

**Sport and Physical Activity among those aged over 16
in County Clare**

By

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Summary

Active Participation in Sport

- 41.5% participate regularly in sport equivalent to over 37,000 adults aged 16 and over
- Significantly more men (45.2%) than women (37.9%) participate
- Individual sports dominate with swimming, running, exercising and cycling being particularly important in this regard
- Over 20 times as many women play individual sports than team sports
- Social gradients continue to be important to participation
- Individuals with a long-term illness / disability are much less likely to participate
- Over 90% of participants benefit their health through the intensity of participation
- Women prefer casual participation while men prefer to participate solo

Broader Physical Activity

- Over 70% of Clare adults take a recreational walk at least once a week with significantly more women (82%) than men (58%) doing so
- One in seven adults walk every day of the week
- Walking is the sole form of exercise for one in four adults
- Just over one in three adults walk for transport
- 10% of adults cycle for transport
- Women are more likely to walk for recreation while men are more likely to walk and cycle for transport

Social Participation

- Significantly more men (44.5%) than women (23.9%) are members of a sports club
- Individual and team sports are equally popular as club sports
- 17% of men and 13.1% of women volunteer in sport
- 23.6% of men and 26.2% of women attended sporting events
- Volunteering and attendance are primarily focussed on team sports and likely to be associated with children's participation in such sports

Sport and Health

- Women are much more likely to be highly active than men primarily due to taking part in more recreational walking and a combination of sport and recreational walking

- Those who combine different forms of activity (such as recreational walking and playing sport) are more likely to meet the Physical Activity Guidelines
- A lack of time prevents most people from being more active
- A majority of respondents (60%) would like to take part in more sporting activity, particularly individual activities such as swimming, hill-walking and cycling
- Sedentarism is particularly strong among those who have a long-term illness or disability

1. INTRODUCTION

The National Physical Activity Guidelines¹ 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 benefits² and participation in sport and active leisure plays an increasingly important role in adult physical activity levels worldwide³. The benefits from activity can be gained at any age. The English Longitudinal Study of Ageing⁴ 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 county Clare. The analysis aims to be of interest and assistance to those involved in the promotion of sport in Clare, particularly Local Authorities, Clare LSP 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 587 Clare respondents to try to reduce the error margin within the results. Based on this sample size the error margin around key high level results is about 4%. Where the sample has been divided into further sub-samples by gender or age, the error margin is increased. **So, while the results provide an indication of sports participation in Clare it is recommended that the figures are treated with caution.**

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.

¹ <http://www.getirelandactive.ie/guidelines-resources/how-much-physical-activity-is-required/>

² <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC1402378/pdf/20060314s00023p801.pdf>

<http://www.health.gov/paguidelines/guidelines/chapter2.aspx>

<http://www.who.int/mediacentre/factsheets/fs385/en/>

³ <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3401184/pdf/nihms389131.pdf>

⁴ Regular physical activity in later life boosts likelihood of 'healthy aging' up to sevenfold, November 5th 2013, <http://www.sciencedaily.com/releases/2013/11/131125185600.htm>

Therefore it was necessary to re-weight the data used for this report so that the sample more closely represented Clare's current demographic profile. Gender, age, working status, region (urban or rural) and education were considered in this re-weighting exercise. The Appendix compares the demographic profile of the dataset used for this report with the profile of Clare recorded by the Central Statistics Office in the 2011 Census of Population.

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 national figures for comparison purposes. These figures are composite averages from 2011 and 2013 and differ slightly from figures published in the respective ISM annual reports.

ISM Definition of Sport and Physical Activity

The primary justification for public investment in sport is to increase physical activity and hence to improve health⁵. Consistent with this aim (and 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. All participation rates have margin of errors and small differences should not be over-interpreted as meaningful particularly, as in this case, 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.

⁵ <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. RESULTS

2.1 Overall Physical Activity

Table 1 compares overall activity levels in Clare with the composite national average⁶. It captures activity through sport, recreational walking and active travel. In all cases the percentages represent the proportion of the population that took part in the activity at least once in the previous 7 days. In the table below, the “highly active” are those who are meeting the National Physical Activity Guidelines while those who are “sedentary” did not participate in sporting activity, recreational walking, or walking or cycling for transport during the previous 7 days.

Table 1: Summary of physical activity

	Clare	Composite National Average
Sport Participation	41.5%	46.0%
Recreational Walking	70.1%	64.3%
Walking for Transport	36.1%	40.0%
Cycling for Transport	10.8%	10.0%
Highly Active	30.2%	30.3%
Sedentary	12.5%	13.2%

While there are fewer sports participants and active commuters in Clare than nationally, there are more recreational walkers in the county. The overall effect of this is that the numbers of highly active and sedentary individuals are very similar between the county and the country as a whole.

When looked at by gender some different patterns of activity emerge between Clare and nationally. The gender gap in recreational walking is much greater in Clare than nationally primarily because there are substantially more female recreational walkers in Clare than nationally (82% vs. 73%). Allied to a closer gender gap in sports participation in Clare, the result is that there are far more highly active women in Clare than men (36% vs. 24%) and fewer sedentary women than men (15% vs. 11%). Nationally the numbers of highly active and sedentary are very similar among men and women.

⁶ This composite national average is a weighted average of the 2011 and 2013 ISM surveys based on the sample size in the respective years. All national figures have been calculated accordingly.

Clare has a slightly older population profile than the rest of the country which might help explain the differences particularly in relation to sports participation and recreational walking. Sports participation declines with age while recreational walking tends to be stronger among older age cohorts. Based on 2011 Census data, the 41.5% for sports participants is equivalent to approximately 37,200 adults playing regular sport in Clare.

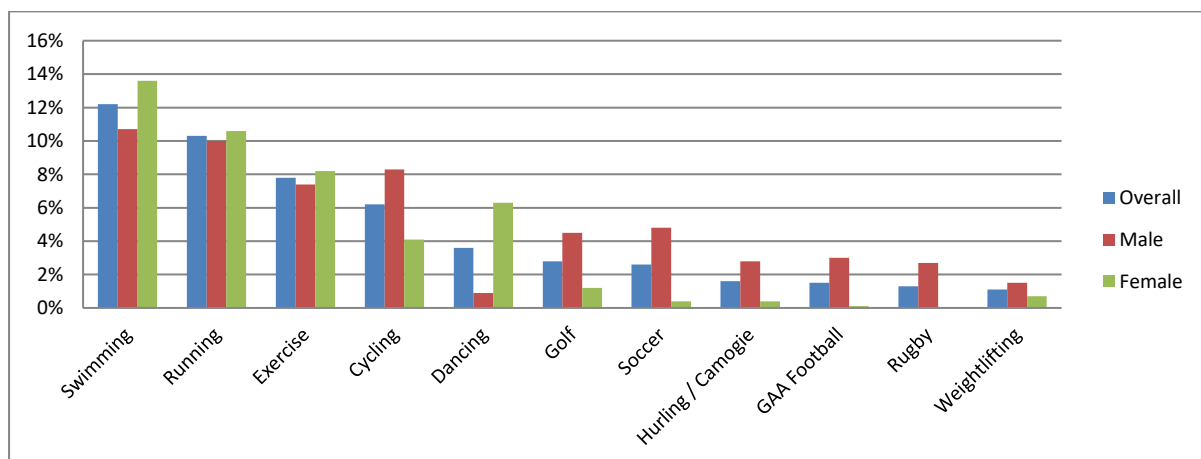
2.2 Most Popular Sporting Activities

Figure 2.1 shows the most popular participation sports in Clare for all adults and by gender. All of the sports shown have a recorded participation level in excess of 1% in the ISM. Given the sample size, these figures are for indicative purposes only. While the same sports dominate national participation statistics (not shown) there are some differences in relation to their order.

Nationally, exercise is the most popular sport followed by swimming, running, soccer and cycling. While these are also the 5 most popular sports in Clare, the order is somewhat different and levels of participation vary. Running and swimming participation rates are above the national average while those for exercise and dancing are below it. Cycling levels are almost identical to the national figures. However it must again be stressed that these results should be interpreted with caution given the margins of error.

Participation levels are lower among both men and women in Clare than nationally with the gap being greater in the case of men. As a result, the gender gap in participation is lower in Clare than nationally. In this respect it is noteworthy that women have higher levels of participation in 4 of the top 5 sports in the figure below.

