

Sporting  equals

Promoting ethnic diversity across sport & physical activity

Club Membership Insight Paper

March 2012

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Club Membership Insight Paper

1. Background

Increasing sport club participation is a key objective of National Governing Bodies of sport (NGBs) as a means of developing and growing their sports. While club membership can be seen as a natural progression of sport participation, involvement varies considerably between black and minority ethnic (BME) and white communities (ASP5, 2011).

This insight paper seeks to identify levels of engagement of BME communities in sports clubs and the perceptions and barriers preventing individuals from such communities becoming members of clubs. The research provides insight into what BME communities want from sports clubs and what actions sports clubs and NGBs might take to better engage this target audience in order to drive and sustain growth in sports participation.

2. Methodology

Sporting Equals deployed a mixture of qualitative and quantitative research methods to obtain a cross section of views from the BME community. The research sought the views of both club and non club members and captured the direct views of 76 individuals from a diverse range of ethnic and religious backgrounds, as well as a BME sports club.

The report is based on the amalgamation of the findings from desktop research, review of the latest Active People Survey (APS5), focus groups, on line surveys and a detailed case study with a BME sports club. However, where the findings draw upon a particular aspect of the research this is clearly identified in the report.

The key components of the research methodology are set out below

2.1 Desktop research

The Sporting Equals literature review¹ and desktop trawl of literature established that very little research has been carried out around club membership and BME communities, however this piece of work has a direct link with the new government strategy to support doorstep sports clubs which is explored further in this paper.

2.2 Sporting Equals – BME sport club mapping exercise

This paper draws upon earlier research undertaken by Sporting Equals in partnership with KKP in February 2011² which mapped BME community sports

clubs across England. The mapping exercise identified up to 468 BME sports clubs located predominantly in regions with high BME demographics (see map on page 7). The research categorised club location and type, and set out preliminary findings on BME club membership.

2.3 Active People Survey 5

The Active People Survey is an annual telephone survey, carried out on behalf of Sport England, that is designed to collect data on sports participation amongst a sample of adults aged 16 and over, living in England. Five surveys have been undertaken since 2005/06 (APS1) to date. APS5, the latest survey, covered the period October 2010 to October 2011 and involved interviews with over 166,000 adults.

APS5 data has been analysed to give a profile of club members according to ethnicity, gender, age and working status.

2.4 Focus Groups

Three focus groups were carried out between December 2011 and January 2012 involving 29 individuals and including both club and non club members. The aim of the focus groups was to explore the perceptions held about clubs by individuals from BME groups and to identify the changes needed in order to address the barriers and improve engagement.

The focus group profiles are given below:

Focus Group Profiles

Organisation	Gender		Ethnicity		Religion		Age Range		Disability
Leicester Focus Group 18/12/2011	Male	9	Other	5	Christian	5	Under 16	2	None
	Female	1	African	1	Muslim	5	16-20		
			Indian	4			21-30		
							31-40	1	
							41-50	1	
							50+	1	
							No stated	5	
Attock Cricket Club 12/01/2012	Male	11	Pakistani	11	Muslim	11	Under 16		None
	Female	0					16-20	1	
							21-30	4	
							31-40	1	
							41-50	2	
							50+		
							No stated	3	
Nechells Focus Groups 23/01/12	Male	7	Caribbean	7	Christian	7	Under 16	1	None
	Female	1	African	1	Other	1	16-20	3	
							21-30	1	
							31-40		
							41-50	1	
							50+		
							No stated	2	

Each focus group explored three key questions focusing on identifying the issues and challenges as well as solutions. As the feedback from all three groups was similar the findings have been amalgamated in the research findings section.

2.5 Online survey

Two on-line surveys explored the experiences of both club and non club members. The purpose was to identify the barriers and issues preventing BME individuals from becoming club members and to explore what works in terms of increasing club membership. In total feedback was received from 47 individuals.

The profiles of club and non club members are set out below:

Non Club member Questionnaire Survey Profiles

Survey	Gender		Ethnicity		Religion		Age Range		Disability
Non Club members	Male	7	Asian	6	Hindu	1	Under 16		Yes - 3
	Female	6	White	2	Sikh	1	16-20	1	
			Black	3	Muslim	3	21-30	3	
			Filipino	1	Christian	6	31-40	2	
			Not Stated	1	Quaker	1	41-50	4	
					Not Stated	1	50+	3	

A mix of male and female non club members responded to the questionnaire from a diverse range of ethnic and religious and age profiles. All were involved in some form of sport or physical activity, with basketball and walking the most popular activities.

Club member Questionnaire Survey Profiles

Survey	Gender		Ethnicity		Religion		Age Range		Disability
Club Members	Male	29 5	Asian -	10	Hindu	1	Under 16	2	None
			Pakistani		Muslim	16	16-20	4	
			Asian -		Christian	11	21-30	8	
			Indian		Rastafarian	1	31-40	4	
			Black Mixed		Not Stated	5	41-50	10	
			Black				50+	6	
			Caribbean				No stated		
			White						
			Sri Lankan						
			Tamil						
			Not Stated						

The profile of club respondents was mainly male although respondents represented a wide range of ethnic, religious and age profiles.

2.6 Case study

A one to one interview was undertaken with the Chair of Attock Cricket Club, a BME Cricket Club in the heart of Birmingham, to explore how and why the club was established and to learn from their experience in reaching out to under represented communities.

3. Research Findings

3.1 Sport club types

The Sporting Equals mapping research identified that sports clubs can be categorised into two main types²:

- Mainstream sports clubs
- BME sports clubs (which serve a particular local BME profile or people from a diverse mix of backgrounds attend the club).

