



Research examining the participation
and attitudes of older people in Ireland
towards physical activity and sport

Report prepared for:
Go for Life and Sport Ireland

September 2015

sport ireland

**Age &
Opportunity**

Life is for
Living.

Research examining the participation and attitudes of older people in Ireland towards physical activity and sport

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Perceptive Insight

Jacob Peterson House
109 Bloomfield Avenue
Belfast
BT5 5AB

T +44 (0) 28 9073 7090

F +44 (0) 28 90734

W www.perceptiveinsight.co.uk

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Definition of terms used

Older people

As used throughout this report, the term older people refers to those over 50 years of age.

Moderate intensity activity

Activity which is of sufficient intensity to raise a participant's breathing rate.

Highly active

Participants who accumulate a weekly average of **five periods** of physical activity or walking of moderate intensity of at least 30 minutes for four weeks, as per the National Physical Activity Guidelines.

Medium active

Those who have taken part in moderate activity of sufficient duration at least one day a week, but less than five days weekly for the last four weeks.

Low active

Accumulate less than 30 minutes of moderate intensity exercise per week (includes walking).

Participants

Those who have either (1) walked for at least 30 minutes in the last four weeks (2) participated in sport or physical activity in the last four weeks or (3) both walked and engaged in sport/physical activity.

Non participants

Those who have not engaged in some form of physical activity or at least 30 minutes walking in the last four weeks.

Socio-economic group (SEG)

Used to describe, measure and classify people of different social grade and income and earnings levels, as follows:

ABC1

Those categorised as being in the 'upper' (A), 'middle' (B) and 'lower middle' (C1) classes, and employed in managerial, administrative or professional capacities.

C2DE

Those categorised as being in the 'working class' including skilled (C2), semi-skilled and unskilled manual workers (D), and the unemployed, state pensioners or widows (no other earner), casual or lowest grade workers (E).

1. Executive summary

This is the fourth survey of older people's attitudes and behaviours around physical activity undertaken for Sport Ireland and Age & Opportunity's Go for Life programme. It asked a representative sample (n=1,000) of people in Ireland aged over 50 about their behaviours and attitudes to physical activity.

Tipping the Scales

For the first time since these surveys began in 2006, there are more active than inactive older people in Ireland, but only just. More older people are in the 'highly active' or 'medium' category than in the 'low' or 'not active' category.

26% of all older people are 'highly active'

27% are 'medium' (up from 18%)

This equals 53% overall

The data reveals a positive shift in the overall activity levels of older people. 26% of all older people are 'highly active', 27% are in the 'medium' category, and 47% are in the 'low' category. This compares favourably with activity levels in the 2011 data. The significant increase has been in the proportion of older people participating in activity at a 'medium' level (27% vs. 18% in 2011) which appear to be moving from the 'low' category (47% vs. 55% in 2011).

Minding the Gap

There has been a rise in the numbers of people aged 50-64 getting active. Nearly half of them take part in sport or physical activity, which is up from just over two-fifths.

There are still significant differences in participation in sport and physical activity based on socio-economic differences and on age range.

47% of people who are between fifty and sixty-four are participating in sport or physical activity in comparison to 34% of people sixty-five and over

49% of ABC1s participated in sport or physical activity in comparison with 34% of C2Des

41% of respondents said that they have engaged in some form of sporting activity in the past four weeks, excluding walking. The profile of respondents by gender remains similar, with men (43%) more likely to have engaged in sport than women (39%). Contrastingly, the gap in sports participation between the younger and older age groups has increased. In the current study, 47% of 50-64-year-olds reported

participating in sports compared to 34% of those aged 65+; a statistically significant difference. This compares with 41% of 50 – 64 year olds versus 38% of those aged 65+ who had taken part in sport in the 2011 study. Socio-economic background continues to have a significant influence on participation in sports, as 49% of ABC1s reported that they participated in sports compared to just 34% of C2DEs.

The Non-Participants

Non-participants can be split into those who have stopped taking part and those who have never taken part.

Those who have stopped are more likely to be over sixty-five. Their main reason cited is injury or health. Of those who have never taken part, over half of them say that nothing would motivate them.

43% of those who are 'low activity' stated that they stopped doing regular exercise in the last five years

43% of those who are 'low activity' stated that they stopped participating due to injury or health

60% of those who have stopped or never taken part in physical activity said that nothing would motivate them

With regard to those who have stopped participating, 56% of those who have not undertaken a sporting activity in the last four weeks, have some experience of regular exercise in the past. 43% stated that they stopped doing regular exercise in the last five years. Further analysis reveals a number of statistically significant differences in this demographic; those in the younger age bracket (49%) were more likely to report that this was the case compared to their older counterparts (37%), as were women at 54% vs. men at 32% and those from the ABC1 socio-economic group 54% compared to 34% of the C2DE group.

43% indicated that they stopped participating due to injury or health. Men (49%) were significantly more likely than women (38%) to provide this response, as were those aged 65+ (55% vs. 32% aged 50 – 64 years). 36% mentioned that they were deterred by lack of time. The third most cited reason for ceased sports participation was lack of interest, mentioned by 25% of respondents, and consistent by age, gender and socio-economic group.

Of those who, as an adult, have never taken part in regular exercise, 38% stated that they lacked motivation with a further 12% lacking interest. 20% lacked time, a reason more commonly cited by women (22%) than men (18%). 11% stated that they lacked awareness of clubs/organisations available to enable regular participation.

Those who have not taken part in sports or recreational activity were asked if any factors may encourage regular participation. The majority (60%) reported that nothing would motivate them to undertake regular exercise or activity. It should be

noted that two-thirds of such responses came from those who have walked for a minimum of 30 minutes in the last four weeks, and thus, there may be an issue with what they perceive as ‘undertaking regular exercise’.

Perhaps most noteworthy are the 14% who indicated that they are ‘interested in making a healthier change but haven’t thought seriously about it’. It is possible that, with some encouragement or guidance, this segment may be willing to make positive lifestyle choices.

Only 12% expressed resistance to making a healthier change. Such respondents are more likely to be male. Further analysis reveals a significant difference in socio-economic group and age. Those from the C2DE group, and aged 65+ years, are significantly more likely to report lack of interest in making a healthier lifestyle change.

Guiding Principles

The National Physical Activity Guidelines call on all adults to take part in thirty minutes of physical activity on five days of each week.

Almost half of people had heard about the Guidelines but just over a tenth of people surveyed could correctly cite them.
Of those who had heard of them, their estimate of the Guidelines was fairly accurate

While 42% had heard of the guidelines, only 13% could correctly cite them.

74% of those who had heard of the Guidelines could provide a reasonably accurate estimate.

Awareness of the National Physical Activity Guidelines was fairly limited. Although 42% indicated that they had heard of the recommended physical guidelines, only 13% of all respondents correctly cited the guidelines as thirty minutes of exercise over five days of the week. A much higher number (43%) indicated that they were not sure of the guidelines, however, it is promising to note that around two in five (38%) provided a close approximation.

Interestingly, 33% of those who indicated that they had heard of the guidelines gave an underestimated response, while 28% gave an overestimation. It is positive to note, however, that 74% of those who had heard of the guidelines provided a reasonably close or exact estimation compared to 34% of those who had not heard them.

Picking up the pace on walking

Almost everyone does some walking but, now, over half report walking at a 'fast' or 'fairly brisk' pace. Over half walk alone, while another quarter walk with just one other person.

92% of people indicated that they walked for a minimum of five minutes in the last four weeks. 73% have taken a thirty-minute continuous walk in the last four weeks

55% of people walk on their own and a further 25% walk with one other person

55% indicated that they walk on their own, while 25% reported being accompanied by a friend/neighbour or other person. This is broadly consistent with the 2011 study. One significant difference from 2011 is the higher proportion who reported walking on their own (55% in 2014 compared to 47% in the 2011 survey). 73% have undertaken at least one continuous walk lasting a minimum of 30 minutes in the last four weeks. This is largely consistent with the 2011 study, when 72% reported that they had done so. On the whole, the characteristics of walkers remain fairly similar to the 2011 study.

Most noteworthy is the rise in older walkers who report walking at a 'fast' or 'fairly brisk' pace, and so are deemed to have walked at sufficient intensity as advised by the national guidelines. 53% reported walking at a 'fast' or 'fairly brisk' pace compared to 43% in the 2011 and 40% in the 2008 studies. Those aged between 50 and 64 years are more likely to be adhering to the guidelines based on their walking pace (60% compared to 43% of respondents aged 65+).

Pedal Power

Golf and swimming remain the two most popular sports that people engaged in. Cycling, however, is on the rise.

Cycling has risen to become the third most popular sport enjoyed by older people

Cycling has risen in popularity from 4% to 7% in the last four years.

Cycling has overtaken weight training, dancing and aerobics in popularity among respondents since 2011. Those who cycle also reported that they were engaging more regularly in this activity on a weekly basis than some other sports, including swimming.

Overall, 31% of older people have participated in only one sport or physical activity, excluding walking, in the last four weeks. This figure is consistent with the 2011 study. 9% reported engaging in two sports, while just 1% has participated in three or more sports, excluding walking in the past four weeks.

Clubbing together

Membership of, and participation in, clubs and groups continues to be a significant factor in predicting involvement in sport and physical activity.

Almost half of respondents use a club or are part of a group. A large number see sport and leisure facilities as welcoming places.

46% of people reported using a group or club

68% of people agreed that sport and leisure facilities are welcome places

Almost half (46%) of older people participate in a group or avail of a club. The study reveals a boost in membership across all groups, with the exception of card/bridge clubs.

Membership incidence across all types of sport/social club is significantly higher amongst men (50% compared to 42% of women), those aged 65+ years (49% compared to 44% of 50 to 64-year-olds), and ABC1 groups (57% compared to 35% of C2DEs).

Men are more likely than women to belong to a sporting club (33% vs. 16% respectively).

There is strong agreement among older people that sporting and leisure facilities are welcoming places for them. 44% strongly agreed that leisure facilities are welcoming, with 68% agreeing overall. Only 8% reported negative perceptions.

Not surprisingly, those who engage in physical activity, including walking, are more likely to agree that sporting and leisure facilities are welcoming places for older people. Over half of non-participants, however, reported positive perceptions of sport and leisure facilities.

Recommendations

Increase people's walking pace

- Promote the benefits of walking, especially walking at a faster pace in order to meet the National Physical Activity Guidelines
- Target those walking for five minutes and encourage them to walk for longer

Encourage those who are engaging in physical activity

- Encourage those in the younger bracket (50 to 64 years) to maintain, or build upon, their current level of physical activity so as to combat the decline in physical activity among older people aged 65+
- Promote the 'swap, don't stop' approach where mobility and health problems become barriers to older people engaging in particular exercises. This is particularly of relevance to people over 65 years of age

Find the barriers to physical activity facing C2DE groups

- Run a practical intervention for C2DE groups. There may be merit in engaging with a group of older people from the C2DE socio-economic group to further determine the barriers preventing them from engaging in activity and how those barriers might be overcome
- Promote the benefits of walking at a faster pace to C2DEs

Counter barriers to physical activity

- Promote low strength, low impact exercises to encourage uptake of those who are deterred by poor health or mobility problems
- Counteract perceptions of sports as time-consuming through promoting short exercises

Target those who are 'open to lifestyle change'

- Target those who are open to improving their lifestyle, but continue to promote activity and the benefits of a healthier lifestyle to those who are not interested in making changes

Promote the National Physical Activity Guidelines

- Promote the National Physical Activity Guidelines for adults, including older people
- Suggest how adults can incorporate physical activity into their daily lifestyle on a flexible basis to overcome trepidation among those who deem the Guidelines to be unobtainable
- Counter misperceptions among older people about their physical activity status

2. Introduction

Sport Ireland and Age & Opportunity first collaborated on the National Programme for Sport and Physical Activity for Older People in 2001. Since then, Go for Life (GFL) has promoted participation in sport and physical activity at all levels, through its unique model of peer leadership, supported by the small grants scheme, as well as various initiatives targeting specific groups of inactive older people, and a general public awareness campaign.

Since 2006, GFL and the Irish Sport Council have worked in conjunction to explore the attitudes and participation of older people (aged 50 and over) in Ireland towards sport and physical activity. In 2014, Perceptive Insight Market Research was commissioned to undertake the fourth wave of the study, which included the facilitation of 1,000 surveys with adults aged 50 and over across Ireland. This report presents the key survey findings from the 2014 study.

Importance of understanding participation and attitudes to physical activity and sport

Previous research has highlighted the importance of understanding participation and attitudes to physical activity and sport amongst older people. Some of the key reasons are outlined below:

- **The promotion of active healthy ageing is a global societal challenge¹:** The importance of ensuring active healthy ageing was recognised by the European Union, who recently set a target for researchers and policymakers to increase average healthy life span by two years before 2020. In order to meet this target, it is necessary to have a better understanding of the current issues facing the ageing population, and potential facilitators / barriers to increasing the life span of the population aged 50 and over.
- **Population projections suggest an increased population 65 years and over:** The European Commission issued a projection of age-related expenditure in 2009². This document highlighted a likely increase in life expectancy for the EU as a whole, and predicted that in 2060 life expectancy at age 65 would reach 21.8 years for men and 25.1 for women. The Irish Longitudinal Study on Ageing (TILDA)³ substantiates this, predicting that the proportion of the population in the Republic of Ireland aged 65 or over is expected to increase from the current level of 11.4% to 22.4% by 2041. Such increases in the older population will have an economic impact, particularly given the financial burden upon the health and social services, as well as the forecasted increase in public spending on

¹ Kenny, R. A & Bennett, A. (2011) *Fifty Plus Ireland 2011. First results from the Irish Longitudinal Study of Ageing: Introduction*. Trinity College Dublin.

² European Commission/Economic Policy Committee. The 2009 ageing report: Economic and budgetary projections for the EU-27 member states (2008-2060).2009. Available from: http://europa.eu/epc/pdf/2009_ageing_report.pdf

³ Kenny, R. A & Bennett, A. (2011) *Fifty Plus Ireland 2011. First results from the Irish Longitudinal Study of Ageing: Introduction*. Trinity College Dublin.

pensions, with a possible doubling in spending as a proportion of GDP by 2060 envisaged.

