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The Paradoxical Place of Alcohol in Rural Community Sporting Clubs: An Australian Case Study

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Abstract

There is a longstanding and problematic connection between alcohol consumption and sport. Drinking often features heavily in post-sport celebrations for participants and spectators alike, and many sporting events and clubs are reliant on alcohol-industry sponsorship and/or alcohol-derived income. Yet community sporting clubs also promote 'healthy lifestyles'. The aim of this article is to present selected results from an Australian scoping study on alcohol in community sporting clubs, with a particular focus on members' views on the place of alcohol in club culture and their receptiveness to various harm-minimisation strategies.

The Knowing the Score project was conducted in Tasmania and involved a survey of 700 individuals associated with 31 sporting clubs including the Australian Football League, basketball, bowls, golf, hockey, netball and soccer. Overall, 42% of participants from licensed clubs reported that alcohol was 'very important' or 'important' for celebrating after a match/game. Alcohol was considered 'very important' or 'important' for clubs' financial wellbeing by 74% of AFL club participants and 64% of bowls participants. Alcohol was the most commonly identified problematic drug, across all sports. With respect to harm-minimisation strategies, participants indicated the most support for designated driver programs and the least support for banning alcohol sponsorship.

Alcohol occupies a paradoxical place in many community sporting clubs. It is recognised as problematic, yet its consumption remains a highly valued aspect of club culture. Efforts of clubs to implement harm-minimisation strategies may be hampered by lack of support from members and a deficient evidence base, and rural clubs may be additionally impeded by limited public transport and other factors. Community sporting clubs are, however, well positioned to promote behavioural/cultural change with respect to alcohol use.

Keywords: alcohol consumption, sport, club culture, harm-minimisation strategies

1.0 Introduction

There is a longstanding and somewhat problematic connection between alcohol consumption and sport. In Australia and many other nations, alcohol consumption often features heavily in post-sport celebrations (and commiserations) for participants and spectators alike, and many sporting events and clubs are reliant on alcohol-industry sponsorship (McDaniel, Kinney, & Chalip, 2001; McGuifficke, Rowling, & Bailey, 1991; Rhem & Kanteres, 2008; Snow & Munro, 2000). Even

in small community-based clubs, alcohol consumption may be an unquestioned ‘part of life’, even for young members (Hughes, 2008).

Previous studies (Black, Lawson, & Fleishman, 1999; Lawson & Evans, 1992; Nelson & Wechsler, 2003; Rowe, 2003) have revealed that high risk drinking is prevalent among sportspeople, and alcohol-fueled incidents involving members of the sporting community are frequently featured in the mass media. Drinking is regarded as an important tradition within many community sporting clubs, and it is seen to improve camaraderie and contribute positively to members’ experience of the club (Dietze, Fitzgerald, & Jenkinson, 2008; Duff, Scealy, & Rowland, 2005).

The place of alcohol as a ‘social lubricant’ and as an aide to relaxation and fun exists against a more serious and sinister backdrop (Hughes, Julian, Richman, Mason, & Long, 2008). Assaults, damage to property, suicides, unwanted sexual activity and accidents are associated with alcohol consumption (Farrington, 2000), and rural residents are more at risk (Williams, 1999). Many initiatives at the national, state and local levels are attempting to address the issue, with sport having recently been identified as an area of particular concern (Premier’s Drug Prevention Council, 2004).

2.0 Background

Community sporting clubs play a key role in many rural communities around Australia (Cashman, 2002; Finch, Mahoney, Townsend, & Zazryn, 2003; Tonts, 2005). In places where there are few recreational and other facilities, ‘the local footy club’ may function as the social heart of the town, and club activities may directly or indirectly involve significant numbers of residents. However, there is increasing awareness that despite their positive contribution to community engagement and physical health, community sporting clubs can also be associated with health-compromising behaviours including risky drinking and tobacco and other drug use.

In response to this concern, Sport and Recreation Tasmania commissioned the Drug Education Network, Tasmania to undertake a state-wide case study (‘Knowing the Score’, or KTS) on the prevalence and patterns of, and attitudes towards, alcohol and other drug use in Tasmanian community sporting clubs (Craw, 2009). This article presents selected results from KTS, including participants’ views of the social and financial contributions of alcohol to their club, the extent to which alcohol use is perceived as problematic for their club, and their responses to various club-based harm-minimisation strategies.