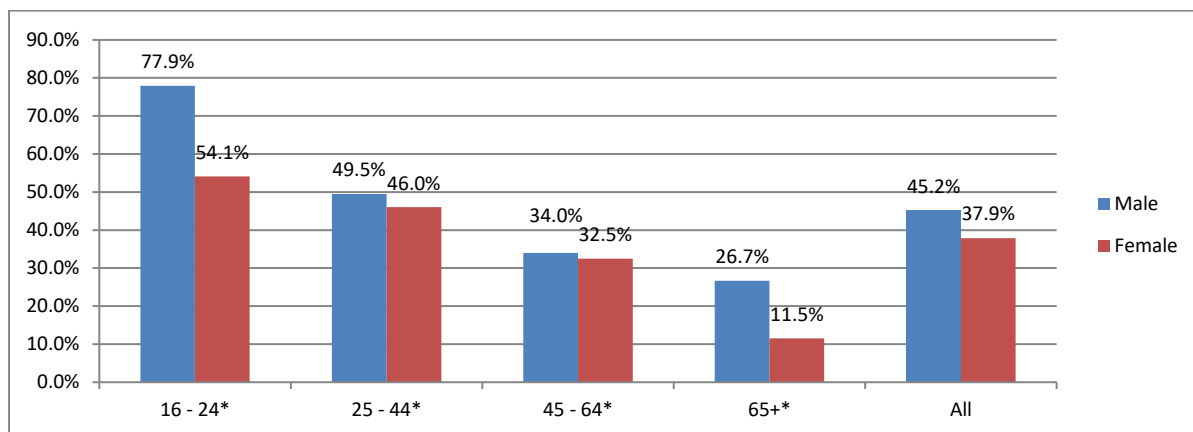
Figure 2.1 - Most Popular Participation Sports



2.3 Gender and Age

Sports participation declines with age among men and women as can be seen from **Figure 2.2** below. However, the pattern of decline differs between the two genders. For men the fall off in participation is particularly severe from the mid 20s onwards and is also quite steep in the late 50s and early 60s. For women participation levels lag considerably behind those of men in the late teens and early 20s. However, the fall off in participation from there onto the late 60s is far less dramatic than it is for men, so much so that participation levels are very similar between the genders between the 30s and early 60s. There is another sharp drop in participation levels among women from the mid 60s on. The differences between the age groups may also partly be a cohort effect as young people today are more likely to take part in sport than previous generations.

Figure 2.2 - Participation by Gender and Age⁷

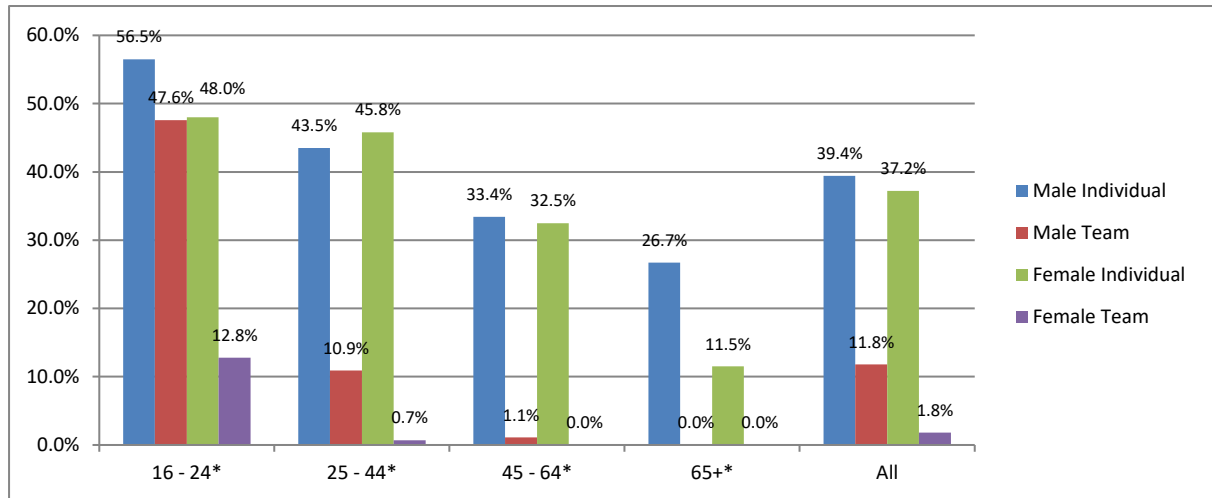


Differences in the way that men and women engage in team and individual sports over the adult life course help to explain these differences as can be seen in **Figure 2.3** below. Individual activities appeal to both genders across the age spectrum while team sports appeal principally to younger men. Overall, while there are over 3 times as many men participating in individual activities compared to team sports, there are over 20 times as many women playing individual sports than team sports. Even among the oldest age cohort of women where participation is known to be low, there are proportionately almost as many participants in individual sports as there are women aged 16 to 24 playing team sports. Team sports are an important source of participation for young men but even here there is a steep drop off in participation from the mid 20s onwards. Individual sports tend to

⁷ Throughout the report categories marked with an * within figures have sample sizes of less than 100

endure transitions throughout life as participants do not have to depend on getting other members to take part. They are also relatively flexible as to where and when they can be played.

Figure 2.3 - Gender, Age and type of Participation



2.4 Participation and illness/disability

The presence or absence of a disability or illness is known to be a significant factor in whether or not an individual participates in sport⁸. 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 the above question are also asked whether this problem prevents their participation in sport or exercise. Just over 18% of Clare-based respondents answered yes to the first question with the majority of these (just over 15%) also answering yes to the second question. Nationally, the corresponding figures for 2013 were 19% and 14% respectively.

Older people and those with a lower income, education or occupation class tend to have worse health status. These are also groups that are the least likely to play sport. Thus those with a long-term illness or disability are not only less likely to play sport on health grounds but also by virtue of their socio-economic characteristics. This also proves to be the case when we look at Clare.

14.5% of those with a disability played sport in the previous 7 days compared to 47.5% for those without a disability. Where the disability limited the playing of sport the figure was even less at 12.1%. Further analysis is limited because of the small numbers of persons with a disability in the sample. However, the figures suggest that participation is lower among women, and older people, with a

⁸ <http://www.esri.ie/UserFiles/publications/20091216163532/BKMNEXT155.pdf> (pages 44 - 46)

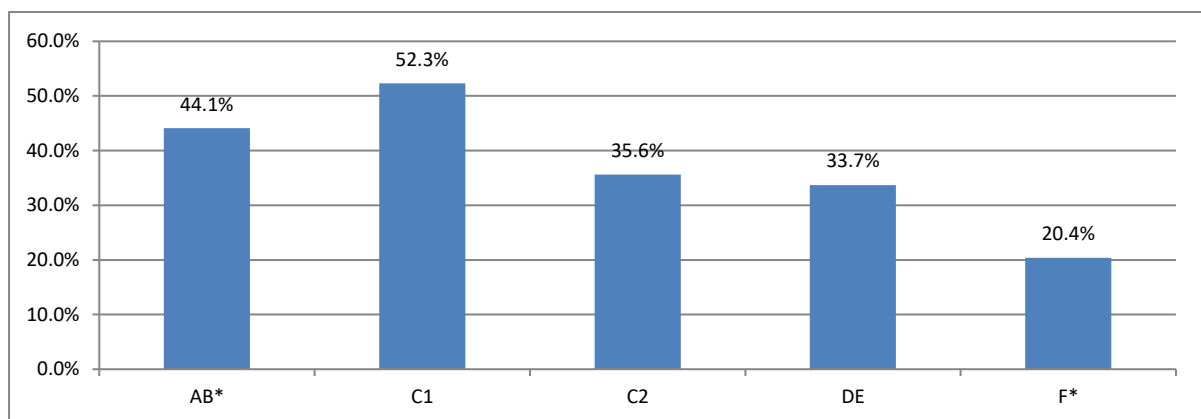
disability. Participants with a disability participate mainly in individual-based activities including running, cycling, swimming and golf which have a broad appeal across gender, age and health levels.

2.5 Socio-Economic Status and Participation

Sports participation has a strong socio-economic gradient with those in the higher social classes, higher income earners and those with higher educational attainment significantly more likely to play sport. While income and education are closely correlated they have also been shown to be strong influences on participation separately. This social gradient has been a consistent feature of all sports participation research in Ireland for over a decade and has been resilient to the policy efforts which have sought to address it in the intervening period.

