# Sport and Physical Activity among those aged over 16 

 in Carlow/Kilkenny/Waterford
## By

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## Executive Summary

## Active Participation in Sport

- $46.3 \%$ of residents took part in sport, this is the equivalent of 76,600 regular participants in Carlow, Kilkenny and Waterford.
- Men (50.9\%) are more likely to play sport than women (41.9\%).
- Exercise such as gym activities and swimming are the most popular sports played overall.
- Overall sporting activities are similar to those outside the region however hurling is particularly popular with men and participation in swimming in higher among women in the region.


## Broader Physical Activity

- $65 \%$ of residents took a recreational walk in the last week.
- Women (72.6\%) are more likely to take part than men (57.2\%).
- Both men and women are equally likely to walk for transport however men are more likely to cycle for transport.
- Walking for transport in the region is below the national average.


## Social Participation

- Social participation (club membership, volunteering and attending sporting events) is slightly above the national average.
- Team sports dominate events and volunteering however clubs are more likely to play individual sports reflecting their popularity among participants.
- GAA has a strong presence among club members, particularly hurling/camogie.


## Sport and Health

- The proportion who are highly active and sedentary is broadly in line with the national picture.
- Those with a third level education are more likely to be highly active than those without.
- More than half of respondents (61.2\%) would like to take part in more sport.
- Time is the main barrier to taking part in more sport.


## 1. INTRODUCTION

The National Physical Activity Guidelines ${ }^{1}$ recommend at least 30 minutes of moderate intensity activity on 5 or more days a week for adults. The 30 minutes can be accumulated in bouts of 10 minutes or more over the course of a day. Being active confers significant health and related benefits ${ }^{2}$ and participation in sport and active leisure plays an increasingly important role in adult physical activity levels worldwide ${ }^{3}$. The benefits from activity can be gained at any age. The English Longitudinal Study of Ageing ${ }^{4}$ tracked participants whose average age was over 65 for 8 years. Participants who took up activity in those 8 years also saw health benefits despite being previously inactive. Physical activity contributes to healthy ageing regardless of current age.

This report provides evidence on the sport and recreational exercise activity of adults (aged 16 and over) in Carlow, Kilkenny and Waterford (C-K-W). The analysis aims to be of interest and assistance to those involved in the promotion of sport in the region, particularly Local Sports Partnerships, Local Authorities, sports clubs and volunteers.

## Scope

The figures in this report are based on the results of the 2011 and 2013 Irish Sports Monitor (ISM) surveys. The data from both years were combined into one dataset of 966 respondents to try to reduce the error margin within the results. $30.6 \%$ of respondents were based in Carlow, $32.6 \%$ in Kilkenny and $36.9 \%$ in Waterford. Based on this sample size the error margin around key high level results is about $3.15 \%$. So if we report a participation rate of $46.3 \%$ in the report we would expect that the true participation rate for the region lies somewhere between $+3 \%$ and $-3 \%$ i.e. between $43.1 \%$ and $49.4 \%^{5}$ Where the sample has been divided into further sub-samples by gender or age, the error margin is increased. So, the results are only an indication of sports participation in the region and should be treated with caution.

[^0]The ISM asks interviewees about their active and social participation in sport in the previous 7 days. Further details of the aims and methodology of the ISM can be found in ISM Annual Reports (available at http://www.irishsportscouncil.ie/Research/The Irish Sports Monitor/). The ISM is designed to be representative of Ireland's population as a whole rather than the population of any individual county. Therefore it was necessary to re-weight the data for this report so that the sample more closely aligned with the region's current demographic profile. Gender, age and employment status were considered in this re-weighting exercise. The Appendix compares the demographic profile of the dataset used for the report with the profile of the region recorded by the Central Statistics Office in the 2011 Census of Population.

A feature of the ISM is the inclusion of periodic flexible modules on particular topical policy issues. These modules are included over a number of months and therefore only include a sub-sample of the annual survey respondents. For this reason it is not always possible to carry out a meaningful analysis of these issues beyond the national situation. During 2011 and 2013 flexible modules were included on gender issues in Irish sport, interest in playing more sport, motivations for participating in sport, barriers to participation, perceptions of health and wellness and engagement in other behaviours (smoking, drinking alcohol, dieting, watching TV, etc.) which might influence health and wellness, and knowledge of the sports policy environment nationally and locally. These issues are reported on in the relevant ISM annual report to which the reader is referred for more detail. However, where respondent numbers allowed and where findings of local interest emerged these issues are explored in this current report. Readers are reminded of the statistical limitations within such analysis and to regard such references as indicative only.