BME sports clubs fall into two categories:

- Informal – non structured sports club
- Formal/Affiliated – structured sports club linked to formal club structures

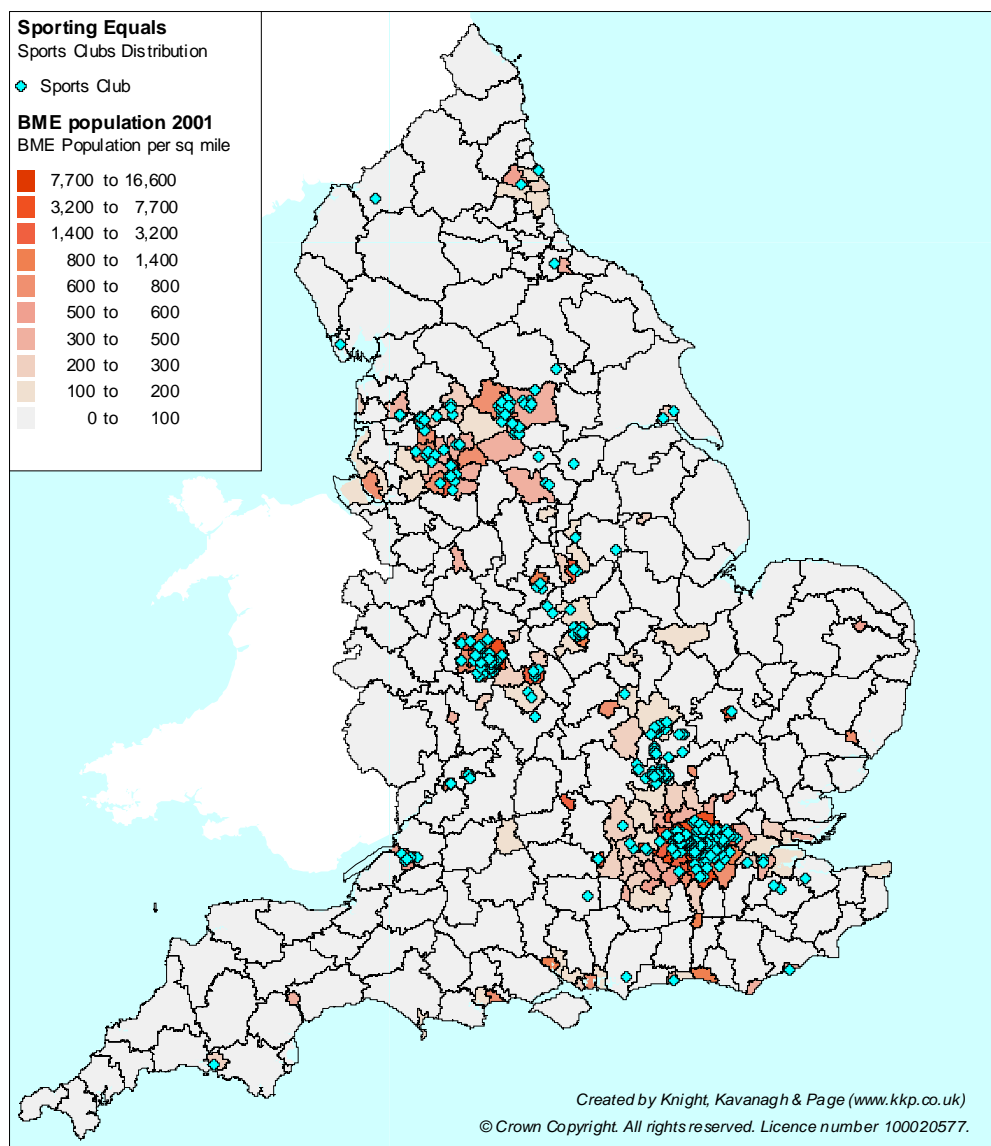
In addition there are numerous informal BME clubs which do not appear on the radar as they are not registered or formally constituted. There is also a particularly high incidence of football and cricket clubs in comparison to other sports.²

There may be some historical influence as to how and where clubs have evolved. For example, there are large Pakistani communities in certain areas of Yorkshire and Humber which have a very large cricketing presence. It is not unrealistic to speculate that, given that Yorkshire has a significant cricketing history as has Pakistan, there is a natural development of clubs with a large BME community involvement as facilities and the desire to develop are in place.

It is important to acknowledge the existence of BME clubs in the context of this research as this demonstrates the demand for sports provision from BME communities and supports the argument that some mainstream clubs may not be reaching out effectively to BME communities contributing to the emergence of a significant proportion of BME clubs.

Feedback from the research suggested that many clubs have not specifically set out to represent the BME community per se; rather they represent their local community which happens to include diverse communities contained within their clubs.²

Sporting Equals Mapping BME sports clubs and community organisations delivering sport ²



The map indicates the BME sports clubs and organisations mapped against BME demographics. A direct correlation exists between BME clubs and areas with high BME populations.

3.2 Doorstep Sports Clubs⁴

The new Government and Sport England Sport Strategy titled 'Creating A Sporting Habit for Life' (January 2012) commits £1 billion to youth sport over the next five years. The priority is 14 to 25 year olds, tackling the huge problem of young people dropping out of sport in this age group.

One of the strategy's commitments is for Street Games to lead the creation of 1000 new Doorstep Sport Clubs. The plan is to engage over 150,000 disadvantaged young people as participants and members of Doorstep Clubs, an average of 150 young people per club – although in reality clubs will be all different shapes and sizes.

Doorstep Sport Clubs will be youth led - they will have a culture that is very different from the mood and style of traditional, typically lease holding voluntary clubs. Clubs will target disadvantaged young people from the age of 14. A key target for all Doorstep Clubs is to tackle drop out from sport at the age of 16 and build in plans to encourage lifelong participation.

Doorstep Sport Clubs are multi-sport clubs that will grow participation and help combat adolescent drop-off by flexibly applying the most up to date knowledge of what works to retain the 14+s in sport. They will cater for the spectrum of sporting needs – from the keen to the casual participant.

All Doorstep Clubs will sign up to equity plans for girls, disability and BME groups. Some clubs will be girls only or disability only. They will draw on the expertise of the Street Games 'Us Girls' project to shape an offer to young women. As a rule of thumb members of Doorstep Clubs will reflect the demographics of the local area.

Doorstep sport clubs are very different in style from traditional sports clubs that cater for adults and juniors. Doorstep Clubs will be youth led: young people will set the mood and tone of the clubs and provide a welcome and friendly local sport environment for hundreds of young people. The strong youth leadership aspects to the clubs will ensure they are genuinely in sync with the preferences of young people. There will also be well managed adult and youth volunteer opportunities within each club.