- **An increased aged population will influence public spending on long-term care:** An ageing population will have a strong upward impact on public spending for long-term care. This is because frailty and disability rise sharply at older ages, especially amongst those aged 80 and over, who are predicted to be the fastest growing segment of the population in decades to come⁴. Therefore, it is vital to gain an understanding of the issues and difficulties associated with this age group in advance of the predicted increase. This will enable forward planning and influence of policy reforms to support the needs of those aged 80 and over.

Given the trend of people living longer in current society, it is imperative to gain insight into the participation and attitudes of older people in Ireland to physical activity and sport.

The National Guidelines on Physical Activity for Ireland (2009)

In order to comprehensively assess activity levels of adults in Ireland, it is necessary to gain an understanding of the background to, and the purpose of, the National Guidelines on Physical Activity for Ireland (2009).

The Health Service Executive (HSE), in conjunction with the Department of Health and Children, has developed The National Guidelines on Physical Activity for Ireland to support the promotion of physical activity throughout the country. These Guidelines aim to: emphasise the importance of physical activity to the health of all Irish people; and outline the recommendations for physical activity for people of all ages and abilities. The Guidelines begin the process of setting national policy on physical activity in Ireland in terms of health, education, environment, sport and transport.

The Guidelines highlight World Health Organisation findings, that physical activity *‘interacts positively with strategies to improve diet, discourages the use of tobacco, alcohol and drugs, helps reduce violence, enhances functional capacity and promotes social interaction and integration’*. As well as the benefits to physical and mental health, and social well-being of individuals, the Guidelines recognise that there are financial benefits of encouraging increased participation in physical activity and sport. For example, recent studies^{5 6} have estimated that physical inactivity can

⁴ European Commission/Economic Policy Committee. The 2009 ageing report: Economic and budgetary projections for the EU-27 member states (2008-2060). 2009. Available from: http://europa.eu/epc/pdf/2009_ageing_report.pdf

⁵ *Tackling obesity in England. Report by the Comptroller and Auditor General*. London, The Stationery Office, 2001 (http://www.nao.org.uk/publications/nao_reports/00-01/0001220.pdf)

⁶ Martin BW et al. (2001) Economic benefits of the health-enhancing effects of physical activity: first estimates for Switzerland. Scientific position statement of the Swiss Federal Office of Sports, Swiss Federal Office of Public Health, Swiss Council for Accident Prevention, Swiss National Accident

cost about €150 to €300 per citizen per year. Therefore, increasing current levels of physical activity could significantly reduce the financial burden to society.

The guidelines set out the recommended level of physical activity for older people, as follows:

- Adults aged 18 to 64 – at least 30 minutes a day of moderate activity on five days a week; and
- Older people aged 65 and over – at least 30 minutes a day of moderate intensity activity on five days a week, with a focus on aerobic activity, muscle-strengthening and balance.⁷

Measuring physical activity levels

Since 2006, GFL and Sport Ireland have used the above guidelines to devise a measure of physical activity amongst older people. Before commencing the first survey in 2006, a review of existing studies and surveys on physical activity was conducted with a view to identifying the most appropriate measurement of physical activity and exercise to use in the survey. Following this exercise, and to ensure consistency with other studies including the ESRI/Irish Sport Council's 2003 Survey of Sport and Physical Exercise, walking was included in the 2006 and subsequent surveys, however, occupational activity was not.

Specifically, the study sought to identify the proportion of older people in Ireland who are 'highly active', i.e. those who meet the recommendations set out in the National Physical Activity Guidelines which is... *'the accumulation of at least 30 minutes of regular, moderate-intensity physical activity on most days of the week.'*

Aims and objectives

The measurable nature of sports and physical participation provides real insight for policymakers and stakeholders in assessing the effectiveness of current policies and the implications in assessing the effectiveness of associated decisions. Therefore in acting as an update on previous studies conducted in 2006, 2008 and 2011, the current research is important in contributing to an understanding of participation in sport and physical activity among older people in Ireland and to the future policy development in this area.

The overall aim of the research project was to investigate and assess the participation of people aged 50 and over in sport and physical activity in Ireland and the factors and issues surrounding that participation. Secondly, the research investigated and assessed the characteristics associated with older people who do

Insurance Organisation (SUVA), Department of Medical Economics of the Institute of Social and Preventive Medicine and the University Hospital of Zurich and the Network HEPA Switzerland. *Schweizerische Zeitschrift für Sportmedizin und Sporttraumatologie*, 49(3):131–133.

⁷ The Guidelines define moderate activity, as activity involving *'increased breathing and heart rate, but still able to carry on a conversation. Warm or sweating slightly, comfortable pace'*.

not participate in sport and physical activity, and the issues around such non-participation.

In summary, the overall aims of the research were to:

- Provide a robust picture of attitudes and participation of older people i.e. those aged 50 years and over in Ireland with regard to recreational physical activity and sport;
- Identify current barriers to participation and potential levers for change;
- Determine the proportion of older people in Ireland who engage in levels of physical activity that meet national guidelines;
- Identify strategic recommendations that will inform future policy and communications; and
- Provide a comparison with previous research, in particular the 2011 study, of changes in attitudes and participation of older people in Ireland with regard to recreational physical activity and sport.

3. Methodology

In this section we have detailed the key tasks that were undertaken during the implementation of the research. It should be noted that a detailed technical overview of the approach to the survey is available as a separate document.

The research design of this study replicates both 2011 and 2008 studies. Thus, the quantitative data presented in this report is based on a nationally representative survey of 1,000 people aged 50 years and over.

The survey was administered between 5th November and 5th December 2014 by telephone.

Questionnaire development

For the most part, the questionnaire used in the 2014 survey replicated the questions used for the 2011 and 2008 surveys in order to facilitate benchmarking. However, some refinements were made upon review of the survey by the Age & Opportunity and Sport Ireland research teams. Specifically, questions were incorporated to review the role of technology (mobile apps etc) in encouraging older people to participate in sport. A series of further questions were added to assess reasons for non-participation in recreational physical activity, other than walking.

The survey covered the following core topic areas:

- Levels of exercise and physical activity;
 - Walking;
 - Sports and recreation;
- Attitudes to physical activity and sports participation, including awareness of physical activity guidelines for adults;
- Motivation, barriers and access to opportunities for activity and participation;
- Use of internet and technology in enabling sports participation;
- Demographics (gender, age, working status, social class, tenure, level of educational attainment) in addition to perception of current health status, frequency of GP visitation, incidence of being diagnosed with any chronic or long lasting medical conditions, levels of mobility.

To enable comparative analysis, the format of the questions was kept largely consistent with the previous survey research. Further, the same approach to measuring participation in sport and recreational activity was used as in the 2011 study, as outlined in the following paragraphs.

Measure of participation in sport and recreational physical activity, excluding walking

To measure levels of sports participation and physical activity among older people, the survey initially assessed whether respondents had undertaken any form of recreational physical activity in the last four weeks, excluding walking. Subsequent questions were included to (1) identify the specific activities or sports in which they were engaged; (2) the number of days active per sport; (3) the length of time usually spent engaging in the activity (hours, minutes); (4) whether the effort put into the sport was enough to raise the participant's breathing rate; and (5) whether the effort put into the sport was enough to make the participant out of breath. The latter two questions assessed the intensity of the activities, using a standard self-rating scale.

Measure of physical activity, including walking

Respondents were also asked about walking in addition to sports and physical recreational activity. In this instance respondents were asked to indicate the number of days in the last four weeks they had conducted a continuous walk lasting at least 30 minutes and their usual pace of walking. By assessing pace, we were able to assess the intensity of walking, as moderate intensity is denoted by a 'fast' or 'fairly brisk' pace. Further analysis of both intensity and duration yielded insight into the extent to which respondents were considered meeting the National Physical Activity Guidelines.

The 'combined effect'

As with the 2011 and 2008 studies, a composite measure of activity was derived from the accumulated total minutes respondents spent engaging in individual episodes of sport or recreational physical activity, including walking, in the last four weeks.

To assess those who are considered 'highly active' a composite measure of physical activity was derived, calculated by the addition of the total number of minutes people spent walking for 30 minutes at a brisk or fast pace (i.e. sufficient pace to be categorised as of moderate intensity) and the total number of minutes spent engaged in a sport or recreational physical activity of at least 30 minutes duration, which resulted in a rise in the participant's breathing rate (i.e. sufficient exertion to be deemed moderate intensity).

To be considered 'highly active', respondents were required to have accumulated a weekly average of **five periods** of physical activity or walking of moderate intensity of at least 30 minutes for four weeks, as per the National Physical Activity Guidelines.

There was discussion at the analysis stage about those who accumulate more than 150 minutes of exercise per week, however do so on less than five separate occasions (i.e. those who undertake long bouts of exercise in one or two sittings). It was felt that, as the activity has not been undertaken on at least five occasions, such

people are not conducting sufficient activity to meet the recommended guidelines, and thus, were not categorised in the 'highly active' category.

Sample design

A Random Digit Dialling (RDD) sampling methodology was used in the study. RDD involves the random generation of telephone numbers based on geographic location.

Similar to the methodology employed during the last phase of research, quotas were applied to the survey to ensure that it was based on age, gender and location. The data was subsequently weighted to ensure it was reflective of the adult population based on Census 2011 data for age and gender. Table 3.1 provides a profile of the adult population demographics (by age and gender) based on Census data and the number of interviews that were conducted.

Table 3.1: Number of interviews conducted by age and gender

Category		Number in population	Achieved no of interviews (weighted)
Age	50 to 64	580	58%
	65 +	420	42%
Gender	Male	480	48%
	Female	520	52%
Total		1,000	100%

Whilst the Census data holds population statistics for socio-economic group (SEG), this is not categorised by age. Therefore it was deemed that population statistics on SEG may be misleading for the purposes of this study, as the SEG for those over 50 may not be reflective of the population as a whole. Whilst strict quotas were not set on this demographic, SEG was monitored to ensure it was largely consistent with the household demographics as per the 2011 Census. The following table demonstrates the achieved response by SEG for the 2014 and 2011 studies.

	Achieved 2014	Achieved 2011
ABC1	49%	45%
C2DE	49%	52%
Refused	2%	4%
	100%	100%

Quotas were set to reflect the population distribution at Province and County level, with quotas for Cork, Dublin, Limerick, Waterford and Galway split at city/county council level.

Sampling errors

The survey approach and sample size dictate the reliability of the findings. When conducting a survey we make statistical inferences on the reliability of the findings. That is because, in a random sample design, only a selection of the population is interviewed. Therefore the proportion of respondents who gave a particular answer is only an estimate of the proportion of potential respondents in the population who would have given that answer i.e. there was a margin of error, plus or minus, known as the sample error.

Below we illustrate the sampling errors based on a number of sample sizes and a 95% confidence level, and illustrate the maximum margin of error that would be achieved 95 times out of 100 if the survey was replicated. Therefore, as the current study consisted of a sample size of 1,000 respondents, the margin of error is fairly low. The findings lie within a maximum range of + or – 3.1%.

Table 3.2: Sample size and associated confidence intervals

Sample size	Confidence interval
1,000	+/- 3.1%
650	+/- 3.84%
450	+/- 4.62%
250	+/- 6.2%
200	+/- 6.0%
100	+/- 9.8%

Statistical significance

Throughout the report comparisons are drawn between various sub groups, such as age, gender, socio-economic group, and level of sports activity, as well as between the 2014 and 2011 survey findings. In order to assess the extent to which differences in findings are ‘statistically significant’, i.e. an indication of a ‘real’ difference in percentages in the target population, and not due to natural sample variations, a calculation known as significance testing is used.

It should be noted that significant differences are denoted within the report in the following ways:

- Differences in sub groups (gender, age and SEG) are denoted in charts with the following symbols:  *Significantly higher*  *Significantly lower*
- Differences in sub groups in tables are denoted by font colour; green font represents a significantly higher value, whilst red font represents a significantly lower value;
- Differences between 2011 and 2014 data are denoted in the charts with an *asterisk

Please note any mention of 'significance' within the body of the report is in reference to *statistically* significant differences between values.

A small number of respondents (n=17) declined to provide an occupation, and thus, the socio-economic category for this group was coded as 'refused'. Due to the low base, this group has not been included in the final presentation of the results.

Regional differences have not been included as it was recognised that, in some instances, regional variations may be masking other demographical differences (age, gender, socio-economic group). For example, a higher number of interviews were conducted with ABC1 respondents in the Dublin region, whilst a greater proportion of interviews were conducted with C2DE respondents in the Munster and Connaught/Ulster areas.

The survey captured demographical information from participants, as well as self-ratings on health, diet, and level of mobility. An overview of the demographical findings is available from Age & Opportunity by request.

4. Participation and non-participation

In this section we detail key findings from the survey in relation to sports participation and physical activity, including walking, among older people in Ireland. The topics covered include:

- The nature of the physical activity undertaken by older people overall (walkers only; sports only; both walking and sports; and those who undertake no activity);
- Proportion, profile and patterns of older people who participate in sport;
- The profile of those who have not participated in sport or recreational physical activity in the last four weeks, and reasons for this non participation;
- Proportion, profile and patterns of older people who walked in the last four weeks;
- Physical activity levels and the extent to which respondents are engaging in physical activity levels which meet the National Physical Activity Guidelines.

4.1 Overall profile of participants and non-participants

Figure 4.1.1 provides a breakdown of Ireland's older population into four activity groups, based on the types of physical activity engaged in or not over the past four weeks.

It should be noted, that to be considered a 'walker', the respondent must have walked continuously for at least 30 minutes, at least once in the last four weeks.

Just under two fifths (39%) indicated that they had walked continuously for 30 minutes in the last four weeks but had not undertaken any other form of sporting or recreational physical activity. A slightly smaller proportion (34%) reported participating in at least one type of sporting activity, as well as walking continuously for 30 minutes. Less than one in ten (7%) older people have participated in sport, however not walked for any considerable length of time, while one fifth (20%) have not engaged in either walking or sport in the last four weeks.

Comparative analysis with the 2011 data reveals that the proportion engaging in each form of activity is fairly consistent across the studies.