## Statistical Analysis

In this report, the charts and tables generally show percentage participation rates in a given activity by a particular group (e.g. the percentage of women who play team sport). Where this is not the case the report highlights the basis for the participation rates. The report includes certain national figures for comparison purposes. In the main such national figures are composite averages from 2011 and 2013. Exceptions to this approach are noted.

The primary justification for public investment in sport is to increase physical activity and hence to improve health ${ }^{6}$. Consistent with this aim (and with the Irish Sports Council Act, 1999), the report defines "sport" broadly, to include recreational exercise (e.g. swimming, gym, dance classes, yoga, etc.), as well as field games (e.g. soccer, Gaelic football). The ISM also records recreational walking, walking and cycling for transport, allowing sport to be set in the context of more general physical activity.

## Limitations

All statistical surveys are approximate. In the case of the ISM, measurement error may be caused by people recalling activity inaccurately, respondents wishing to paint themselves in a good light (social desirability bias), failure to survey hard-to-reach groups, mistakes made by interviewers, and so on. For example foreign nationals are underrepresented in the overall ISM and in the sample for this region. Previous research has suggested that their sports participation rates are lower than they are for Irish nationals. Accordingly participation rates are likely to be over-stated in this respect. All participation rates have margin of errors and small differences should not be over-interpreted as meaningful particularly where the sample size is relatively small. So, when looking at the figures below it is important to remember that they are at best an approximation.

[^1]
## 2. RESULTS

### 2.1 Overall Physical Activity

Table 1 compares physical activity participation in the region with the national average. It captures regular ${ }^{7}$ participation activity through sport, recreational walking and active travel i.e. walking and cycling for transport. In the tables below, the "highly active" are those who meet the National Physical Activity Guidelines ${ }^{8}$ while those who are "sedentary" do not take part in sport, do no recreational walking and don't walk or cycle for transport. Based on the 2011 Census, the $46.3 \%$ participating in sport is equivalent to approximately 76,600 adults aged 16 and over taking part in regular sporting activity in C-K-W.

Table 1: Summary of Physical Activity - Carlow/Kilkenny/Waterford vs. National

|  | Carlow/Kilkenny/Waterford | National |
| :---: | :---: | :---: |
| Sporting Participation | $46.3 \%$ | $46.0 \%$ |
| Recreational Walking | $65.0 \%$ | $64.3 \%$ |
| Walk for Transport | $33.2 \%$ | $40.0 \%$ |
| Cycle for Transport | $7.8 \%$ | $10.1 \%$ |
| Highly Active | $33.1 \%$ | $30.3 \%$ |
| Sedentary | $13.8 \%$ | $13.2 \%$ |

The only notable differences in Table 1 are in respect of active transport where participation rates are lower in the region than nationally, particularly so in the case of walking for transport. The more rural nature of the region compared to nationally helps to explain this. Urban residents in C-K-W are significantly more likely to walk for transport than rural residents ( $38.1 \%$ and $29 \%$ respectively). They are also more likely to cycle for transport and walk for recreation but the differences here are not significant. The numbers of highly active in the region are higher than nationally although the difference is not statistically significant. This is somewhat surprising given the almost identical levels of sporting participation and recreational walking that we see in Table 1.

In Table $\mathbf{2}$ overleaf when we look at these behaviours by gender we see that patterns of activity by gender are broadly similar to those at national level. Again the most notable exception here is among

[^2]women walking for transport. Whereas nationally similar numbers of women and men walk for transport, in the region women are less likely to walk for transport than men although the difference is not significant. Men are more likely to take part in sport and cycle for transport while women are more likely to take part in recreational walking. The number of women achieving highly active status in the region is greater than nationally but the difference is within the error margin.

Table 2: Summary of Physical Activity by gender - Carlow/Kilkenny/ Waterford vs. National

|  | Carlow/Kilkenny/ Waterford |  | National |  |
| :---: | :---: | :---: | :---: | :---: |
|  | Male | Female | Male | Female |
| Sporting Participation | $50.9 \%$ | $41.9 \%$ | $51.5 \%$ | $40.9 \%$ |
| Recreational Walking | $57.2 \%$ | $72.6 \%$ | $58.0 \%$ | $70.3 \%$ |
| Walk for Transport | $35.1 \%$ | $31.3 \%$ | $39.1 \%$ | $40.9 \%$ |
| Cycle for Transport | $11.8 \%$ | $4.0 \%$ | $14.6 \%$ | $5.7 \%$ |
| Highly Active | $31.7 \%$ | $34.4 \%$ | $29.9 \%$ | $30.7 \%$ |
| Sedentary | $15.2 \%$ | $12.5 \%$ | $13.3 \%$ | $13.0 \%$ |