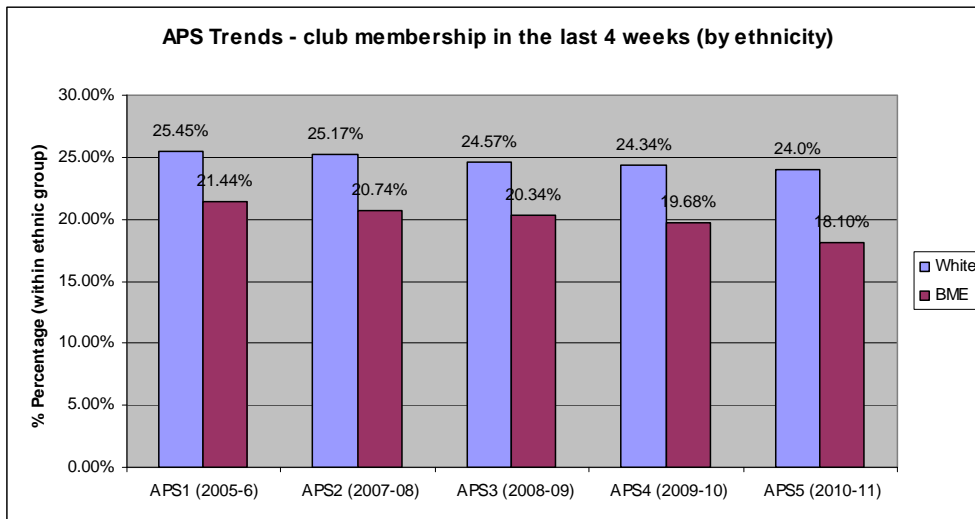
Sporting Equals will be working in partnership with Street Games to ensure that Doorstep sports clubs engage with BME communities and that sport is directly brought to communities who are otherwise disengaged from mainstream sports clubs. The doorstep clubs are likely to influence how BME informal clubs evolve in light of strong youth leadership aspects, particularly in respect of clubs reflecting local demographic profiles of areas.

3.3 Club membership profile

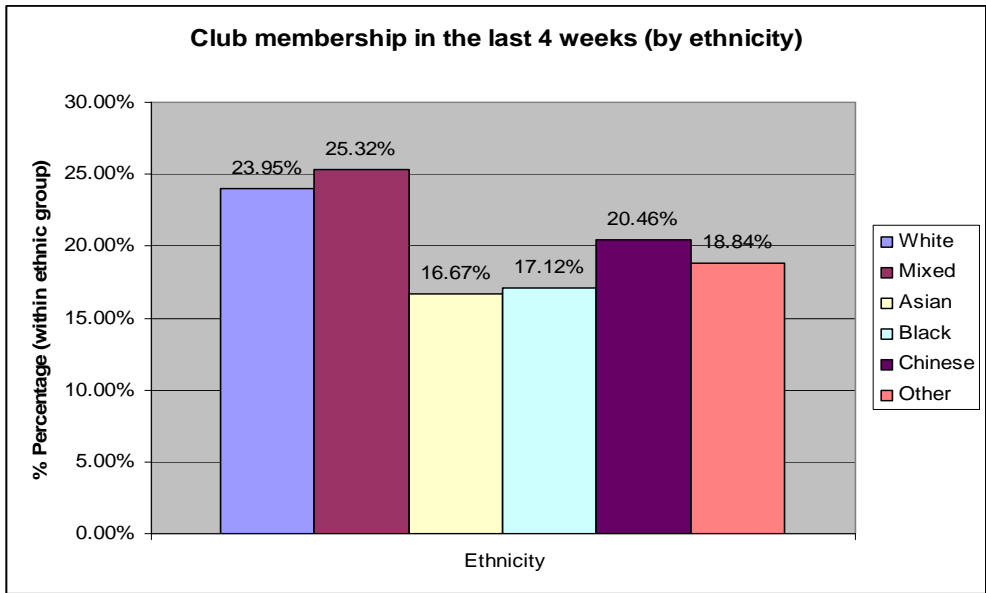
The findings in this section are primarily based upon the findings APS5³.

Ethnic profile

Club membership among BME adults has shown a steady decline between APS1 (2005-06) and APS5 (2010-11), resulting in a drop of 3.34% over this period. Membership levels have been consistently higher among the White population than among BME communities; BME adult membership of sports clubs now stands at 18.10% in comparison to 24% among White adults.

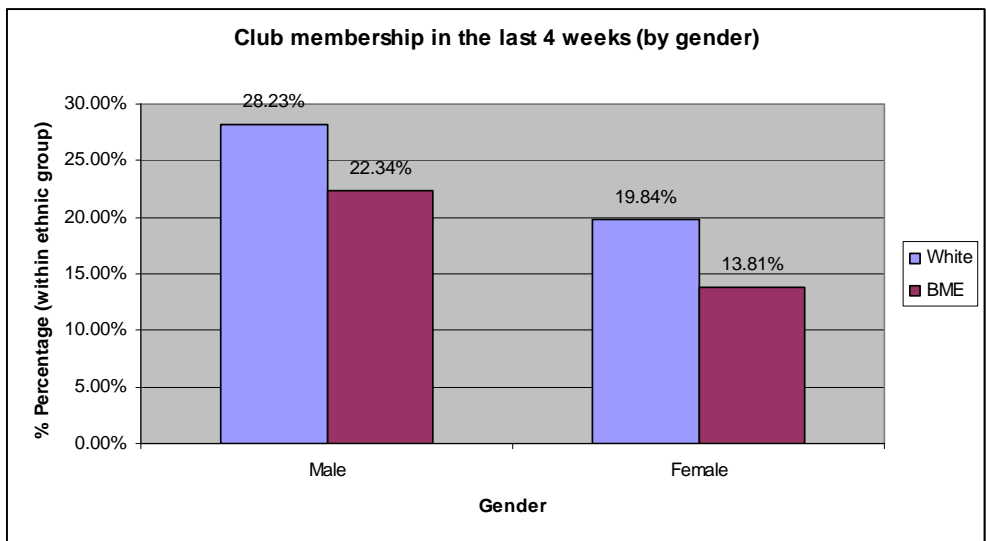


Club membership varies considerably among ethnic groups. It is highest among Mixed ethnic groups (25.32%), followed by White (23.95%) and Chinese communities (20.46%). Adults from Asian and Black communities are least likely to be members of sports clubs with rates of 16.67% and 17.12%, respectively.