Figure 4.1.1: Analysis of activity segments

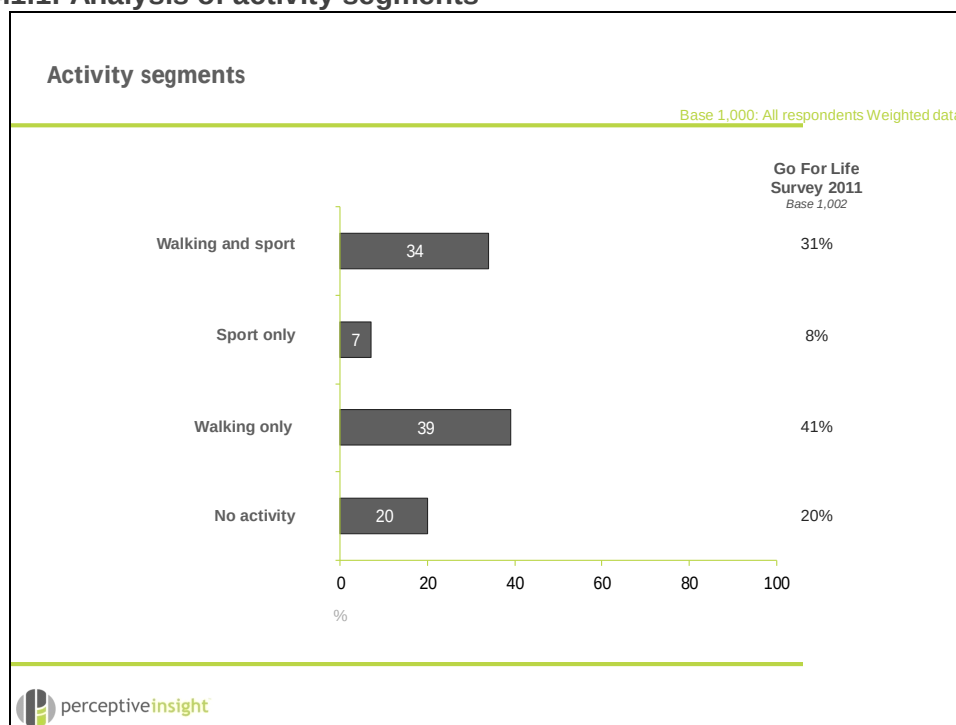


Table 4.1.1 shows that those who walk only are more likely to be female (41% compared to 36% male) and from the C2DE socio-economic group (41% vs. 37% ABC1). Those who both walk and participate in sport are significantly more likely to fall within the younger age bracket (40% of 50 – 64 year olds compared to 25% of those aged 65+) and come from a higher socio-economic group (41% ABC1 compared to 27% C2DE). Consistent with the 2011 study, non-sports participants are significantly more likely to be older (29% of those aged 65+ compared to 14% aged between 50 and 64 years), and from the lower socio-economic group (26% C2DE compared to 15% ABC1).

Table 4.1.1: Activity segments characterised by profile

	Walkers only	Walkers and sports participants	Non-participants
Gender	Female	All	All
Age	All	50 - 64	65+
Social Class	C2DE	ABC1	C2DE

4.2 Participation in sport and recreational physical activity

Just over two fifths (41%) indicated that they have engaged in some form of sporting activity in the last four weeks. This figure is slightly higher than the previous survey waves, with 39% of older people having engaged in sport in the 2011 study, 40% in 2008, and 39% in the 2006 wave.

The profile of respondents by gender remains similar, with males more likely to have engaged in sport than females (43% compared to 39% respectively). However the

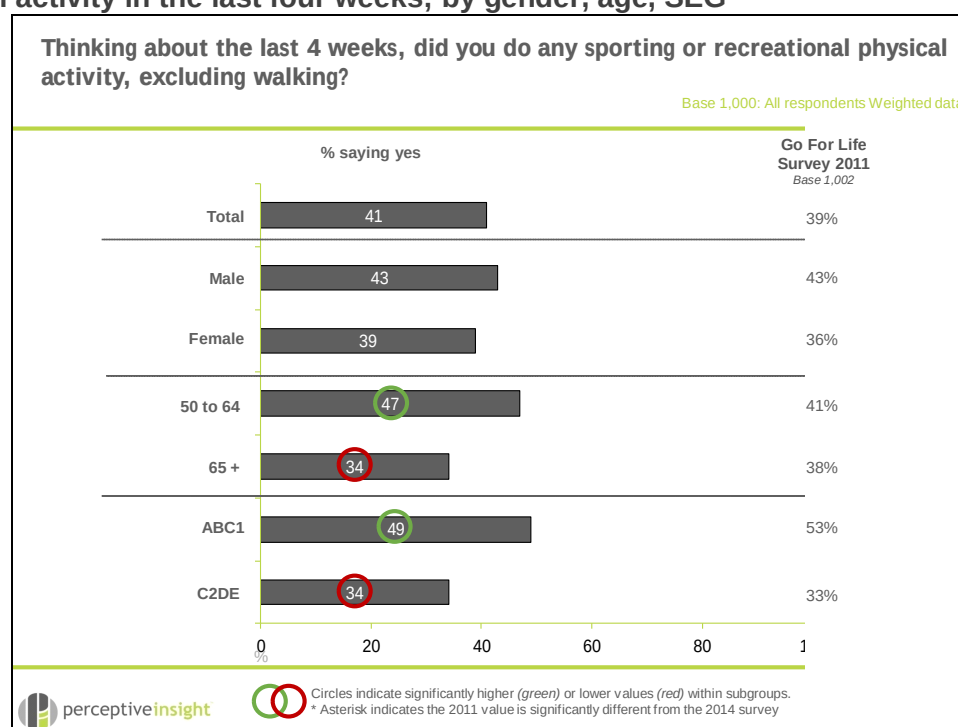
gap in participation has narrowed compared to the 2011 study, when 43% of males reported sports participation compared to 36% females.

Contrastingly, the gap in participation levels between the two age groups has increased significantly; in the current study 47% of 50 - 64 year olds vs. 34% of those aged 65+ reported participating in any sporting activity. This compares with 41% of 50 – 64 year olds vs. 38% 65+ who were surveyed in the 2011 study.

As observed in the 2011 study, socio-economic background has a statistically significant influence on propensity to participate in sports, as 49% of ABC1s reported that they participated in sports compared to 34% of C2DEs.

Further analysis reveals that 38% of respondents have undertaken activity on a weekly basis, with those aged 50 – 64 years being significantly more likely to meet this threshold than respondents aged 65+ (43% vs. 31% respectively). These figures are significantly higher than in the 2011 study, when 31% had engaged in weekly activity (33% 50 – 64 year olds vs. 30% 65+ years). Therefore the 2014 study reveals a trend towards increased frequency of sports participation.

Figure 4.2.1: Proportion of older people who have engaged in sports or recreational physical activity in the last four weeks; by gender, age, SEG



4.2.1 Sports played

This section looks at the prevalence of participation in certain types of sport/recreational physical activities, as a percentage of the overall sample.

Golf and swimming remain the two most popular sports, with slightly higher propensity towards golf in the 2014 study (11% versus 9% in 2011).

The popularity of cycling is also on the increase, with 7% having engaged in this activity in 2014 compared with 4% in the 2011 study. Weight training /weight lifting/multi-gym use have fallen slightly in terms of popularity, as have dance and keep fit/aerobics.

Other sports mentioned (with a 1% participation rate) include bowls/boules, badminton, soccer, Gaelic football, squash, aqua aerobics, Pilates, stretching / resistance exercises.

Table 4.2.1: Percentage of overall sample participating in sports – comparative data

	% of overall sample	
	2014	2011
<i>Weighted Base</i>	<i>1,000</i>	<i>1,002</i>
Golf	11%	9%
Swimming (indoors/outdoors)	9%	9%
Cycling	7%	4%
Weight training/weight lifting/multi-gym use	3%	5%
Dancing	3%	4%
Yoga	2%	2%
Running/Jogging	2%	1%
Keep fit/aerobics	2%	4%
Gymnastics	2%	0%
Tennis (indoors/outdoors)	2%	1%

4.2.2 Frequency of participation in top sports

The following table provides an overview of the frequency with which the sports were undertaken.

Respondents are more likely to report frequent engagement in exercises including cycling, weight training, running/jogging and keep fit/aerobics⁸. Other popular activities including golf and dance are more commonly undertaken on a less frequent basis, with 75% and 82% respectively stating that they partake in these activities one or two times a week.

Table 4.2.2: Frequency of participation

	Less than once a week	1 – 2 times a week	3 – 4 times a week	5+ times a week	Not sure
Golf Base: 108	12%	75%	13%	-	-
Swimming (indoors/outdoors) Base: 93	12%	58%	15%	15%	-
Cycling Base: 72	6%	40%	36%	17%	-
Weight training/weight lifting/multi-gym use Base: 31	7%	37%	34%	22%	-
Dancing Base: 26	6%	82%	12%	-	-
Yoga Base: 23	-	73%	12%	9%	6%
Running/Jogging Base: 21	-	24%	47%	29%	-
Keep fit/aerobics Base: 20	8%	31%	16%	41%	4%
Gymnastics Base: 18	-	46%	49%	5%	-
Tennis (indoors/outdoors) Base: 17	-	81%	19%	-	-

4.2.3 Activity intensity and duration - by sport

As per the previous studies, participants were asked to cite the typical duration of each session and to assess the intensity of these activities using a standard self-rating scale in relation to (1) raised breathing and (2) being 'made out of breath' by the exertion of the activity.

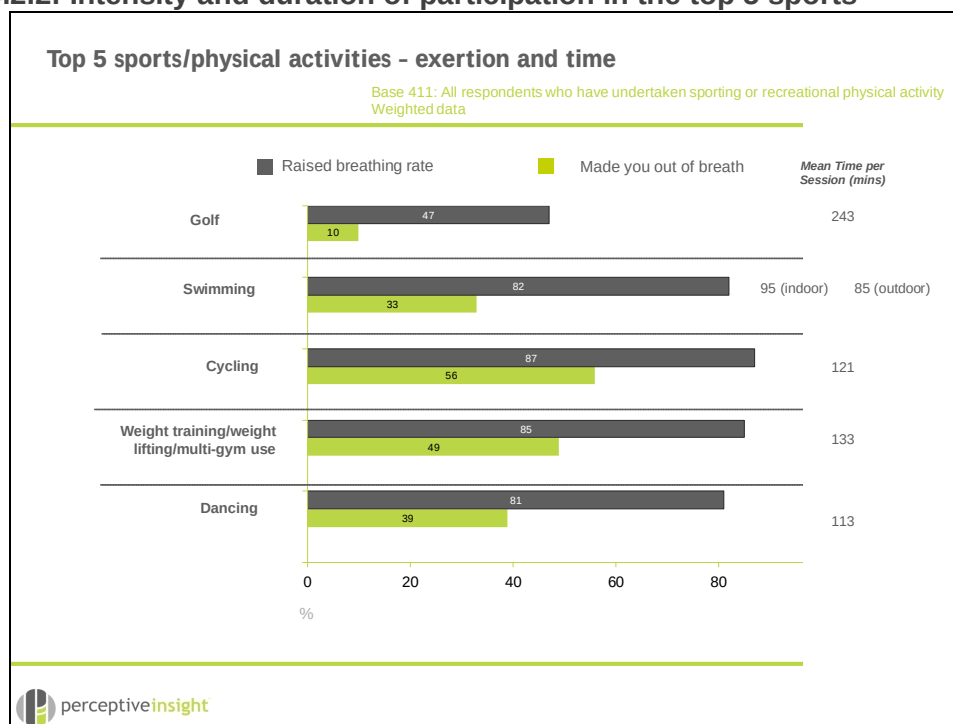
Figure 4.2.2 shows that the average time spent engaging in the top 5 sports. It illustrates that the time varies depending on the type of sport/activity. For example, average time spent engaging in golf is much higher than other activities, at approximately 4 hours. However, respondents were less likely to report physical

⁸ Please note that the frequency of participation has been calculated based on the proportion of respondents who engaged in each activity, not as a percentage of the overall sample

exertion from playing golf, as less than half (47%) indicated that this activity resulted in raised breathing rate, compared with over 80% who engage in the other activities.

As outlined in the methodology section, for an activity to be counted towards achievement of the national guidelines it should be of sufficient intensity to raise the participants' breathing rate. Therefore, based on this information, less than half of golfers are engaging at a sufficiently active level to be deemed meeting the guidelines.

Figure 4.2.2: Intensity and duration of participation in the top 5 sports



4.3 Non participation in sport and recreational physical activity

We have already seen that almost 6 in 10 of the survey respondents reported not taking part in any sport or recreational physical activity during the previous 4 weeks. While many of these do engage in some physical activity through walking (for recreation or transport) a sizeable minority do not. They are therefore in the low active category and thus of particular interest to policy makers given the health risks associated with their low levels of activity. In this section we look at the two sub-groups who make up this sizeable majority of older adults, namely those who previously engaged in sport as adults but gave it up (the “quitters”) and those who never took part in sport or recreational physical activity as adults (“the non-starts”).

The “quitters”

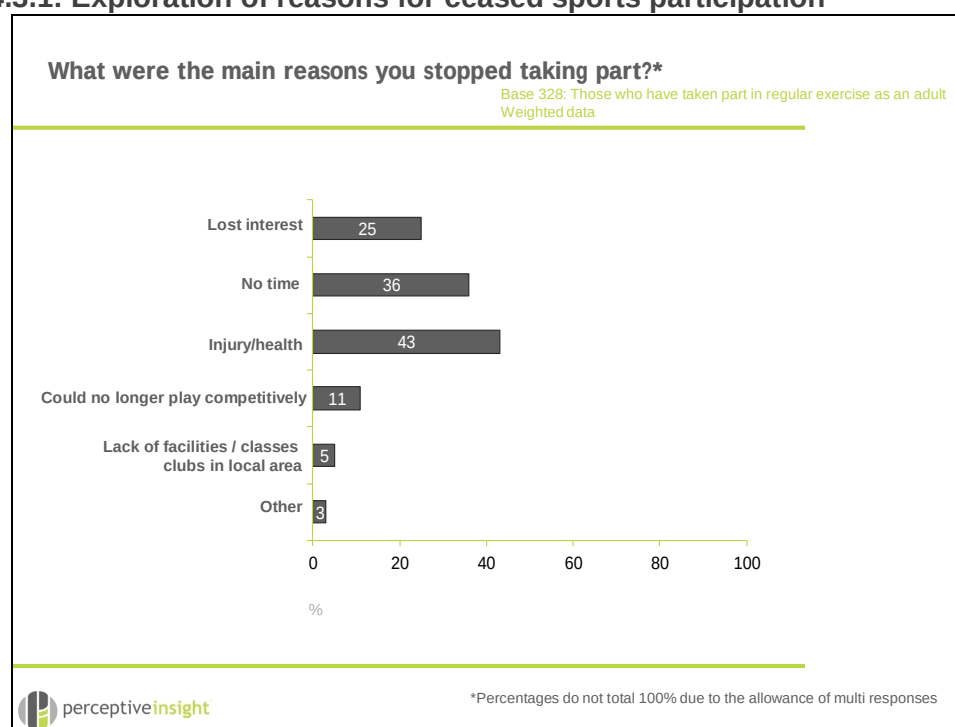
Over half (56%) of those who had not taken part in a sporting activity in the last four weeks indicated that they had some previous experience of regular exercise. This represents one third of the entire population of older adults who gave up sport at some stage during their adult lives and had not resumed their participation. No

significant differences were found by gender or age but those who had previously participated and stopped were more likely to be from the ABC1 social classes.

