



FULL RESEARCH REPORT · 2026

EXPLORING THE SOCIAL IMPACT OF PITCH AND PUTT

Understanding the community benefits of a recreational sport for females over the age of 55

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Lead Organisation: Pitch and Putt Ireland · Collaborating Organisation: University College Dublin
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SECTION 1

Introduction & Background

Acknowledgements, executive summary, and study context

Acknowledgements

- The research team would like to thank the study participants.
- The Pitch and Putt Ireland National Executive Committee.
- Ger Holland and Frances Ryan.
- The Pitch and Putt Ireland office staff, Miriam Valentine and Norma Duffy, for their support throughout the project.

Executive Summary

- This project examined the health and social benefits of participation in Pitch and Putt among women aged 55+ in Ireland.
- Golf's broad physical, psychological, and social benefits are well documented, but Pitch and Putt remains under-researched — particularly its value and meaning for older women.
- A mixed-methods design combined a literature review with a national survey to explore how Pitch and Putt may support active ageing, social connection, and overall well-being.
- Despite the recognised benefits of golf, multiple barriers limit women's participation. It is important to consider whether Pitch and Putt offers a more accessible route to similar health and social gains.
- The survey was completed by 122 women members of Pitch and Putt Ireland aged 55 years or older, revealing high levels of perceived benefit and a cyclical pattern of participation across the lifespan.
- Collectively, findings demonstrate that Pitch and Putt is an inclusive, low-cost, community-rooted sport promoting health and social connectedness.

BACKGROUND: GOLF, BARRIERS, AND PITCH AND PUTT

- Golf is consistently associated with improved cardiovascular health, enhanced mental well-being, and strong community engagement.
- Older women often encounter barriers to golf participation, including time constraints, cultural stereotypes, and gendered club environments.
- Pitch and Putt, a shorter and more informal adaptation of golf, originated in Ireland in the mid-1930s – the first 9-hole course was established in Fountainstown, Co. Cork, in 1937.
- It has remained community-focused and accessible, requiring minimal land and lower costs than traditional golf, and supports participation across the lifespan.
- Despite these potential benefits, there had been a notable lack of research examining women's participation in Pitch and Putt – the gap this project set out to address.

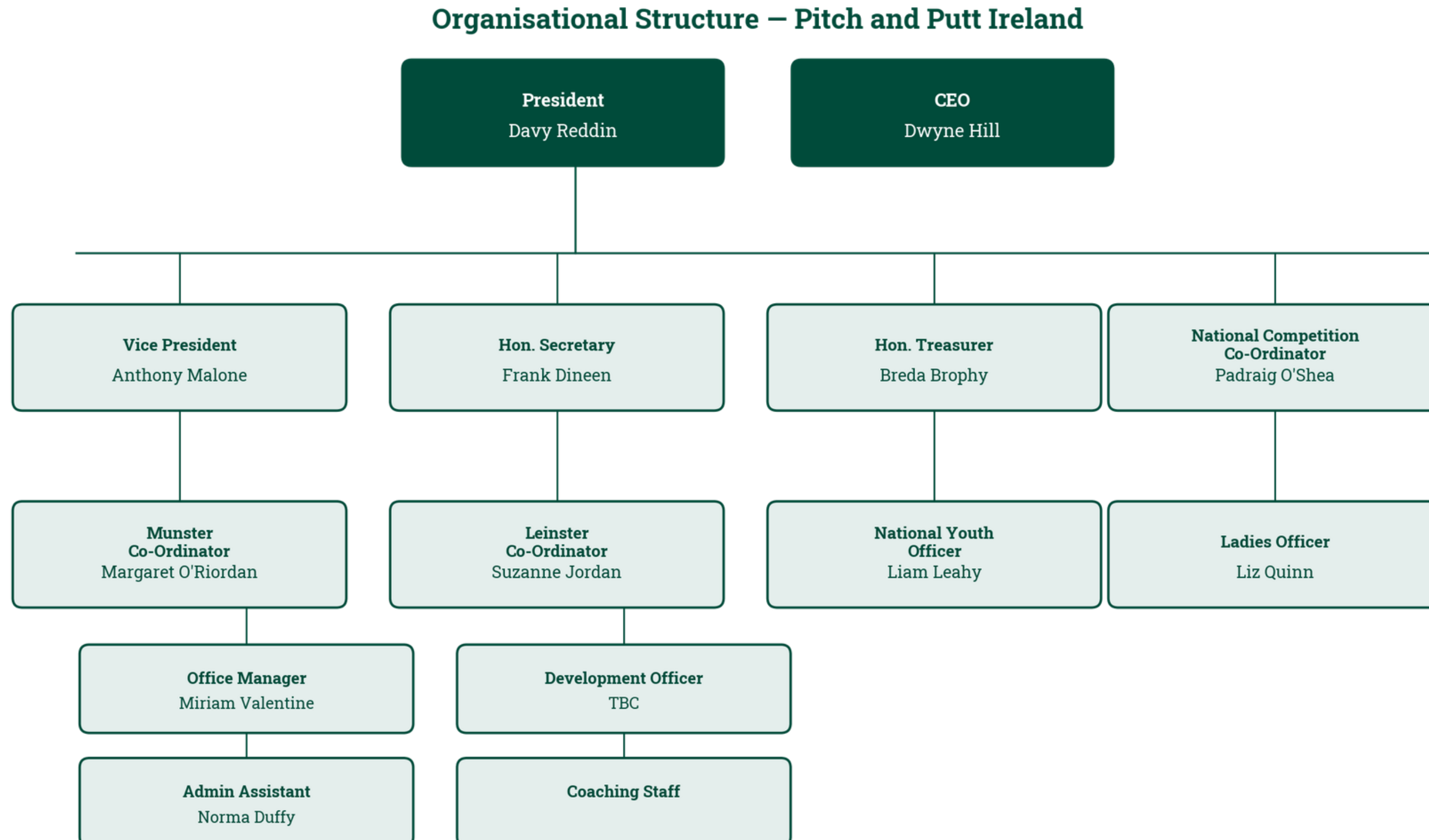
ALIGNING WITH NATIONAL PRIORITIES

- This project supports national and organisational priorities relating to lifelong participation, active ageing, and increasing opportunities for women in sport.
- Aligned frameworks: the National Physical Activity Plan, the Sport Ireland Women in Sport Policy 2023, and the Pitch and Putt Ireland Women in Sport Strategy 2026–2029.
- Supported through a Sport Ireland Research Grant (2024/25), Pitch and Putt Ireland partnered with UCD's School of Public Health, Physiotherapy & Sports Science and the UCD Institute for Sport and Health.
- The study explored participation pathways, barriers and facilitators to engagement, and the perceived physical, psychological, and social benefits of lifelong participation.