3.0 Methods

Participants in this case study included 700 individuals associated with a purposive sample of Tasmanian community sporting clubs including football (AFL), basketball, bowls, golf, hockey, netball and soccer. The majority (77%) of participants were players, with club officials, coaches, supporters and parents comprising 9%, 6%, 4% and 3% of the sample, respectively. All participants responded to a 71-item survey that was developed to measure consumption, attitudes, and harm-minimisation behaviours toward alcohol use within each sporting club.

The case study received ethics approval from the Human Research Ethics Committee Tasmania (H10373). Potential clubs were contacted via State Sporting

Organisations and followed up via telephone. Once clubs had indicated an interest in involvement, a data collection session was scheduled. All participants were provided with a study information sheet and consent form, in addition to information about standard drinks and counselling services. The Turning Point Keypad system was used for data collection, with participants using hand-held keypads to anonymously respond to survey questions projected onto a screen.

4.0 Results

Thirty-one clubs participated in this study. Just under half (48%) of all clubs surveyed held a current liquor licence. However, 100% of AFL, bowls, and golf clubs were licensed, compared to 67% of soccer clubs, while none of the basketball, hockey or netball clubs surveyed were licensed (although some of these clubs played at venues where a license was externally held).

Sixty-one percent of the study participants were male. While a number of sports showed an expected gender bias (See Table 1), no one sport consisted exclusively of male or female participants.

Table 1. *Gender of Participants, by Sport*

		Gender		
		Male	Female	Total
Sport	AFL	124	10	134
	Basketball	36	54	90
	Bowls	22	11	33
	Golf	48	25	73
	Hockey	41	32	73
	Netball	15	108	123
	Soccer	138	36	174
	Total	424	276	700

The highest proportion of participants came from the 18-30 year age group (37%) followed by 14-17 years (25%), 50+ years (15%), 31-40 years (14%) and 41-50 year olds (9%). While age groups were not evenly distributed among sports, there was representation for all age groups in each sport, with the exception of 14-17 year olds in bowls clubs.

4.1 The Positive and Negative Contributions of Alcohol

Participants at licenced clubs were asked about the importance of alcohol when socialising and celebrating at their sports club (see Figure 1). Among licensed clubs alcohol was considered ‘very important’ or ‘important’ when socialising at the club for 63% of AFL participants, 40% of golfers, 33% of bowls participants and 18% of soccer participants.

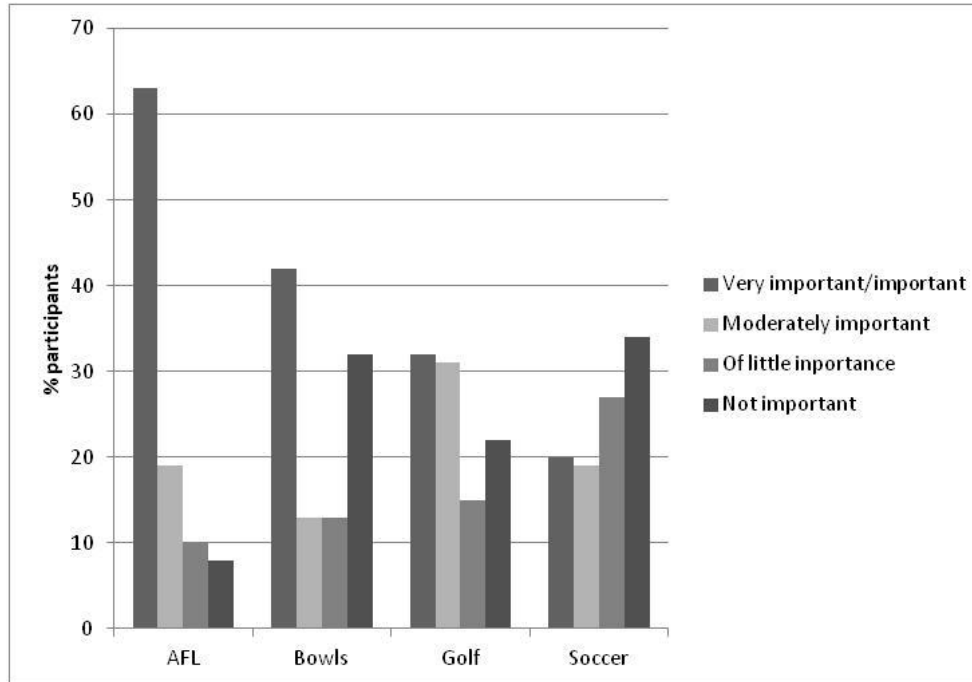


Figure 1. Importance of alcohol when socialising/celebrating, by sport

Similarly, alcohol was considered very important or important when celebrating at their club after matches/games for nearly half (46%) the AFL respondents compared to 19% for bowls and golf, and 10% of soccer respondents.