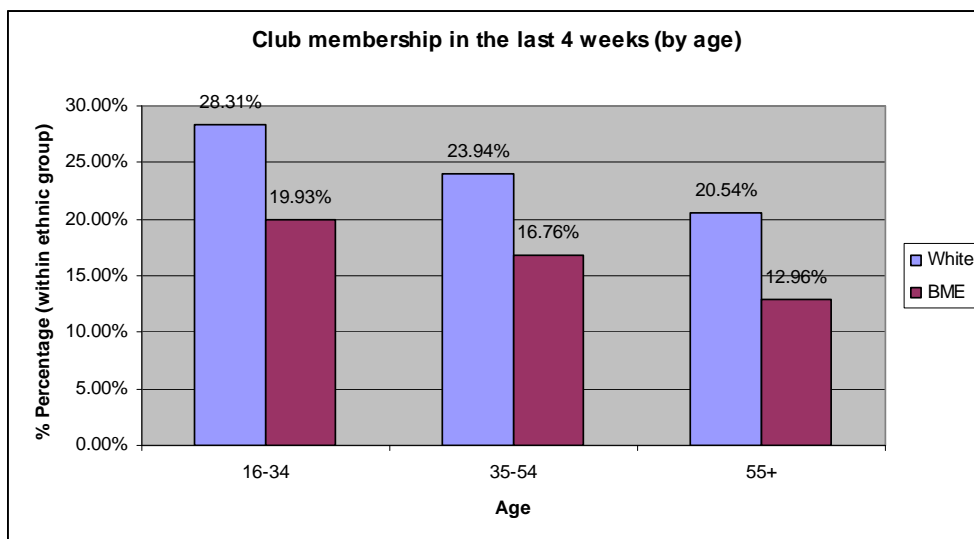


Age and gender profile

White and BME males (28.23% and 22.34% respectively) are more likely to be members of sports clubs than their female counterparts (19.84% and 13.81% respectively). Of all adults, BME females are least likely to be members of sports clubs, with a membership rate that is approximately two fifths lower than BME males and a third lower than White females.

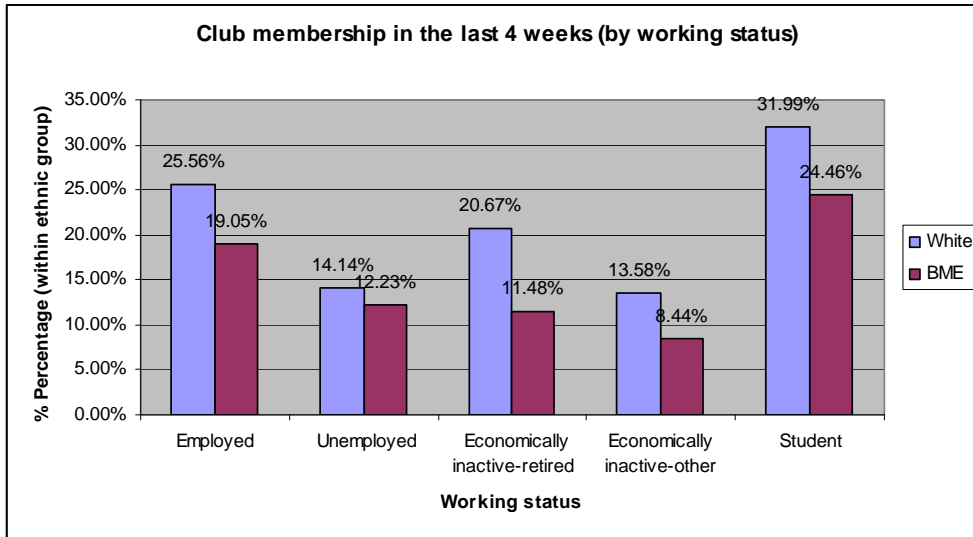


Club membership across all age groups is higher among White adults than their BME counterparts. White adults aged 16-34 are most likely to have club membership (28.31%), followed by White adults from the older age groups. Although membership progressively declines with increasing age, White adults aged over 55 (20.54%) are still more likely to be members of a sports club than BME adults of any age (19.93%, 16.76% and 12.96%).



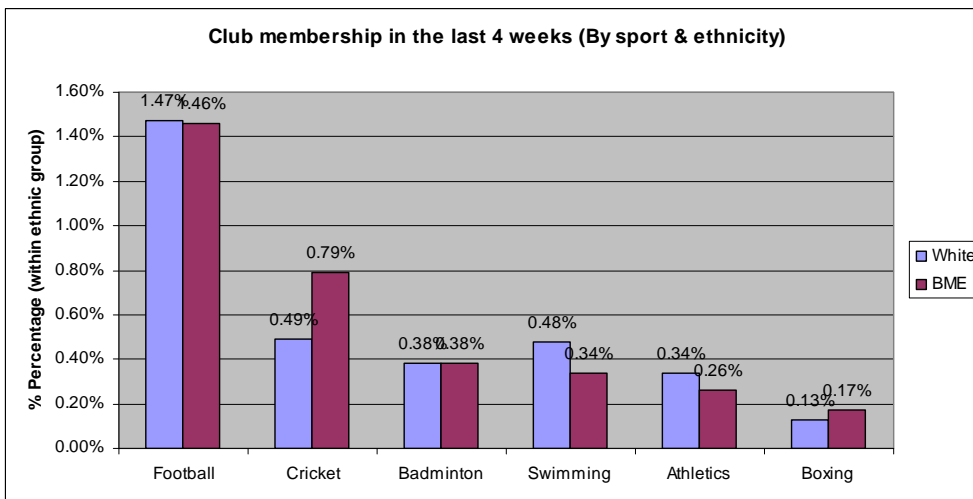
Club membership and working status

Club membership is most prevalent among White (31.99%) and BME (24.46%) students, followed by White and BME adults in full-time or part-time employment (25.56% and 19.05% respectively) in comparison to adults of other 'working status'. The greatest difference in club membership is among retired White and BME adults (20.67% and 11.48% respectively), with retired White adults nearly twice as likely to be club members than BME adults.