### 2.2 Most Popular Sporting Activities

Figures 2.2 and 2.3 and $\mathbf{b}$ show the most popular sports in the region overall and by gender. Only sports with an overall participation level of $2 \%+$ are shown ${ }^{9}$. The exception is gaelic football which is included because of its cultural significance. Individual sports dominate, accounting for seven of the ten most popular activities. Almost $40 \%$ of all sports participation in the region takes place in individual sports compared to just over $12 \%$ in team sports.

Figure 2.2: Top Participation Sports in Carlow/Kilkenny/Waterford vs. National - Overall


Figure 2.3a: Top Participation Sports in C-K-W vs. Nationally - Men ${ }^{10}$


Figure 2.3b: Top Participation Sports in C-K-W vs. Nationally - Women ${ }^{11}$


[^3]In C-K-W soccer is the most popular activity for men while for women it is swimming. While for most sports levels of activities are similar to those nationally among men and women, there are two notable exceptions in this regard. For men, the popularity of hurling in the region is particularly striking from Figure 2.3a. Among women, swimming is relatively much more popular in the region than nationally. Interestingly enough this contrasts to the situation among men where swimming is relatively less popular in the region than nationally although the difference is less pronounced than in the case of women. Individual activities are preferred among men and women with $40.1 \%$ and $39.6 \%$ respectively taking part in such activities. As we have seen team sports are participated in by $12 \%$ of adults in the region and are much more popular among men with nearly 4 times as many participants compared to women (19.3\% to 5.1\%).

### 2.3 The Demographics of Participation in C-K-W

In this section we look at participation by age, presence of children, social class and disability status.

Participation declines among both men and women with age ${ }^{12}$ as can be seen in Figure 2.4 below. Patterns in C-K-W are very similar to those experienced at national level. Participation levels sharply decline in early adulthood before stabilising somewhat in middle age and falling sharply again in older age. Participation in individual sports (not shown) sustains more strongly and endures transitions across the life course for both men and women.

Figure 2.4 Participation in sport in C-K-W ${ }^{13}$ vs. Nationally by age range


The interaction between age and presence of children on participation is explored in Figure $\mathbf{2 . 5}$ below. Age ranges have been merged to preserve sample size.

[^4]Figure 2.5 Participation in sport in C-K-W by age range and presence of children ${ }^{14}$


What is noticeable from Figure 2.5 is the influence of children on participation levels among adults in the "parenting" years.

We know from national research that there are strong social gradients in sports participation. People with higher levels of educational attainment and / or income are the most likely to participate. The situation presented in C-K-W is similar if slightly less clear cut in this regard. Those with a $3^{\text {rd }}$ level education are more likely to participate than those with a lower level of educational attainment but the difference is marginal ( $48.5 \%$ vs. $44.1 \%$ respectively). On the other hand those with monthly incomes over $€ 4,000$ are significantly more likely to play than those with lower income levels ( $56 \% \mathrm{vs}$. 42.4\%).

Figure 2.6 below looks at participation by social class ${ }^{15}$. Here, while there are some slight differences between the region and nationally, the key message is that those in the lowest social class are significantly less likely to play sport than those in the other 3 classes in both cases.

Figure 2.6 Participation in sport in C-K-W and nationally by social class

[^5]

Finally in this section we look at the impact of having a disability on participation. The ISM asks respondents whether they have any long-term illness, health problem or disability that limits their daily activities. Those who answer "yes" to this question are also asked whether this problem prevents their participation in sport or exercise. $17.6 \%$ respondents answered yes to the first question with over $13 \%$ of these (or $75.8 \%$ of all those with an illness/disability) also answering yes to the second question. These figures are in line with the national figures ${ }^{16}$. In Figure $2 . \mathbf{7}^{17}$ below we look at participation levels by these categories in C-K-W and compare them to national levels. The influence of having a disability which prevents participation is very apparent.

Figure 2.7 Participation in sport in C-K-W and nationally by disability status


### 2.4 FITT Analysis

[^6]The ISM asks respondents questions about how often they play sport, for how long, at what intensity and in what context. This allows us to conduct an F (Frequency), I (Intensity), T (Time) and T (Type) analysis on participation patterns which we do in Figures 2.8-2.10.

