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Scelles, Nicolas , Inoue, Yuhei , Perkin, Seth  and Valenti, Maurizio  (2024) Social impact assessment of corporate social responsibility initiatives: evaluating the social return on investment of an inclusion offer. *Journal of Business Ethics*. ISSN 0167-4544

**DOI:** <https://doi.org/10.1007/s10551-024-05786-w>

**Publisher:** Springer

**Version:** Published Version

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**Additional Information:** This is an open access article which appeared in *Journal of Business Ethics*, published by Springer

**Data Access Statement:** The data are available in the article and the supplementary material.

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# Social Impact Assessment of Corporate Social Responsibility Initiatives: Evaluating the Social Return on Investment of an Inclusion Offer

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Received: 29 October 2023 / Accepted: 25 July 2024  
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## Abstract

This study addresses the growing interest in the social impact assessment of corporate social responsibility (CSR) initiatives. Using the benefit (value) transfer approach, this study seeks to demonstrate how the social return on investment (SROI) of a CSR inclusion initiative promoting disability sport participation can be assessed. Literature on CSR inclusion initiatives, social impact measurement, disability sport participation and disability interventions/organizations was reviewed and compared. This helped identify the stakeholders and social outcomes to include, and the assumptions for the financial proxies and beneficiary percentages. Based on data provided by the Rugby Football League in England, an application to Inclusion Rugby League—a CSR inclusion initiative promoting disability sport participation—was then conducted. The SROI of Inclusion Rugby League is 3.39:1—a social return of £3.39 for £1 invested. Our research quantifies the positive social impact of a CSR inclusion initiative in monetary terms, providing insights for assessing SROI. This study informs future research on the social impact assessment of CSR initiatives, offering valuable guidance for organizations and their managers in making a case for further investments in CSR. Moreover, it encourages potential funders to engage in CSR initiatives.

**Keywords** Physical activity · Disability sport · Social value

## Introduction

Many organizations around the world have engaged in corporate social responsibility (CSR), which entails the “policies and practices of corporations that reflect business responsibility for some of the wider societal good” (Matten

& Moon, 2008, p. 405). However, there is little evidence of social impact from CSR (Walker et al., 2017), leaving the central question of whether CSR initiatives provide the societal good that they promise largely unanswered (Barnett et al., 2020). Instead, much of the work on CSR has focused on the financial benefits for the organization implementing it (Vishwanathan et al., 2020; Walker et al., 2017). That is, researchers primarily assessed the financial impact of CSR on a firm’s revenue and profit, as opposed to the social impact of CSR on the wider society and communities, as well as human resource outcomes (Barnett et al., 2020). This focus on deploying CSR for financial benefits can be problematic partially because when consumers believe an organization implements CSR for its own interest, the initiative could negatively influence consumers’ attitudes toward the organization (Walker et al., 2010). In addition, by focusing on firm financial performance, scholars have missed an opportunity for making “the tremendous resources continuously devoted to CSR scholarship more effective, so that the good intentions of business can better be realized by society” (Barnett et al., 2020, p. 939). To overcome such negatives, there is a need for CSR researchers and organizations

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to objectively evaluate the extent to which CSR programs have benefitted society and generated social impacts (Barnett et al., 2020; Walker et al., 2017).

The present manuscript focuses on the social impact assessment of a CSR initiative promoting inclusion practices (hereafter “CSR inclusion initiative”). Inclusion represents an appropriate focus for advancing knowledge on the social impact assessment of CSR, as it is increasingly important within society and there is a growing body of literature addressing the social impact of inclusion initiatives (Grabowski et al., 2024; Herrera, 2016; Mertens, 2021; Mor Barak, 2020; van der Westhuizen & Visagie, 2024). This literature suggests the benefits of inclusion initiatives in terms of achieving lasting social impact (Herrera, 2016), promoting social justice (Mertens, 2021; Mor Barak, 2020) and active citizenship (Grabowski et al., 2024), and wider social transformation through policy implementation (van der Westhuizen & Visagie, 2024). Although such benefits underline the significance of inclusion initiatives, the literature has not adequately considered their broad impacts on participants and communities (Grabowski et al., 2024). More generally, there is a limited understanding of how the social impact of CSR inclusion initiatives can be measured. This highlights a significant knowledge gap because, despite their importance, CSR inclusion initiatives are often overlooked in part due to the lack of an agreed method for assessing and evidencing their impact beyond financial performance (Barnett et al., 2020).

To fill this gap, a methodological challenge is to calculate the overall social impact of CSR inclusion initiatives and derive a value capturing such impact, which helps organizations evidence and communicate on the (positive) value of CSR inclusion initiatives in a way that is accessible and appealing to policymakers. We therefore apply the social return on investment (SROI) method (Hall et al., 2015). SROI is the ratio between the monetized social outcomes derived from an intervention and the financial inputs that led to these social outcomes. In other words, SROI indicates the social return expressed in monetary terms for each dollar, euro, pound or other currency invested. For example, a ratio of 3:1 indicates that an investment of \$1 delivers \$3 of social value.

There is a growing interest in SROI across sectors because (public) funding increasingly requires the demonstration of social impact, with the use of SROI being explicitly requested in countries such as the United Kingdom (UK) (Miller & Hall, 2013). Compared to other types of impact measurement practices (see the literature review section for further details), SROI enables making intangible social impacts more visible and evidencing why organizations and governments should consider investing in CSR/social initiatives through the demonstration of a monetary value (Ashton et al., 2024; Bosco et al., 2019).

Given the growing importance of SROI to showcase social impact and justify investment (Hall et al., 2015), it is paramount that management scholars understand and engage with this approach, especially in relation to assessing and demonstrating the social impact of CSR initiatives. Nevertheless, the application of SROI to the social impact assessment of CSR initiatives has been limited despite its recognized utility for demonstrating the social impact of corporations and their activities (Nicholls et al., 2012).

The purpose of this study is to demonstrate how the SROI of a CSR inclusion initiative can be assessed by exploring and applying relevant social outcomes. This is illustrated through a CSR inclusion initiative targeted at supporting people who experience disability in sport. In this setting, SROI is underused, with only a few non-academic reports (Bain & Chin, 2016; Company, 2016; SiMPACT Strategy Group, 2015) addressing the SROI of disability sport participation to date. Guided by the benefit (value) transfer approach, our specific objectives are to: (1) review evidence about the stakeholders and social outcomes included for the assessment of CSR inclusion initiatives, social impact, disability sport participation, and disability interventions/organizations; (2) establish a list of stakeholders and social outcomes for assessing the SROI of a CSR inclusion initiative promoting disability sport participation; (3) select appropriate financial proxies for the social outcomes based on a conservative approach; (4) derive a list of components for assessing the SROI of a CSR inclusion initiative; and (5) demonstrate the assessment through its application to Inclusion Rugby League delivered by the Rugby Football League (RFL) in England in 2021.

By achieving these objectives, we intend to make two contributions. First, our study advances knowledge on the monetary assessment of the social impact of CSR inclusion initiatives. Second, it demonstrates the process of conducting SROI using the benefit (value) transfer approach applied to a CSR inclusion initiative. The process presented in this manuscript can be adopted to inform the social impact assessment of other CSR (inclusion and non-inclusion) initiatives.