Club membership by sport

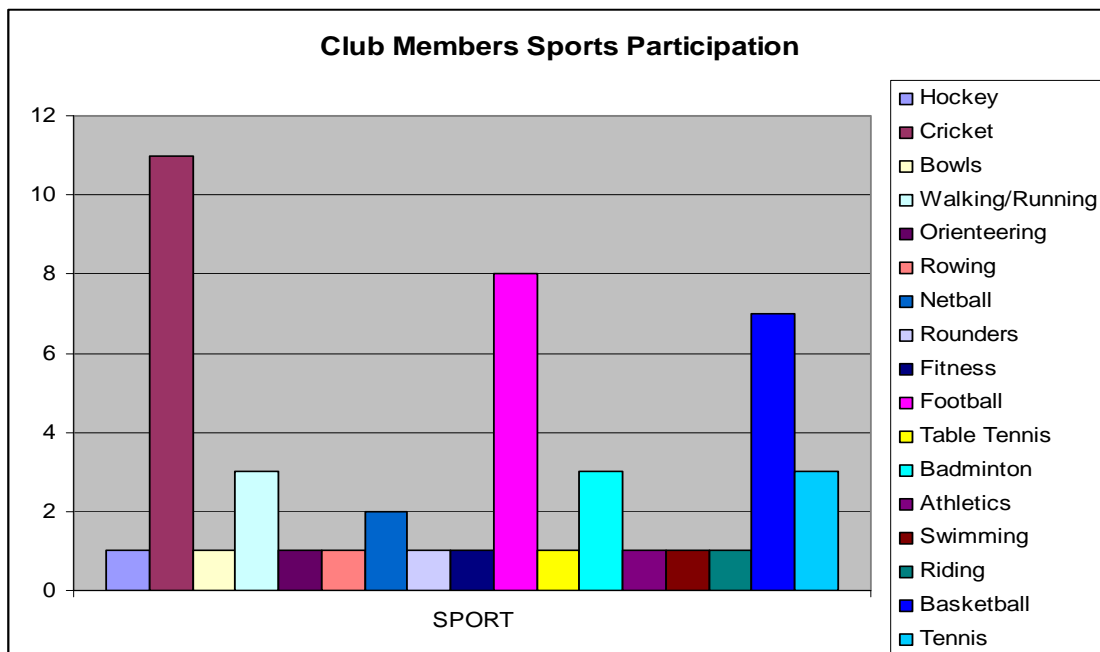
The diagram below shows club membership levels among six popular sports that have sufficient APS5 sample size. Football has the highest club membership with similar levels among White and BME adults (1.47% and 1.46% respectively). The greatest difference in club rates is in cricket with BME adults approximately two fifths more likely to be members of a cricket club than White (0.79% and 0.49% respectively). Boxing club membership is also higher among BME adults (0.17%) than their White counterparts (0.13%). White club membership is greater for swimming and athletics with rates of 0.48% and 0.34% in comparison to 0.34% and 0.26%.



Survey respondents – club membership profile

44% of the club member survey sample stated that they were members of a BME sports club. The profile of club respondents was mainly male supporting the findings of APS5 which highlights that BME females are least likely to be members of a sports club.

All of the club members participated in one or more forms of sport. The most popular activities for club members were cricket, football and basketball as shown in the graph. All respondents had been a club member for one year or more with older respondents generally being long term members.



Summary

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Overall club membership is consistently higher among the white population than among BME communities and the data profiles suggest there has been a steady decline over the past few years. Club membership varies considerably among ethnic groups and is lowest among Asian and Black communities.

Club membership is also particularly low among BME females who are least likely to be a member of a sports club. Club membership also declines with age. Popular sports such as cricket, football and boxing, however, are likely to have a higher BME club membership profile.

The creation of new Doorstep Sports Club to help engage disadvantaged young people will help support BME groups to get more involved in sporting activity. The emphasis on youth leadership and volunteer opportunities should also help support a growth in BME sports participation.

3.4 Impact of sports club cultures on BME participation

A number of issues related to the culture of mainstream sports clubs were identified which impact on BME participation, although not every issue is relevant to all BME communities.

- Lack of awareness of cultural or religious needs – 56% of club members felt that clubs were insensitive to cultural/religious issues. For example not recognising the need for female only sessions, particularly to increase participation among Asian communities, the need for female lifeguards to facilitate women only swimming sessions, consideration of prayer timing, and privacy in changing facilities.
- Lack of language sensitivities – failing to recognise the language needs of local communities results in lack of participation.
- Traditional afterschool programming – the concentration of after school activities between 4 and 6pm often limits the involvement of Muslim young people many of whom attend mosque at this time.
- Drinking culture of sport – this can be particularly off putting to some BME communities where drinking is not a part of their culture and therefore feel they will not fit in if they avoid drinking and socialising aspects of a lot of sports clubs.
- All white establishments/lack of membership diversity – the lack of visible BME members, staff and role models often prevents people joining as the club is perceived to be non welcoming.
- Lack of progression – the lack of visible progression pathways for participants and where to go for support.
- Lack of robust equal opportunities policies – failure to incorporate sufficiently robust equal opportunities policies in recruitment practices can restrict opportunities for BME communities to get involved as volunteers or staff.
- Favouritism in development of elite athletes – clubs are seen to be selective in the people they support and take forward to elite level. Issues around favouritism, social circles and access to funding were particularly mentioned by focus group respondents.

3.5 Perceptions of mainstream sports clubs

Many BME clubs emerge either because mainstream clubs are not engaging with the wider community or the community wants sports provision locally. Often they evolve out of an informal group of people playing and grow according to the support and finance they can access. There are also examples of leagues dedicated to the BME community, which reflects the issue that mainstream clubs are not perceived as open and accessible.

Clubs with large BME membership are perceived to cater better for the needs of BME club members, while those with smaller numbers give less priority to this area. In this research over half of survey respondents felt that mainstream clubs did not meet the needs of the wider community.