While around two in five of those who stopped participating (43%) stated that they did so in the last five years, with those in the 50 – 64 age brackets, females, and those from the ABC1 socio-economic group were more likely to report that this was the case, the majority of this group (57%) reported that they gave up anywhere between 5 and 40+ years ago. This is equivalent to almost 1 in 5 older adults who gave up playing sport a considerable time ago and found no incentive or were unable to resume their activity. Clearly such a prolonged absence from an active lifestyle is likely to have a significantly adverse effect on their health and wellbeing.

Knowing the reasons for people's decisions to give up participating might help policy makers in their efforts to influence those decisions. In figure 4.3.1 we see that a small number of reasons dominate the decision to stop taking part in sport or physical activity. Over two fifths (43%) indicated that they were required to stop participation due to injury or health, with males and those in the 65+ age group more likely to be in this category. 36% reported that they were prevented by lack of time, whether due to family obligations (18%) or to work commitments (18%). The third most cited reason for ceasing sports participation was lack of interest.

Figure 4.3.1: Exploration of reasons for ceased sports participation

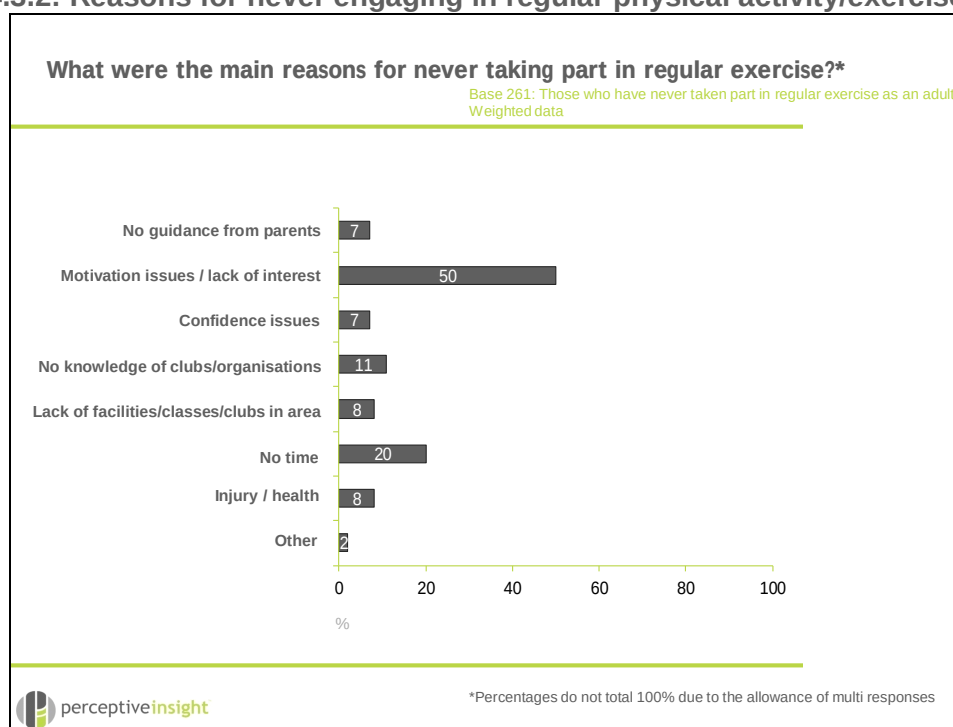


The “non-starts”

Just over one in four of all respondents (26%) reported that they had never taken part in sport or recreational physical activity as an adult. Figure 4.3.2 lists the main reasons for this. Half (50%) stated that they lacked motivation or interest to take part, while one fifth claimed that they lacked the time and just over one in ten (11%) stated

that they lacked awareness of clubs/organisations available to enable regular participation.

Figure 4.3.2: Reasons for never engaging in regular physical activity/exercise



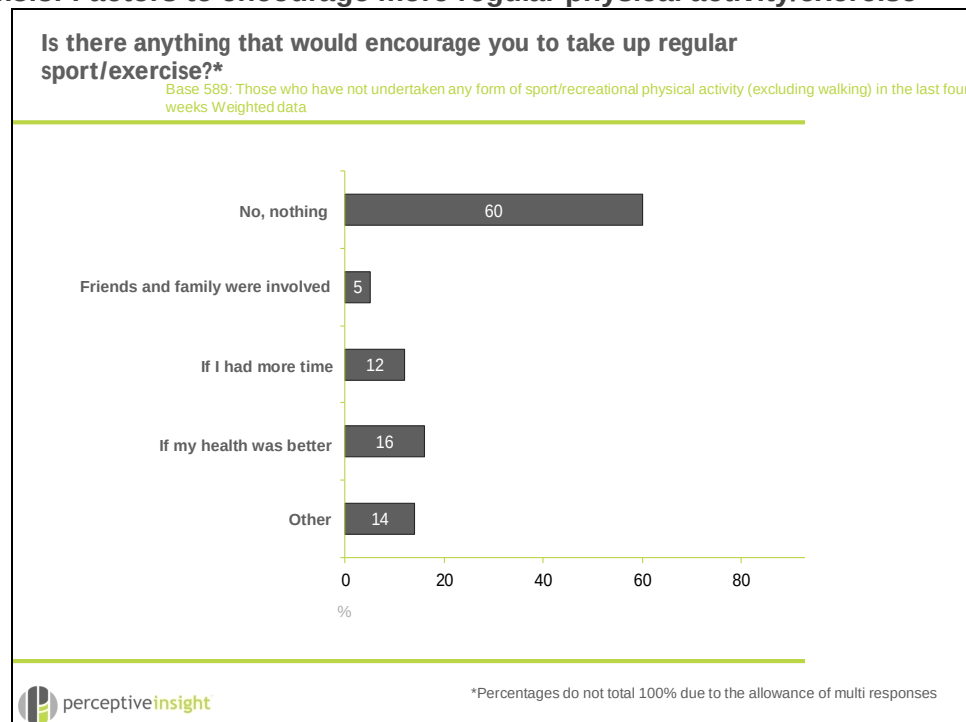
Can we encourage non-participants to take part?

All of those who have not taken part in sport/physical activity in the last four weeks were asked if any factors might encourage their participation. For most (60%) nothing would motivate them, as we can see in figure 4.3.3. Males, those aged 65+ and those from the C2DE socio-economic group were more likely to provide this response. However, two thirds of those who indicated that nothing would influence regular exercise had walked for a minimum of 30 minutes in the last four weeks. The promotion of more walking opportunities might represent the best opportunity for any efforts seeking to increase this group's participation in physical activity.

One in six (16%) non-participants stated that they would be more active if they had improved health, while one in eight (12%) indicated that that they might engage in more frequent exercise if they had more time. Included among the range of other responses provided by smaller numbers of respondents was joining a sports club, greater provision of sports facilities in their area, or if advised by a health professional / doctor

Of some concern is that about one in eight of the overall sample indicated that they had not undertaken any form of sport or physical activity in the last four weeks and that nothing would encourage them to take part in regular exercise. This group is significantly more likely to be aged 65+ years and from the C2DE socio-economic group.

Figure 4.3.3: Factors to encourage more regular physical activity/exercise



4.4 Participation in walking

The survey initially assessed the extent to which participants had walked continuously for at least five minutes in the last four weeks and the context for that walking. The main findings were that:

- The vast majority (92%) walked with those in the younger age bracket being significantly more likely to have done so compared to those 65+ years;
- For more than half of all walkers it is a solitary activity while one quarter walk with a friend or neighbour and most of the remainder walk with a pet. The proportion walking alone has significantly increased since 2011 while the other two categories have seen slight declines in their numbers.

Incidence of walking more than 30 minutes

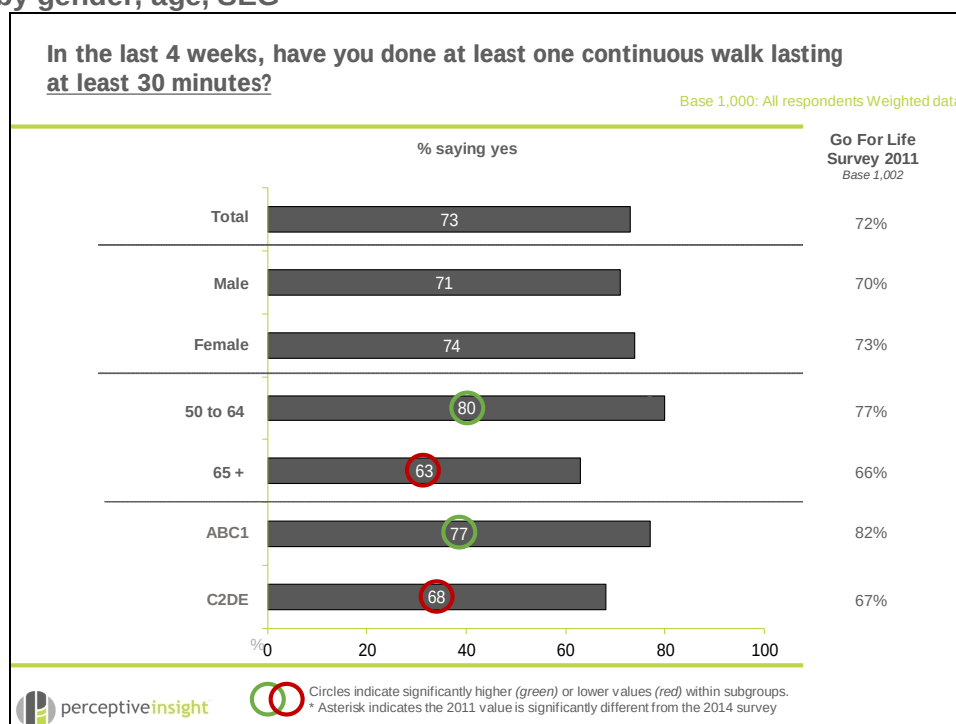
In order to assess the extent to which older people are meeting or exceeding the health guidelines, respondents were asked whether they have walked continuously for at least 30 minutes in the last four weeks.

Figure 4.4.1 illustrates that 73% have undertaken at least one continuous walk lasting a minimum of 30 minutes in the last four weeks, a similar proportion (72%) who reported doing so in the 2011 study.

There is a statistically significant difference in relation to walking propensity by socio-economic groups and age band, with ABC1s and people aged 50 to 64 more likely to have walked for at least 30 minutes in the last four weeks.

On the whole, the characteristics of walkers remain fairly consistent with the 2011 study.

Figure 4.4.1: Profile of those who have walked for at least 30 minutes in the last four weeks; by gender, age, SEG



Just under one in five (18%) indicated that they had walked continuously for 30 minutes on more than twenty occasions in the last four weeks (Figure 4.4.2). This is a 2% point increase on the 2011 study. Overall, compared to the 2011 study, participants who walk are doing so on more occasions (that is around five or more days a week). 16% of such respondents reported walking for the purpose of health and recreation, not just to get from place to place.

There is a statistically significant difference in the proportion of those reporting that they walk 16 to 20 days (16% in the 2014 findings vs. 9% in 2011) and 11 to 15 days (17% 2014 vs. 10% 2011). Perhaps most interestingly, the proportion of those reporting to have walked on 1-5 days has fallen substantially. In the 2011 study, a quarter of older people indicated that they had done so, whilst the 2014 study highlights a statistically significant difference, with just 11% stating that they walked for this duration.