PITCH AND PUTT IRELAND: ORGANISATION & MEMBERSHIP

- The National Governing Body for the sport across the island of Ireland.
- Governance operates through affiliated clubs, County and Regional Boards, and a National Executive Council (NEC), under the PPI Constitution (March 2025).
- Affiliated internationally through the European Pitch and Putt Association (EPPA).
- As of 2026: 94 affiliated clubs and 9,565 registered members across the island of Ireland, including 2,028 female members (21%).
- The organisation manages club affiliation and member registration through standardised governance and administrative processes.

FIGURE 1: ORGANISATIONAL STRUCTURE



INCLUSIVITY & POLICY ALIGNMENT

- PPI's mission: to promote, develop, and govern pitch and putt in Ireland – "A Sport for Everyone: Accessible, Enjoyable, and Lifelong Participation."
- Values emphasise inclusivity, accessibility, community, and progressiveness, with a commitment to a family-friendly, fair, safe, and enjoyable sport for all.
- The PPI Strategic Plan 2025–2029 and Women in Sport Strategy 2026–2029 prioritise developing participation opportunities and lifelong engagement, particularly among women, older adults, young people, and newcomers.
- These priorities align closely with Sport Ireland's Women in Sport Policy (2023), which seeks equal opportunity for women to achieve their full potential through lifelong participation in sport.

SECTION 2

Research Objectives & Methods

Study aims, work packages, and methodology

RESEARCH OBJECTIVES

The overarching aim: to examine the physical, psychological, social, and health-related benefits of participation in Pitch and Putt among women aged 55+ in Ireland.

- Explore existing evidence relating to the physical, psychological, and social benefits of participation in Pitch and Putt, golf, and related sports among older women.
- Determine the profile of women aged 55+ participating in Pitch and Putt in Ireland – demographics, participation patterns, motivations, health behaviours, and well-being indicators.
- Explore the perceived benefits of Pitch and Putt for women in this age group, alongside barriers and facilitators to participation and sustained engagement.

Work Package 1

- Conduct a comprehensive literature review on the health, well-being, and participation benefits of golf and related sports for older women.

Work Package 2

- Identify participation patterns, motivations, health behaviours, and health-related indicators through a national survey.
- Explore women's experiences of participation, including perceived benefits, barriers, and facilitators, through qualitative analysis of open-ended survey responses.
- Synthesize findings to develop evidence-informed policy and practice recommendations.

METHODS: WORK PACKAGE 1 — LITERATURE REVIEW

- Databases searched: CINAHL, SPORTDiscus, PubMed, and Google Scholar (23rd–30th June 2025). No date restrictions were applied.
- Focus: physical, psychological, and social benefits of participation in golf and related sports; barriers and facilitators to women's participation; and the potential relevance of these findings to Pitch and Putt.
- Methodological approach: Joanna Briggs Institute Methodology for Evidence Synthesis.

METHODS: WORK PACKAGE 2 — NATIONAL SURVEY

- Sample: 122 women aged 55+ participating in Pitch and Putt in Ireland.
- Recruitment: through PPI clubs via posters, member email circulation, and QR code distribution.
- Data collection: paper-based or electronic survey.
- Measures: demographics, participation patterns, motivations, barriers/facilitators, health behaviours, health status, perceived impacts, and the PROMIS-10 Global Health measure, plus open-ended questions.
- Quantitative analysis in SPSS and Microsoft Excel; qualitative analysis of open-ended responses via thematic analysis.
- Data management: dataset reviewed, cleaned, and standardised for consistent denominators and accurate interpretation of multi-response items.
- Reporting: percentages use valid responses per variable (item-specific denominators).

SECTION 3

Findings

Work Package 1 – Literature Review

LITERATURE REVIEW: WHAT WE KNOW ABOUT GOLF

- The literature review (n=15 papers) identified consistent evidence that participation in golf is associated with physical, psychological, and social benefits.
- Women continue to face barriers to participation, including gendered sporting environments, exclusion from leadership roles, institutional sexism, and inconsistencies in club policies and practices.
- Facilitators to women's participation included socially focused leagues, mentorship opportunities, welcoming club cultures, and inclusive organisational policies.
- No published studies examining Pitch and Putt specifically were identified – but its shorter, informal, community-based, accessible nature suggests relevance of many golf-literature factors.

TABLE 1: SUMMARY OF LITERATURE REVIEW FINDINGS

Domain	Key Findings for Golf	Evidence for Pitch & Putt
Demographics	Women underrepresented in golf research and leadership roles. Most studies focus on older adults.	No demographic data available.
Participation	Barriers: gendered culture, institutional sexism, exclusionary policies, lack of mentorship. Facilitators: flexible/social leagues, inclusive policies, mentorship, policy reforms.	Suggested to be accessible and gender-inclusive, but no research is available.
Health Benefits	Physical: cardiovascular health, strength, balance, weight management. Psychological: reduced anxiety/depression, improved mood/cognition. Social: connectedness, purpose,	No direct studies, but benefits likely similar to golf.
Qualitative Themes	Belonging, emotional wellbeing, persistence despite health challenges, community motivation.	Themes are inferred; no direct qualitative research on Pitch & Putt.