Figure 2.8 shows that over $75 \%$ of all players took part more than once a week with one in seven taking part at least once every day. There is very little difference between male and female participants with both engaging in a session every other day on average.

Figure 2.8: Proportion of sporting sessions by number of participant sessions in previous 7 days


Figure 2.9 below compares the duration of sessions between men and women in C-K-W. While we see above that men and women engage in roughly the same number of weekly sessions, a very different picture emerges when we look at the duration of these sessions. Sessions involving men are significantly longer than those involving women with the average duration of sessions being 77 minutes and 56 minutes respectively. Despite these differences it is distinctly positive that over 85\% of all sessions are of at least 30 minutes duration although there is a noticeable decline in this respect among those aged 55 and over where just over $70 \%$ of sessions are 30 minutes or longer.

Figure 2.9: Proportion of sporting sessions by duration of session in previous 7 days - by gender


In Figure 2.10 we look at the proportion of sporting sessions by intensity levels and by gender. Intensity is self-reported by the participants with light sport meaning that there was no increase in breathing rate, moderate meaning that there was an increase in breathing rate and vigorous meaning that the respondent reported being out of breath or sweating as a result of the session.

Figure 2.10: Proportion of sporting sessions by intensity in previous 7 days - by gender


Almost $90 \%$ of all sports sessions are at least of moderate intensity. More men participate at a higher intensity than women. The intensity of sessions is consistently high for adults until they get into their 50s. From the mid 50s onwards, almost $1 / 3$ of all sports sessions are reported as light intensity against less than $10 \%$ for all younger age groups.

Figure 2.11: Context of sporting participation


Nearly $70 \%$ of all sporting sessions take place in unstructured settings, either played solo or casually with family and friends as can be seen from Figure $\mathbf{2 . 1 1}$ above. There is little difference between men and women in this regard with the possible exception of organised competition which is slightly more to men. However, it should be noted that organised competition is comfortably the least popular context for participation among both genders. The popularity of solo sport reflects the growth of
sports such as running, swimming, exercise, and cycling in recent years. It is also noteworthy that solo sport is most popular among middle- and older-age groups. Organised training is very popular among young adults aged $16-24$ while organised competition appears to have two peaks one around the late 20 s (reflecting the prominence of team sports) and then during the 50 s and 60 s when golf is particularly popular.

Research has shown that the biggest disparity in health status is between those who participate in no sport or physical activity and those who are active to any extent, rather than between those who are active to differing degrees (Fahey et al., 2004; Lunn and Layte, 2008). In keeping with this, it is a primary focus of national policy to concentrate on getting people, who do not actively participate in sport and exercise, to take up some form of activity. The analysis presented above supports this as an appropriate goal for policy. What it shows is that once an individual is engaged in a sport or exercise activity, there is a good chance they will participate more than once a week, for longer than half-anhour and that they will do so sufficiently to get out of breath or sweat. Thus, most participants are likely to be getting some degree of health benefit from their participation. The key issue remains whether they are an active participant in the first place.

Nevertheless, the findings with respect to the context of participation are also noteworthy as regards policy that aims to increase participation. The majority of sporting activity is occurring outside of formal sporting structures suggesting that policy mechanisms that rely on pre-existing sporting bodies are less likely to be successful unless those bodies can reach out beyond the existing sporting and social networks with which they currently engage.

As regards the social benefits of sport, that almost $50 \%$ of sporting sessions are undertaken by people on their own is striking. Previous research has identified that the primary reason cited by nonparticipants for not playing sport is lack of time (Fahey et al., 2004; CSO, 2007). The solo activities identified are efficient forms of exercise, taking up relatively little time and not requiring much in the way of coordination. There may therefore be a trade off between the health benefits that solo exercise activities bring and the social benefits that accompany other types of participation.

### 2.8 Interest in doing more sports

In 2011 ISM respondents were asked whether or not they were interested in doing more sport or exercise, if so which sport they would like to do more of and, if not, what were the reasons preventing them from engaging in more activity. Encouragingly well over half (61.2\%) of participants in the region
are interested in increasing their sporting activity with people who are currently playing sport only slightly more likely to agree with this ( $63.7 \%$ and $59.2 \%$ respectively). Women were also slightly more likely to agree than men ( $64 \%$ and $58.1 \%$ respectively).

Figure 2.12 below displays the main sports preferred by those interested in doing more with the featured sports being popular among approximately 1 in 5 respondents. The profile is broadly similar to that reported at national level. Soccer, golf and running were identified as being of interest in doing more sport by about one in twenty respondents.