Figure 4.4.2: Frequency of walking 30 minute continuously

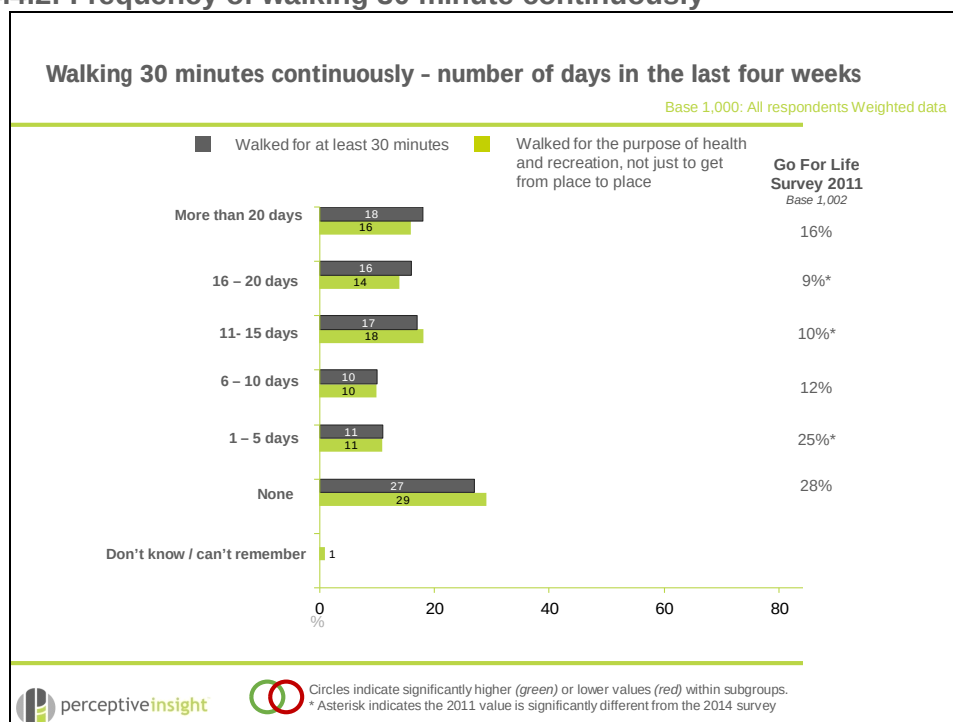
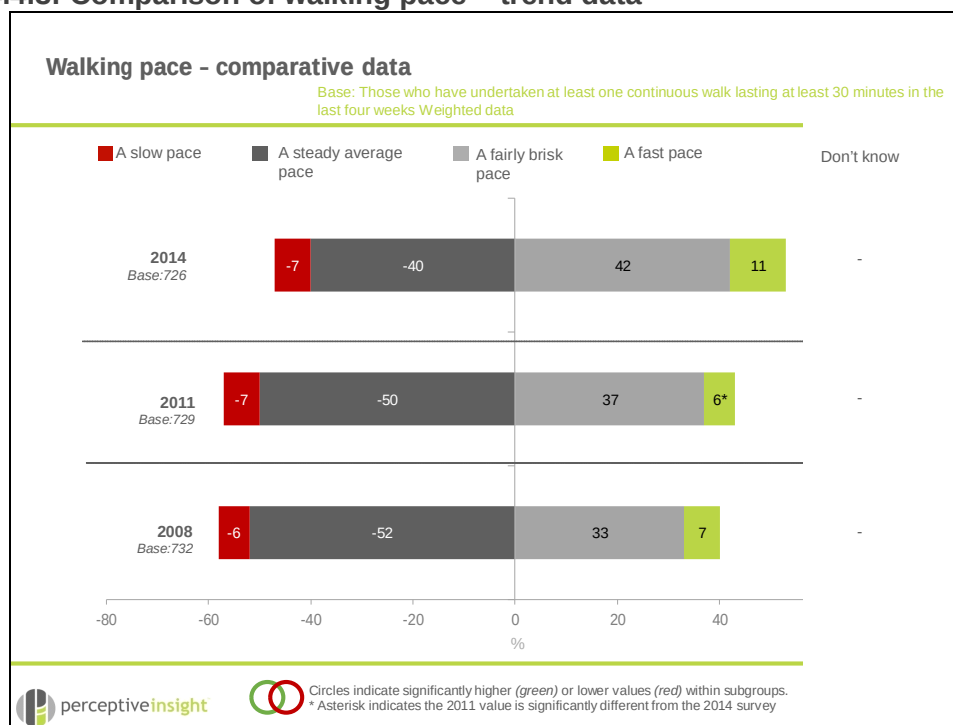


Figure 4.4.3 provides an indication of the intensity⁹ at which older people walk when walking continuously for at least 30 minutes. 53% reported walking at a 'fast' or 'fairly brisk' pace, and thus are deemed to have walked at sufficient intensity as advised by the national guidelines. Further demographic analysis revealed that those aged between 50 and 64 years are more likely to be adhering to the guidelines based on their walking pace (60% compared to 43% of respondents aged 65+).

Comparison of trend data reveals that a significantly higher proportion of respondents in the current study are considered to be meeting the guidelines; 53% reported walking at a 'fast' or 'fairly brisk' pace compared to 43% in the 2011 and 40% in the 2008 studies.

⁹ As per the previous studies, it should be noted that this is a subjective measure based on a respondent's interpretation of the terms 'fast', 'fairly brisk', 'steady average' and 'slow' pace.

Figure 4.4.3: Comparison of walking pace – trend data



4.5 Activity level

In order to assess the extent to which respondents are meeting the national physical activity guidelines, a composite measure of activity levels was derived, following the same principles as the previous studies. The measure was derived from the addition of the total number of minutes respondents spent walking at a brisk or fast pace and the total number of minutes spent engaging in a sport or recreational physical activity of at least moderate intensity (i.e. enough to raise one's breathing rate) in the last four weeks.

Respondents were categorised into various activity levels based on the following principles:

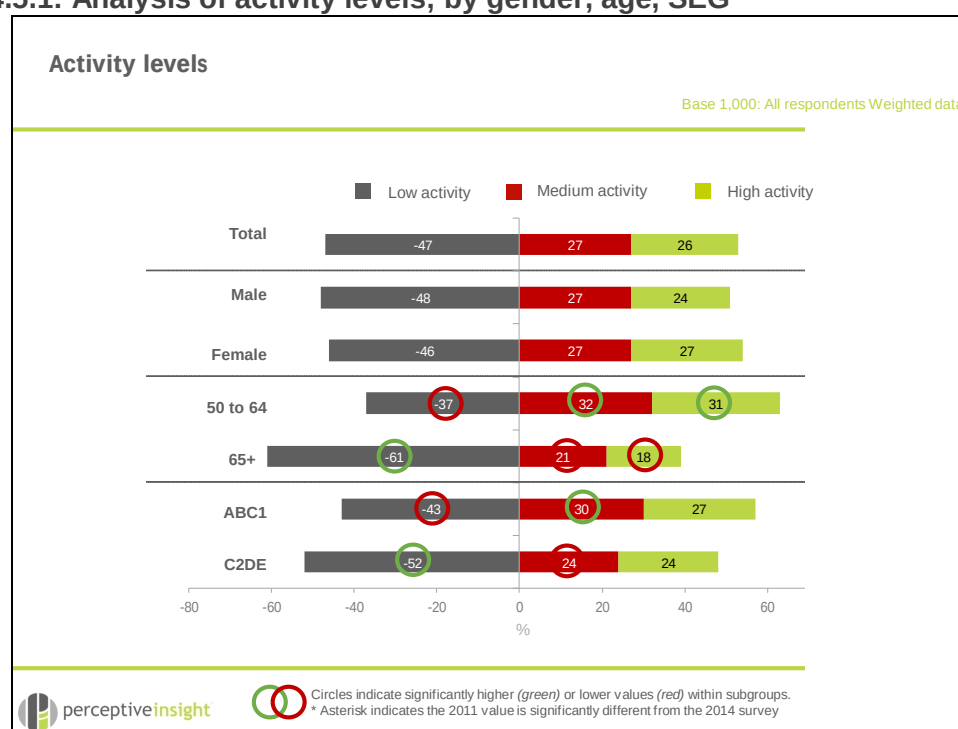
- Highly active: respondents were required to have accumulated an average of five periods of physical activity or walking of moderate intensity of at least 30 minutes weekly for a period of four weeks (along the National Physical Activity Guidelines).
- The 'medium activity' category is comprised of those who have taken part in moderate activity of sufficient duration at least one day a week, but less than five days weekly for the last four weeks.
- Those in the 'low activity category' have not done an average of one occasion of physical activity of sufficient duration and intensity weekly.

Figure 4.5.1 shows that over one quarter (26%) of all older people are 'highly active', 27% are in the 'medium' category, and 47% in the 'low' category.

It is evident that age plays a significant influence on activity levels; almost one third (31%) of those aged 50 – 64 are highly active compared with 18% aged 65+ - a statistically significant difference. Indeed, 61% of those aged 65+ years fall within the low active category. Furthermore, C2DE respondents are significantly more likely to be categorised as low active than those from ABC1 groups (52% vs. 43% respectively).

Within the low active category 20% undertake no physical activity or sport while 27% are undertaking exercise, but at a low intensity level. Whilst there is no difference in the age characteristics of this latter group, they are more likely to be female and from the ABC1 socio-economic group.

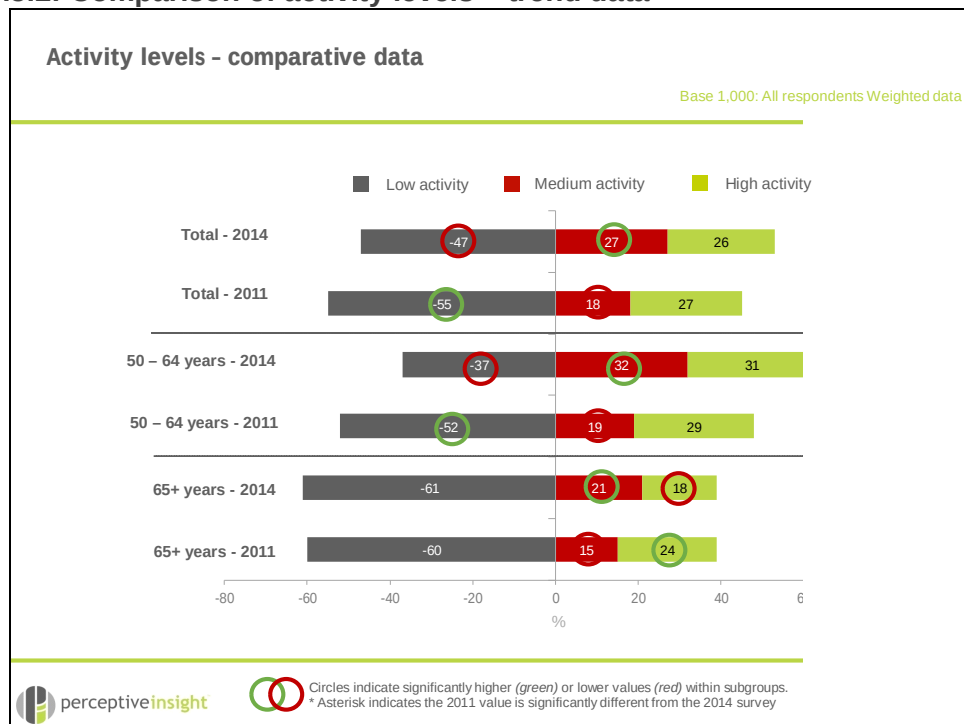
Figure 4.5.1: Analysis of activity levels; by gender, age, SEG



Comparison of the activity levels with the 2011 data highlights some interesting differences. Of note is the increase in the proportion of older people participating in activity at a 'medium' level (27% vs. 18% in 2011). Further, the 2014 study yielded a smaller proportion of 'low active' respondents (47% vs. 55% in 2011). This finding is somewhat promising as it suggests an increasingly active older population, with a movement from the 'low' into the 'medium active' category.

Nevertheless, the findings suggest a degree of polarisation for the two age groups in relation to activity uptake between 2011 and 2014. For example, those aged 50 – 64 display a trend towards increased activity, whilst those aged 65+ have experienced a significant decline. These findings suggest a significant challenge in encouraging the older population to engage in increased physical activity, a challenge likely to be amplified by the projected ageing of the population over the coming years.

Figure 4.5.2: Comparison of activity levels – trend data



5. Physical activity - attitudes and opportunities

This section explores the attitudes of older people towards physical activity and sports participation, including barriers and access to opportunity for activity.

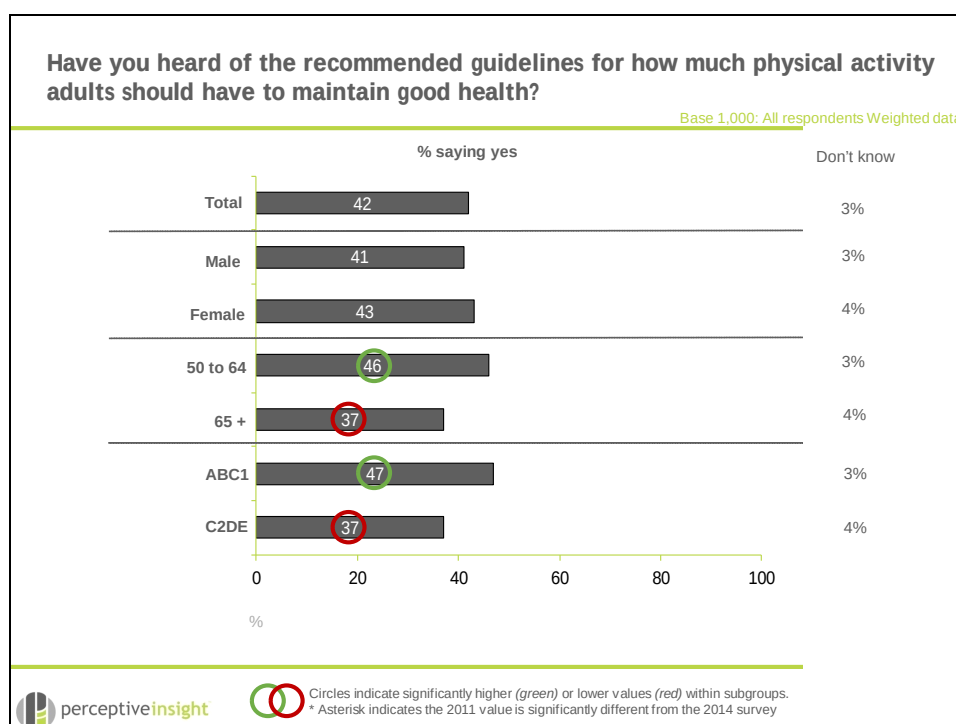
Findings are structured under the following headings:

- Awareness of physical activity guidelines for adults;
- Barriers to increasing physical activity;
- Opportunities for physical activity;
- Physical activity levels – current vs. previous;
- Awareness of Go For Life and Age and Opportunity.

5.1 Awareness of physical activity guidelines for adults

Just over two fifths (42%) indicated that they had heard of the recommended physical activity guidelines for adults (Figure 5.1.1). There was little difference in level of awareness based on gender, however those aged 50 – 64 years are significantly more likely to express awareness than respondents aged 65+ (46% vs. 37% respectively), as are those from the ABC1 socio-economic group (47% vs. 37% C2DE).

Figure 5.1.1: Awareness of recommended physical activity guidelines; by gender, age, SEG



Further analysis highlights that those who engage in some form of physical activity (walking, sports or both) are significantly more likely to have heard of the guidelines than those who do not (45% vs. 32% respectively). Those who engage in both walking and sports activity are significantly more likely than other groups to have heard of the guidelines.