SECTION 3

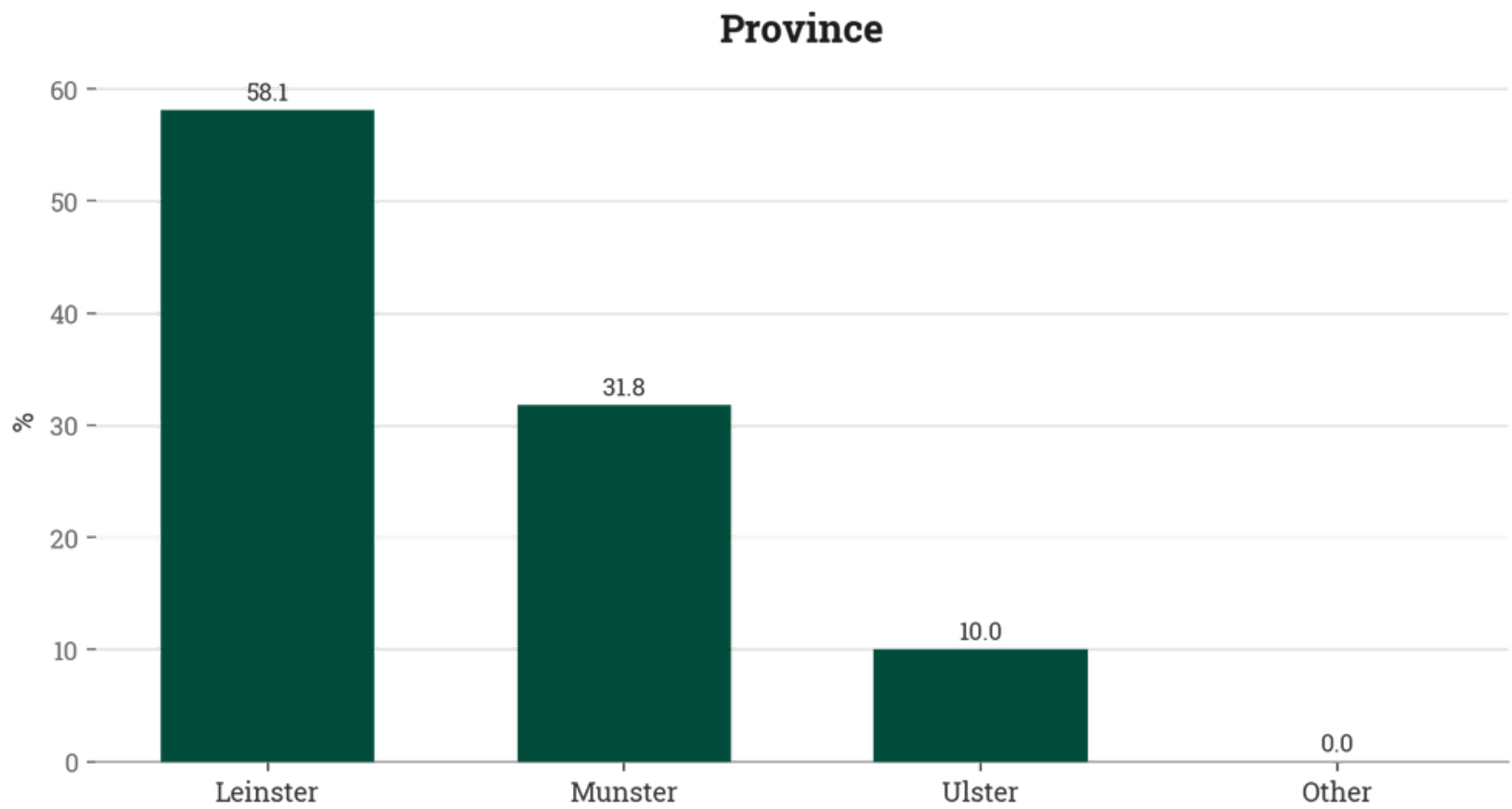
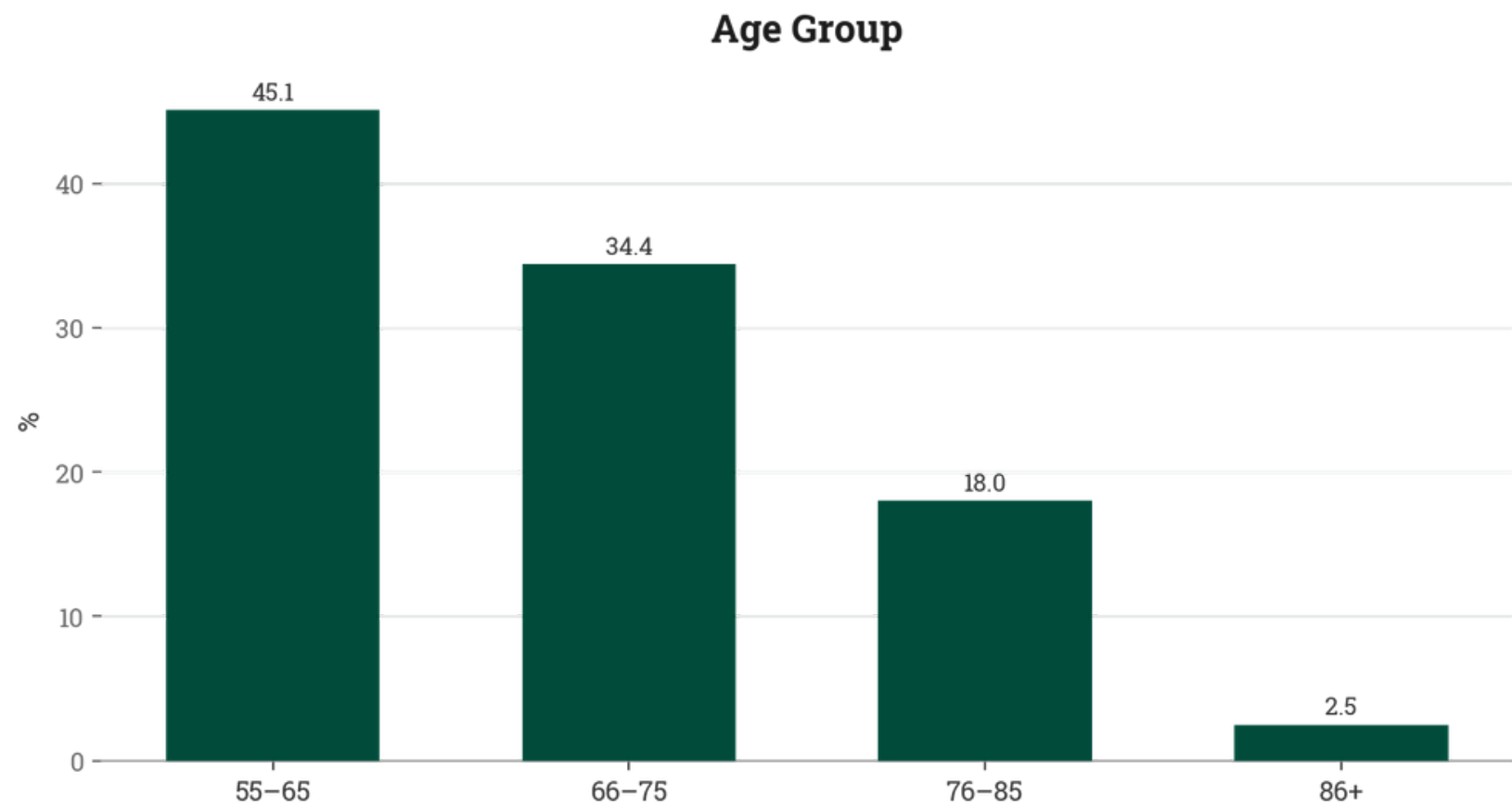
Findings

Work Package 2 – National Survey

THE NATIONAL SURVEY: AN OVERVIEW

- The national survey provided the first empirical data on women's participation in Pitch and Putt in Ireland.
- It offers insight into participant characteristics, participation patterns, health and well-being, and perceived benefits of the sport.
- 122 women aged 55 years and older responded, forming the basis for all findings that follow.

DEMOGRAPHICS: AGE AND REGION



DEMOGRAPHICS: WHAT THE NUMBERS SHOW

- 122 women aged 55+ participated; mean age 66 years, with 79.5% aged between 55 and 75.
- Age breakdown: 45.1% aged 55–65, 34.4% aged 66–75, 18.0% aged 76–85, and 2.5% aged 86+.
- Participants reported an average of 17.5 years of involvement and approximately three rounds played per week.
- Geographically, most participants were from Leinster (58.1%), followed by Munster (31.8%) and Ulster (10.0%); no respondents were from Connacht.