Figure 2.12 Interest in doing more sport - by sport (Base: All interested in doing more sport)


When it comes to barriers to increasing participation, time is easily the most commonly cited factor overall while for those with an illness or disability, health is the most common barrier. Neither financial issues nor lack of facilities feature particularly strongly as barriers to increasing participation. This echoes previous research findings (Fahey et al 2004, CSO 2007). Among the "other" category in Figure 2.13 below, pregnancy and child minding responsibilities feature prominently. Overall, the analysis suggests that the major factors limiting people's ability to participate in (more) sport lie outside their immediate control but may be capable of being influenced by the provision of more convenient, accessible offerings which they can fit into their otherwise time-pressed lives.

Figure 2.13: Barriers to increasing participation (Base: Those not interested in increasing their participation)


Finally in this section we look briefly at the relationship between current sports participation and the sporting history of the respondent. Specifically we compare two aspects of that history, namely whether or not they played sport at school (outside of PE) and whether their parents played sport regularly while the respondent attended school, with current active participation patterns. We do this in Figure 2.14 below. The influence of a positive sporting history on both counts is very clear from the figure. Later on in Section 4 we look at the relationship between these variables and current social participation patterns.

Figure 2.14: Proportion currently participating vs. historic sporting factors


3 Broader Physical Activity

### 3.1 Introduction

As well as looking at participation in sport and exercise, the ISM also looks at participation in broader physical activity including recreational walking, and walking and cycling for transport. This section looks at these issues and at the extent to which through a combination of sport and these physical activities respondents meet the National Physical Activity Guidelines or avoid being sedentary.

### 3.2 Recreational Walking

Recreational walking is an important source of physical activity for the majority of the adult population. It can be particularly beneficial in providing health and other benefits to older age groups who do not play sport. As a low load-bearing activity that can be undertaken at various intensities, it overcomes one of the main disadvantages identified by older people to physical activity, namely that it is easier to injure yourself. ${ }^{18}$ The ISM records information about the walking habits of Irish adults including the number of walks in the previous 7 days, the duration of each walk and the usual walking pace. Recreational walking was the most popular activity with almost $65 \%$ of adults taking part in at

[^7]least one walk in the past 7 days (Figure 3.1). Walking is significantly more popular with women (72.6\%) than men (57.2\%) and is highly popular across all age groups. Most recreational walkers took part in more than one walk per week with over 1 in 6 taking part in 7 or more walks. On average, men and women take part in more than 4 recreational walks per week walking for a little over 40 minutes resulting in total walking time of about 3 hours per week.

Figure 3.1: Recreational walking by number of walks in the previous 7 days


In terms of walking pace, over 90\% of participants in C-K-W reported walking at steady, brisk or fast pace. Women are more likely to report walking at a brisk pace while more than $50 \%$ of men report walking at a steady pace.

Apart from the variation by gender, recreational walking does not manifest the same strength of social and other gradients already seen in respect of sports participation. For example, almost $56 \%$ of those with a disability which prevents participation in sport (see above for background to this) walked for recreation in the previous 7 days compared to $66 \%$ of those without. While this gap is significant, both statistically and otherwise, it is much less severe than the corresponding gap seen above in sports participation. Because it can be undertaken at different intensities, recreational walking represents the ideal opportunity for many, including those with disabilities, to engage in health enhancing physical activity.

One final feature to note in relation to recreational walking is that for men at least, where they live has a particularly important bearing on whether or not they walk for recreation in C-K-W. Figure $\mathbf{3 . 2}$ below compares recreational walking by gender and location of residence in the region. Given that the gender gap only appears in respect of rural dwellers there may be some scope for local policy makers to seek to develop walking initiatives to involve more men living in rural environments. The

Local Authorities, the LSPs, community and sporting groups might work together to develop such initiatives.

Figure 3.2: Recreational walking in C-K-W by gender and living location


### 3.3 Walking and Cycling for Transport

The ISM asks respondents if they have engaged in any walking or cycling for transport in the previous 7 days. While walking for transport is equally appealing to men and women (albeit to a far lesser extent than elsewhere in the country as we have already seen) nearly three times as many men as women cycle for transport as we saw in Table 2 earlier.

Walking for transport is much more popular in more densely populated areas as we can see from Figure 3.3 below. However, unlike in the case of recreational walking where it was rural men who were distinctly less likely to take part, here we see that it is women living in rural areas who are the least likely to walk for transport. Issues around safety may be at play here as this is also the group that is least likely to cycle for transport (not shown). Walking and cycling for transport are particularly popular among younger age groups, including students where the low level of car ownership is likely to be the principal factor in this regard. Social class gradients are not particularly strong in respect of both activities while those who have a disability which prevents them from participating in sport are significantly less likely to engage in either activity than other comparable groups.

