differences in:

- Implementation of the Care Sport Connector policy
- Achieved connection between primary care and PA sector
### Delphi-study: Tasks & collaboration

<table>
<thead>
<tr>
<th></th>
<th>General practitioner</th>
<th>Nurse practitioner</th>
<th>Fysio</th>
<th>Dietican</th>
<th>Social work</th>
<th>MHS</th>
<th>Sport</th>
</tr>
</thead>
<tbody>
<tr>
<td>Stimulating lifestyle</td>
<td>7/13</td>
<td>6/12</td>
<td>13/13</td>
<td>9/11</td>
<td>4/7</td>
<td>4/8</td>
<td>6/10</td>
</tr>
<tr>
<td>Collaboration</td>
<td>0/9</td>
<td>0/9</td>
<td>10/10</td>
<td>4/10</td>
<td>9/9</td>
<td>4/11</td>
<td>6/10</td>
</tr>
</tbody>
</table>

- All professionals have a role to play in stimulating physical activity
- Primary care hardly refers to physical activity programs
- Primary care is not willing to collaborate regarding PA promotion
- Some Dieticians are willing to collaborate
Which citizens participate in activities?

Three recruitment strategies:

1. Newspapers, leaflets
2. General letter from city-council
3. Referred by professional (GP, fysiotherapist, welfare)

Diversity of activities:

From fit tests to all kind of courses and PA-activities
## Participants and recruitment

<table>
<thead>
<tr>
<th></th>
<th>T0</th>
<th>T1</th>
<th>T2</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fittest</td>
<td>402</td>
<td>270</td>
<td>245</td>
</tr>
<tr>
<td>Questionnaire</td>
<td>330</td>
<td>259</td>
<td>241</td>
</tr>
</tbody>
</table>
# Characteristics of participants and recruitment strategy

<table>
<thead>
<tr>
<th></th>
<th>PR</th>
<th>Letter</th>
<th>Referral</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Age (year)</strong></td>
<td>59.8</td>
<td>67.9</td>
<td>53.5*</td>
</tr>
<tr>
<td><strong>BMI (kg/m(^2))</strong></td>
<td>29.68*</td>
<td>27.73*</td>
<td>32.5*</td>
</tr>
<tr>
<td><strong>Middle circumference (cm)</strong></td>
<td>97.1</td>
<td>96.7</td>
<td>107.3*</td>
</tr>
<tr>
<td><strong>Physical function</strong></td>
<td>71.3*</td>
<td>79.0*</td>
<td>62.1*</td>
</tr>
<tr>
<td><strong>Endurance (m)</strong></td>
<td>431.6</td>
<td>474.4</td>
<td>395.8^</td>
</tr>
<tr>
<td><strong>Motivation</strong></td>
<td>9.03</td>
<td>8.86</td>
<td>6.54*</td>
</tr>
<tr>
<td><strong>Physical activity norm</strong></td>
<td>51.7%</td>
<td>68.3%</td>
<td>39.5%*</td>
</tr>
<tr>
<td><strong>Morbidity</strong></td>
<td>1.49</td>
<td>1.55</td>
<td>2.35*</td>
</tr>
</tbody>
</table>

* Significantly different from the other groups,
^ significantly different from letter
## Effect of participation

<table>
<thead>
<tr>
<th></th>
<th>T=0</th>
<th>T=1 (1/2 year)</th>
<th>T=2 (year)</th>
</tr>
</thead>
<tbody>
<tr>
<td>BMI (kg/m²)</td>
<td>30.034#</td>
<td>29.896</td>
<td>29.802</td>
</tr>
<tr>
<td>Middle circumference(cm)</td>
<td>98.614!</td>
<td>97.423</td>
<td>96.938</td>
</tr>
<tr>
<td>Experienced health</td>
<td>61.5</td>
<td>62.9</td>
<td>61.9</td>
</tr>
<tr>
<td>Morbidity</td>
<td>1.8</td>
<td>1.6</td>
<td>1.2</td>
</tr>
<tr>
<td>Squeeze force (kg)</td>
<td>58.4</td>
<td>59.6</td>
<td>59.1</td>
</tr>
<tr>
<td>Endurance (m)</td>
<td>424!</td>
<td>453</td>
<td>461</td>
</tr>
</tbody>
</table>

# Significantly different from T2;
! Significantly different from other measures
Self-management support

Factors which should be addressed:

- Motivation
- Behavioral change
- Self-efficacy
- Social contacts
- Experienced interest
- Information/education
- Knowledge of financial resource
- Physical environment
- Empowerment
- Improving experience
- Problem solving ability
- Perseverance
- Physical condition
- Goals and action plans
- Stress
- Self-monitoring
- Willingness

The connection between primary care and PA sector is too narrow, widening to well-being would be appropriate.
Conclusions

- The Care Sport Connector is able to establish a connection between primary care and sports and physical activity
- Primary care is important, but hard to involve in lifestyle activities
- Recruitment strategy is essential for reaching intended target group
- An integral approach to the implementation of the Care Sport Connector seems promising
Recommendations

- Continue the Care Sport Connector funding
- Advocate and support an integral approach for the structural embedding of the Care Sport Connector funding
- Reimburse primary care professionals for preventive work
- Stimulate a health promotion mindset among primary care professionals
- Focus on existing low-threshold physical activities
- Tune recruitment methods to the intended target group and existing PA activities
Questions?

Thank you for your attention!

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Discussion

- Recruitment of the right target group
- The best way to connect different sectors
- Added value of a broker role
- Prerequisites for appointing a broker
- Prerequisites for embedding a broker
- Brokers in different countries and health systems