Figure 2.4 examines participation in Clare by social class in Clare. The picture which emerges is not as clear cut as is the case within the national ISM data and the gradient is not as strong or consistent as it is within the national sample. That this is the case is likely to be reflective of the relatively small samples within the various sub-groups in the Clare sample. Despite this limitation the figure suggests that those in the lowest social class are significantly less likely to participate. A similar picture emerges when participation is analysed by highest level of educational attainment.

Figure 2.4 - Participation by social class



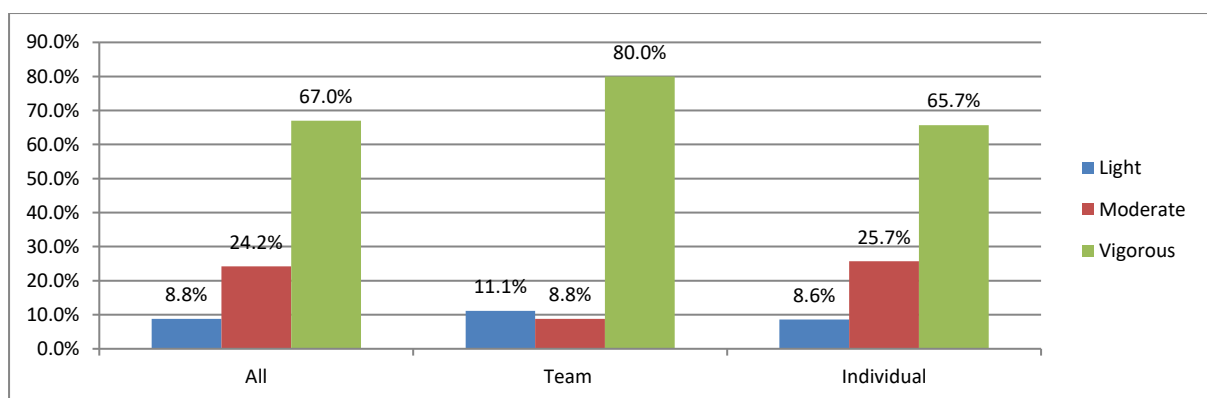
2.6 FITT Analysis

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.

On average, sports participants in Clare take part in approximately 3 sporting sessions per week with men taking part in significantly more sessions than women (3.31 vs. 2.57). While there are far more participants in individual sports than team sports, for those who take part in team sports they do so more regularly than those who take part in individual activities (4.55 vs. 2.93).

Most participants are taking part with sufficient effort to benefit their health as can be seen below in **Figure 2.5**. Over two-thirds of participants are engaging in sporting activity at a vigorous intensity (out of breath or sweating) while an additional quarter are engaging in moderate intensity activity (increasing their breathing rate). Overall therefore over 90% of participants are benefitting their health through the intensity of their participation. Team sport participants tend to participate at a slightly higher intensity than individual sports participants. The intensity of sports participation declines with age with almost 90% of 16 – 24 year olds taking part at a vigorous intensity compared to 20% of over 65 year olds. The decline is most noticeable from the mid 40s onwards.

Figure 2.5 - Intensity of participation – overall and by type of sport



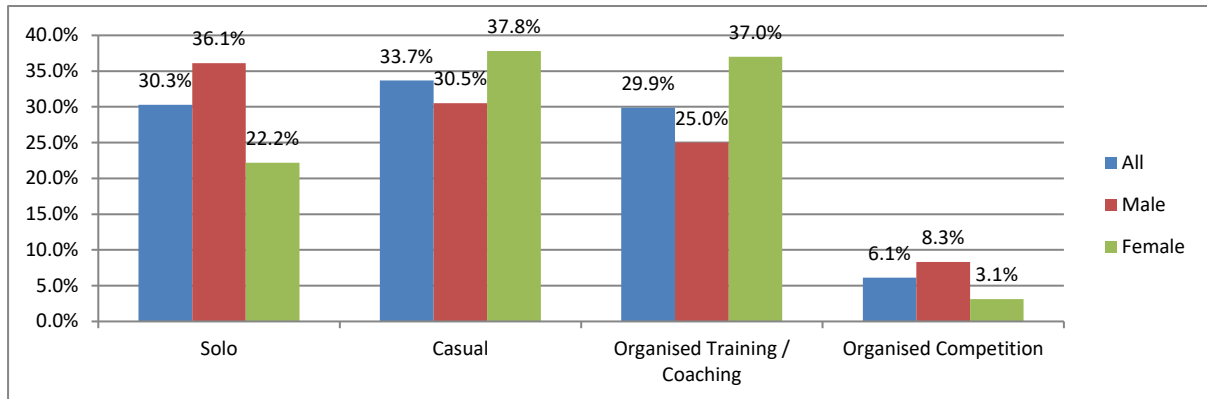
For those who do participate in sport, the median⁹ weekly duration is 150 minutes (2.5 hours) with men taking part for longer (240 minutes vs. 120 minutes) and team sports participants taking part for longer than individual sports participants (330 minutes vs. 150 minutes).

Adult sport in Clare is dominated by informal / unstructured participation as can be seen from **Figure 2.6**. Over two thirds of all participation occurs solo or casually with family and friends irrespective of gender. However, women prefer casual participation while men have a preference for solo participation. Organised competition has the least appeal for both genders, particularly for women.

⁹ The median represents the mid-point in the distribution of durations for all participants. It is used here instead of the mean to minimise the impact of extreme durations associated with particular sports e.g. fishing, triathlon, cycling

Recently however there has been a growth in participation in organised training associated with the rise of exercise and running and the popularity of this context for participation can be seen below.

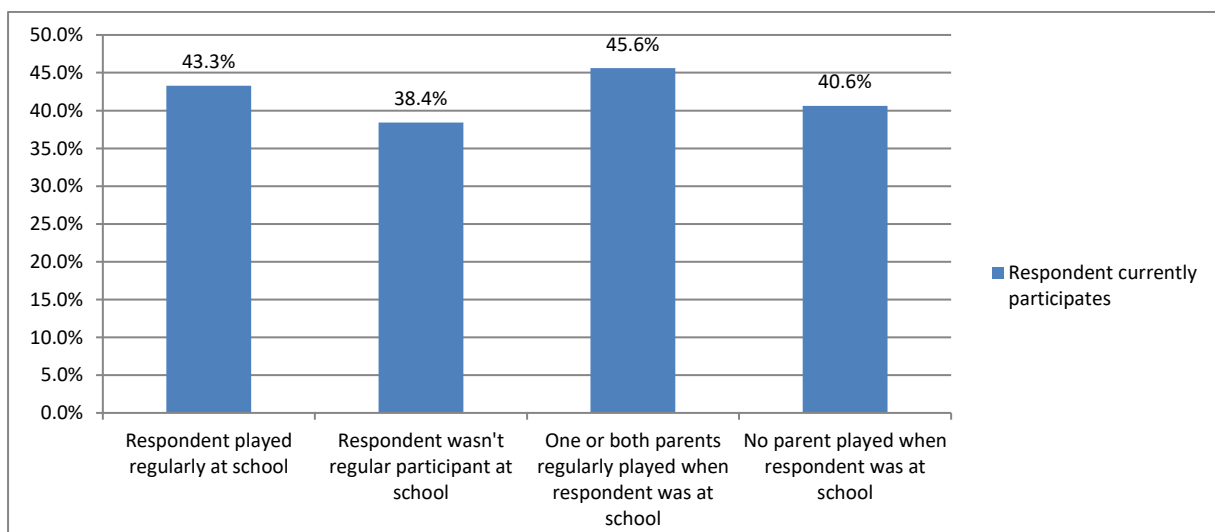
Figure 2.6 - Context for Participation – overall and by gender



2.7 Participation and influence of school and parents

The ISM asks respondents whether or not they played regular sport at school apart from PE lessons and whether or not their parents were regular participants when the respondent was at school. Using this information it is possible to assess whether or not their participation in childhood or that of their parents during their childhood has any bearing on the respondent’s current participation. Note that because of the small sample size it is not possible to look at the influence of different parental participation groupings (father only, mother only, both parents playing) here. The results in **Figure 2.7** simply compare current participation with whether or not any parent was a regular participant while the respondent was at school.