The research identified a number of negative perceptions of mainstream sports clubs, held by some people from BME communities that act as barriers to club membership.

- Perception of racism - racism was a recurrent issue identified throughout the research. Mainstream clubs were perceived to be 'elite', all white establishments where people didn't feel they would be welcome or comfortable. BME respondents felt that many people from their communities thought they would be discriminated against because of their ethnic background.
- Perception of inequality in opportunity - there is perception that black youth are not given equal opportunities to expand into the wider fields of sport at all levels both as participants and through employment, and that clubs are not interested in supporting people from BME communities. This perception is a result of the lack of BME involvement in management and leadership positions in the sport sector.
- Perception of social class affiliation of certain sports – in certain sports membership is perceived to be 'exclusive' and based in favour of specific social classes and networks. For example golf and cycling clubs appear to be dominated by more affluent people from the middle to upper classes.
- Perception that sports clubs are primarily located in affluent suburbs – due to the perceived location of sports clubs they are felt to be inaccessible to BME communities which are mostly concentrated in inner city areas. The alien environment, feeling they will not fit in with the 'class' and the lack of ability to fund travel to these locations on a regular basis can all act as barriers to participation.
- Perception of the purpose of sports clubs – perceptions are often held that the main aim of clubs is to promote organised competition and sport progression therefore targeting elite groups and not ordinary participants,

particularly in sports such as swimming and cycling. Almost a third of survey respondents (non members) stated they were not aware of the benefits of becoming a club member while most saw membership as related to organised sport.

If mainstream clubs put in place effective engagement strategies this could help break down some of these perceptions. .

3.6 Practical issues and barriers to club membership

- Lack of relevant information – marketing and promotion is not reaching the wider community and people from BME communities are not getting access to opportunities due to lack of information about club membership, its benefits and what it means to be a ‘club member’. One respondent stated that he knew nothing about joining a club and its advantages. If individuals can’t see the benefits, cost becomes even more of a barrier as they are not willing to commit financially to something they do not see the value of. Older people in particular and people with language difficulties or without access to the internet often face the greatest barriers.
- Cost and affordability – cost of membership is a big barrier for many people, a point which was repeated throughout the research. Pricing and affordability were among the key challenges for many users of local authority facilities, especially in relation to group activities where discretionary pricing is not recognised. It is interesting to note, however, that the Attock Cricket Club (pre-dominantly a BME club) charges a membership fee which parents are happy to pay. This further highlights the issue around perception of cost and that clubs need to market fees as ‘affordable’ for the wider community.
- Location of sports clubs – the location of sports clubs can be a challenge for many people as it is difficult for them to get to venues outside their own localities. BME communities are usually located outside of areas where clubs operate and often transport is a major issue. People can’t afford to pay for transport to get to sports activity and at times personal safety is also an issue, due to location and/or timing of activity.
- Lack of BME role models – as there is a lack of visible BME role models (as participants, coaches and managers) within clubs people are more hesitant about becoming club members, further exacerbating the issue of ‘all white’ establishments’.
- Other issues highlighted included lack of time and work commitments.

The following case study exemplifies some of these issues as well as the challenges that exist within BME communities themselves.

Case study – Mohammed Naz, Attock Cricket Club, Birmingham

Attock Cricket Club started off as an informal club, but is now affiliated and has club mark status. Mohammed explains, *'It has been challenging to get to this stage as we needed a lot of support from within the community and now have a dedicated team of volunteers who support and promote the club to the wider community. The club has developed over the years, however, it has taken us a lot of time and effort to get to where we are today. The support of a dedicated team of volunteers has enabled us to achieve our aspirations of competing in the Asian Cricket League and developing our young talent.'*

We are often sidelined as we are seen as a BME club and therefore don't necessarily get access to funding and support. Our club, however, provides an important vehicle for engaging young people and keeping them off the streets. It provides young people with a place where they can socialise, gain skills and build confidence in a safe environment. A lot of young people have become role models and some have continued supporting the club as it has developed.

We have found that the easiest way to engage communities is to get parents on board. Parents need to see the value of a club particularly if they are paying membership fees and the easiest way is to get them involved as volunteers. However, the wider benefits need to be explained in light of working with young people and making a difference to the community.'

Attock Cricket Club identified the following barriers to participation:

- **BME culture** - a lot of Asian families give more precedence to education than sport and don't particularly value sport as a career. Parents are therefore often reluctant to commit to dropping off and picking up children from clubs. The benefits of getting involved in sport such as health, fitness and confidence need to be explained to parents to obtain 'buy-in'.
- **Cultural awareness** - more needs to be done within mainstream clubs to raise awareness of issues such as prayer, dress, timetabling and to work with communities to help raise the profile of sport.
- **Financial** - a lot of parents can't afford to transport their kids to a club regularly so membership fees need to be kept affordable.
- **Timing** - a lot of young people attend mosque after school so it is important to consult with parents regarding timing.

The key is trying to secure volunteers and role models from within the BME community and to engage parents to help encourage participation and involvement.

3.7 Club membership and increased sport participation

Overall, both club members and non members felt that club membership encouraged greater participation in sport.

- 76% of non club members stated that being a member of a club would help increase their participation levels. The reasons given included:
 - Increased motivation to step up activity
 - Greater flexibility in attendance
 - Increased self confidence

- 82% of club members confirmed that being a member of a club had contributed to increased participation levels. The following reasons were given:
 - Opportunity to play on a regular basis
 - Opportunity to coach regular members
 - Opportunity to take part in competitions
 - Opportunity to pass on experience and nurture others
 - Playing with other people helps develop skills to a higher standard
 - Membership encourages people to work harder and to reach their goals
 - Membership helps to increase confidence as a player
 - Membership facilitates the development of teams and team work

3.8 Reasons for joining a sports club

Club respondents identified a number of reasons for joining a club as well as a number of benefits associated with being club members. These can be categorised into four key areas: social, community, physical health and personal development.