In addition to playing a role in club-based social activities, alcohol appeared to be highly valued for its financial contribution to some community sporting clubs. Nearly three quarters (74%) of AFL participants and over half of bowls (64%) and golf (55%) participants but only 21% of soccer participants considered alcohol as ‘very important’ or ‘important’ for their club’s financial wellbeing (Figure 2).

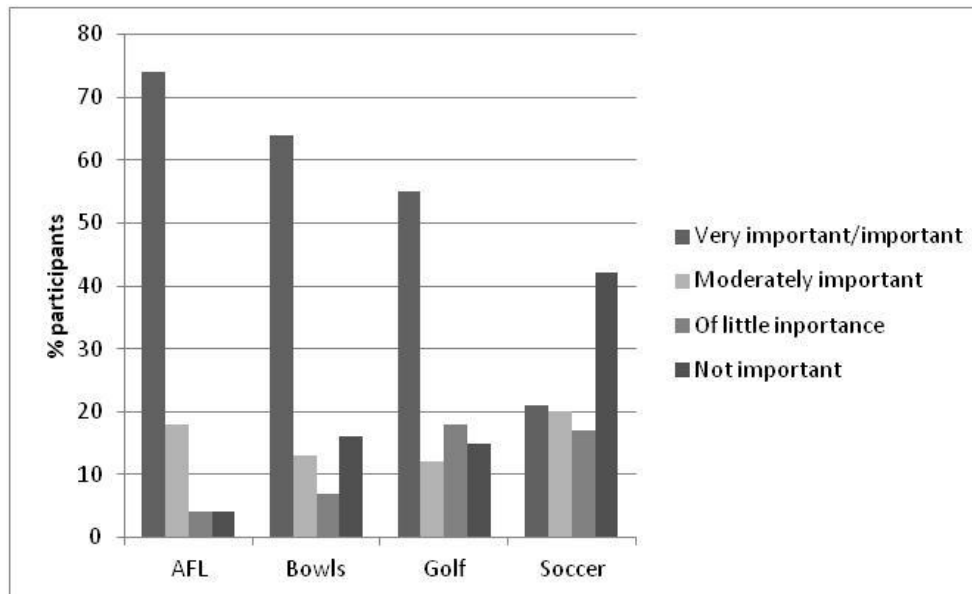


Figure 2. Importance of alcohol for club's financial stability, by sport

This view was reinforced by licensed sporting club officials, with 100% of AFL, bowls and golf and 75% of soccer club management reporting that a liquor license was important for raising revenue.

The paradoxical place of alcohol is highlighted by the results to the question ‘which drugs are considered to cause the most problems for your club?’. Alcohol was the most commonly identified problematic drug for all sports (see Figure 3).