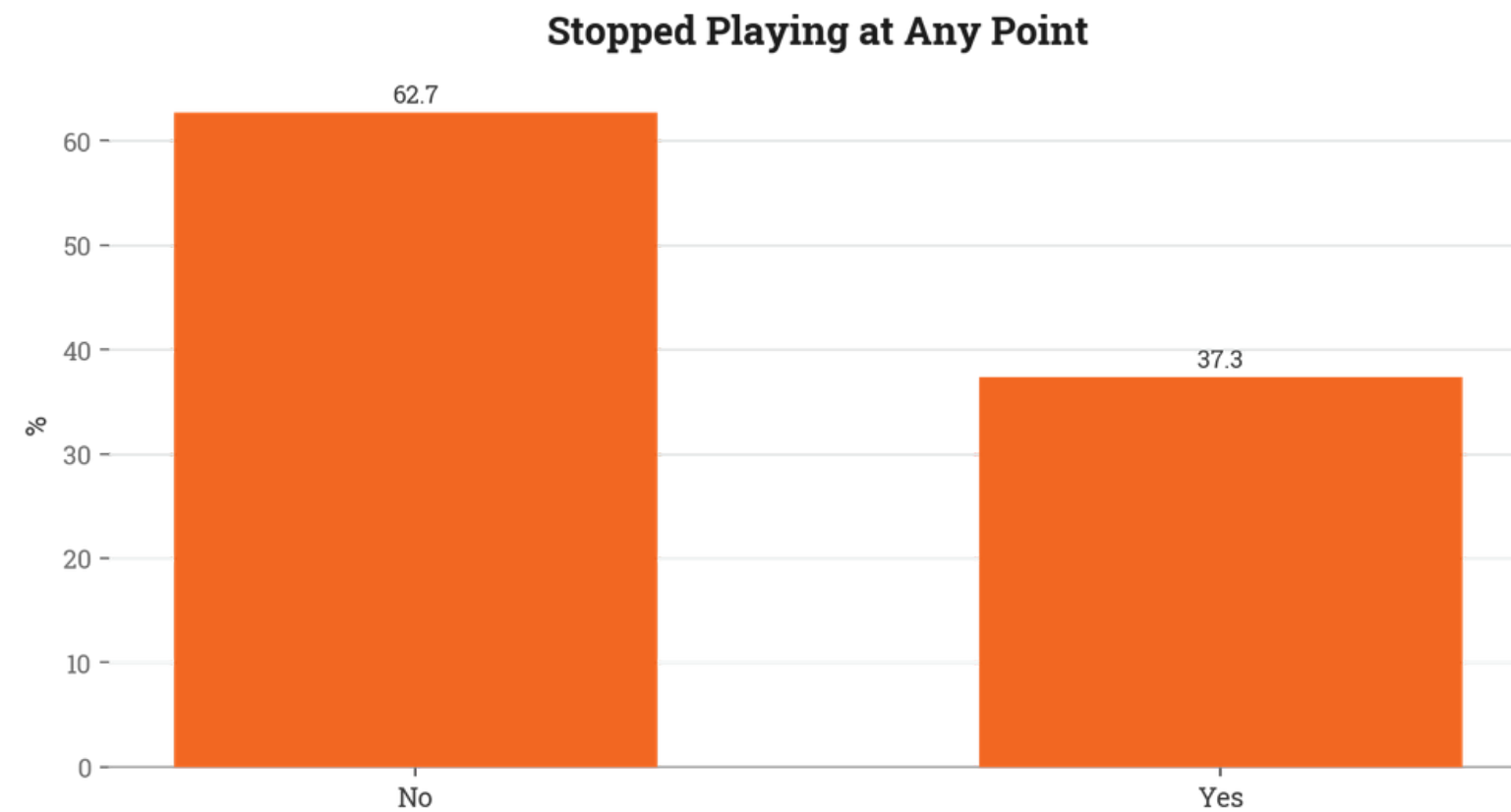
PARTICIPATION PATTERNS: MOTIVATIONS

- Top individual motivations: participation in the sport itself (17.2%), family encouragement (13.8%), and making new friends (12.9%).
- Many respondents gave combined responses – reflecting the interconnected nature of physical activity, social engagement, and well-being.
- 84.5% first heard about Pitch and Putt through someone they knew – word of mouth is the dominant recruitment pathway; only 15.5% learned via other sources.

PARTICIPATION PATTERNS: LIFE CIRCUMSTANCES

- Largest groups: retired women not volunteering (37.2%) and retired women who volunteer (20.7%).
- Smaller groups: employed part-time (14.9%), employed full-time (13.2%), unemployed/homemakers not seeking work (9.9%), self-employed (1.7%), unemployed seeking work (1.7%), carers (0.8%).
- Living arrangements: 52.5% live with a partner/spouse, 25.4% live alone, with smaller numbers living with children, pets, housemates, or combinations thereof.
- The importance of interpersonal recruitment pathways highlights the potential value of ambassador programmes, community outreach, and peer-led recruitment.

PARTICIPATION PATHWAYS: STOPPING AND RETURNING



- 62.7% of women never stopped playing; 37.3% stopped at some point before later returning.
- This suggests Pitch and Putt provides opportunities for both sustained participation and re-engagement across the life course.

WHY WOMEN STOP AND WHY THEY RETURN

- Among women who stopped, the most common reasons were other commitments (77.3%), illness (59.0%), and injury (41.0%).
- A cyclical pattern of participation emerged: many women first became involved through family or local clubs, reduced participation during employment, caregiving, illness, or competing commitments, then resumed later in life – particularly after retirement.

“Always knew about it and looking for something to do when I retired.”

“My children, their commitments... led me to leave temporarily.”

“Pitch and putt has helped me so much throughout my life... I have been able to escape from the stress of work and relationships.”

HEALTH & WELLBEING: PERCEIVED BENEFITS

99.2%

physical health
benefit (118/119)