	Reasons for joining a club	Benefits of being a club member
Social	Make new friends Have fun Meet people Recreational Hobby Interest in sport	Enjoyment Social environment to relax Meeting new people Get to travel and compete Make friends Part of a club camaraderie Helping young people to develop Helping others
Community	Helping youth Working for the benefit of the community Family Involvement	Helping young people Helping others
Physical health	Keeping active Keeping fit	Meet new challenges Lots of competition

	Progress in sport	Being active Keeping fit and healthy Improving health and fitness
Personal Development	Becoming a coach Play in competition Develop skills Build confidence / communication Help progress as an athlete	Meeting individual goals and aspirations Employment opportunities Developing transferable skills

3.9 Increasing club membership levels

As part of the research respondents were given the opportunity to identify possible solutions to address the issues highlighted. Their responses are summarised below:

- **Recruitment** – encourage staff and volunteers to recruit new members outside the usual circles and promote opportunities to the wider community.
- **Marketing & promotion** – this needs to be wider, e.g. through community centres, places of worship and ethnic media to maximise exposure of sports opportunities. Marketing should include more local information, greater publicity and advertising, use of positive images and role models including features on people from diverse ethnic groups.
- **Facilities** – good standard facilities, better changing rooms, flexible opening times, free induction and taster sessions.
- **Inclusiveness** – increased cultural awareness through consultation with local communities to identify concerns and how these can be addressed. Engage young people from specific religious backgrounds through building relationships with parents.
- **Role models** – increased and more effective use of BME role models to help break down barriers and perceptions of ‘all white’ establishments.
- **Membership benefits** – the benefits of club membership need to be repackaged so people understand what is involved with being a club member, what they get out of it and the advantages of buying into this service. This needs to be marketed appropriately to different segments of the community e.g. for women and girls – female only sessions, crèche availability etc. For older people – access to someone who speaks a community language, flexible clothing requirements.
- **Affordability** – along with promoting benefits, cost should reflect value for money and fees should be kept affordable. A good way of engaging BME

groups initially would be to offer incentives to new members along with taster sessions to help break down barriers.

- **Stronger sport structures** – increased engagement between mainstream and BME clubs e.g. sharing facilities, joint events etc. There also needs to be improved communication and co-ordination between local government, schools, clubs and communities about increasing sport participation and how people can be supported who want to participate in sport. One respondent identified the need to support school tournaments and to raise the profile of clubs in schools.
- **Selection processes** – to avoid preconceptions of ‘favouritism’ and lack of opportunity for BME communities selection processes for higher level sport participation should be open and transparent.
- **Equal opportunities** – clubs should endeavour to increase BME involvement in management, leadership and governance positions as well as giving opportunities for BME individuals to hold key volunteer positions. Visibility is key to breaking down perceptions around ‘exclusivity’ of club membership and access.
- **Staff training** – train staff so they are aware of what to do in the event of harassment, how to recognise and address discriminatory behaviour and how to promote equality of opportunity.

Best practice & learning from the mapping research²

Recruiting new members - the most successful way to recruit new members is through word of mouth via family and friends. The ethnic media, on line advertising, local press and recommendations from GPs and other local forums are also successful ways of engaging BME communities.

Quality of sport provision - research identified that people are prepared to travel reasonable distances if the sport and physical activity on offer is deemed to be of good quality. It is, however, difficult to determine whether this was due to performance or because it might be the only appropriate opportunity in the area.

Volunteer retention - volunteers who are managed well and are offered development opportunities are likely to be retained regardless of whether the club has a high BME membership or not.

Increasing participation among women and girls - women and girls are less likely to participate in sport. One respondent stated that ‘we all have a clear reflection of the ethnicity breakdown of our community but find female participation difficult to sustain’. Some clubs indicated that they have recruited a female specific sports officer to overcome barriers, although others claimed that

they would like to do this but cannot afford to do so. In one instance the ladies provision has now developed into its own club.

Summary

The research suggests that issues around racism, equal opportunities and social status all perpetuate the negative perceptions of sports clubs.

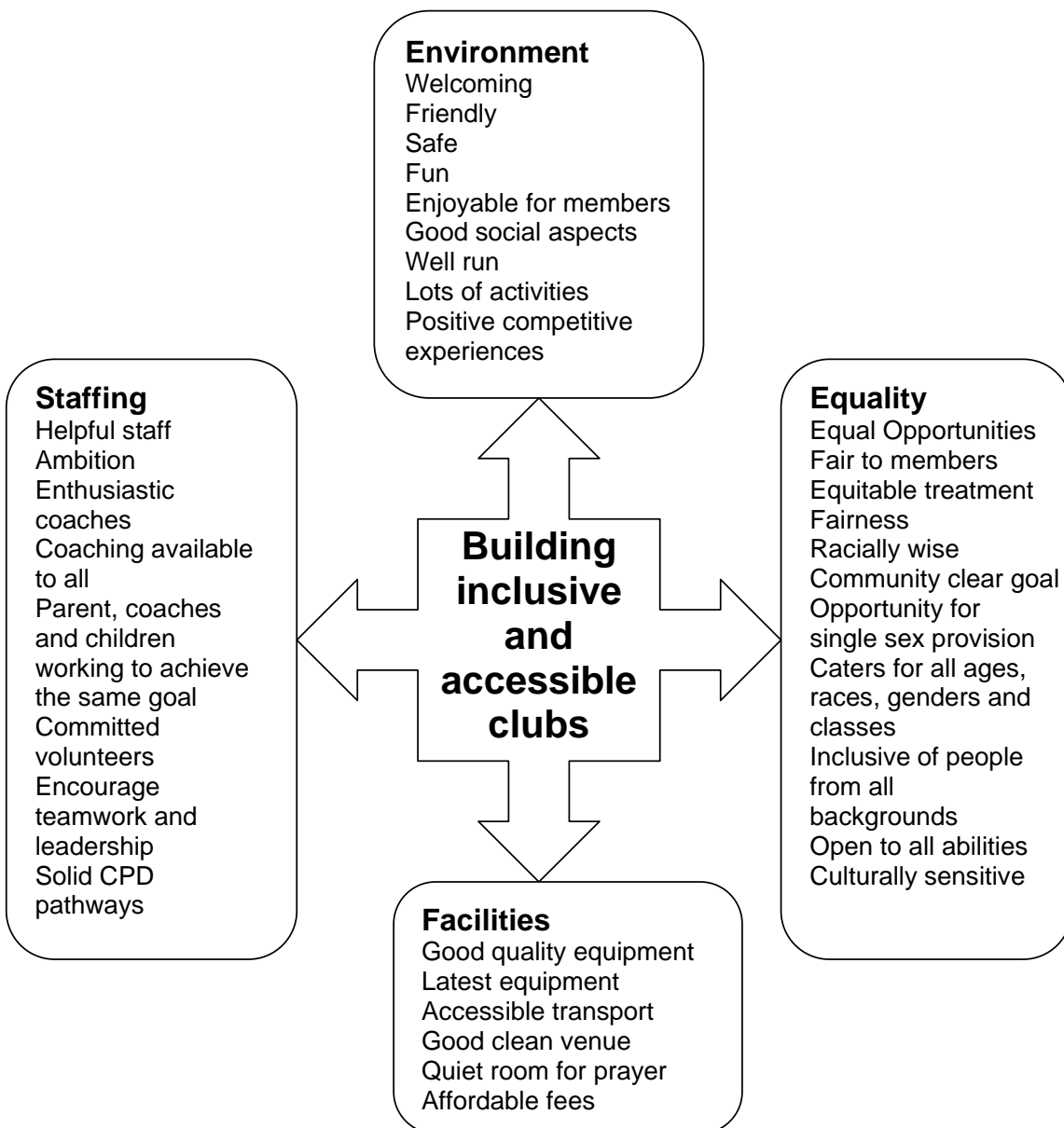
The main barriers include the lack of information, affordability, understanding of the benefits of being a club member and the need for culturally sensitive services. The lack of role models and visible BME involvement in leadership positions in sports club also hinder club membership.