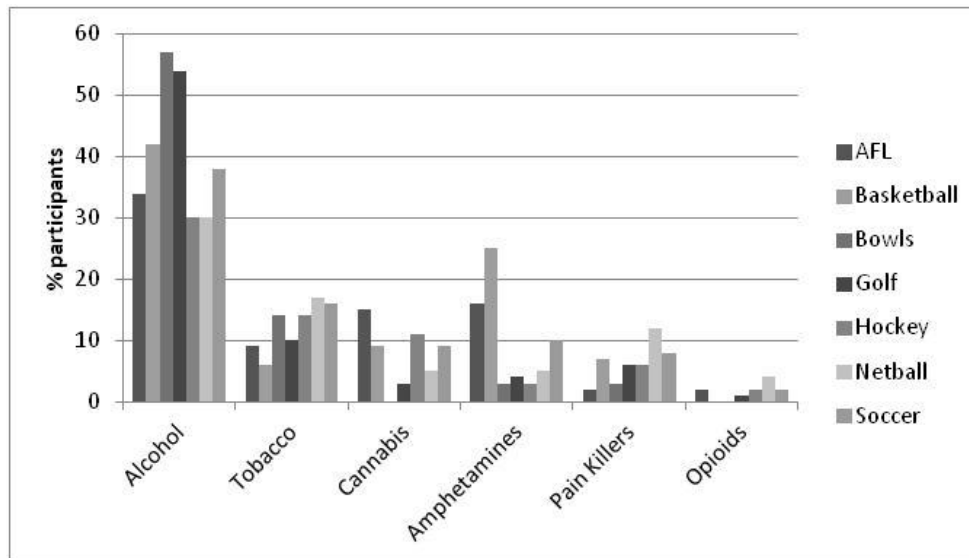


Figure 3. Perceptions of the Most Problematic Drug, by Sport

Furthermore, almost one quarter of AFL members (23%) reported ‘often’ being concerned about another club member driving after consuming alcohol at their club, compared to 16% of golf participants and 6% of soccer participants. Alcohol was also regarded as being implicated in the majority of incidents involving off-field threats and aggressive/violent behaviour.

4.2 Club-Based Harm Minimisation Measures

Several survey items related to the perceived effectiveness of various strategies that could be employed by clubs in an effort to reduce alcohol-related harm. These strategies included serving only low-alcohol beverages, introducing a designated driver program, holding occasional alcohol-free functions, and banning alcohol industry sponsorship. These will now be addressed in turn.

Overall, 47% of participants believed that serving only low alcohol beverages in clubs would not be an effective strategy for reducing alcohol related issues at their club. However, there was considerable variation between sports, with 71% of AFL participants believing it to be an ineffective strategy compared to 29% of basketball participants (see Figure 4).

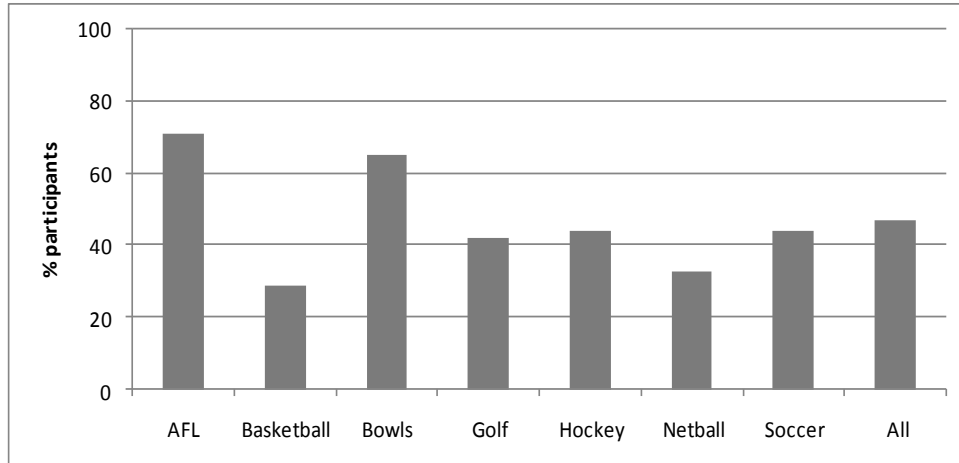


Figure 4. Perceived Ineffectiveness of Serving of Only Low-Alcohol Options

By comparison with serving only low-alcohol options, participants were more supportive of club-based designated driver programs. As Figure 5 shows, designated driver programs were considered to be ineffective by 10% of study participants. Once again there was some variation between sports, with 19% of hockey participants considering it to be an ineffective strategy, as compared to only 3% of bowls participants.