## Literature Review

### CSR and Inclusion Initiatives

CSR is a multifaceted concept that consists of different dimensions (Carroll, 1979; Clarkson, 1995). Clarkson (1995) argued that the multidimensionality of CSR can be assessed through the application of a stakeholder framework. Building upon this, subsequent studies measured CSR using the Kinder, Lydenburg, Domini (KLD) data that reflects corporate attention to different stakeholder issues (Harrison

et al., 2023; Inoue & Lee, 2011). Specifically, the following five categories of the KLD data have been commonly used (Inoue & Lee, 2011): (1) employee relations, (2) product quality, (3) community relations, (4) environmental issues, and (5) diversity issues. Of them, the fifth dimension is most relevant to the context of the current investigation and is concerned with how an organization incorporates diversity and inclusion practices into its operations and management, for example, through the appointment and promotion of women and minority employees.

CSR practices aiming at diversity and inclusion relate more broadly to the recent expansion of diversity, equity, and inclusion (DEI) initiatives (Baker et al., 2024; Jin et al., 2024). In the current paper, the focus is placed on CSR inclusion initiatives. Studies centered on such initiatives examine the relationships between lesbian, gay, bisexual, and transgender (LGBT) inclusion and organizational performance (Kotiloglu, 2023; Kotiloglu & McDonald, 2023), factors impacting the integration of disability into organizational practices aimed at recruiting a diverse workforce (Gould et al., 2020), and factors leading to successful innovation for inclusive growth that enhances corporate performance and creates long-lasting and significant social impact (Herrera, 2016), among others.

### Social Impact of CSR

The research by Herrera (2016) represents one of the studies linking CSR and social impact. Social impact of CSR refers to the change in social outcomes (e.g., greater participation, improved health, enhanced wellbeing) that is attributed to a given CSR initiative (Barnett et al., 2020). Although the importance of measuring the impact of CSR beyond companies' financial performance has been acknowledged (Inoue & Kent, 2014), there is absence of research concerning the social impact assessment of CSR initiatives (Barnett et al., 2020). An exception is Walker et al. (2017), who evaluated a socially responsible youth employability program in the UK. The program was developed through the foundation of a professional British football club and funded by a large multinational bank as part of their CSR agenda. Their findings indicate some positive outcomes, including improvement in self-esteem, self-efficacy, perceived marketability, a high level of motivation for work, attitude enhancement, and satisfaction with program delivery. However, the study also provided mixed evidence for employment, further highlighting some issues, such as a lack of synergy between program goals and the delivery, the challenge of skill improvement within a sport program intervention, and the need to translate positive attitudes to enduring outcomes.

A limitation of the study by Walker et al. (2017) is that it does not relate the social impact of the CSR initiative to the financial input from the sponsor bank. This limitation is

significant, as connecting the social impact of a CSR initiative to the financial input contributes to evidencing a return on investment and can incentivize organizations to make further investments in CSR initiatives. SROI helps address this limitation.

### Social Return on Investment

A problem arises when organizations are accountable specifically to the value which is measured (i.e., financial impact of CSR), as opposed to the broader value which is not measured (i.e., social impact of CSR not captured in financial terms). This narrow focus on financial value leads to making decisions based on incomplete information about the full impacts of an organization and its activities (Nicholls et al., 2012). SROI constitutes a response to this issue, referring to “a framework for measuring and accounting for this much broader concept of value... [which] seeks to reduce inequality and environmental degradation and improve wellbeing by incorporating social, environmental and economic costs and benefits” (Nicholls et al., 2012, p. 8).

Although SROI is derived from cost–benefit analysis (CBA), it also draws on two other traditions: sustainability accounting and financial accounting (Social Value UK, 2014). The SROI framework was originally presented in Emerson and Twersky (1996). It was then developed in the UK through a government-funded program on the measurement of social value started in 2008 (Arvidson et al., 2013).

The SROI framework is built on a theory of change model and a commitment to valuing and monetizing outcomes (Davies et al., 2019). SROI measures change in ways that are relevant to the people or organizations that experience or contribute to it (Nicholls et al., 2012). This is relevant when assessing the social impact of a CSR inclusion initiative such as a disability sport offer. SROI measures changes that directly affect people who experience disability by enhancing their life circumstances through participation, while assessing the contribution of organizations involved in fostering these changes. SROI also suggests the need to involve stakeholders (though the degree of stakeholder involvement varies by budget and/or timeframe), which is the first of the seven SROI principles identified by Nicholls et al. (2012). The other six SROI principles highlighted by the authors are: understand what changes; value the things that matter; only include what is material; do not overclaim; be transparent; and verify the result. More recently, an eighth principle focusing on the management of social value has been added: be responsive (Social Value International, n.d.). These principles lead to six stages in SROI (Davies et al., 2019, 2021): identifying stakeholders; mapping inputs, outputs, and outcomes; measuring and valuing outcomes; establishing impact; calculating SROI; and reporting.

Notably, some issues with SROI are identified. These include the difficulty of comparing studies and different interventions due to the use of a range of valuation methods (Arvidson et al., 2013); difficulty of attaching monetary values to non-market goods and establishing the counterfactual, that is, what would have happened without the intervention (Banke-Thomas et al., 2015); and lack of guidance on how the opinions and values of individuals should be aggregated (Fujiwara, 2014). However, these issues are not unique to SROI, and its merits exceed the issues as Davies et al. (2019) state: “On balance, SROI offers a practical and transparent framework, which can be used to capture the social value of different activities for diverse audiences” (p. 591). This is because SROI uses monetary values to represent social outcomes from different and diverse activities, hence enabling a ratio of benefits to costs (Nicholls et al., 2012). In addition, the application of the eight principles stated above facilitates the transparent and credible reporting of how the monetary values are calculated, with an illustration of the pathways that connect inputs or investments used to deliver an activity with the outcomes and social impacts of the activity (Social Value International, n.d.).

### SROI vs. Other Social Impact and Sustainability Measurement Practices

It should be acknowledged that SROI is only one approach among several social impact and sustainability measurement practices. In their literature review about social impact measurement, Rawhouser et al. (2019) highlight that most papers from the ethics discipline conceptualize social impact in terms of (corporate) social performance, as opposed to a focus on environmental impact, performance, or efficiency in the operations discipline. The authors also draw a typology of the papers depending on whether they focus on activity or outcome, and multisector or single sector. Consistent with the prevailing practice in the ethics discipline, SROI conceptualizes social impact in terms of social, rather than environmental, performance. It focuses on both activities and outcomes while clearly distinguishing both dimensions and relating outcomes to the activities and investments required to reach them. Besides, SROI measures the social impact of an activity (e.g., CSR initiative) in a specific sector, hence relating to a single sector. While this could be seen as a limitation in terms of potential generalizability, Rawhouser et al. (2019) argue in favor of single-sector research because it is suited for developing middle range theories that can be more precisely measured and matched to the interests of an organization’s specific stakeholders. In addition, single-sector research allows for a more precise consideration of the assumptions underlying the processes that result in social impact, thus enabling researchers to model the complexities

and idiosyncrasies that characterize the reality faced by organizations in a particular context.