Figure 2.7 – Current participation vs. childhood participation and parental participation

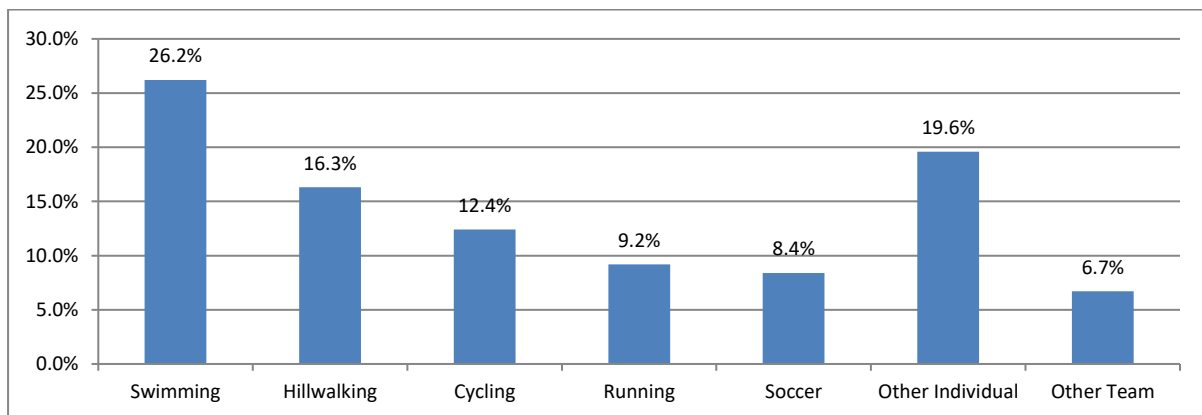


Both the respondent's participation in childhood and the participation of the parents when the respondent was a child appear to be positively associated with the respondent's current participation. While the differences seen below do not reach statistical significance they point to the potential importance of regular participation as a child as well as parental engagement in sport during the child's development to the likelihood of engagement in sport as an adult.

2.8 Interest in participating more and barriers to playing more sport

During 2013 the ISM included a module asking respondents whether or not they would be interested in participating more, what sports they might be interested in playing more, and what were the barriers to increasing their participation. Encouragingly almost 60% of respondents from Clare expressed an interest in participating more, the vast majority of whom expressed an interest in participating in more individual activities as shown in **Figure 2.8** below. While most of the sports identified might be expected one surprising inclusion is hill-walking which may reflect an aspect of Clare's landscape and topography.

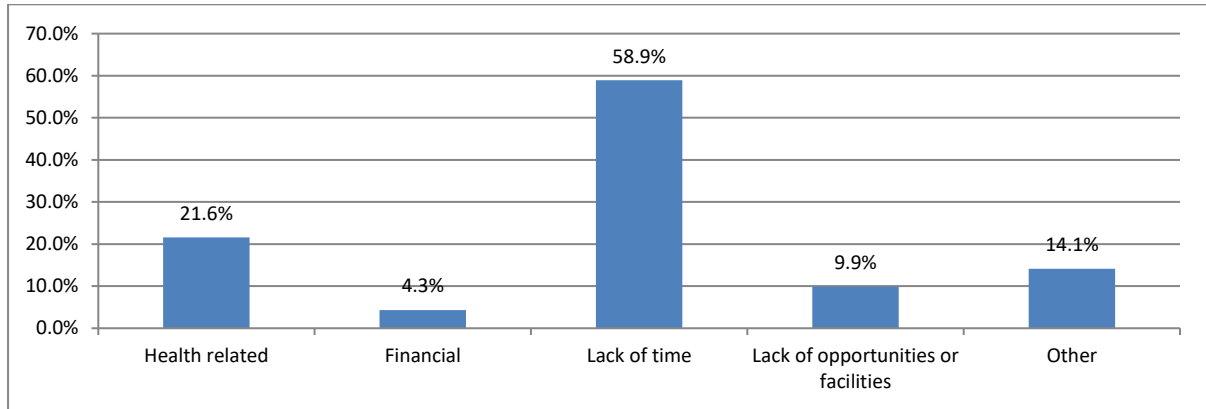
Figure 2.8 – Interest in increasing participation by sport (% of participants interested in increasing participation)



Finally the module identified the main reasons preventing individuals from taking part in more sport. These are presented in **Figure 2.9**. Like with many other surveys lack of time, principally in respect of work commitments but also arising from family responsibilities, was the overwhelming barrier to increasing participation. In the case of health barriers, these included issues such as a perception of being too old, being in poor health, a recent illness / injury, or having a disability. Lack of resources and opportunities / facilities featured less prominently as barriers while very few people cited lack of

interest (0.4%) or lack of motivation / laziness (4.8%). Finally, weather was a barrier to participation for 7.4% of respondents who would like to do more.

Figure 2.9 – Main Reasons preventing participation in more sport



3. Broader Physical Activity

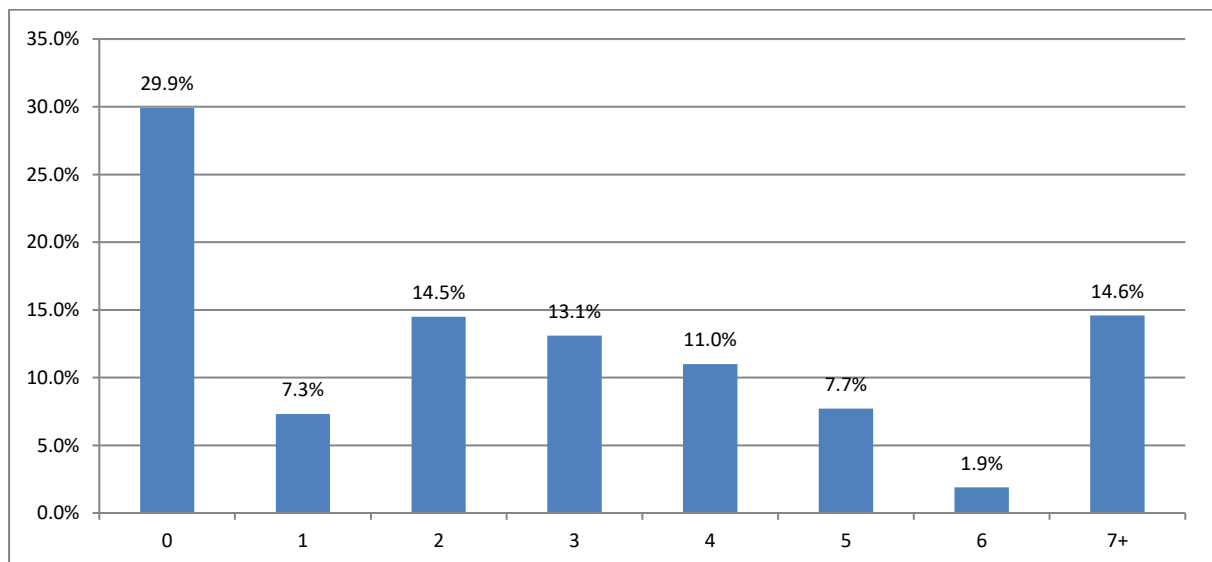
3.1 Recreational Walking

Recreational walking is an important source of physical activity for many. 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, recreational walking overcomes one of the main disadvantages identified by older people to physical activity, namely that it is easier to injure yourself.¹⁰

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.

Over 70% of Clare adults undertook at least one walk for recreation or leisure during the previous 7 days. For almost all of these participants, at least one walk was of 20 minutes or more duration. The mean number of walks per week was 4.3, but the distribution of the number of walks across the population was somewhat polarised (**Figure 3.1**) with 15% walking for recreation every day and 30% not walking at all. Thus, very close to half of the population either walked every day or not at all.

Figure 3.1 – Walks per week



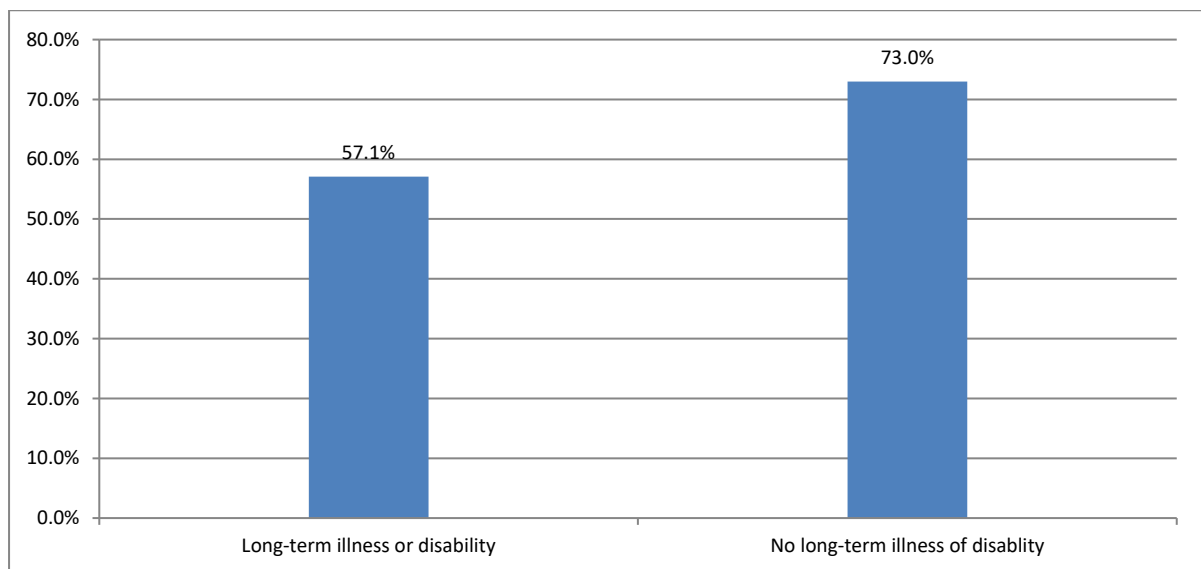
¹⁰ Physical Activity and Sport: Participation and Attitudes of Older People in Ireland, Ipsos MORI September 2009

The mean weekly walking duration is 163 minutes while 90% of walkers describe their walking pace as “steady, average” or “fairly brisk”.