99.1%

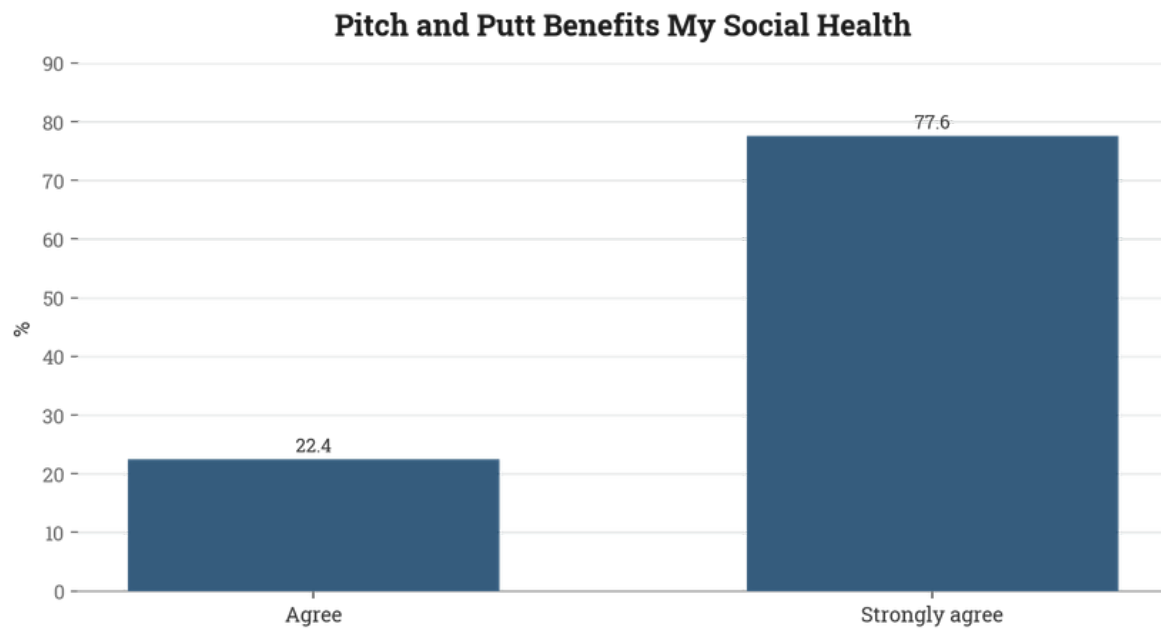
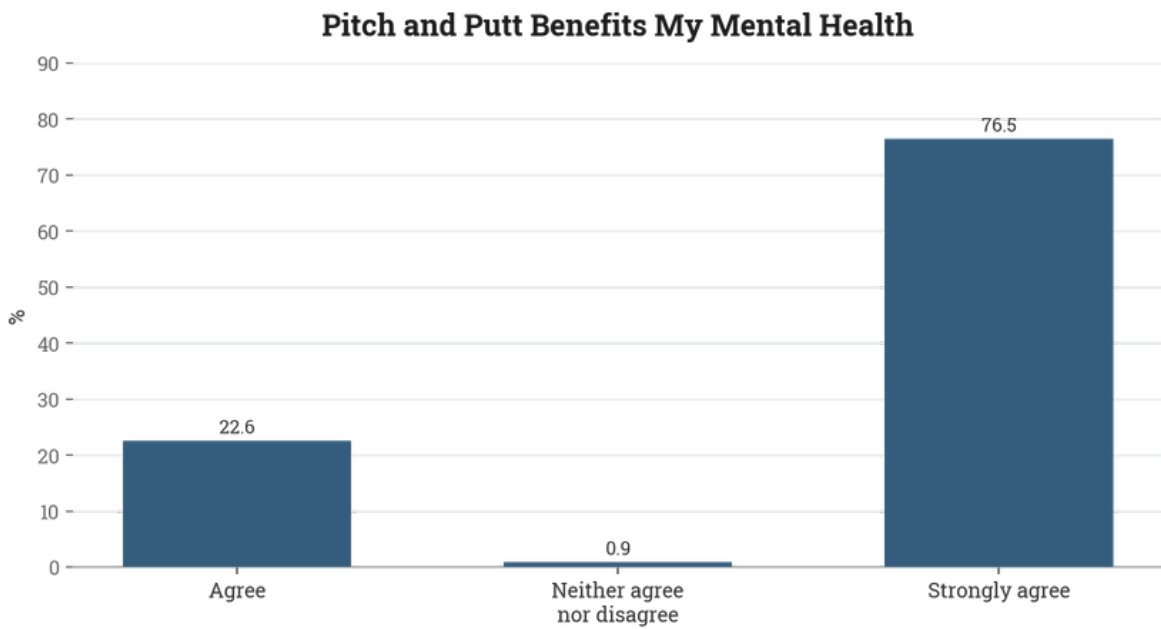
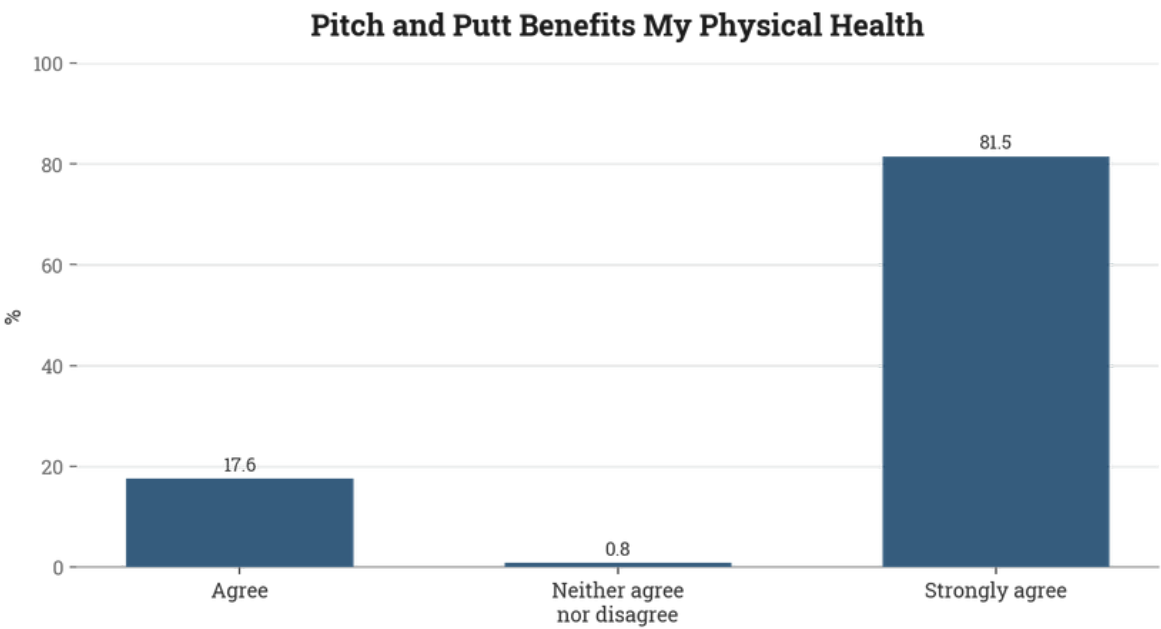
mental health
benefit (114/115)