Figure 3.3: Walking for transport in C-K-W by gender and living location


### 3.4 Overall Activity Levels

The ISM allows an approximate ${ }^{19}$ analysis of adult activity levels against the National Physical Activity Guidelines based on a four-category classification system shown in Figure 3.4 overleaf. The system is bookended by "sedentary" and "highly active" categories which are the main focus of this section.

This analysis can only be regarded as approximate as it does not take account of physical activity undertaken in the workplace or in the home.

Figure 3.4: Activity Spectrum Categories and Definitions

| Highly active | Participate in 30 minutes moderate ${ }^{\prime}$ physical activity at least five <br> times during the previous seven days (i.e. meet the National Physical <br> Activity Guidelines) |
| :--- | :--- |
| Fairly Active | Participated in 30 minutes physical activity at least twice during the <br> previous seven days |
| Just active | Participated in a sporting activity or recreational walking for 20 <br> minutes at least once during the previous seven days, or regularly <br> walks or cycles for transport (at least once a week) |
| Sedentary | Did not participate (20 minutes) in sporting activity or recreational <br> walking during the previous seven days and does not cycle or walk <br> regularly for transport. |

Activity levels are fairly well in line with the national picture across all activity categories as shown in Figure 3.5 below. This is true for both men and women in the region (not shown).

Figure 3.5 Population by activity category in Carlow/Kilkenny/Waterford and Nationally


There are strong social gradients around activity categories as can be seen in Figure 3.6 below although the patterns are not are clear cut as we tend to find in the national context. The performance of the C2 class (skilled working class) is noticeable in this regard. Whether this is due to the smaller sample sizes or reflects the reality we cannot say. However, the broad message around the social gradients remains.

Figure 3.5 Highly active and sedentary by social class in C-K-W


When looked at by level of educational attainment the clear benefit of completing a $3^{\text {rd }}$ level degree course is evident with those in this group being significantly more likely to be highly active and significantly less likely to be sedentary than those who don't.

In Figure 3.6 below we look at the proportions achieving highly active status in C-K-W through their participation in sport only, in recreational walking only or through a combination of the two types of activity $^{20}$. Because the figures are presented as the proportion of those meeting the Guidelines, the totals for the groups shown (all, male and female) add up to $100 \%$ in each case. The critical contribution of recreational walking to whether or not an individual meets the Guidelines is very evident from this figure. Combining activities is also important with just less than 1 in 5 of those who meet the Guidelines participating in a mix of sport and recreational walking activities. Policy makers might find it useful to promote the potential of recreational walking and combining activities as a means of encouraging health enhancing physical activity throughout the adult population.

Figure 3.6 Meeting the National Physical Activity Guidelines in C-K-W by gender by type of activity (Base: Proportion of those meeting the Guidelines at all) ${ }^{21}$


It should be remembered here that only participation in sport or recreational walking are considered in the ISM for the purposes of assessing whether or not an individual meets the Guidelines. Walking and cycling for transport are only considered in the context of assessing sedentarism. This is a limiting factor of this analysis given that those who are regular cycling commuters are likely to be meeting the Guidelines through this activity alone.
21 It is important to recognise that when we use the phrases "sport only" or "recreational walking only" in this context this does not necessarily mean that individuals meeting the Guidelines through one or other of these categories were not participating in the other type of activity. All it means is that participation in that secondary category was not necessary for them to meet the Guidelines through their main mode of activity. So, a "sport only" met the Guidelines through taking part in at least 5 sessions of sport lasting at least 30 minutes each of at least moderate intensity activity while any participation in recreational walking would not have been of sufficient intensity, duration and frequency to meet the Guidelines through that activity.

### 4.1 Introduction

The ISM looks at social participation in sport through club membership, volunteering and attendance at sports events. In 2013 it also looked at perceptions around gender and sports administration locally and nationally as well as the reasons for participating in sport outside the club environment. These issues are examined in depth in the 2013 ISM Annual Report to which the reader is referred for further detail. That report also examines the demographics of social participation in some detail. This chapter therefore concentrates on the main headlines around social participation.