The significance of recreational walking as a source of health can also be recognised given that it represents the only form of regular exercise for one in four Clare adults while one in eight walkers meet the National Physical Activity Guidelines solely through recreational walking.

Women walk more than men (82% vs. 58%). While this is in line with the national trend, at 24% the difference is much greater than the 13% difference between the genders seen nationally. Recreational walking is also more popular among older age groups. Individuals with children are more likely to walk than those without. Students are less likely to walk than they are to take part in other sports. The social gradients around recreational walking are much weaker than in the case of participation in other sports. People with a long-term illness or disability are significantly less likely to walk than those without as seen below in **Figure 3.2** although it is still the case that nearly 60% of those with a disability are recreational walkers. Finally, those living in a rural part of Clare are more likely to walk than their urban counterparts.

Figure 3.2 – Recreational walking by presence of a long-term illness / disability



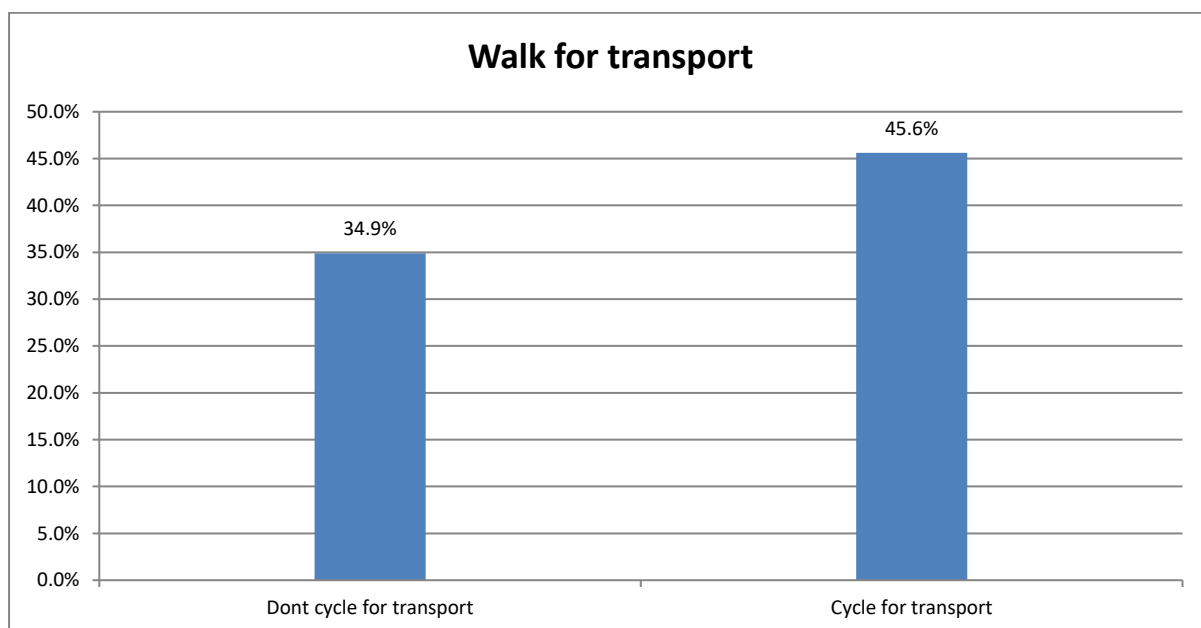
Overall, the picture around recreational walking suggests that there may be a trade off going on with those who do not play sport compensating by walking and vice versa. It could also be that walking is seen as a more affordable less strenuous activity which more people can accommodate into their daily schedules. Flexibility of time and place are also important considerations in terms of the likelihood of walking.

3.2 Walking for transport

In the ISM respondents were asked separately whether they undertook regular walks for transport, as opposed to for recreation, exercise or leisure. ‘Regular’ was defined as at least once a week. Of the total Clare population, 36% undertook regular walks for transport compared to 40% nationally, a marginally significant difference.

While we have seen that recreational walking is more popular among rural Clare residents, the opposite is the case with walking for transport. People living in urban areas are more likely to walk for transport. When considering transport issues only, there is clearly a greater degree of car-dependency associated with living in rural Ireland, which has an impact upon levels of physical activity. There is no association, positive or negative, between recreational walking and walking for transport among the Clare population in our sample. However, there is a strong association between walking for transport and cycling for transport as can be seen below in **Figure 3.3**.

Figure 3.3 – Walking for transport by whether cycles for transport

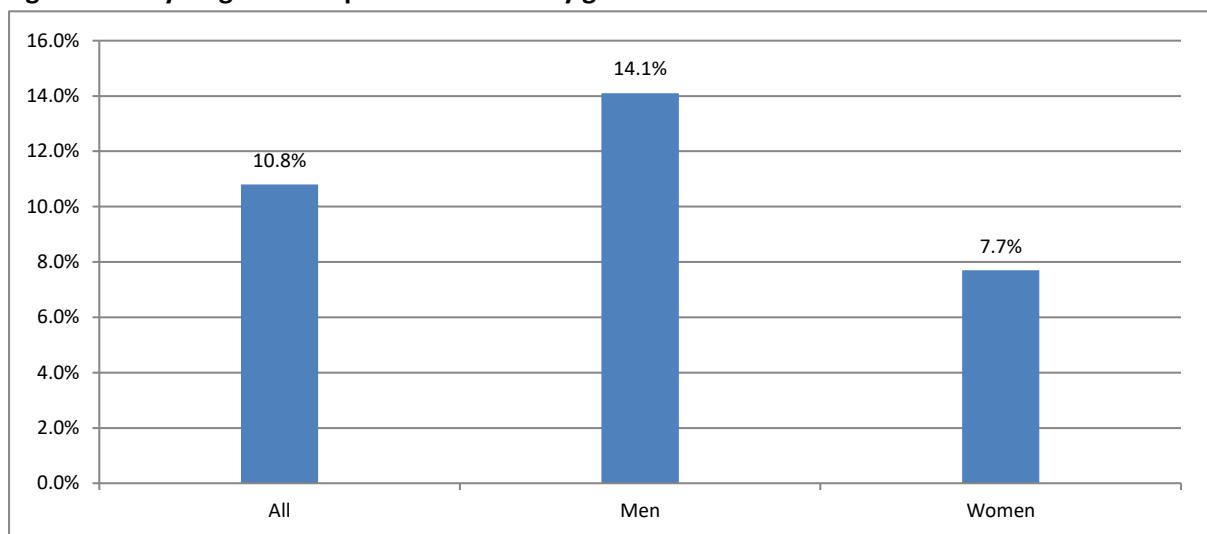


The profile of those who walk for transport is almost diametrically opposed to those who engage in recreational walking. Whereas in the latter case it is older married individuals (particularly women) with children who take part, it is more likely to be younger single men who are students who take walk for transport. However, one low participant group in both cases is the one which includes individuals with a long-term illness or disability.

3.2 Cycling for Transport

Approximately one in nine Clare adults reported cycling for transport at least once a week. This figure is slightly higher than the national average but the difference is not significant. As with cycling for sport, men are much more likely to cycle for transport than women as can be seen from **Figure 3.4**. Apart from the influence of gender, not having a car and not having a long-term illness or injury are positively associated with cycling for transport in Clare. Those who cycle for sport are also more likely to cycle for transport (the effect is also likely to work in the other direction).