100%

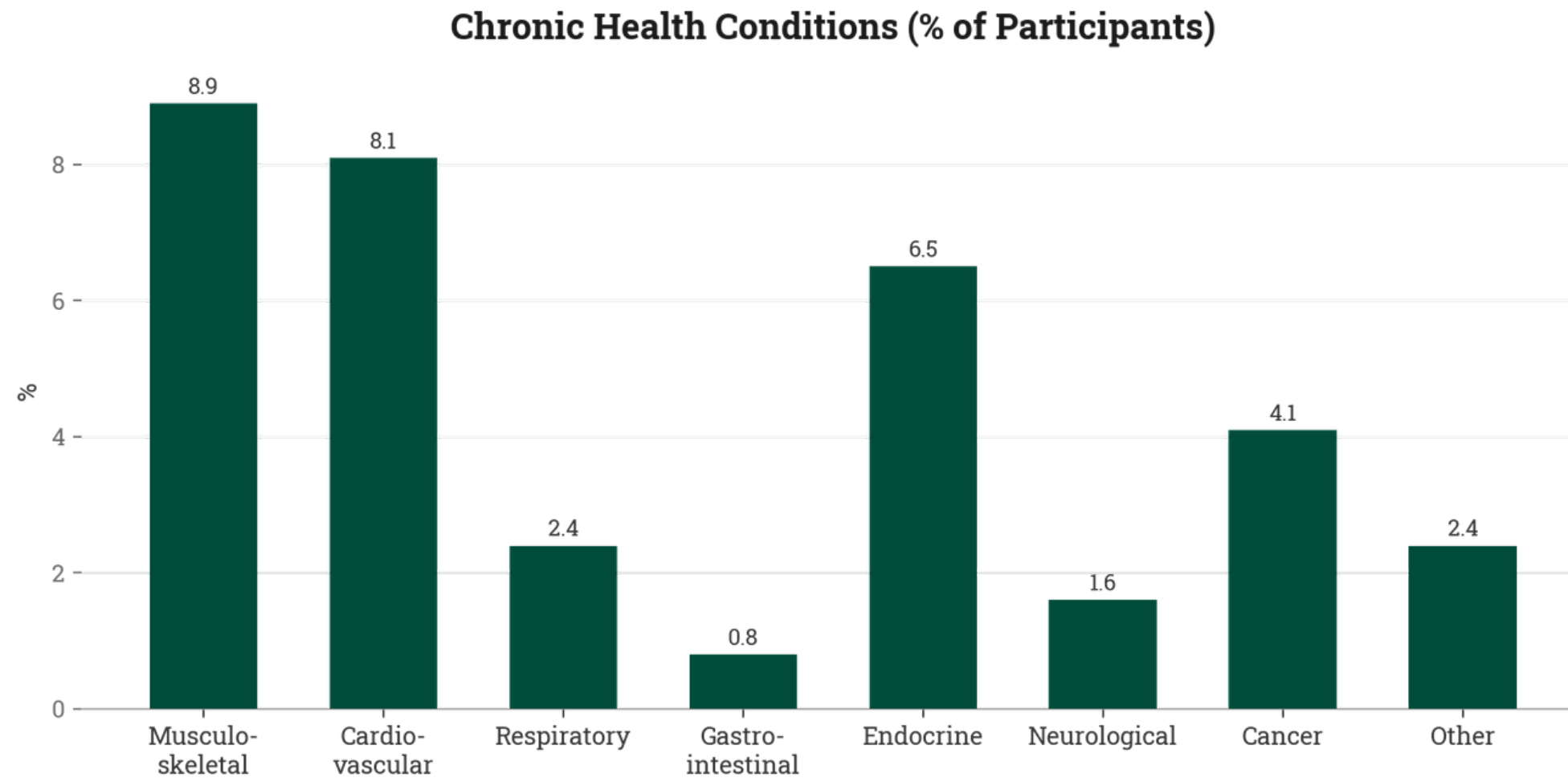
social health
benefit (116/116)

- Perceived benefits of participation were overwhelmingly positive across all three domains.
- These findings highlight the important role Pitch and Putt may play in supporting healthy and active ageing among older women.

PERCEIVED BENEFIT BY DOMAIN



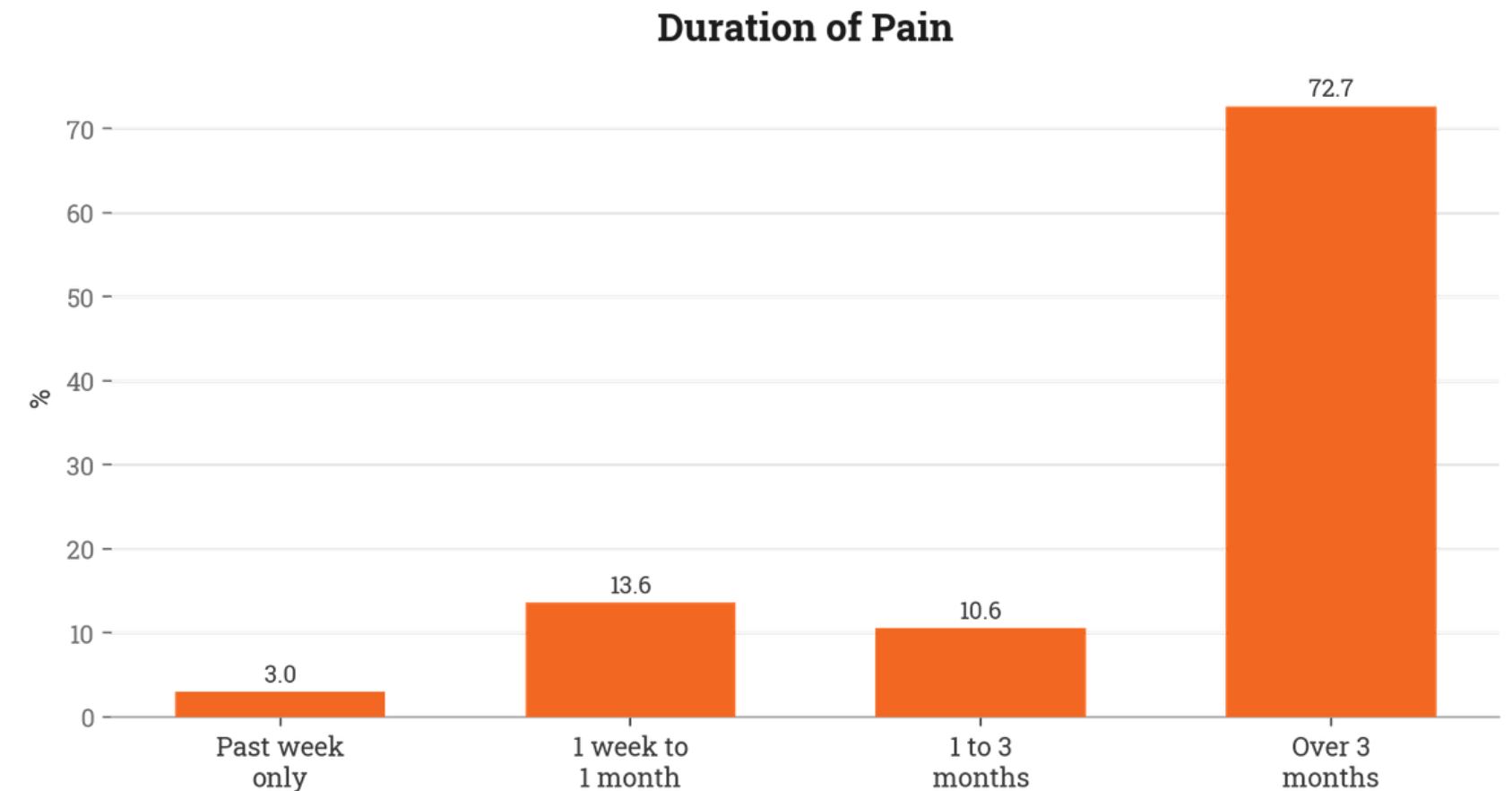
CHRONIC HEALTH CONDITIONS



- 35.3% live with at least one chronic health condition; 64.7% report none.
- Most common: musculoskeletal (8.9%) and cardiovascular (8.1%), followed by endocrine (6.5%) and cancer (4.1%).
- Despite this, women reported high ongoing engagement and overwhelmingly positive perceptions of physical, mental, and social benefit.