Before looking at each of the different forms of social participation in turn we compare the overall levels of social participation in the region with the national situation in Figure 4.1 below. Social participation in C-K-W is higher than nationally under all categories of participation with the differences being statistically significant in all cases except attendance at sporting events. The difference in the case of club membership is particularly noteworthy. Overall, over half the adults in the region report being involved in some form of regular social participation in sport underscoring the importance of sport in contributing to C-K-W's social capital.

Figure 4.1: Social Participation in sport - C-K-W vs. National


While active participation is dominated by individual sporting activities the situation is more mixed when it comes to social participation as we can see from Figure 4.2 overleaf. The overwhelming majority of volunteering and attendance at sporting events is associated with team sports, in all likelihood most of this being connected with children's participation. On the other hand, club membership slightly favours individual sports reflecting to some extent the preferences of active participants. We will look at these more closely below.

Figure 4.2: Social Participation in sport in C-K-W by type of sport ${ }^{22}$


### 4.2 Club Membership

Club membership is the most common form of social participation. While active participation in C-KW is on a par with the rest of the country, the proportion of club members is significantly higher in the region as we have already seen. In Figure 4.3 below we see the sports and activities which account for this difference. Gyms and GAA clubs are the most popular sports clubs while the strength of hurling / camogie in the region is particularly evident.

Figure 4.3: Club Membership by sport ${ }^{23}$


In Figure 4.4 overleaf we see evidence of strong gender preferences around club membership. Overall, nearly twice as many men as women are members of sports clubs $-52.8 \% \mathrm{vs} .30 .3 \%$. The difference is particularly strong in respect of team sports where three times as many men as members as women.

[^8]All of the above is reflected in Figure 4.4. For the top 5 sports, there are far greater numbers of men than women members. The strength of team sports particularly gaelic games is very apparent for men. While men are equally likely to belong to an individual or team based club women are twice as likely to belong to clubs specialising in individual activities as team sports. Swimming is the only activity where there is a substantially greater female membership presence while membership in running and hill walking is fairly even.

Figure 4.4: Club membership by sport in C-K-W by Gender


Apart from the influence of gender, age, the presence of a disability, educational attainment and whether the individual played sport outside of PE at school are all factors for membership.

Almost 70\% of 16-24 year olds are club members with that membership slightly favouring team sports over individual sports during this period ( $48 \%$ vs. $42 \%$ respectively). Membership levels decline very sharply to $40 \%$ among the $25-34$ age group; thereafter they are relatively stable until there is a further decline to $30 \%$ after age 65 . The decline with age is most pronounced for team sports while for individual sports membership levels stabilise at 20\% - 25\% from age 25 onwards. From this it seems that the biggest challenge for clubs seeking to retain their membership base is to address the significant decline in membership among adults in their late 20s and early 30 s.

We have already seen the influence of having a disability on active participation in sport. Its influence is equally profound on club membership with $31 \%$ of those with a disability being members compared to almost $44 \%$ of those without. The impact is equally strong across team and individual sports. In contrast, the influence of educational attainment applies to individual sports only with those having a
$3^{\text {rd }}$ level qualification being significantly more likely to be members of individual sports clubs than those with a lower level educational attainment.

Finally in this section, having played sport outside of PE while at school appears to have a strongly positive influence on whether an individual is a current member of a team-based sports club. Of those who did play sport at school, which given the nature of children's sports was highly likely to have been a team sport, over $27 \%$ are currently members of a team sports club. The comparable figure for those who didn't play a sport at school is 7\%.

### 4.3 Volunteering

Volunteering is regarded by many as the lifeblood of sport, without which much of sporting activity, particularly that involving children, would simply not occur. It is a key component of organised sport in Ireland and, according to official sources sport features as the single activity involving the greatest amount of volunteering. The 2006 Census of Population ${ }^{24}$ identified that $33 \%$ of all volunteers were involved in sport only slightly behind the much broader category of "social / charity" at 35\%.

Volunteering levels in C-K-W are higher than nationally. About one in six adults volunteered at least once in the previous 7 days during 2011 - 2013 with men being more likely to volunteer than women ( $18.7 \%$ vs. $13.1 \%$ respectively). Team sports dominate the volunteering landscape as seen in Figure 4.5 below. Only sports with an overall volunteering rate of $1 \%$ or more are shown. Volunteering is strongly associated with children's participation in sport with $18.3 \%$ of parents volunteering compared to $12.1 \%$ of those without children.