Non club members generally recognise that club membership is likely to increase participation levels, however, feedback suggests that most don't understand the benefits of club membership. There is a perception that clubs are for organised sport competition and a lot of people feel that more can be done by clubs to meet the needs of BME communities.

Club members, however, have relatively positive experiences leading to increased participation, confidence and participation in the social aspects of membership. More needs to be done, however, particularly around marketing, use of positive imagery and engagement with BME communities.

4. Building inclusive and accessible clubs

The following is a diagram of the key components to building inclusive and accessible clubs based on feedback from respondents. The four key deliverables are: informed staff, positive environment, equality of opportunity and good quality, affordable facilities. BME respondents particularly emphasised equality, inclusion and culturally sensitive services.



5. Conclusion

Sports clubs can be categorised as either a mainstream sports club or a BME sports club (which serves a particular local BME profile or a diverse mix of backgrounds attend the club). BME sports clubs exist in areas of high BME demographics and can be either formal, affiliated or informal, many of which do not appear on the radar as they are not registered.

There is also a higher incidence of BME football and cricket clubs compared to other sports. There may be some historical influence as to how and where clubs have evolved in light of where certain communities are located and access to facilities. However this does raise further questions around why BME clubs evolve and whether mainstream clubs are reaching out to BME communities.

The new government strategy which supports Doorstep Sport Clubs should support the informal nature of BME involvement in sport as they are youth led. The strong youth leadership aspects of the clubs will ensure they are inclined to the preferences of young people. Adult and youth volunteer opportunities will also be managed differently which should help support BME involvement in these areas.

Active People data suggests that club membership is consistently higher among the white population than among BME communities and has steadily declined over the past few years. Club membership varies considerably among ethnic groups and is lowest among Asian and Black communities. Club membership is particularly low among BME females. Club membership also declines with age. Popular sports such as cricket, football and boxing, however, are likely to have a higher BME club membership profile.

The research suggests that perceptions around racism, equal opportunities and social status all perpetuate the negative perceptions of sports clubs. Addressing these issues is among the key priorities. Other barriers to club membership include the lack of information, affordability, understanding of the benefits of being a club member and the need for culturally sensitive services. The lack of role models and visibility of BME people in leadership positions in sports club also hinder club membership.

Non club members generally recognise that club membership is likely to increase participation levels however feedback suggests that most don't understand the benefits of club membership. There is a perception that clubs are for organised sport competition and a lot of people feel that more can be done by clubs to meet the needs of BME communities.

Although club members have a relatively positive experience they feel more needs to be done particularly around marketing, use of positive imagery and engagement with BME communities.

To increase participation among BME communities it is important to build inclusive and accessible clubs. This includes having informed staff, developing a positive environment, ensuring inclusion and culturally sensitive services, including equality of opportunity and providing good quality affordable facilities.

6. Recommendations

- Mainstream clubs, particularly those located in high BME demographic areas, to establish wider engagement strategies to help break down negative perceptions and work towards a more diverse and culturally aware workforce.
- Efforts may be better concentrated on creating more informal clubs, similar to the doorstep clubs identified in the new government strategy for youth and community sport. Organisations can work with Sporting Equals to support this initiative.
- Repackage club services and clearly identify the benefits and advantages of being a club member so BME communities understand what is involved. Taster sessions and open days may help in encouraging people from BME communities to get involved.
- Target specific initiatives to encourage women and girls from BME communities to become club members. There is also a need to target greater club membership from both Asian and Black communities.
- Review marketing strategies to enable them to change the perception of clubs through positive imagery and role models.
- Maintain affordable membership fees to ensure accessibility for a wider group of people.
- Build relationships with parents to enable them to see the value of their child taking part in sport. A good way of doing this would be through schools and educational establishments and linking clubs into afterschool activity.
- As club membership decreases with age, clubs need to try and sustain membership through support mechanisms such as opening up routes for volunteering and utilising existing members as role models.
- Clubs should aspire to working towards building inclusive and accessible clubs with a strong emphasis on equality of opportunity, inclusion and provision of culturally sensitive services.

References

1. *A Systematic Review of the Literature on BME communities in Sport and Physical Recreation, Leeds Met University, Sporting Equals & the five Sports Councils, July 2009*
2. *Sporting Equals – Mapping of Community Sports Clubs, Knight Kavanagh & Page (KKP), Feb 2011*
3. *Active People Survey 5 (Oct 2010-Oct 2011)*
4. *1000 Doorstep Sports Clubs, Street Games and Sport England, February 2012*

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Sporting Equals Research Team

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