While SROI presents several pros, it may be argued that its focus on social impact—rather than both social and environmental impacts—puts it at a competitive disadvantage, compared to broader sustainability-oriented measurement practices. Examples of the latter include the Impact Weighted Accounts Initiative (IWAI), the Impact Reporting and Investment Standard (IRIS), the Impact Management Project (IMP), the United Nations Sustainable Development Goals (SDGs), the Global Reporting Initiative (GRI), and the B Impact Assessment (BIA) by B Lab (a nonprofit network). Nevertheless, when it comes to measuring social impact, SROI’s exclusive focus on it can be seen as a competitive advantage over other practices. For example, in relation to the IWAI, Serafeim and Trinh (2020) suggest different dimensions for product impact frameworks. However, these dimensions, such as environmental use and end of life recyclability, are more about environmental than social impact and are therefore not all well suited to measuring social impact as defined in the ethics discipline. The IRIS is a foundation for impact measurement systems and provides a catalogue of metrics for impact investors to analyze environmental, social and financial performance of investments from several sectors (Pichler & Lehner, 2017). This broad scope makes the IRIS less focused on social impact than SROI. The IMP recommends and guides investors to assess the potential impact of an investment project from five dimensions: what, who, how much, contribution, and risk (Islam & Habib, 2024). The impact assessed through the IMP depends on an organization’s impact goals that can be broader than social impact.

The SDGs consist of 17 goals divided into environmental, social, and economic targets (Fallah Shayan et al., 2022), with 169 associated targets (World Health Organization, 2024). The GRI represents a modular system of interconnected standards for reporting publicly on a range of economic, environmental, and social impacts (Global Reporting Initiative, 2024), based on 69 indicators (Safdie, 2023). Based on roughly 200 questions, the BIA measures how companies create positive impacts in five areas: governance, company’s workers, community, customers, and environment (Kim, 2021). Staniškienė and Stankevičiūtė (2018) note that there are too many indicators in GRI, while there are even more targets and questions respectively in SDGs and BIA. By contrast, SROI tends to rely on a more selective set of indicators (e.g., 23 social outcomes examined later in this paper) that are carefully chosen by considering the nature of outcomes produced by the activities being analyzed. Accordingly, measuring impact through SROI helps understand the effectiveness of CSR initiatives with respect to overarching goals through a more manageable and measurable set of social outcomes. In addition, due to their risk/

internally oriented approaches and their many indicators, the application of sustainability-oriented measurement practices can result in a limited definition of the consequences of CSR projects. Another strength of SROI over other impact measurement practices is to demonstrate the social impact of an activity in a single monetary term. This is particularly useful for comparing the impact of an initiative with that of other similar initiatives as well as monitoring the longitudinal changes in the initiative's impact.

The SROI framework is built on a theory of change model. However, theory of change and SROI have distinctive features that make them separate impact measurement devices (Ruff, 2021). Sometimes also called 'program theory', theory of change "refers to the construction of a model that specifies (usually visually) the underlying logic, assumptions, influences, causal linkages and expected outcomes of a development program or project" (Jackson, 2013, p. 100). Ruff's (2021) case study shows that using theory of change instead of SROI can modify the assessment of the social impact of an organization. Specifically, adopting theory of change led to a highly favorable assessment of the social impact, while using SROI resulted in a neutral to highly unfavorable assessment (Ruff, 2021). Beyond these findings, Ruff (2021) highlights that the rationale underpinning the two devices is considerably different: management's intention in the case of theory of change as opposed to social value-for-money, cost effectiveness, responsiveness to stakeholders, and efficiency for funders in the case of SROI. Because of these differences, SROI reports present a variety of stakeholder perspectives (Hall et al., 2015), while the theory of change invites mentions of management's objectives only (Hall, 2014). This focus on stakeholder perspectives constitutes an additional strength of SROI.

### The Utility of SROI to Evaluate CSR Inclusion Initiatives

The above discussion highlights the demonstration of the social impact of an activity in a monetary term as a strength of SROI. However, critics of this approach may argue that SROI monetizes aspects that are inherently non-monetary. Specifically, in the context of evaluating CSR inclusion initiatives, one may inquire about the rationale to monetize inclusion. In line with this, it could be suggested that a qualitative approach is more suitable for measuring life-changing dynamics related to inclusion. However, while qualitative data can offer rich insights into participants' experiences, analyzing and presenting the qualitative data only is often insufficient for justifying investments in CSR. Grabowski et al. (2024) address this issue using a qualitative and abductive approach, leading to a radar diagram that displays the social impact performance of a project on different factors and providing an overall social impact ratio out of 1. This

ratio offered by Grabowski et al. (2024) captures the social impact of a project in a quantitative term and may help communicate such impact. Nevertheless, the fact that social impact is not expressed in monetary terms may limit the appeal of this approach to organizations and policymakers who need to justify their investment. Accordingly, the monetization approach used in SROI helps justify investment in CSR inclusion initiatives and hence can attract and sustain funding in this area.

### SROI and Disability Sport Participation

Having reviewed the literature on SROI and other impact measurement practices and justified the utility of SROI to evaluate CSR inclusion initiatives, we now turn to the issue of how SROI can be applied to disability sport participation, which represents the context of this study. Chin (2015) implemented a health impact assessment of a project aiming to open opportunities for people who experience disability to be involved in physical activity and sport in Wales. Specifically, the author used the health and wellbeing determinants checklist designed by Chadderton et al. (2012) to identify a range of positive and negative impacts through a stakeholder workshop. These impacts informed the later SROI analysis conducted by Chin (2016), along with people and staff stories, and stakeholder interviews.

The SROI of disability sport participation in Chin (2016) is 124:1. This value is 10 to > 70 times higher than those found in 16 studies about non-disability sport participation reviewed in Gosselin et al. (2020). It is also 18 to 34 times higher than those found in two studies conducted on behalf of Special Olympics Canada (7:1 in Bain and Company (2016) and 3.66:1 in SiMPACT Strategy Group (2015), respectively). In a worst-case scenario with a 56% drop-out rate and durations of outcomes set at one year (instead of three to five years), Chin (2016) reports that SROI would be around 20:1. While this value aligns more closely with findings in other studies, it remains relatively higher, indicating the necessity for a thorough evaluation of stakeholders, social outcomes, and the underlying assumptions used for these calculations. In the current study, we initially utilized the outcomes identified by Chin (2016) as a starting point. However, we extended our assessment by comparing these outcomes with those from peer-reviewed articles and studies by other researchers, ultimately leading to the formulation of our own informed choices.

Chin (2016) lists nine measurable outcomes across two stakeholders, as shown in Table 1. These outcomes are applied to 10 participants out of the 279 participants who engaged in the project under consideration, and three 'talented' athletes and their respective family.