MANAGING CONDITIONS AND PAIN

- Among those managing a health condition, 71.8% said Pitch and Putt helps them manage it; only 5.1% said it did not help.
- 45.9% reported no recent pain. Among those with pain and duration data, 72.7% experienced pain lasting longer than three months.
- Many women manage chronic conditions and long-standing pain, yet continue to engage regularly – suggesting the sport offers a sustainable, accessible form of physical activity.



GENERAL HEALTH STATUS — PROMIS-10

44.4

Mean Global Physical Health (GPH) T-score — slightly below population reference mean

47.9

Mean Global Mental Health (GMH) T-score — broadly comparable to population reference

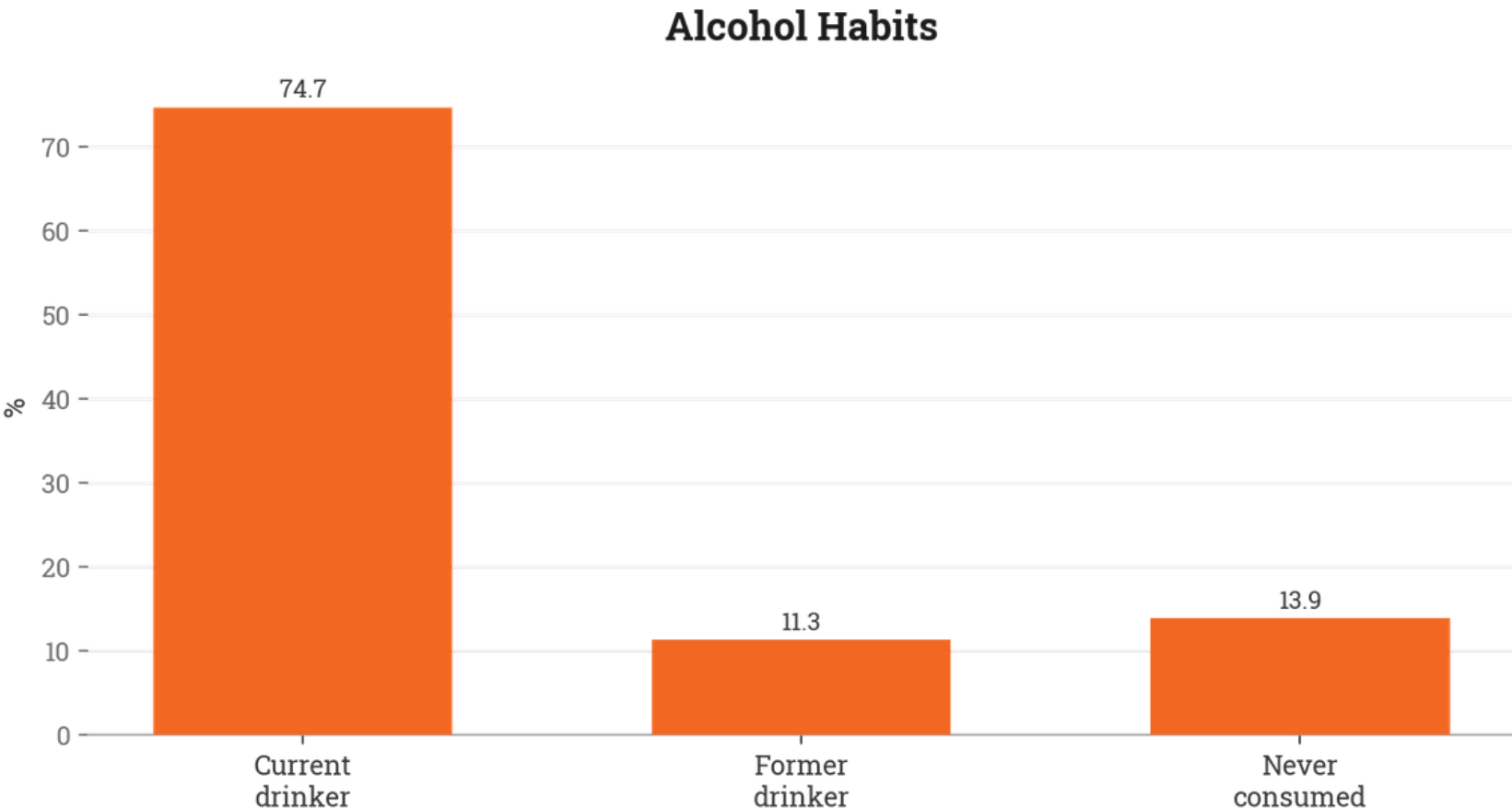
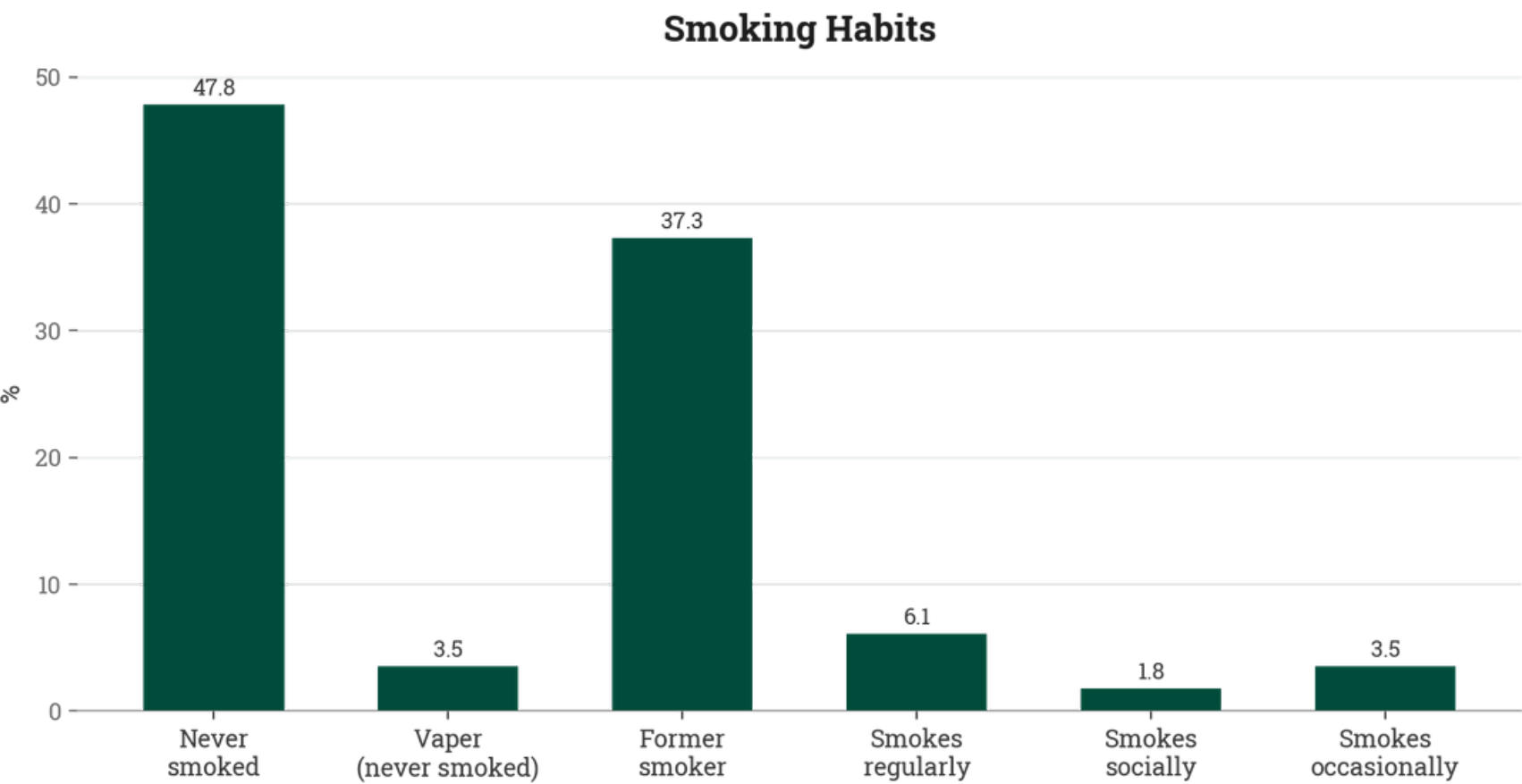
- T-scores are standardised with a population mean of 50 and SD of 10.
- Despite chronic health conditions and long-standing pain among some participants, mental health and well-being levels were broadly consistent with population norms.
- GPH percentile scores ranged from ≈ 2.1 to 65.9; GMH percentile scores ranged from ≈ 13.1 to 81.6, with most participants near the population average.