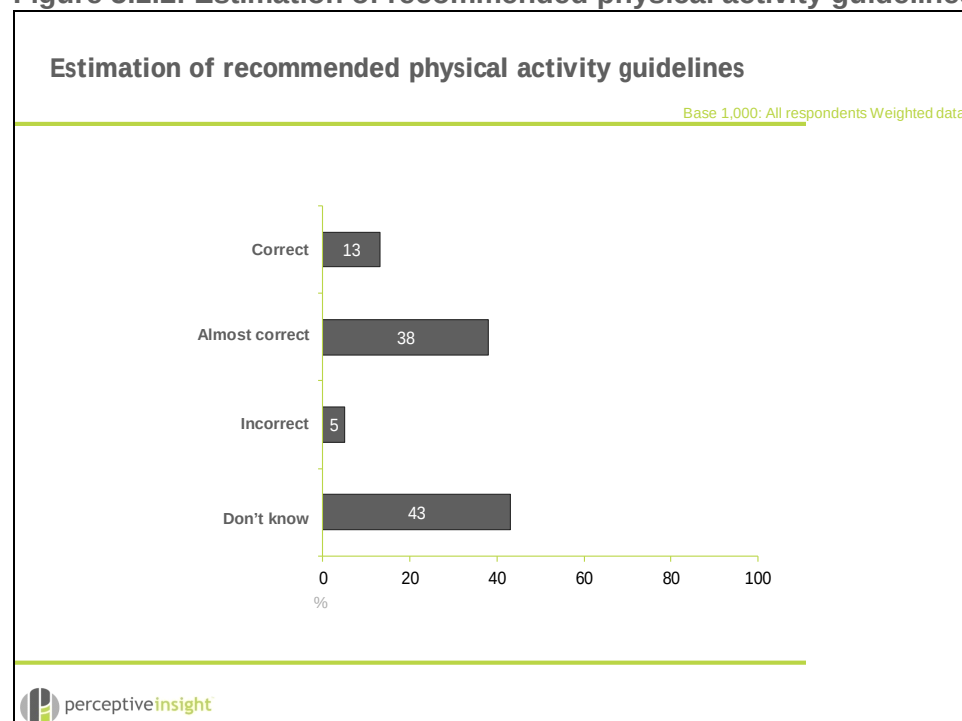
The findings also unveil a strong gender effect in relation to those who play sport only. Less than one quarter (24%) of males who play sport were aware of the guidelines compared to over 40% of females (43%) who play sport only. This suggests a group who may benefit from targeted communication and awareness-raising.

Estimation of recommended physical activity guidelines

All respondents were asked to provide an estimation of the physical activity guidelines for adults. An indication of accuracy was subsequently devised based on response.

Only 13% correctly cited the guidelines as 30 minutes exercise over five days of the week, however, it is promising to note that two in five (38%) provided a close approximation. 43% indicated that they were not sure of the guidelines, while 5% provided an incorrect response.

Figure 5.1.2: Estimation of recommended physical activity guidelines



Further demographic analysis reveals that older respondents, and those from the C2DE socio-economic group, are more likely to be unsure about the guidelines.

Perhaps not surprisingly, those who participate in some form of exercise are significantly more knowledgeable about the guidelines than those who do not engage in any form of physical activity. This is particularly the case amongst those who both walk and play sports.

Interestingly, one third (33%) of those who indicated that they had heard of the guidelines provided an underestimated response, whilst over one quarter (28%) gave an overestimation. However, it is positive to note that almost three quarters (74%) of those who had heard of the guidelines provided a reasonably close or exact estimation, compared to 34% of those who had not heard of them.

Perception of meeting the guidelines

Overall, just over half (54%) considered themselves as meeting or exceeding the guidelines (Figure 5.1.3). Analysis by age reveals a statistically significant difference in response; 58% of those aged 50 – 64 years perceive themselves to be meeting the guidelines, compared to 50% of those aged 65+ years. Further, socio-economic profiling shows a statistically significant difference in perceptions, with 58% of those from the ABC1 socio-economic group believing that they meet the guidelines, compared to 50% C2DE.

Figure 5.1.3: Perception of meeting or exceeding the guidelines; by gender, age, SEG

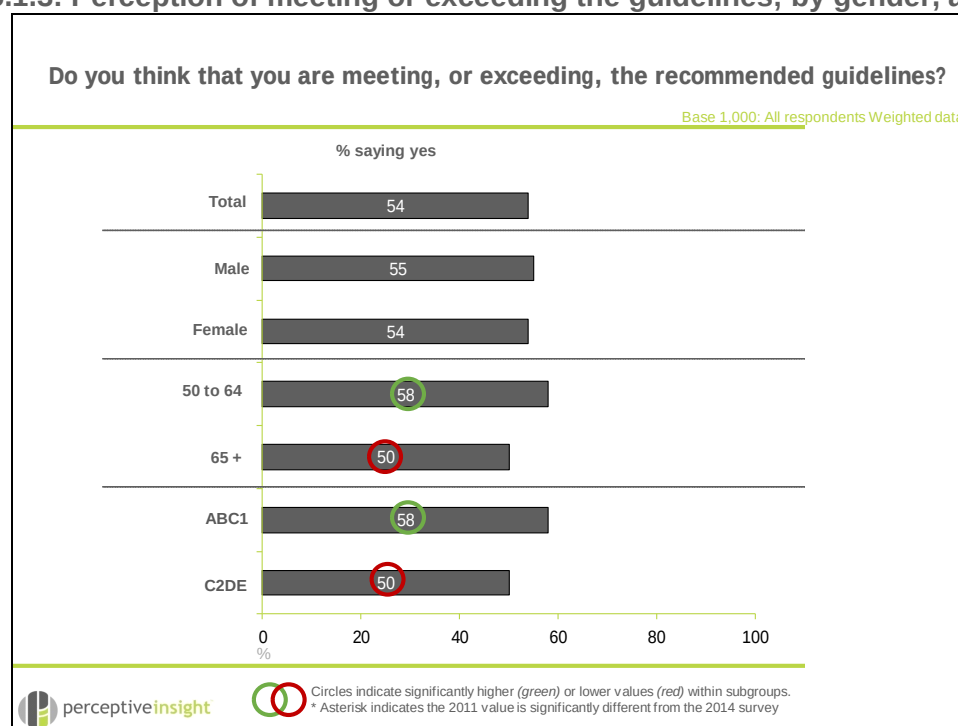
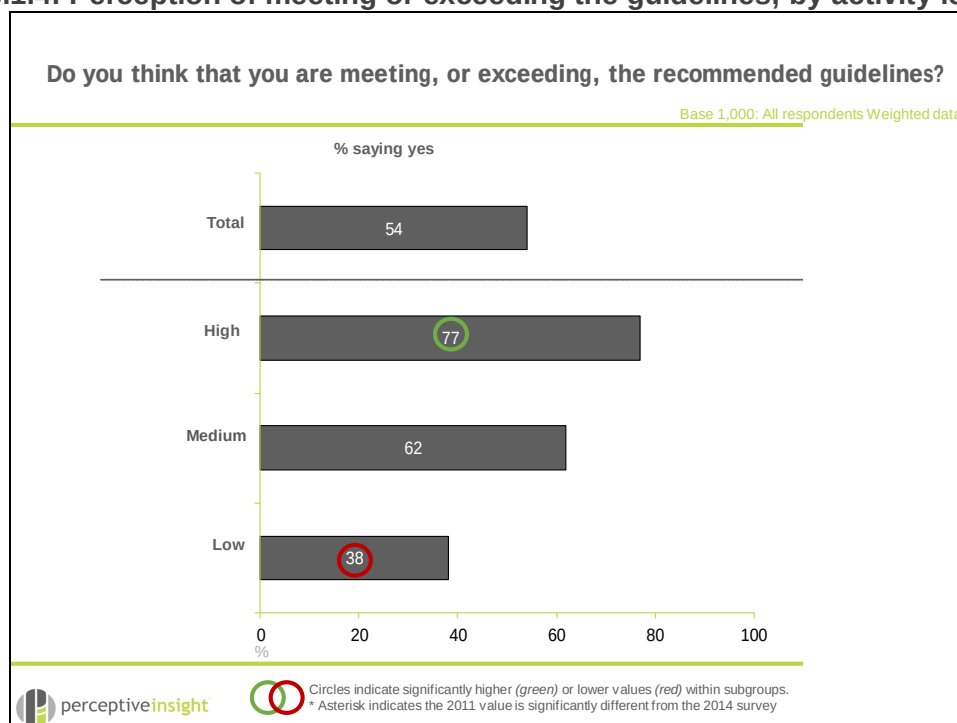


Figure 5.1.4 shows that those who are meeting the guidelines, that is engaging in at least five periods of exercise of at least 30 minutes and thus deemed 'highly active' are significantly more likely to be of the perception that they are meeting the guidelines than other groups. Interestingly, 23% of such participants do not believe or are unsure whether they are undertaking sufficient activity to meet the guidelines.

Perhaps worryingly, around two fifths (38%) of those who are at a 'low active' level mistakenly believe that they are meeting the guidelines suggesting a lack of awareness of them among many inactive older adults.

Figure 5.1.4: Perception of meeting or exceeding the guidelines; by activity level



5.2 Barriers to increasing physical activity

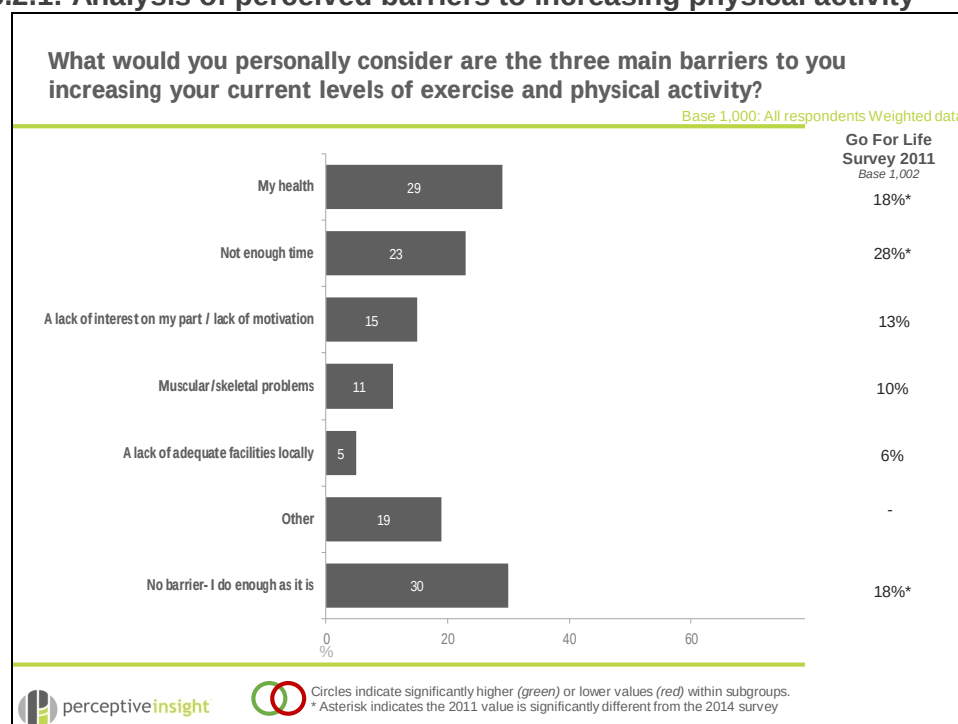
The top two barriers to increasing physical activity remain constant from the 2011 survey. These include 'my health', identified by 29% of older people, followed by 'not enough time', which was cited by 23% of respondents. However, those claiming their health is the main barrier has increased significantly from 18% in 2011 to 29% in 2014.

Interestingly, 'the weather' does not remain within the top three mentioned barriers, as per the 2011 and 2008 studies. Indeed, only 4% deemed the weather to be a barrier, a statistically significant decrease from 18% who reported it in the 2011 study. Rather, the third most commonly cited barrier in the current study is 'lack of interest / lack of motivation', which was mentioned by 15% of respondents.

Perhaps noteworthy is the statistically significantly higher proportion of those commenting on 'no barrier – I do enough as it is'. Whilst it was noted in 2011 that the proportion of those who provided this response had increased from 2008 (18% vs. 3% in 2008), the percentage of those who provided this response in the current study has increased significantly again, to 30%. Also noteworthy is the fact that over 40% of those who are highly active cited this compared to 31% in the medium and 22% in the low active categories.

It should be noted that a range of disparate comments were provided. Where less than 5% provided a response it has been coded as 'other'. In addition to the 'weather' (4%), such 'other' barriers include: 'age' (3%), 'current lack of fitness' (3%), 'cost' (3%), 'lack of guidance' (2%), lack of accompaniment (1%), 'my weight' (1%), and family commitments (1%). A further 1% reported uncertainty about the barriers relating to exercise and physical activity.

Figure 5.2.1: Analysis of perceived barriers to increasing physical activity



As observed in the 2011 study, health-related barriers such as 'my health', 'muscular / skeletal problems', 'my age' were more commonly mentioned by those aged 65 and over. Those aged between 50 and 64 years are significantly more likely to cite 'lack of time' and 'lack of motivation'.

A series of gender and socio-economic differences are also apparent. Females are more likely to be deterred by health related issues, as are those from the C2DE grouping. Males and C2DEs are significantly more likely to be of the perception that they do enough physical activity already.

Analysis by level of activity shows that those who have not engaged in either walking or sports are significantly more likely to be deterred by poor health (51% compared to 23% of those who have engaged in some form of physical activity in the last four weeks), muscular/skeletal problems, current lack of fitness, lack of adequate facilities locally, and weight. 33% of sports participants stated that there is 'no barrier – I do enough as it is'. Interestingly, 15% of non-participants also identified with this response. Most of these respondents have walked at least five minutes in the last four weeks and therefore perhaps deem this to be sufficient activity. It is also possible that they misinterpreted the question as encapsulating other forms of activity, such as domestic chores etc., which may have contributed to response.

5.3 Opportunities for physical activity

In this section we examine the extent to which older people are availing of local facilities or clubs and their perceptions of sports and leisure facilities as welcoming places for older people.