Based on interviews, Chin (2016) determines the number of participants and family members impacted by the

**Table 1** Social outcomes of disability sport participation, sport participation and disability interventions/organizations

Stakeholders	Disability sport participation (Chin, 2016)	Sport participation (Davies et al., 2019, 2020; Taylor et al., 2015)	Disability interventions/organizations (Hutchinson et al., 2020; Tirado-Valencia et al., 2021)
Participants	Increased confidence		Increased confidence and/or self-esteem; self-regulation of behaviors
	Socialization	Captured by improved wellbeing (adults)	Social participation; improved social relations
	Volunteering		
	Bullying prevention (children)		Feelings of dignity, respect, involvement, inclusion
	Better physical health	From reported improved good health to reduced risk of hip fracture and back pain, and increased risk of getting a sports-related injury (all for adults)	
	Improved mental health and overall wellbeing	Improved wellbeing (adults)	Improved mental health/wellbeing; improved purpose and life satisfaction/feeling happy
	Better management of health conditions	Reduced GP visits and use of psychotherapy services (adults)	Feelings of dignity, respect, involvement, inclusion
		Reduced risk of cardiovascular and heart disease/ stroke, type 2 diabetes, breast cancer (females), colon cancer, dementia and depression (all for adults)	
		Improved education performance (11–18 years old)	Educational opportunities
		Enhanced human capital (graduate participants)	Employment roles
Family	Improved physical and mental health and wellbeing		Sports and recreation Increased independence/autonomy/choice; feeling more independent/control over their life/self-determination
	Socialization		Reduced burden on caregivers; reduction in worry, stress and/or anxiety; improvement in family relationships Improvement in social life Change in attitude toward disability
Volunteers		Improved wellbeing	Increase in confidence and self-esteem; feeling engaged and contributing to society; more involvement in society Change in attitude toward disability
Society/community		Reduction in crime (10–24 male participants)	
		Enhanced social capital (adults)	More positive interaction with people who experience disability
		Volunteering	Increased community awareness
Staff/organizations			Awareness of rights and potential of people with disability; increased confidence/morale; increased satisfaction and self-esteem

different outcomes. This number is then multiplied by the value in pounds of the financial proxy selected for each outcome and the number of years the outcome lasts, then subtracting the values that should not be allocated to the

outcome. This is due to deadweight (part of the outcome would have happened without the activity), activity displacement, attribution (other factors contributing to the change) and the outcome dropping off over time. From this, Chin

(2016) obtains the overall value of the social outcomes for the 10 participants and three talented athletes (including their family). Since the 10 participants were selected from a broader sample of 279 participants, Chin (2016) then calculates the average per participant across the 10 selected, before multiplying this value by 279.

Despite a limited sample from which the figures are determined before being extrapolated, according to Goselin et al. (2020) the approach followed by Chin (2016) seems to present some degree of rigor. This is because her approach meets nine out of 12 criteria expected from SROI studies. This suggests that if the SROI (124:1) is higher than it should be, this is likely due to assumptions leading to values that are too high for the financial proxies.

## Methodology

In this section, we describe the SROI methodology guided by the benefit (value) transfer approach adopted in the current study. This includes the identification of stakeholders and social outcomes for disability sport participation and financial proxies of these outcomes, followed by the presentation and analysis of empirical data specific to Inclusion Rugby League in England. This empirical data was provided by the RFL, which gathered the data from clubs, conducting a survey and interviews with other stakeholders in parallel to our SROI study between late 2021 and early 2022. Specifically, 180 players completed a short survey asking them whether becoming involved in the sport improved their life satisfaction, confidence, and socialization. Interviews were conducted with 22 players, four parents and two volunteers (24 interviewees overall as three interviewees were both players and parents, and one interviewee was player and volunteer), and asked questions around increased confidence and self-esteem, physical and mental wellbeing, expanding social circles and connecting families, and perception of disability. Although the RFL designed and delivered the survey and interviews, they asked respondents questions specifically informing our SROI analysis and supplementing the benefit transfer approach.

## Benefit Transfer Approach

This research is guided by the benefit transfer approach, which is an economic technique designed to transfer social value estimates from existing SROI studies and make any appropriate remedies and adjustments (Social Value International, 2022). The application of this approach remains scarce. However, it can serve as a viable approach for both researchers and practitioners “as it is relatively inexpensive and quick to implement” (Social Value International, 2022, p. 15). Although benefit transfer has some limitations (e.g.,

limited engagement with stakeholders), it is often the best or only option available to evaluate the social value of a program or policy (Richardson et al., 2015). We demonstrate a careful and transparent application of the benefit transfer approach to increase its validity and utility. Accordingly, our exploration provides an illustration of how the social value of disability sport and other CSR initiatives can be estimated when direct consultation with stakeholders may be constrained by time, cost, and/or resourcing issues. The outcomes, stakeholders, and financial proxies presented in this research can provide an informed starting point for future SROI studies that integrate close stakeholder consultation.

Historically, most benefit transfers can be characterized as unit value transfers based on one of the three approaches (Richardson et al., 2015): identifying a single study that best matches the current research, applying an average value from several studies, and using administratively approved values. In the present research, we applied unit value transfers based on the identification of several relevant studies. In addition, instead of applying an average value from these studies, we favored a conservative approach with the use of the lowest value.

## Stakeholders and Social Outcomes in the SROI of Disability Sport Participation

From Chin (2016) and literature on the SROI of sport participation and disability interventions/organizations, a list of stakeholders and social outcomes to be included for assessing the SROI of disability sport participation can be established (objective 2). Specifically, we compared outcomes identified by Chin (2016) for disability sport participation to those identified by Taylor et al. (2015) and Davies et al., (2019, 2020) for sport participation, as well as those identified by Hutchinson et al. (2020) and Tirado-Valencia et al. (2021) for disability interventions/organizations. This comparison is shown in Table 1 where outcomes capturing the same idea across studies appear on the same row.

From the social outcomes in Table 1, we established a list of social outcomes to be included for assessing the SROI of disability sport participation. In the assessment of the SROI of Inclusion Rugby League in England presented later, some level of stakeholder involvement happened at this stage by having the RFL review and confirm the list of stakeholders and outcomes. Table 2 presents the final list of social outcomes included in our analysis, together with the associated stakeholders. These outcomes included both positive (e.g., improved wellbeing) and negative (e.g., injuries) outcomes. Below we explain why we retained or excluded some of the outcomes originally listed in Table 1.