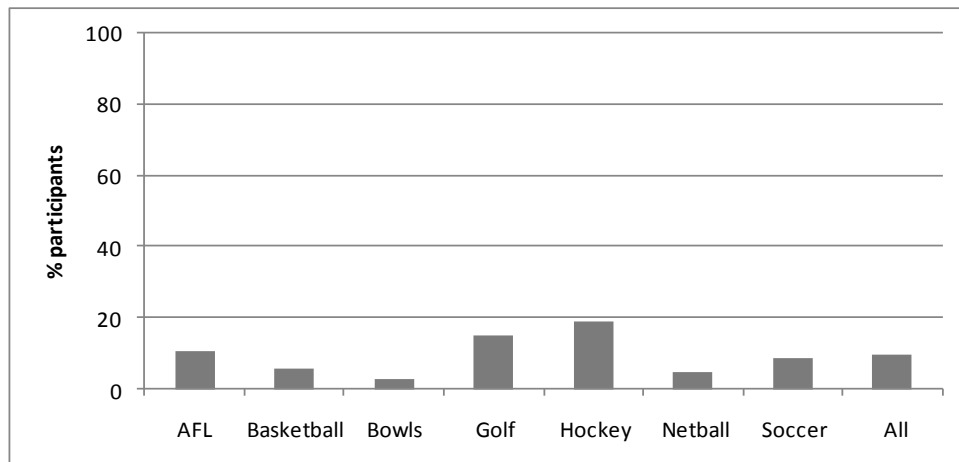


Figure 5. Perceived ineffectiveness of designated driver programs

The third strategy to be addressed was sporting clubs holding occasional alcohol-free functions. Overall, study participants were not particularly supportive of this strategy, with 63% stating they believed that occasional alcohol free functions would be ineffective in reducing alcohol related issues at their club. Once again there was variation between sports, with 79% of AFL participants deeming this an ineffective strategy compared to 46% of soccer participants and 48% of basketball participants (see Figure 6).

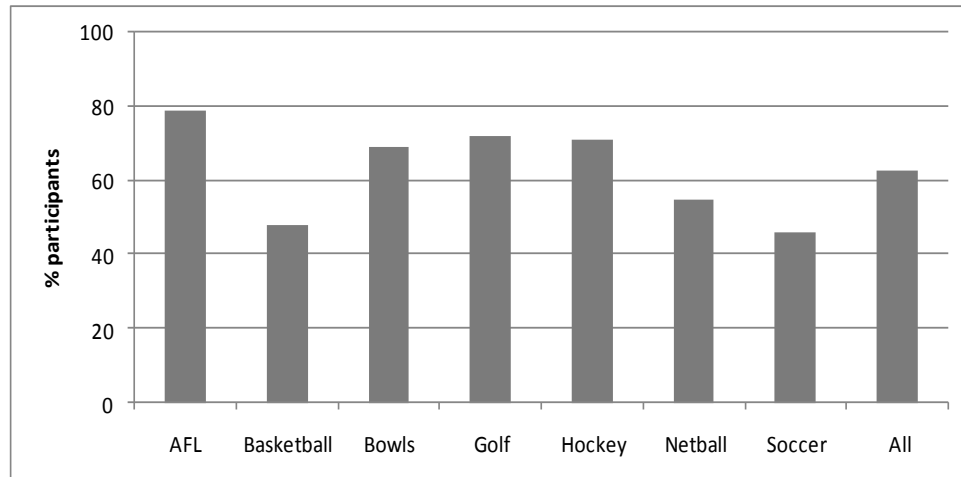


Figure 6. Perceived ineffectiveness of occasional alcohol-free functions

The final strategy to be considered here is the banning of alcohol sponsorship of sporting events and/or sporting clubs. Overall, the majority (68%) of study participants believed that an alcohol sponsorship ban would be ineffective at reducing alcohol-related issues within their sporting club. This view was expressed by 88% of bowls participants and 83% of AFL participants but less than 50% of netball participants (see Figure 7).