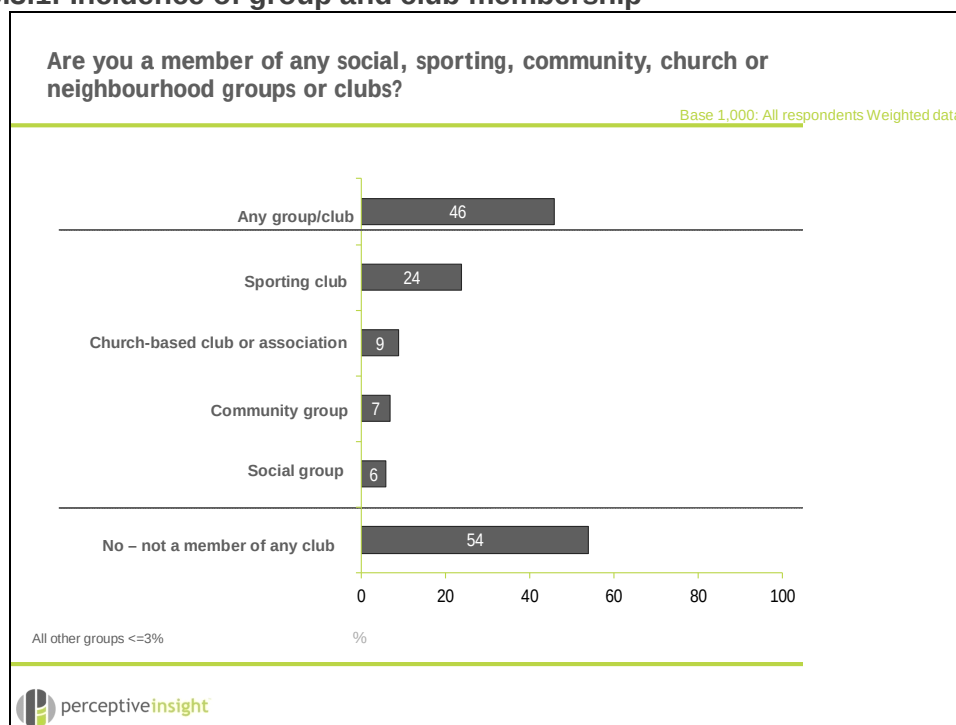
Figure 5.3.1 shows that 46% of older people socially participate in a group or avail of a club. Sports clubs represent the most prominent form of social participation, with 24% of older adults being members, nearly three times as much as for the next most popular form of membership – for a church-based club or association.

Membership incidence across all types of sport/social club is significantly higher amongst males (50% vs. 42% females), those aged 65+ years (49% vs. 44% of 50 to 64 years), and ABC1 groups (57% vs. 35% C2DE). This socio-economic difference is of particular concern, especially considering the positive correlation revealed between club membership and physical activity (50% of those who participate in physical activity belong to a sport/social club, compared to 32% of those who are inactive).

Further correlation between club membership and health/quality of life self-ratings shows the positive contribution social participation has on older people's health and wellbeing. For example, 45% of those who belong to a group cited their health as very good compared to 34% non-club members. Furthermore, 49% of those who belong to a group described their quality of life as very good compared to 37% non-club members. Therefore, the benefits of encouraging social club membership amidst the challenges in enabling such opportunities for the C2DE group are evident.

Males are significantly more likely than females to belong to a sporting club (33% vs. 16% respectively). Analysis of the types of sports engaged in by those who belong to a sporting club provides some insight into this gender bias. For example, over one third (36%) of those who avail of a sporting club indicated that they play golf, a sport which was highlighted as having a predominance of male survey participants.

Figure 5.3.1: Incidence of group and club membership



Promisingly, over two thirds of older people (68%) agreed that sporting and leisure facilities are welcoming places for older people. Indeed, over two fifths (44%) are in strong agreement that this is the case, whilst only 8% reported negative perceptions. Findings are fairly consistent across the age, gender and socio-economic categories, with approximately two thirds of respondents in each instance agreeing that sport and leisure facilities are welcoming places for older people.

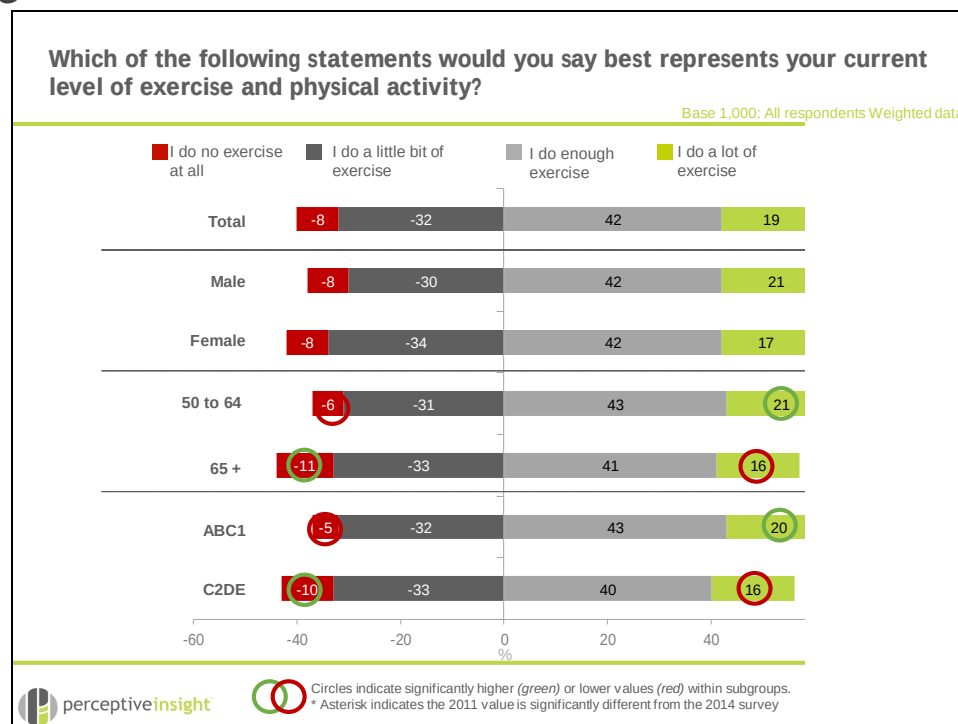
Not surprisingly, those who engage in physical activity, including walking, are significantly more likely to agree that sporting and leisure facilities are welcoming places for older people. Encouragingly, however, over half of non-active participants reported positive perceptions of sport and leisure facilities.

5.4 Physical activity levels - current vs. previous

Older people were asked to identify with the statement which most accurately represents their current level of exercise and physical activity (Figure 5.4.1).

One fifth (19%) indicated that they '*do a lot of exercise*', a sentiment significantly more common from 50 to 64 year olds, and those from the ABC1 socio-economic group. Over two fifths (42%) perceive themselves to be doing '*enough exercise*', whilst around one third (32%) reported doing '*a little*'. Only 8% perceive themselves to be doing '*no exercise at all*'. Those aged 65 and over, and from the C2DE socio-economic group, are significantly more likely to report being physically inactive.

Figure 5.4.1: Perception of current level of exercise and physical activity; by gender, age, SEG



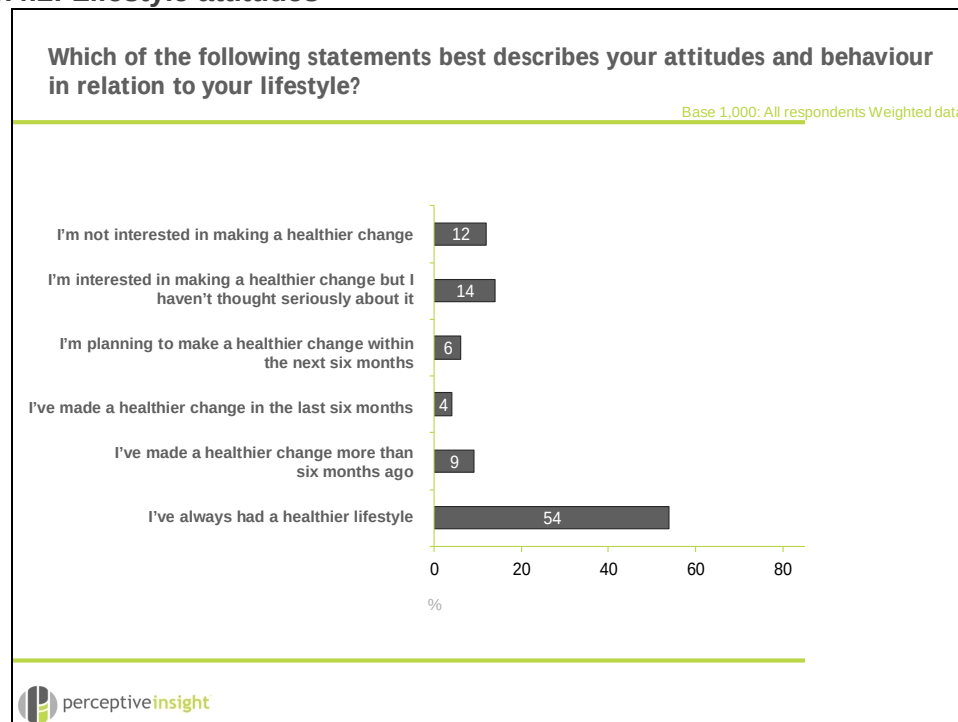
It is interesting to note that respondents who do not participate in any sports activities still claim to be doing a small amount of exercise. Almost half (49%) of those with no activity (walking or sports) stated they *'do a little bit of exercise'*. A further 17% feel that by doing their current level of exercise and physical activity they *'do enough exercise'*. Nevertheless, this group remains significantly less likely than those who engage in walking, sports or both to report doing *'enough'* or *'a lot of exercise'*.

Lifestyle attitudes

Over half (54%) are of the perception that they have always led a healthy lifestyle, while only 12% expressed resistance to making a healthier change (Figure 5.4.2).

13% reported that they have made a healthier lifestyle change in the last 12 months. Promisingly, a further 6% indicated that they are planning to make a healthier change within the next six months. Perhaps most noteworthy are the 14% who indicated that they are *'interested in making a healthier change but haven't thought seriously about it.'* It is possible that, with some encouragement or guidance, this segment group may be willing to make positive lifestyle choices.

Figure 5.4.2: Lifestyle attitudes



Females, ABC1s and those aged 65+ years are more likely to be of the perception that they have always led a healthy lifestyle. Only 12% expressed resistance to making a healthier change. Such respondents are more likely to be male. Furthermore, those from the C2DE group, and aged 65+ years, are significantly more likely to report no interest in making a healthier lifestyle change.

Males are significantly more likely to report an interest in a healthier change, but having not thought seriously about it. Those aged 50 to 64 years are significantly more likely to have made a healthier change more than six months ago.

Over one quarter (27%) of those with no activity say they are not interested in making a healthier change. This resolute attitude is quite concerning, therefore consideration will be required to counter disinterest amongst this group. Of further concern is that fact that one third (33%) of inactive respondents deem themselves to have always led a healthier lifestyle. Such misperceptions may be countered by further awareness raising of the physical activity guidelines.

27% of inactive respondents indicated that they are at the contemplation stage, i.e. are interested in making a change, however, haven't given it serious thought. This group may be most receptive to becoming more active, if the opportunity or encouragement is provided.

Comparison of previous and current physical activity levels

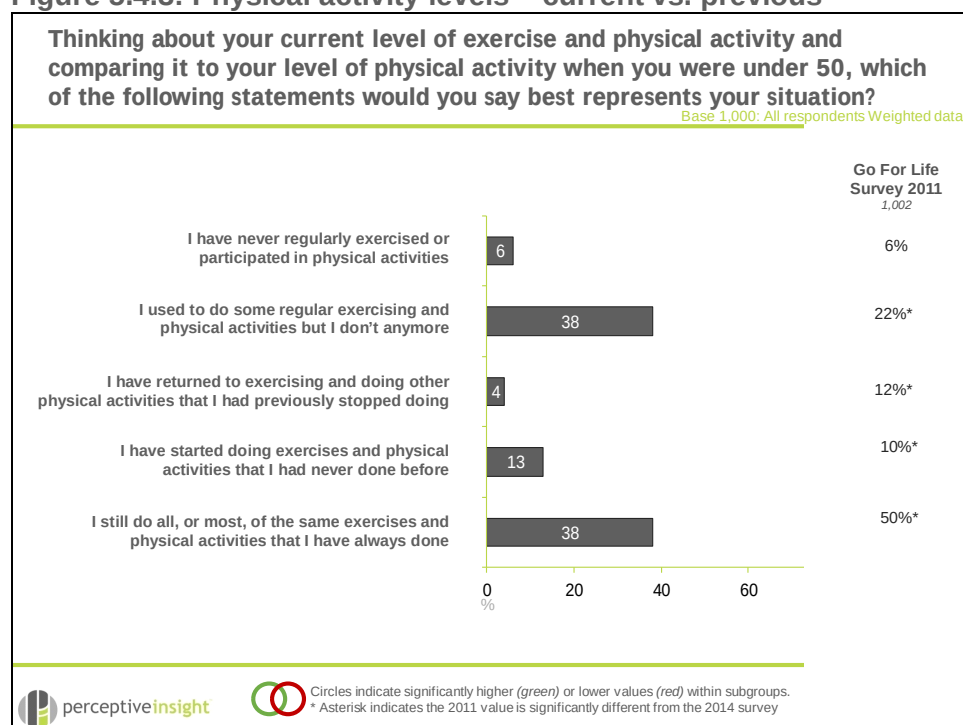
Respondents were asked which statement best describes their current level of exercise and physical activity compared to when they were under 50 (Figure 5.4.3).

Almost two fifths (38%) indicated that they *'still do all, or most, of the same exercises and physical activities that they have always done'*, a significant decrease from 50% who expressed the same sentiment in the 2011 study.

The same proportion of respondents in the current study (38%) stated that they *'used to do some regular exercising and physical activities but don't anymore.'* This figure has risen significantly from the 2011 study, when only one in five (22%) provided the same response.

13% indicated that they have started doing exercises and physical activities that they have never done before, whilst only 4% reported *'returning to exercising and doing other physical activities that I have previously stopped doing.'* A further 6% indicated that they have never regularly exercised or participated in physical activities, the same proportion as reported in the 2011 study.

Figure 5.4.3: Physical activity levels – current vs. previous



Further analysis by key demographics reveals that those aged 65+ are significantly more likely to state that they used to do some regular exercising and physical activities, however don't anymore (48% vs. 32% aged 50 to 64 years), as are those from lower socio-economic groupings (41% C2DE compared to 37% ABC1).