First, socialization is captured by improved wellbeing for adults (Taylor et al., 2015) so we decided not to incorporate it for assessing the SROI of disability sport participation,



**Table 2** List of components for assessing the SROI of disability sport participation

Stakeholders	Social outcomes	Financial proxies	Sources
Participants	Change in attitude toward disability (participants without disability)	Disability awareness training	Own addition
	Increased confidence	Confidence building course Individual face-to-face sessions with a life coach	Hutchinson et al. (2020)
	Sports and recreation	Membership and equipment (free)	
	Socialization (children)	Value for attending regular clubs	Chin (2016)
	Bullying prevention (children)	Economic cost of bullying prevention	Legood et al. (2021)
	Reduced risk of hip fracture (adults)	Average annual cost per person diagnosed	Davies et al. (2020)
	Reduced risk of back pain (adults)		
	Increased risk of getting a sports-related injury (adults)		
	Reduced GP visits (adults)		
	Reduced use of psychotherapy services (adults)		
	Reduced risk of cardiovascular and heart disease/stroke (adults)		
	Reduced risk of type 2 diabetes (adults)		
	Reduced risk of breast cancer (adult females)		
	Reduced risk of colon cancer (adults)		
	Reduced risk of dementia (adults)		
	Reduced risk of depression (adults)		
	Family	Improved education performance (11–18 years old)	Annual average of lifetime productivity returns (value per person)
Enhanced human capital (graduate participants)		Average additional starting salary for graduates who are sports participants (value per person)	
Volunteers	Improved wellbeing (adults)	Monetary value placed on improved wellbeing	
Staff/organizations	Improved wellbeing		
	Change in attitude toward disability	Disability awareness training	Forth Sector Development and Price-waterhouseCoopers (2011), Jones et al. (2020), Ruiz-Lozano et al. (2020) and The Action Group (2011), cited in Tirado-Valencia et al. (2021)
Society/community	Awareness of rights and potential of people who experience disability		
	Reduction in crime (10–24 male participants)	Average cost per incident of crime prevented	Davies et al. (2020)
	Enhanced social capital (adults)	Value per person	
	Volunteering	Average hourly earnings	
	Increased community awareness	Disability awareness training	Hutchinson et al. (2020)

both for adult participants and family. Second, Chin (2016) is the only source among the six that includes volunteering by participants. However, only one participant reported this benefit, and Chin (2016) does not include volunteers among the stakeholders investigated while other sources incorporate them, meaning volunteering by participants is captured under volunteers by the other sources. Therefore, we excluded volunteering under participants from our analysis to avoid double counting. Third, only one child out of four (vs. two talented children out of three) reported reduced bullying in Chin (2016). Nevertheless, the rather limited

sample is not reliable to make an informed decision. Thus, we incorporated reduced bullying into our SROI assessment, with a view to deciding whether to retain or exclude it based on information more specific to the CSR initiative under investigation. Fourth, the sources on sport participation refer to reduced risk for six health conditions, improved education performance and enhanced human capital for participants; improved wellbeing for volunteers; and reduction in crime, enhanced social capital and volunteering for society/community. There is no clear evidence as to why these outcomes would not apply to disability sport participation. Hence, we

retained them for the current analysis, while acknowledging that these outcomes could be excluded depending on the specific case applied.

Fifth, the sources outside sport refer to increased independence for participants as a potential social outcome. Specifically, Tirado-Valencia et al. (2021) cite The Action Group (2011), however, the latter source identifies only seven out of 126 users in work benefitting from increased independence, this may not be transferable to disability sport participation as it is about increased independence of external support in their jobs in The Action Group (2011), and it may overlap with increased confidence, so we excluded it. Sixth, Tirado-Valencia et al. (2021) list change in attitude toward disability for family and volunteers, as well as awareness of rights and potential of people who experience disability for staff. We regarded these outcomes as eligible. In contrast, we disregarded increased confidence/morale, and increased satisfaction and self-esteem for staff. This is due to the financial proxies used (cost of confidence building course, organizational costs for the first outcome, cost of sickness absence, willingness to contribute to a similar charitable program for the second outcome) being deemed difficult to assess in relation to the change generated between the actual situation where staff works with people who experience disability and a hypothetical situation where this would not be the case. Lastly, we included change in attitude toward disability for participants (see Table 2 for details on measurement). This is because participants without disability take part in some disability sports and, as a result of their participation, they may improve their awareness of rights and potential of people who experience disability.

### Financial Proxies of Social Outcomes

We identified the financial proxies of the social outcomes from the sources indicated in Table 1. These financial proxies were derived by their respective sources after consideration of deadweight, activity displacement, attribution and the outcome dropping off over time. As a conservative approach, we decided to select the lowest value when a social outcome is captured by several sources (objective 3). Table 2 lists the financial proxies chosen based on this approach. Only one financial proxy comes from Chin (2016), that is, the value for attending regular clubs to capture the social outcome socialization for children, not measured in the other sources. The value of this financial proxy is in line with the values of other financial proxies used to capture the social outcomes related to individual development. Thus, we deemed it acceptable. For improved wellbeing for family, we relied on the value of improved wellbeing for participants in Davies et al. (2020). This is because Davies et al. (2020) do not cover improved wellbeing for family, while Chin (2016) uses the same value for family as for participants. Since the lower

value from Davies et al. (2020) is applied to participants, we also applied the same lower value to their family.

The addition of the financial proxies to the stakeholders, their financial inputs and the social outcomes allows us to derive a list of components for assessing the SROI of disability sport participation represented by Table 2 (objective 4). These components can be adapted to each specific disability sport participation program if additional or irrelevant social outcomes are identified.

### Data Specific to Inclusion Rugby League in England in 2021

We then applied the assessment of the SROI of disability sport participation to Inclusion Rugby League in England (objective 5). Inclusion Rugby League is implemented as the RFL's CSR initiative to constitute the organization's inclusive playing offers that contribute to its commitment to promote and enhance the social impact of rugby league for everyone (Rugby League, 2019, 2021). It includes three variants of rugby league specifically for people who experience disability. These three variants are Physical Disability Rugby League (PDRL), Learning Disability Rugby League (LDRL) and Wheelchair Rugby League (WcRL). They are delivered by the professional club foundations and a third-party charity, that is, Community Integrated Care (CIC). Table 3 presents data provided by the RFL on the number and percentage of clubs and people involved in the three variants of Inclusion Rugby League and overall in 2021, the year we analyzed.

It is worth noting that, while all participants in LDRL experienced disability, 30% of WcRL players and 5% of PDRL players do not have a disability. These able-bodied players are called facilitators who help the game flow. They were included in our calculations since almost all social outcomes identified for participants are not specific to disability

**Table 3** RFL data on the number and percentage of clubs and people involved in Inclusion Rugby League in England in 2021

	PDRL	LDRL	WcRL	Overall
Clubs	5	13	19	29 <sup>1</sup>
Players	127	295	226	648
% female players	2.2%	9.0%	17.0%	10.5%
% male players	97.8%	91.0%	83.0%	89.5%
% under 16 players	7.4%	23.5%	2.2%	12.9%
% 16+ players	92.6%	76.5%	97.8%	87.1%
Players without disability	6	0	68	74
Coaches	16	13	16	45
Volunteers	27	26	98	151

<sup>1</sup> The total does not correspond to the sum of the number of clubs in the three variants due to some clubs operating in at least two of the variants

sport. The only exception to this was the change in attitude toward disability. This was applied specifically to participants without disabilities, but not those who experience disability. This choice is consistent with Tirado-Valencia et al. (2021) who identify this outcome for different stakeholders, except users/participants who experience disability themselves. This is despite the survey by the RFL showing that 88% of PDRL players said playing rugby league has changed the way they think about their disability, with interviews supporting this percentage. However, because the financial proxy applied for other stakeholders (i.e., disability awareness training) was deemed less relevant for participants who experience disability, as a conservative approach we decided to exclude change in attitude toward disability for them.