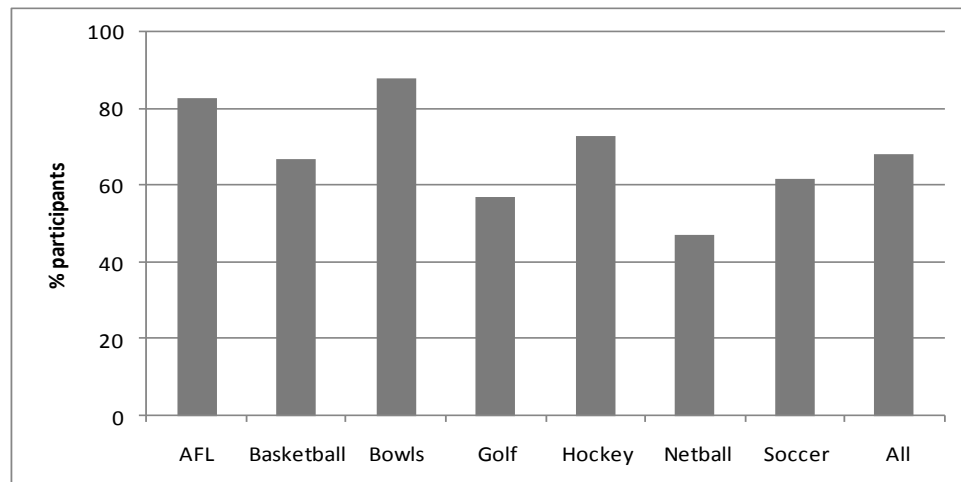


Figure 7. Perceived ineffectiveness of banning alcohol sponsorship

5.0 Discussion

At the time of this study, many Tasmanian community sporting clubs reported actively addressing alcohol/drug issues. Most clubs reported having food available when the bar was operating, and many AFL and soccer clubs put on light dinners for players after training. Qualitative comments from club members and officials indicated a ‘culture change’ relating to alcohol consumption, which has reportedly occurred during the past two to five years. Club management is increasingly aware of its duty of care to all members. The desire to promote ‘a family atmosphere’ at clubs has also contributed, particularly in soccer and netball clubs which have many young players competing at senior levels (Duff, et al., 2005).

However, despite good intentions to minimise alcohol-related harm, clubs also reported encountering significant barriers. Follow-up discussions with club officials suggest that rurality features as a salient factor. For instance, one rural club was repeatedly refused service, on the basis of its location, from the only taxi operation which was based in a nearby town. The club then attempted to link with a privately-operated bus service, on a fee-for-service basis. When that bus service ceased operation, the club lost its best safe transport options for members who drink at the club. Successfully addressing this issue is a matter of urgency, given the relatively high rate of drink driving in rural areas (Ministerial Council on Drug Strategy, 2006).

This study has a number of limitations. Attempts to secure the participation of two clubs from each of the seven sports, in each of the three regions of Tasmania (North-West, North and South) were not successful. Although a relatively large number of people participated in the study, the clubs were selected on a purposive basis, and the generalisability of the results is therefore limited. Furthermore, although the use of the clicker keypad units probably minimised the impact of social desirability bias (whereby participants are inclined to give ‘socially acceptable’ answers rather than completely honest ones), its influence should not be discounted.

6.0 Conclusions

Despite the sample having implications for the wider generalisability of the results, this small case study has made some important contributions to the field. ‘Knowing the Score’ is, to the authors’ knowledge, the first Australian study on alcohol and other drug use/attitudes in community sporting clubs, conducted on a state-wide basis. This article has demonstrated the paradoxical place of alcohol in many clubs, with members applauding alcohol’s social and financial contributions whilst simultaneously bemoaning the harm it causes. It has also highlighted differences in attitude between sporting codes, and specific difficulties rural clubs may encounter when attempting to reduce alcohol-related risk.

This article also investigated participants’ views of the effectiveness of various club-based harm minimisation strategies. Interestingly, there was some incongruity between these views and other research evidence. For instance, only a small proportion of participants considered designated driver programs to be ineffective, which contrasts with the findings of Ritter and Cameron (2006) and others (Nielson & Watson, 2009). Similarly, large proportions of participants across all sports believed that banning alcohol sponsorship would be an ineffective measure, which conflicts with current expert advice on the topic (Kypri, O’Brien, & Miller, 2009; O’Brien & Kypri, 2008) which is based on ‘large-scale, well-resourced and well-conducted studies’. Unfortunately, the evidence base in this field is itself characterised by key gaps and deficiencies (Priest, Armstrong, Doyle, & Waters, 2008) such as small sample sizes and limited follow-up.

In rural communities in particular, sporting clubs are enormously influential and this impact can span generations. Arguably, clubs provide the ideal environment for health promotion, since they are already ‘in the business’ of promoting physical activity and have well-established community linkages. Encouraging behavioural and cultural change requires expertise, a reliable evidence base, local knowledge, and determination to overcome difficulties specific to rural and isolated communities. Nonetheless, with targeted funding, practical support, and further work to improve the evidence base and its translation into practice, community

sporting clubs in rural and regional Australia can make a unique contribution to reducing the harm caused by alcohol and other drugs.

7.0 Acknowledgements

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