Figure 4.5: Volunteering by sport: overall and by gender


As with other forms of participation, volunteering demonstrates strong social gradients. Those who have a $3^{\text {rd }}$ level qualification are significantly more likely to volunteer. Disability is not as important a factor in whether or not a person volunteers although it does appear to have an influence on the type of sport volunteered for. Individuals with a disability are more likely to volunteer for individual sports than those without while those without a disability are more likely to volunteer for team sports. Those who played sport outside of PE at school are significantly more likely to volunteer than those who didn't. Living in a rural area seems to encourage greater volunteering for team sports compared to those who live in an urban area.

Those who volunteer spend on average 4.3 hours per week volunteering with men spending slightly more time volunteering than women ( 4.5 vs. 4.1 hours). The type of volunteering roles carried out also varies by gender as can be seen from Figure 4.6 below. The nature of these roles tends to reinforce the highly gendered nature in the administration of Irish sport as perceived by the ISM respondents during 2013 - the reader is referred to the ISM Annual Report in this regard.

Figure 4.6: Volunteering Roles in C-K-W by gender


### 4.4 Attendance at Sporting Events

Just over one in five adults regularly attend some form of sporting event in C-K-W whether involving adults or children. Like volunteering, attendance is dominated by team sports with over 4 times as many adults attending such events as attending those involving individual activities.

Figure 4.7 overleaf shows attendance by sport by gender during 2011 - 2013 in the region. While hurling and camogie are combined in line with the rest of the report, it should be noted that almost all of the attendance in the figure below consists of attendance at hurling events. To put it in context, 8.1\% of the adult population in C-K-W reported attending at least one hurling sporting event in the previous 7 days during the period 2011 - 2013; the comparable national figure was 3.7\%.

Finally, unlike most other forms of participation in sport, attendance is not as strongly influenced by gender, age, social gradients, disability, living location.

Figure 4.7: Attendance at sporting events by sport by gender


Appendix

|  | 2011 Census | 2011+2013 ISM combined |
| :---: | :---: | :---: |
| Gender | 16 years plus | 16 years plus |
| Male | 49.7\% | 49.7\% |
| Female | 50.3\% | 50.3\% |
| Age |  |  |
| 16-19 | 6.5\% | 6.5\% |
| 20-24 | 7.4\% | 7.4\% |
| 25-34 | 18.9\% | 18.9\% |
| 35-44 | 19.9\% | 19.9\% |
| 45-54 | 17.3\% | 17.3\% |
| 55-64 | 13.9\% | 13.9\% |
| 65+ | 16.1\% | 16.1\% |
| Working Status (Census 2011 includes those under 16) |  |  |
| Employee/Self Employed | 49.3\% | 49.0\% |
| Unemployed | 11.7\% | 11.5\% |
| Retired | 13.4\% | 14.3\% |
| Homemaker | 10.2\% | 10.2\% |
| Student | 10.8\% | 10.5\% |
| Umemployed-illness/disabled | 4.6\% | 4.6\% |


[^0]:    1

[^1]:    6
    http://www.dttas.ie/corporate - High Level Goal for sport "To contribute to a healthier and more active society by promoting sports participation and by supporting high performance and the provision of facilities."

[^2]:    7 The ISM asks respondent about their participation in the previous 7 days so "regular" can be regarded here as being equivalent to participation at least once a week in each type of activity
    $8 \quad$ For adults to be highly active requires that they take part in at least 5 sessions of physical activity per week of at least 30 minutes duration at a moderate intensity or greater. Moderate intensity is considered sufficient to raise the person's breathing rate.

[^3]:    10 Sports with participation rates between 1-2\% are dancing and rugby
    11 Sports with participation rates among women between 1-2\% are camogie, horse riding, weights, cycling, hill walking, soccer and tennis.

[^4]:    12 See http://www.irishsportscouncil.ie/Research/Keeping-Them-in-the-Game-2013-/ for detailed analysis of transitions into and out of sport over the life course
    13 Samples for C-K-W in the first two age groups are less than 100

[^5]:    14 Sample size for ages $45+$ without children is less than 100.
    15 These categories reflect the occupation of the head of the household

[^6]:    16 Nationally the ISM reported that $18.3 \%$ had an illness/disability with $13.7 \%$ of the population indicating that this prevented participation.
    17 The numbers in the disability - not sport prevented category in C-K-W are less than 50

[^7]:    18 Physical Activity and Sport: Participation and Attitudes of Older People in Ireland, Ipsos MORI September 2009

[^8]:    22 Percentages add up to more than 100 due to certain respondents participating socially in both types of sport
    ${ }^{23}$ Only sports with membership levels of $2 \%$ or more are shown. Tennis has membership of $1 \%-2 \%$.