Since there are three variants of Inclusion Rugby League, four SROI need to be calculated: one for each of the three variants, and the fourth for the SROI of Inclusion Rugby League overall based on the sum of the financial data used for the three variants. Table 4 presents the financial inputs from stakeholders for Inclusion Rugby League and the sources for their calculation. We derived the financial inputs by players/family in sport clothing and footwear and travel and other costs, and by volunteers in volunteering, from the average values per person in sport in general in Davies et al. (2020), adjusted for inflation. Since the values used by Davies et al. (2020) are from 2017/18 while our data are from 2021, we multiplied Davies et al. (2020)'s values by  $(1 + \text{inflation rate})$  in 2018, 2019, 2020 and the square of  $(1 + \text{inflation rate})$  in 2021, with inflation rates as released by the UK Office for National Statistics (2022) on 16 February 2022.

We determined the numbers of individuals impacted by the different social outcomes through multiplying the number of persons involved in the specific variant of Inclusion Rugby League by the percentage of persons benefitting from/being affected by the social outcome (please see Table 5 for further details). RFL data and clubs' reports provided data about the numbers of participants, volunteers and staff

involved, as well as attendees to Inclusion Rugby League events (used for increased community awareness). Compared to the social outcomes listed in Table 2, we excluded bullying prevention for children.

We estimated the numbers of family members involved based on an average of 2.36 people per household in the UK in 2021 (Office for National Statistics, 2021), that is, 1.36 people other than the participant. We evaluated the percentage of persons benefitting from the social outcome based on the survey conducted by the RFL, which provided the data for increased confidence (95%) and socialization (94%). The survey also asked about life satisfaction (97%), that can be related to improved wellbeing. However, the monetary value per person used for this outcome comes from Davies et al. (2020) and is an average based on 100% of respondents, that is, including those not benefitting. Thus, we also applied a percentage of 100% for this outcome. It is acceptable to use the same monetary value as Davies et al. (2020) for Inclusion Rugby League, as Fujiwara et al. (2014) find the same value for all sports and team sports.

For the social outcomes coming from Davies et al. (2020), we multiplied the number of persons involved in the specific variant of Inclusion Rugby League by the percentage of persons benefitting from/being affected by sport participation in England for each outcome. For example, 0.62% of adult participants benefit from a reduced risk of cardiovascular and health disease/stroke through sport participation in England. For this specific outcome, we applied the same percentage to the number of adult players in each variant of Inclusion Rugby League. Because the figures obtained were not whole numbers, we rounded them to the closest whole numbers. Since the figures were lower than 0.5 for each of the three variants for the number of participants with reduced risk of breast cancer, colon cancer and hip fracture, as well as improved education performance and reduction in crime, we excluded these five outcomes from our analysis.

Based on the application of intergroup contact theory (Allport, 1954) to contact with people who experience

**Table 4** Financial inputs from stakeholders for Inclusion Rugby League and sources for their calculation

Stakeholders	Financial inputs	Sources for calculation
Volunteers (including coaches)	Volunteering	Davies et al. (2020)
Players/family	Sport clothing and footwear	RFL
	Travel and other costs	
RFL (except development funding to clubs)	Wheelchairs	RFL
	Inclusion Rugby League budget (including from CIC)	
	Players' membership	
Clubs	Staff	
	Own funding	
	Development funding from RFL	
	Other funding (including directly from CIC)	
CIC	Already included in RFL and clubs	

**Table 5** Percentages of people benefitting/being affected and monetary values per person applied to the social outcomes for Inclusion Rugby League in England in 2021

Stakeholders	Social outcomes	Percentages of people benefitting/being affected	Monetary values per person in the present study	
Players	Change in attitude toward disability (players without disability)	100%	£24	
	Increased confidence	95%	£570	
	Sports and recreation (free membership)	100%	£24	
	Sports and recreation (free wheelchair for 60 WcRL players)	26.55%	£833	
	Socialization (children)	94%	£1601	
	Reduced risk of back pain (adults)	6.33%	£285	
	Increased risk of getting a sports-related injury (adults)	1.16%	-£5789	
	Reduced GP visits (adults)	124.64% (% of people * average number of reduced visits)	£16 per visit	
	Reduced use of psychotherapy services (adults)	135.81% (% of people * average number of reduced visits)	£21 per visit	
	Reduced risk of cardiovascular and heart disease / stroke (adults)	0.62%	£7510	
	Reduced risk of type 2 diabetes (adults)	3.73%	£4269	
	Reduced risk of dementia (adults)	0.38%	£39,789	
	Reduced risk of depression (adults)	1.53%	£324	
	Enhanced human capital (graduate participants)	0.93%	£1293	
	Improved wellbeing (adults)	100%	£1355	
	Family	Improved wellbeing	40%	£1355
		Change in attitude toward disability	40%	£24
Volunteers (including coaches)	Improved wellbeing	100%	£2833	
	Change in attitude toward disability	100%	£24	
Staff/organizations	Awareness of rights and potential of people who experience disability	100% <sup>1</sup>	£24	
Society/community	Enhanced social capital (adults)	100%	£617	
	Volunteering	100%	£1535	
	Increased community awareness	100%	£24	

<sup>1</sup>RFL staff is made aware of this for all three variants of Inclusion Rugby League. To avoid triple counting, one third of RFL staff was allocated to each variant

disability (Barr & Bracchitta, 2015), we assumed a percentage of 100% in relation to change in attitude toward disability/awareness of rights and potential of people who experience disability for players without disability, volunteers (including coaches) and staff. In contrast, we applied a percentage of 40% to family members, in line with the percentage applied for improved wellbeing. We derived this percentage from Chin (2016) who found six family members benefitting from improved wellbeing across 11 families, and from the average number of people per household in the UK mentioned earlier (players excluded). A percentage of 40% applied for improved wellbeing to family members can be seen as conservative, as 100% could have been applied if it is assumed that the

monetary value per person is an average including people not benefitting.

Table 5 provides the percentages of people benefitting/being affected and the monetary values per person applied to the different social outcomes (after application of deadweight and attribution). The monetary values are derived from the sources mentioned in Table 2. In addition, these values are adapted to England or the UK if information comes from a source outside these territories and are adjusted for inflation. The highest value per person is for reduced risk of dementia, with £39,789. The second highest value is £7,510 for reduced risk of cardiovascular and heart disease/stroke. Given the difference between the first highest value and the other values per person, the value for

the reduced risk of dementia can potentially have an important impact on the overall values of the social outcomes and subsequent SROI. Based on our approach for determining the number of persons benefitting, we found 0.45, 0.84 and 0.86 participant with a reduced risk of dementia for PDRL, LDRL and WcRL (2.14 participants overall), and applied 0, 1 and 1 participant, respectively (2 participants overall). These low numbers mean a limited impact on the overall values of the social outcomes for LDRL and WcRL, both being above £1 m as presented in the next section.

## Results

This section presents the results per variant of Inclusion Rugby League and Inclusion Rugby League overall. Tables are presented and grouped per stakeholder. Where relevant, some stakeholders are grouped together. For example, players and their families are grouped together, as some families may provide the financial inputs required for players. Besides, the RFL's and clubs' financial inputs to some extent come from charitable activities, which can be associated to inputs from society and CIC. As such, society, RFL, clubs and CIC are grouped together.