Figure 3.4 - Cycling for transport overall and by gender



4. Overall Activity Levels – The highly active and the sedentary

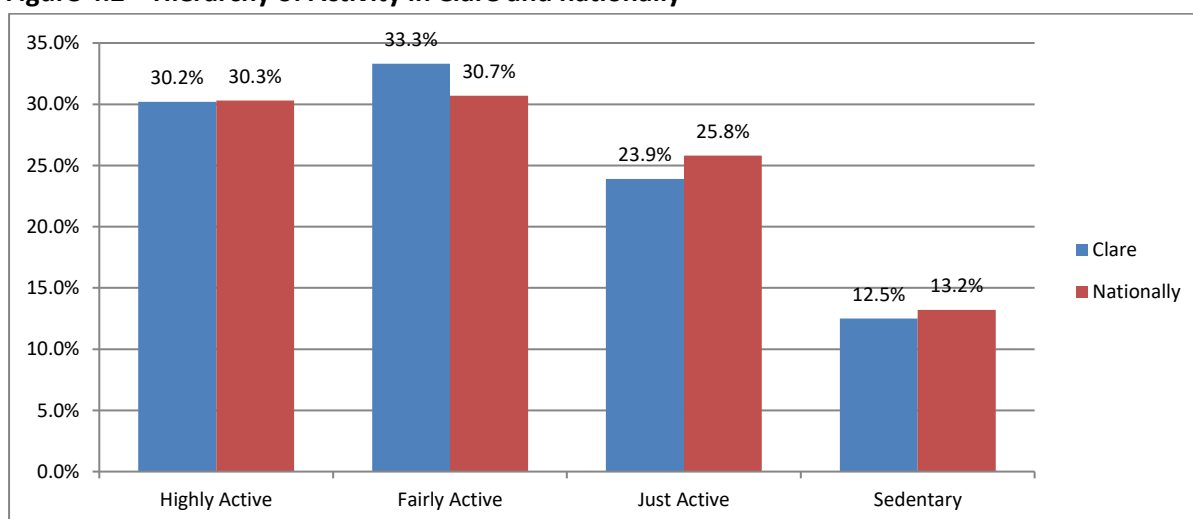
The ISM allows an approximate¹¹ analysis of adult activity levels against the National Physical Activity Guidelines based on a four-category classification system shown in **Figure 4.1**. The system is bookended by “sedentary” and “highly active” categories which are the main focus of this section. This reflects the policy importance of increasing the numbers of those who are highly active at one end of the activity spectrum and decreasing the numbers of those who are sedentary at the other end.

Figure 4.1 – Activity Classification

Highly active	Participate in 30 minutes moderate ¹ physical activity at least five times during the previous seven days (i.e. meet the National Physical Activity Guidelines)
Fairly Active	Participated in 30 minutes physical activity at least twice during the previous seven days
Just active	Participated in a sporting activity or recreational walking for 20 minutes at least once during the previous seven days, or regularly walks or cycles for transport (at least once a week)
Sedentary	Did not participate (20 minutes) in sporting activity or recreational walking during the previous seven days and does not cycle or walk regularly for transport.

Figure 4.2 below shows the proportion of Clare adults across the four categories compared to the national situation.

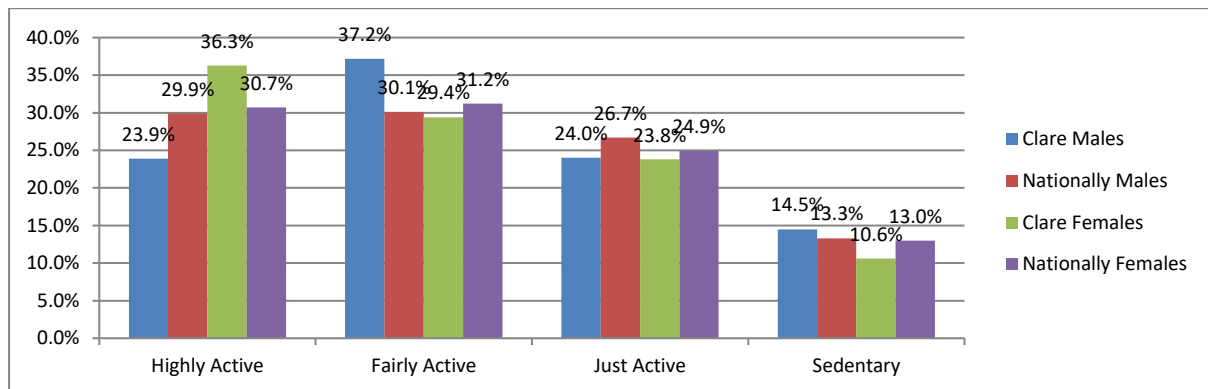
Figure 4.2 – Hierarchy of Activity in Clare and nationally



¹¹ 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.

While Figure 4.2 shows that there is very little difference across all four categories between Clare and nationally a very different picture emerges when we look at the situation by gender as in **Figure 4.3** where the situation in Clare is different particularly in respect of the two most active categories.

Figure 4.3 – Hierarchy of Activity by gender in Clare and nationally



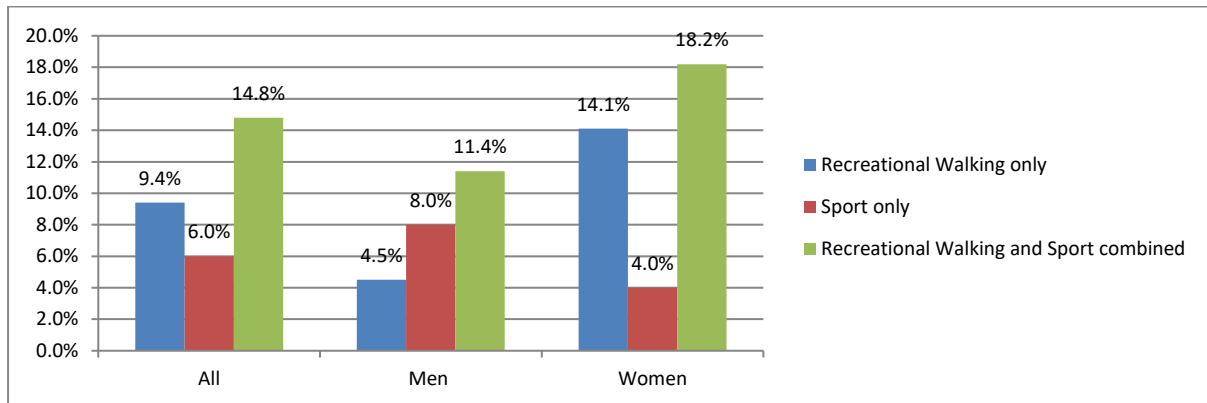
At the active end of the spectrum, we find that over one third of Clare women meet the National Physical Activity Guidelines while less than one quarter of men do so – a difference of over 12%. Most of this difference is accounted for by the next most active category (the “fairly active”) where the difference is 8% in favour of men.

At the other end of the activity spectrum, women also perform better than men with 10.6% being sedentary against 14.5% of men. Recreational walking and walking for transport are suggested as ideal means of reducing the numbers here.

Under the ISM there are three ways in which an individual can achieve the Guidelines, namely through recreational walking only, through playing sport only or through a combination of recreational walking and playing sport¹². Looking at the proportions of men and women who meet the Guidelines under each heading as we do below in **Figure 4.4**, we can see the influence of recreational walking and engaging in multiple activities as the key factors underpinning the gender differences in meeting the Guidelines.

¹² We don’t include walking or cycling for transport in assessing whether or not an individual meets the National PA Guidelines for the reason that the ISM does not collect information on the frequency, intensity or duration of this “active transport”. For this reason and because we exclude physical activity undertaken in the workplace and in the home, the ISM almost certainly underestimates the extent to which the adult population meets the Guidelines.