50 to 64 year olds are significantly more likely to state that they *'still do all or most of the same exercises and physical activities that they have always done'* (43%

compared to 31% aged 65+) or 'have started doing exercise and physical activities that I have never done before' (15% vs. 9% of those 65+).

Table 5.4.1 (overleaf) provides an overview of physical activity levels by activity profile and sports participation.

Non participants, that is those who have not engaged in at least 30 minutes walking or physical activity, are significantly more likely to state that they have ceased regular exercise, while 16% of such participants indicated that they have never regularly exercised.

11% of non-participants stated that they *'still do all, or most of the same activity that I have always done'*. Further analysis reveals that such participants have walked continuously for at least five minutes in the last four weeks; therefore it is likely that this is an activity that they have maintained from before they were 50 years.

Just under half (45%) of participants stated that they still do all or most of the same exercises. Interestingly, almost one third (31%) of such respondents indicated that they used to do some regular exercising, however no longer do so. It is not clear whether such respondents used to engage in more frequent or intensive physical activity than they currently do, and thus deem their current status to be inferior to when they were aged under fifty.

Table 5.4.1: Physical activity levels – current vs. previous; by activity profile and sports participation

		Level of sports participation				Participants vs. non participants	
	Overall	Walkers only	Walkers and sports participants	Sports only	No activity	Participant	Non participant
<i>Weighted Base</i>	<i>1,000</i>	<i>389</i>	<i>337</i>	<i>74</i>	<i>200</i>	<i>800</i>	<i>200</i>
I have never regularly exercised or participated in physical activities	6%	7%	1%	2%	16%	4%	16%
I used to do some regular exercising and physical activities but I don't anymore	38%	41%	19%	37%	67%	31%	67%
I have returned to exercising and doing other physical activities that I had previously stopped doing	4%	4%	5%	8%	3%	5%	3%
I have started doing exercises and physical activities that I had never done before	13%	11%	21%	15%	3%	15%	3%
I still do all, or most, of the same exercises and physical activities that I have always done	38%	38%	54%	38%	11%	45%	11%

5.5 Awareness of Go for Life and Age & Opportunity

A new addition to the 2014 survey assessed the extent to which respondents are aware of Age and Opportunity. Just under one fifth (18%) expressed awareness of the organisation.

Females (22% vs. 13% of males), those aged 65 and over (22% vs. 15% 50 to 64 year olds) and ABC1s are significantly more likely to be aware of Age and Opportunity.

Findings reveal little difference in awareness of Age and Opportunity based on level of physical activity.

Figure 5.5.1: Awareness of Age & Opportunity

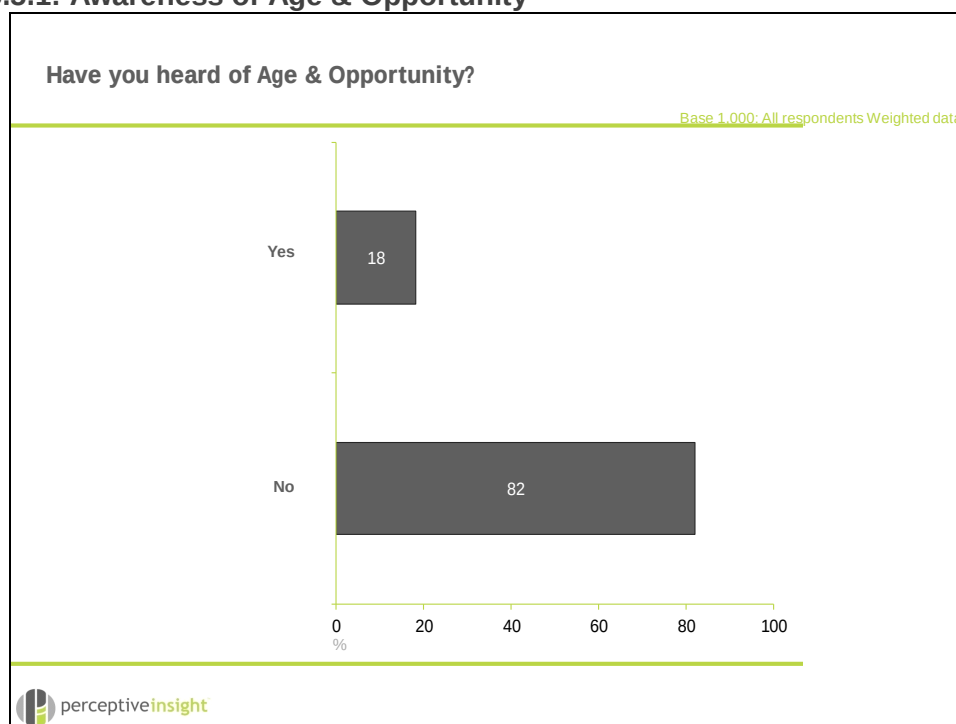
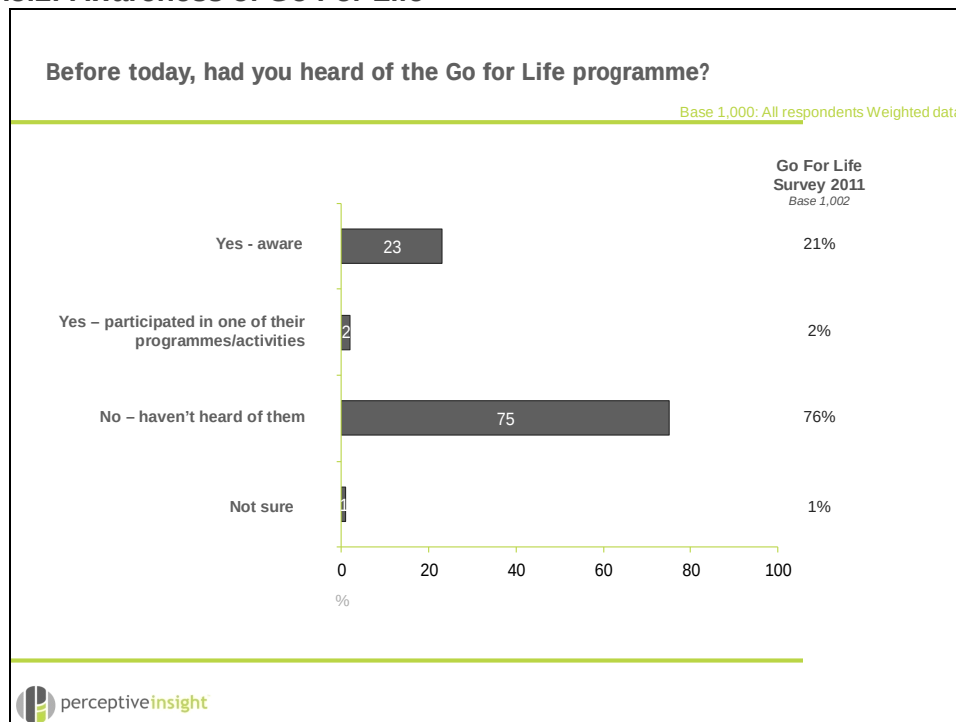


Figure 5.5.2 shows that the proportion of respondents who expressed awareness of Go For Life remains fairly consistent with 2011 study (21% compared with 23% in the current study). As with the 2011 study, awareness levels are similar across gender, age and SEG. Propensity to engage in sport appears to have little bearing on awareness of Go for Life.

Figure 5.5.2: Awareness of Go For Life



Awareness levels of PALS, the Physical Activity Leaders Programme offered by Go For Life, remain static between 2011 and 2014, at 6%.

Analysis by key demographics show little difference in awareness of and participation in the PALS programme based on age, gender, and SEG.

Perhaps not surprisingly, those who engage in sport are more likely to have participated in one of the PALS programmes/activities.

6. Conclusions and recommendations

The following paragraphs provide an overview of the main conclusions from the research, alongside the suggested recommendations to increase participation levels and improve the attitudes of older people in Ireland towards sport and physical activity.

‘Build on’ increased walking pace

The survey findings shed some interesting insight on the profile of Ireland’s walking population aged 50+ years and the propensity of older people engaging in walking.

The vast majority (92%) of survey respondents indicated that they have walked for at least five minutes in the last four weeks. Further, almost three quarters have undertaken at least one continuous walk lasting a minimum of 30 minutes in the last four weeks.

Perhaps most promisingly, the pace with which older people are walking is on the increase. Over half reported walking at a ‘fast’ or fairly brisk’ pace when walking for at least 30 minutes; thus, such respondents are deemed to be at a sufficiently fast pace to be meeting the National Physical Activity Guidelines.

Furthermore, it is evident that recreational walking is the only outlet for regular physical activity in the case of many of those who do not participate in any other form of sport.

Recommendations

- Continue to promote the benefits of walking, and in doing so at a faster pace to meet the physical activity guidelines.
- Consider targeting those walking for five minutes and encourage them to walk for longer.

Continue to encourage those who are engaging in physical activity

As noted, and perhaps not surprisingly, those aged between 50 and 64 years are more likely to report engaging in physical activity than people aged 65+ years. Of some concern is the degree of polarisation for the two age groups in relation to activity uptake between 2011 and 2014. Those aged 50 to 64 years display a trend towards higher intensity activity, while those aged 65+ have experienced a significant decline. In order to prevent further regression in physical activity amongst those aged 65 and over, it is important to continue to target those aged between 50 and 64 years, particularly those who are currently active, and encourage this group to maintain their current level of activity as they get older.

Recommendations

- Combat the decline in physical activity amongst older people aged 65+ by encouraging those in the younger bracket (50 to 64 years) to maintain, or build upon, their current level of physical activity.
- Where mobility and health problems become barriers to older people engaging in exercise, promote the 'swap, don't stop' approach. This could take the form of tips on low combat exercise.

Evaluate and assess the barriers to physical activity facing C2DE groups

Throughout the study, it is evident that socio-economic influences have a role in propensity to engage, or not, in sport and recreational physical activity. C2DE respondents are significantly more likely to fall within the 'no activity' category; that is, those who have not engaged in a 30 minute walk or other form of sport or recreational physical activity in the last four weeks. C2DE respondents are also more likely to indicate that they have never engaged in any form of sport. Further analysis reveals that this group is less likely to belong to a sport or social club, and thus, may be restricted by access to amenities. This socio-economic difference is of particular concern given the positive correlation revealed between club membership and physical activity.

Nevertheless, the findings reveal a propensity to walk amongst C2DE respondents. The segment of those who 'walk only' is more likely to comprise of C2DE respondents than those from the ABC1 socio-economic group. However, this group are less likely to walk at a faster pace and to have done so for at least 30 minutes.

Recommendations

- Consider focusing on specific practical interventions for C2DE groups. There may be merit in engaging with a group of older people from the C2DE socio-economic group to further determine the barriers preventing them from engaging in activity and discuss practical means to overcome such issues.
- Promote further to C2DEs the benefits of walking at a faster pace.

Identify ways to counter barriers to physical activity

The most commonly cited barriers to engaging in sports or physical activity include lack of time, lack of interest, injury and poor health. These reasons were also frequently provided when assessing reasons for ceased participation in sports.

It is interesting to note the rising incidence of older people who reported that they used to undertake regular exercise, however no longer do so. Further analysis of this group reveals that they are more likely to cite poor health and muscular skeletal problems as barriers to participation.

Recommendations

- Consider promoting low strength, low impact exercises to encourage uptake of those who are deterred by poor health/mobility problems.
- Counteract perceptions of sports as time consuming through promotion of short exercises.

Consider targeting those who are 'open to lifestyle change'

The findings suggest that there are some groups of older people who are open to making positive lifestyle choices. Promisingly 6% are at the 'preparation stage' i.e. they are planning to make a healthier change within the next six months, whilst a further 14% are at the 'contemplative phase' i.e. they would like to become healthier, however haven't thought seriously about it. Just over one in ten expressed resistance to make a healthier change.

Perhaps most interestingly, 27% of those who are inactive are at the contemplative stage. It is possible that, with some guidance and advice, this group could be encouraged to become more active.

Recommendations

- Consider targeting those who are open to improving their lifestyle, whilst continuing to promote activity and the benefits of a healthier lifestyle for those who are not interested in making changes.

Continue to monitor awareness of National Physical Activity Guidelines

The research revealed a lack of awareness amongst some older people in relation to the National Physical Activity Guidelines for adults. Whilst two in five indicated that they had heard of the guidelines, nevertheless, only 13% provided an accurate response when asked how much weekly physical activity is recommended for adults. One third of older people who indicated that they had heard of the guidelines actually provided an underestimation. Furthermore, over one quarter of those who are of the perception that they are meeting the guidelines actually underestimated how much physical activity is recommended for adults.

It is possible that some older people do not wish to confront their current activity status, preferring to believe that they are undertaking adequate exercise. Indeed, previous research conducted by Perceptive Insight on behalf of the Public Health Agency (2012) in relation to obesity revealed startling misconceptions in relation to one's weight and physical activity status.

Therefore, it may be interesting to review the characteristics of this group of respondents, particularly the 'inactive' who deem themselves to be meeting the guidelines, and assess whether this situation is a consequence of (1) a genuine lack

of knowledge, (2) unwillingness to 'face up' to lifestyle change or (3) an under recording through the survey of actual activity levels.

The findings also unveil a strong gender effect in relation to those who play sport only. Less than one quarter of male sport participants were aware of the guidelines compared to over 40% of females.

It must not be overlooked that almost three quarters of those who had heard of the guidelines provided a reasonably close or exact estimation compared to one third of those who had not heard of them. There is merit in 'building upon' this current degree of recollection through further promotion of the guidelines amongst older people.

Recommendations

- Continue to promote the National Physical Activity Guidelines for adults, including older people.
- Suggest ways which adults can incorporate physical activity into their daily lifestyle on a flexible basis to help to overcome trepidation amongst those who deem the Guidelines to be unobtainable.
- Consider ways to counter misperceptions amongst older people in relation to their physical activity status.

Go for Life is an Age & Opportunity initiative funded by Sport Ireland



Perceptive Insight
Jacob Peterson House
109 Bloomfield Avenue
Belfast
BT5 5AB
www.perceptiveinsight.co.uk