Overall, three key groups of stakeholders are identified:

- **Players/families:** they invest in sport clothing and footwear, travel, and potentially also equipment (e.g., wheelchairs). In return, they receive social outcomes related to health, wellbeing, individual development and change in attitude toward disability.
- **Volunteers:** they invest their time. In return, they receive social outcomes related to wellbeing and change in attitude toward disability.
- **Society/RFL/clubs/CIC:** they invest in programs, equipment and staff. In return, they receive social outcomes related to social capital, volunteering and change in attitude toward disability/awareness of rights and potential of people who experience disability.

Tables 6 and 9 provide the overall financial inputs and social outcomes per (group of) stakeholders. Detailed

financial inputs and social outcomes are available upon request.

### SROI of Physical Disability Rugby League (PDRL)

Table 6 outlines the stakeholders, financial inputs, social outcomes and SROI of PDRL. Overall, the SROI of PDRL is 4.10:1. This means for £1 invested, the social return is £4.10. SROI is greater for players and families: for £1 invested, players and their families receive a social return of £12.14. The SROI for the group society/RFL/clubs/CIC is more than 2:1, that is, for £1 invested, the social return is more than £2 for this group. The SROI for volunteers is 1.86:1. This ratio is the same for the other variants of Inclusion Rugby League, as the types of financial input, social outcomes and values per person are similar.

### SROI of Learning Disability Rugby League (LDRL)

Table 7 outlines the stakeholders, financial inputs, social outcomes and SROI of LDRL. Overall, the SROI of LDRL is 3.48:1, that is, for £1 invested, the social return is £3.48. Again, SROI is greater for players and families: for £1 invested, they receive a social return of £12.39. It is worth noting that the social outcomes for LDRL require a high investment from society/RFL/clubs/CIC, probably due to the peculiarities of learning/intellectual disabilities. Despite this high investment, the SROI for these specific stakeholders reaches more than 1:1, that is, for £1 invested, they receive a social return of more than £1.

### SROI of Wheelchair Rugby League (WcRL)

Table 8 outlines the stakeholders, financial inputs, social outcomes and SROI of WcRL. Overall, the SROI of WcRL is 3.08:1, that is, for £1 invested, the social return is £3.08. Once again, SROI is greater for players and families: for £1 invested, they receive a social return of £7.37. It must be noted that WcRL requires specific wheelchairs, costing from £500 to £10,000 per person for an estimated lifespan of five years, that is, from £100 to £2,000 per year. This additional investment explains why the SROI for WcRL is

**Table 6** Stakeholders, financial inputs, social outcomes and SROI of PDRL

Stakeholders	Financial inputs	Social outcomes	SROI
Players/families	£30,502	£370,160	12.14:1
Volunteers	£66,011	£122,852	1.86:1
Society/RFL/clubs/ CIC	£59,872	£147,413	2.46:1
Total	£156,384	£640,425	4.10:1

**Table 7** Stakeholders, financial inputs, social outcomes and SROI of LDRL

Stakeholders	Financial inputs	Social outcomes	SROI
Players/families	£70,850	£877,806	12.39:1
Volunteers	£59,870	£111,424	1.86:1
Society/RFL/clubs/ CIC	£215,729	£216,648	1.004:1
Total	£346,450	£1,205,878	3.48:1

**Table 8** Stakeholders, financial inputs, social outcomes and SROI of WcRL

Stakeholders	Financial inputs	Social outcomes	SROI
Players/families	£100,966	£743,638	7.37:1
Volunteers	£175,005	£325,701	1.86:1
Society/RFL/clubs/CIC	£177,481	£326,417	1.84:1
Total	£453,452	£1,395,757	3.08:1

**Table 9** Stakeholders, financial inputs, social outcomes and SROI of Inclusion Rugby League overall

Stakeholders	Financial inputs	Social outcomes	SROI
Players/families	£202,318	£1,991,604	9.84:1
Volunteers	£300,886	£559,978	1.86:1
Society/RFL/clubs/CIC	£453,082	£690,477	1.52:1
Total	£956,286	£3,242,059	3.39:1

comparably lower than PDRL and LDRL. Yet, the overall SROI of WcRL is more than 3:1, and notably more than 7:1 for players and their families, which ultimately provides a rationale for the financial investment in WcRL. In addition, the importance of providing wheelchair users with the opportunity to play a variant of Inclusion Rugby League, together with the associated social outcomes, fully justifies the financial investment required. Instead of comparing the SROI of WcRL to other variants of Inclusion Rugby League, it would be more meaningful to compare to other activities offered to wheelchair users.

### SROI of Inclusion Rugby League overall

Table 9 outlines the stakeholders, financial inputs, social outcomes and SROI of Inclusion RL overall. The SROI of Inclusion Rugby League is 3.39:1, that is, for £1 invested, the social return is £3.39. SROI is greater for players and families: for £1 invested, they receive a social return of £9.84. Volunteers and society/RFL/clubs/CIC also benefit from their investment, with their SROI being respectively 1.86:1 and 1.52:1. This means that for £1 invested, both groups of stakeholders receive a social return of more than £1.

A sensitivity analysis, which accounts for the extent to which the results depend on the assumptions, was conducted to ensure the consistency of the SROI results. This allowed assessment of the SROI of Inclusion Rugby League under different sets of assumptions:

- Alternative values in the number of persons benefiting from social outcomes, that is, 80% (lower percent-

age)/100% (higher percentage) for socialization and confidence instead of 94% and 95%, respectively.

- Inclusion of reduced physiotherapists visits (all players), reduced bullying in children and self-regulation of behaviors for youth.

The sensitivity analysis yielded values ranging from 3.31:1 to 3.58:1. Therefore, the SROI of Inclusion Rugby League (3.39:1, included in Table 9) is confirmed and deemed sufficiently conservative, which is a key feature of any reliable SROI study (Davies et al., 2019, 2020).

## Discussion and Conclusions

This research employed the benefit (value) transfer approach to assess the SROI of a CSR inclusion initiative promoting disability sport participation. Our objective was to advance an understanding of how the social impact of CSR initiatives can be assessed. Drawing from an extensive review of SROI studies in sport participation and interventions for individuals who experience disabilities, we derived a list of relevant factors for assessing the SROI of disability sport participation. These factors were applied to Inclusion Rugby League in England in 2021, revealing that the overall SROI of Inclusion Rugby League was 3.39:1. Notably, variations were observed between the three sport variants, with PDRL achieving the highest SROI (4.10:1), followed by LDRL (3.48:1), and WcRL (3.08:1). Additionally, differences were also identified among stakeholder groups, with players and their families being the primary beneficiaries (overall SROI of 9.84:1), ahead of volunteers (1.86:1) and society/RFL/clubs/CIC (1.52:1). In summary, our findings, demonstrated through the case of Inclusion Rugby League, highlight the substantial capacity of a CSR inclusion initiative promoting disability sport participation to generate positive social outcomes for players who experience disability, their families, volunteers, and society. They also illustrate how the social impact of CSR initiatives can be assessed.