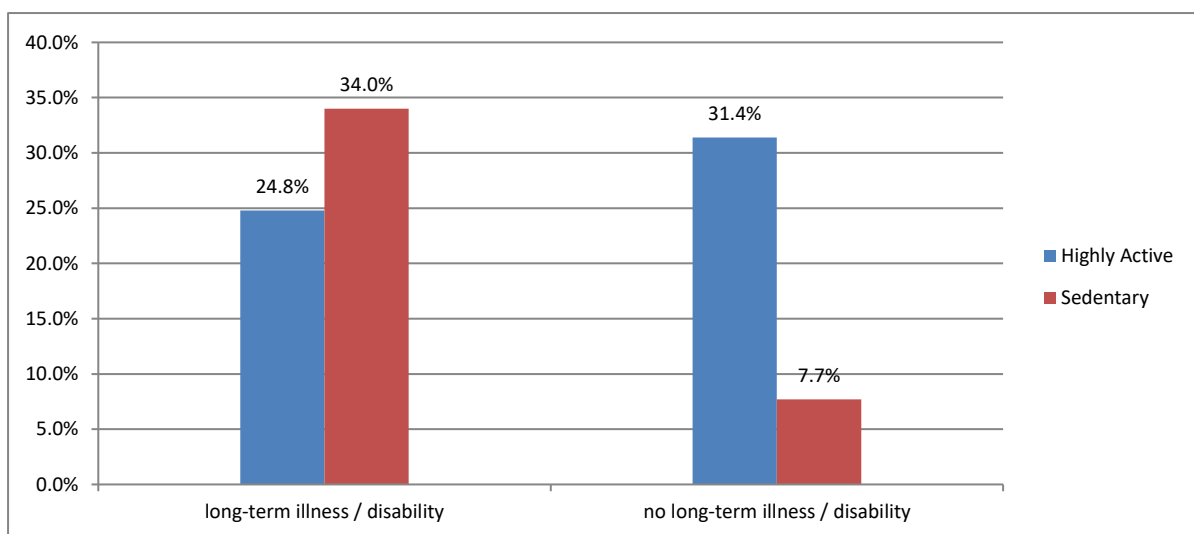
Figure 4.4 – How Clare adults meet the National PA Guidelines – overall and by gender



We have seen in Figure 4.3 that many men are already engaged in activity at the 2nd highest level (“fairly active”). It could be that they just need an extra push to get them to the highly active category. To do so might simply require the inclusion of a small number of recreational walking sessions for 30 minutes or more at a brisk pace into the mix of their activities.

Those who are unable to work due to long-term illness or injury have a high risk of sedentarism. **Figure 4.5** below compares the highly active and sedentary categories between those with a long-term illness / disability and those without. The high levels of sedentarism among people with disabilities is particularly concerning as they may exacerbate existing medical conditions and create further barriers to participation.

Figure 4.5 – Highly Active and Sedentarism levels by whether or not individual has a long term illness / injury

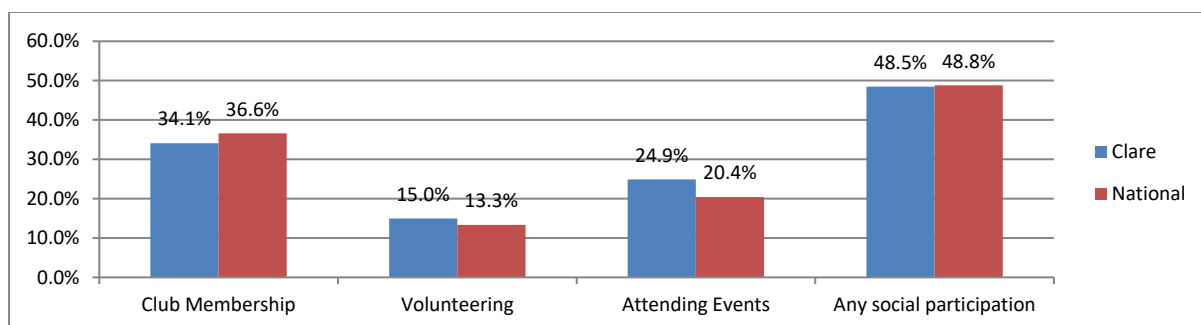


5. Social Participation

5.1 Overall Social Participation

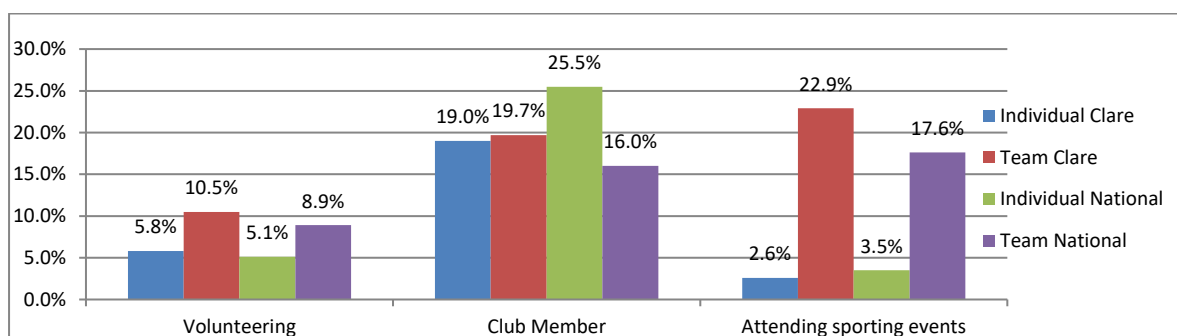
The ISM looks at social participation in sport through club membership, volunteering and attendance at sporting events. Before looking at each in turn we compare the levels of social participation in Clare with the national situation in **Figure 5.1** below. Social participation in Clare is broadly in line with national figures even though the difference in attendance is marginally significant. Caution is suggested in interpreting such differences given the limitations set out at the start of the report. The “any social participation” figure gives an indication of the importance of sport as a generator of social capital with approximately half of Clare’s adult population being involved. It is notable that this is greater than the 41.5% who actively participate. In this respect it is also worth noting that over 1/3 of Clare adults who were not active participants in sport during the previous 7 days were involved in some form of social participation around sport in that period.

Figure 5.1 - Membership, volunteering and attendance at sporting events in Clare and nationally



Volunteering and attendance are dominated by team sports; club membership is even between the two types of sport. This feature is at odds with the national situation as can be seen from **Figure 5.2**.

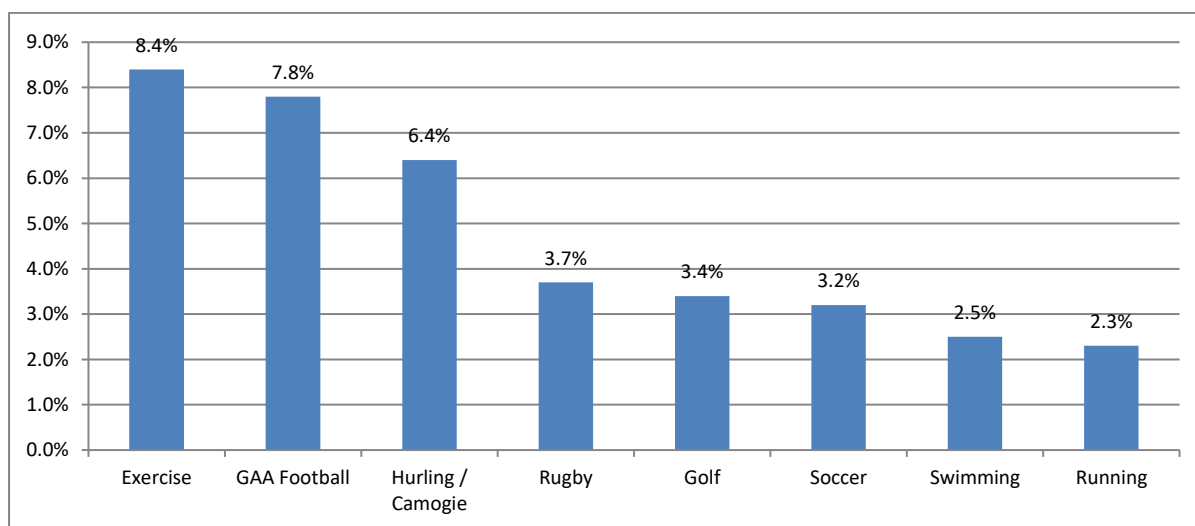
Figure 5.2 – Social Participation by type of sport in Clare and nationally



5.2 Club Membership

Clubs are an important resource in facilitating active and social participation, in providing a place to meet other participants and in offering guidance to people new to the sport. A little over one third of adults in Clare are members of a sports club with membership being relatively evenly split between team and individual sports as seen earlier. The top 8 sports in terms of membership are shown in **Figure 5.3** below. As with other figures and tables in this report, the results should be regarded as indicative only. While most of the team membership is accounted for in the figure below, it should be noted that over 4% of respondents indicated membership of a range of individual sports including badminton, boxing, cycling, dance, rowing, triathlon and weightlifting.

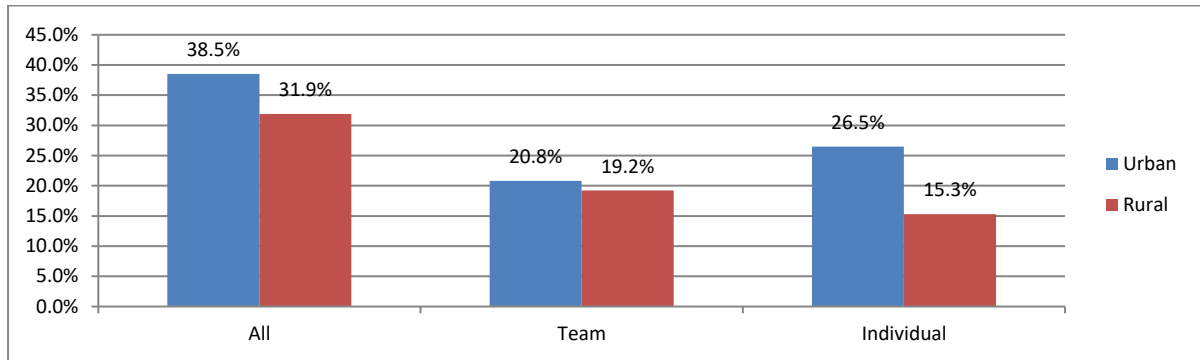
Figure 5.3 – Club Membership by sport in Clare



While the gap between men and women in active participation is just over 7% in favour of men, a much more significant gap exists within club membership with 44.5% of men being members of a club compared to 23.9% of women. Women have lower levels of participation across all three aspects of social participation. In the case of volunteering and attendance this is perhaps not surprising given the relative importance of team sports in respect of these aspects of participation. However, this does not fully explain the disparity in club membership where individual and team sports account for roughly 50% each of overall membership figures. That there are significant differences between men and women in terms of membership of team and individual sports clubs in Clare (and nationally) might simply mean that clubs of any sort have less appeal for women than for men, an issue which the clubs might need to look at if they wish to attract more women members.

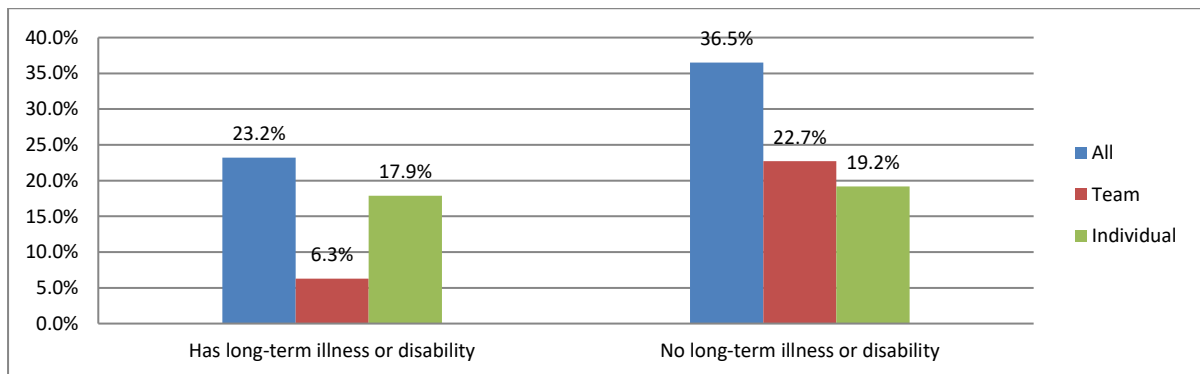
Given that Clare is a strongly rural county it is interesting to compare club membership by whether or not an individual lives in an urban or rural area as in **Figure 5.4** below. Club membership is more popular in urban than rural regions, principally associated with individual sports. While the difference overall is not significant the difference for individual sports is.

Figure 5.4 Club Membership by type of sport by urban / rural location of residence



In Figure 5.5 below we see that those having an illness or disability are much less likely to be club members. When looked at by the type of sport it is clear that clubs catering for team sports are the location of almost all the difference in this respect.

Figure 5.5 Club Membership by presence of long term illness or disability



5.3 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 Population¹³ identified that 33% of all volunteers were involved in sport only slightly behind the much broader category of “social / charity” at 35%.

15% of adults in Clare volunteered at least once a week during 2011-2013. In comparison to other forms of participation in sport this proportion is relatively low and limits more detailed analysis. Nonetheless we have already seen that volunteering is more associated with team sports, which in turn is likely to be driven by children’s participation. In this respect there is a non-significant difference in the proportion of volunteers who have children (16.6%) than those who don’t (12.5%).

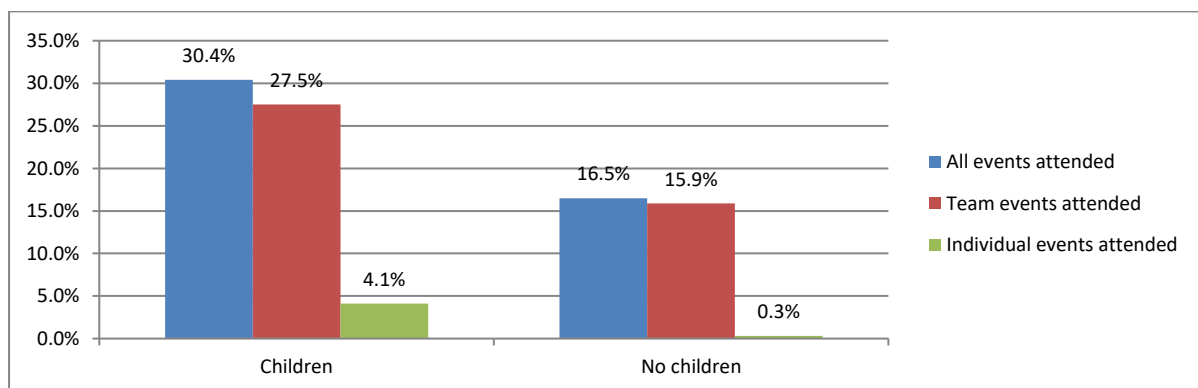
Those who volunteer spend on average just less than 3.5 hours per week undertaking a variety of roles principal the most prominent among which are coaching, organising activities, acting as a club official and providing transport.

More men (17%) volunteer than women (13%) and adults without a long-term illness or disability are more likely to volunteer than those without, 16% against 9%. Neither of these differences is statistically significant although the one related to disability is marginal.

5.4 Attendance at sporting events

Just less than one quarter of Clare adults reported attending at least one sporting event in the previous 7 days involving either children or adults. Given that over 90% of these events involved team sports it might be surmised that they involved a significant amount of children’s participation. We can check this from the ISM by analysing attendance by whether or not the respondent has children. When we do so as in **Figure 5.6** we see that this is exactly the case with significantly greater attendance at all forms of sport among individuals with children.

Figure 5.6 – Attendance at sporting events by type of sport and presence of children



In light of the above it is perhaps unsurprising that there is a strong association between membership of team sports clubs and attendance with those who are members of team sports clubs being more than twice as likely to have attended a sporting event.

There is little difference in attendance patterns between men and women in Clare. Nationally women are significantly more likely to attend than men so it is difficult to know whether this particular feature is a true reflection of the situation in Clare or a function of the small size of the Clare sample. Individuals with a long-term illness or disability are less likely to have attended sporting events than those without but the difference is not significant.

Appendix: 2011 Census Figures and Clare Dataset Demographics

	2011 Census	2011+2013 Census combined
Gender	16 years plus	
Male	49.5%	49.4%
Female	50.5%	50.6%
Age		
16-19	6.4%	6.8%
20-24	7.2%	7.3%
25-34	17.8%	17.7%
35-44	20.1%	19.8%
45-54	17.5%	18.1%
55-64	14.7%	14.8%
65+	16.2%	15.5%
Working Status		
Employee/Self Employed	50.6%	50.0%
Unemployed	10.9%	11.7%
Retired	13.9%	14.2%
Homemaker	9.4%	9.3%
Student	11.2%	10.9%
Umemployed-illness/disabled	3.9%	4.0%
Total		
Region- 2006 Census		
Urban	32.6%	32.5%
Rural	67.4%	67.5%
Education		
Third Level/Other Second Level	45.1%	50.0%
Leaving Cert	22.8%	20.2%
Junior Cert	17.2%	15.3%
Primary/Lower	14.7%	14.3%
Illness or disability-Yes	12.6%	18.2%