## Contributions and Implications

Barnett et al., (2020, p. 937) identify a gap in their review of the CSR literature, indicating that “even the most highly cited studies have stopped short of assessing social impact, often measuring CSR activities rather than impacts and focusing on benefits to specific stakeholders rather than to wider society.” Our research contributes to addressing these shortcomings by assessing social impact through the application of SROI. Unlike previous studies, which primarily focused on measuring CSR activities and their benefits to specific stakeholders, our study examines outcomes for various stakeholders, including the wider

society and community. While Walker et al. (2017) provided an exception to the lack of literature on the social impact assessment of CSR initiatives with their study on a socially responsible youth employability program, it had limitations, notably failing to relate the social impact to financial input. In contrast, the SROI approach applied in our paper not only addresses the limitations in prior work but also demonstrates the positive return on investment in CSR initiatives. As such, by showcasing the tangible social benefits and returns, our research provides a compelling incentive for organizations to continue funding such initiatives in the future.

The reality of constrained budgets and timeframes may impede the ability to involve stakeholders and conduct the long-term research required for original valuation. Therefore, the application of SROI with limited stakeholder engagement suggested in the current work represents a viable alternative at lower cost and duration. In addition, the process of conducting SROI using the value transfer approach as shown in this study, including reviewing relevant evidence in the literature, establishing stakeholders and social outcomes, and selecting financial proxies, is transferable to not only other sport-based CSR but also non-sport CSR initiatives.

A significant contribution of our paper is the development of mechanisms to measure the social impact of CSR inclusion initiatives through the SROI methodology, especially based on the benefit (value) transfer approach. The paucity of previous academic studies on the SROI of CSR initiatives showed limited focus on inclusion. In addition, the literature on the social impact assessment of CSR inclusion initiatives seldom derives a value encapsulating such social impact and facilitating communication to a range of stakeholders. A recent exception is the study by Grabowski et al. (2024) that provides an overall social impact ratio out of 1 through a radar framework. While this ratio captures the social impact of a project quantitatively, it is not expressed in monetary terms, which may limit its appeal to organizations and policymakers who require justification for their investment. In contrast, SROI helps monetize the social impact of supporting inclusion, thereby justifying investment and contributing to attracting and sustaining funding in this area. In the current study of a CSR inclusion initiative promoting disability sport participation, this was undertaken through synthesizing key stakeholders, social outcomes, and financial proxies identified in the limited body of academic work on the SROI of sport participation. We also carefully evaluated the inclusion/exclusion of these stakeholders, outcomes, and financial proxies and added new ones to adapt to the context of disability sport. The approach demonstrated in the current study is applicable to the SROI assessment of different inclusion projects that address such issues as gender and minority inclusion, highlighting the relevance of our work.

Our research further contributes to the broader literature on the social impact of CSR initiatives. The qualitative and non-monetary quantitative methods for social impact assessments used in the literature are helpful to gain a deep understanding of the topic and range of benefits covered. However, they do not provide a summative indicator that can be measured, understood, and communicated through a single figure, as we have demonstrated through the exploration and application of the SROI assessment. Therefore, our work expands an understanding of how SROI can be applied to the social impact assessment of CSR.

## Limitations and Future Directions

The present research has some limitations. The first limitation relates to the focus on a CSR initiative promoting a specific inclusion consideration, namely disability, within a specific context, that is sport. As noted, the benefit (value) transfer approach presented in this work can be adopted to assess the social impact of other CSR initiatives. Therefore, building on our work, future research could conduct an SROI assessment of CSR inclusion initiatives in other contexts and inclusion dimensions to develop a body of evidence on the social impact of such initiatives. More generally, based on our approach, future research could assess the SROI of any CSR initiatives beyond an inclusion initiative.

The second limitation is the limited engagement with stakeholders. The benefit (value) transfer approach used in the current article presents merits, including cost- and time-saving benefits. However, this approach will not take the place of a carefully conducted primary study if sufficient resources are available to undertake such a study (Bateman et al., 2011; Richardson et al., 2015). In our work, calculations are based on several assumptions about the social outcomes to be included, the percentages of individuals impacted and the values per person that need to be applied. Future research could go deeper on the perceptions of individuals who experience disability and other relevant stakeholders to better understand and measure the impact of CSR inclusion initiatives. Further surveys, interviews, and focus groups directly administered by the researchers instead of the organization could be used to contribute to such a deeper understanding. These methods could form the basis for the calculations of indicators such as the willingness-to-pay from stakeholders (Davies et al., 2021). In addition, they could help compare SROI and other (non-monetary) methods as part of a single study to further strengthen the case in favor of SROI.

Another limitation is that our study covers three variants of Inclusion Rugby League aimed to players with a physical or learning disability or wheelchair users, yet there are other types of disability not covered (e.g., blind/visually impaired; Chin, 2016). Further research is required to broaden the

scope of the disabilities covered and better evidence the social impact of inclusion initiatives.

An additional limitation is that the present research—as with previous studies estimating the SROI of sport participation—included only the benefits and overlooked the negative impacts, except for the social cost of injuries. However, constraints and challenges have been found in the literature on the social impact of sport, see, for example, Darcy and Dowse (2013) and Swartz et al. (2018) for disability sport. Specifically, these constraints and challenges tend to apply to access to sport, that is, the possibility to take part in sport. In our study, all participants by definition had access to participate in the Inclusion Rugby League, hence making the constraints and challenges identified in the literature less relevant. Nonetheless, future research should further review evidence about the negative impacts of (disability) sport participation and attempt to assess their monetary value to make sure the SROI of (disability) sport participation is not overestimated.

In conclusion, our research shows the positive social impact of a CSR inclusion initiative in monetary terms, further suggesting how to assess its SROI using the benefit (value) transfer approach when constrained budgets and timeframes impede access to stakeholders. It underscores the importance of SROI in attracting investments towards CSR inclusion initiatives and informs future research on the social impact assessment of CSR initiatives, helping organizations and their managers make a case for further (public) funding. Finally, it also encourages potential funders to engage in CSR initiatives.

**Supplementary Information** The online version contains supplementary material available at <https://doi.org/10.1007/s10551-024-05786-w>.

**Acknowledgements** This article follows a funded research project the authors conducted for the Rugby Football League (RFL). A part of this study has been published as an appendix to the Disability Rugby League Dividend: <https://www.rugby-league.com/uploads/docs/DisabilityDividend.pdf>. The authors thank the RFL for allowing them to submit an academic article derived from the research project they funded. The authors also thank Manchester Metropolitan University for its support. All errors are the authors' own.

**Data availability** The data are available in the article and the supplementary material.

## Declarations

**Conflicts of interest** The authors declare that they have no conflict of interest. The research was funded by the RFL which did not influence the findings.

**Research Involving Human Participants and/or Animals** Some data used in the research come from surveys and interviews conducted by the RFL with human participants.

**Informed Consent** The RFL obtained informed consent from all research participants for the use of their data in a report including an

appendix by the authors of this article, with this appendix identified as supporting potential submission and publication of an academic article.

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