SECTION 3

Findings

Health Behaviours

SMOKING AND ALCOHOL

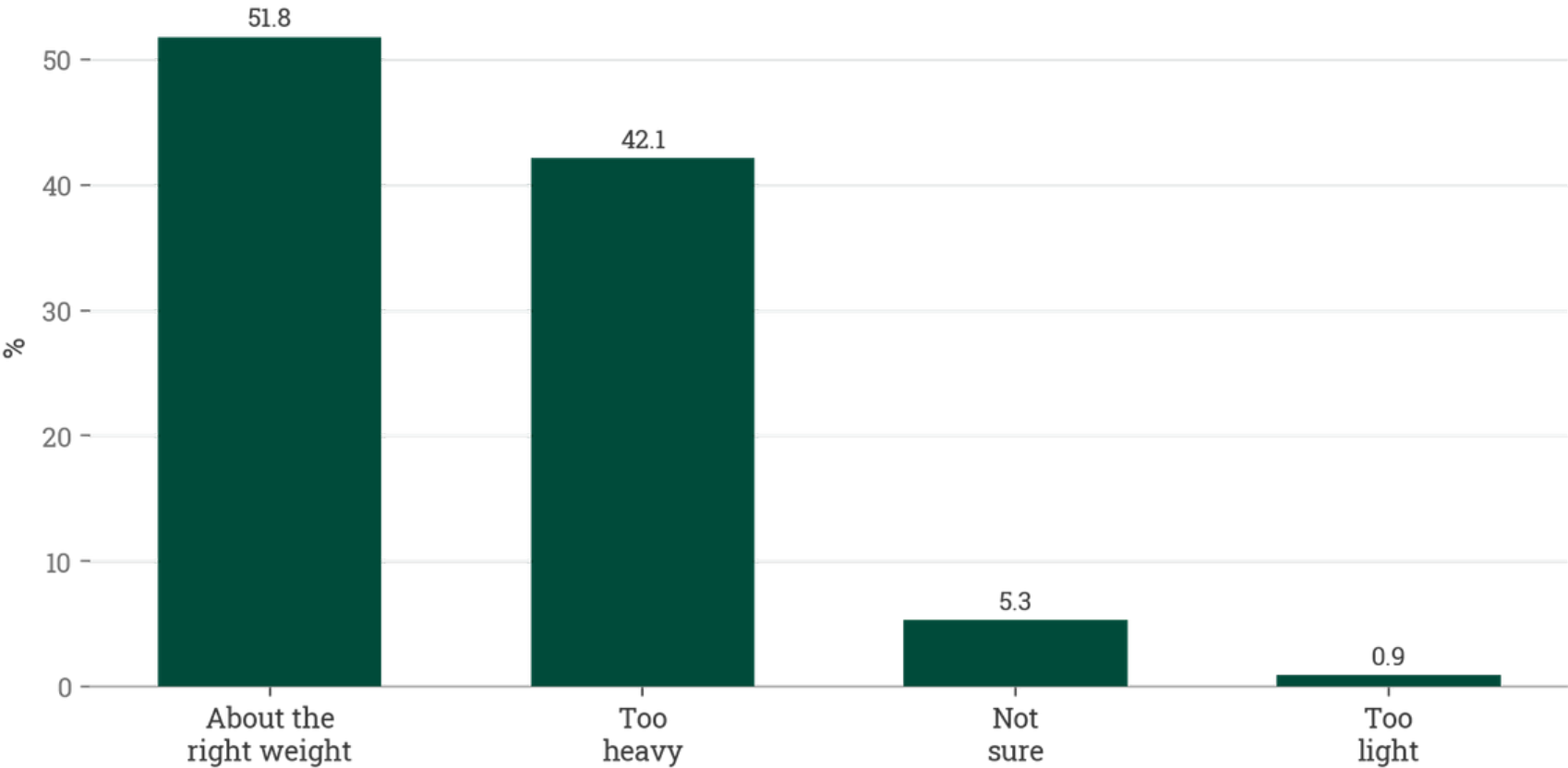


SMOKING AND ALCOHOL: KEY FIGURES

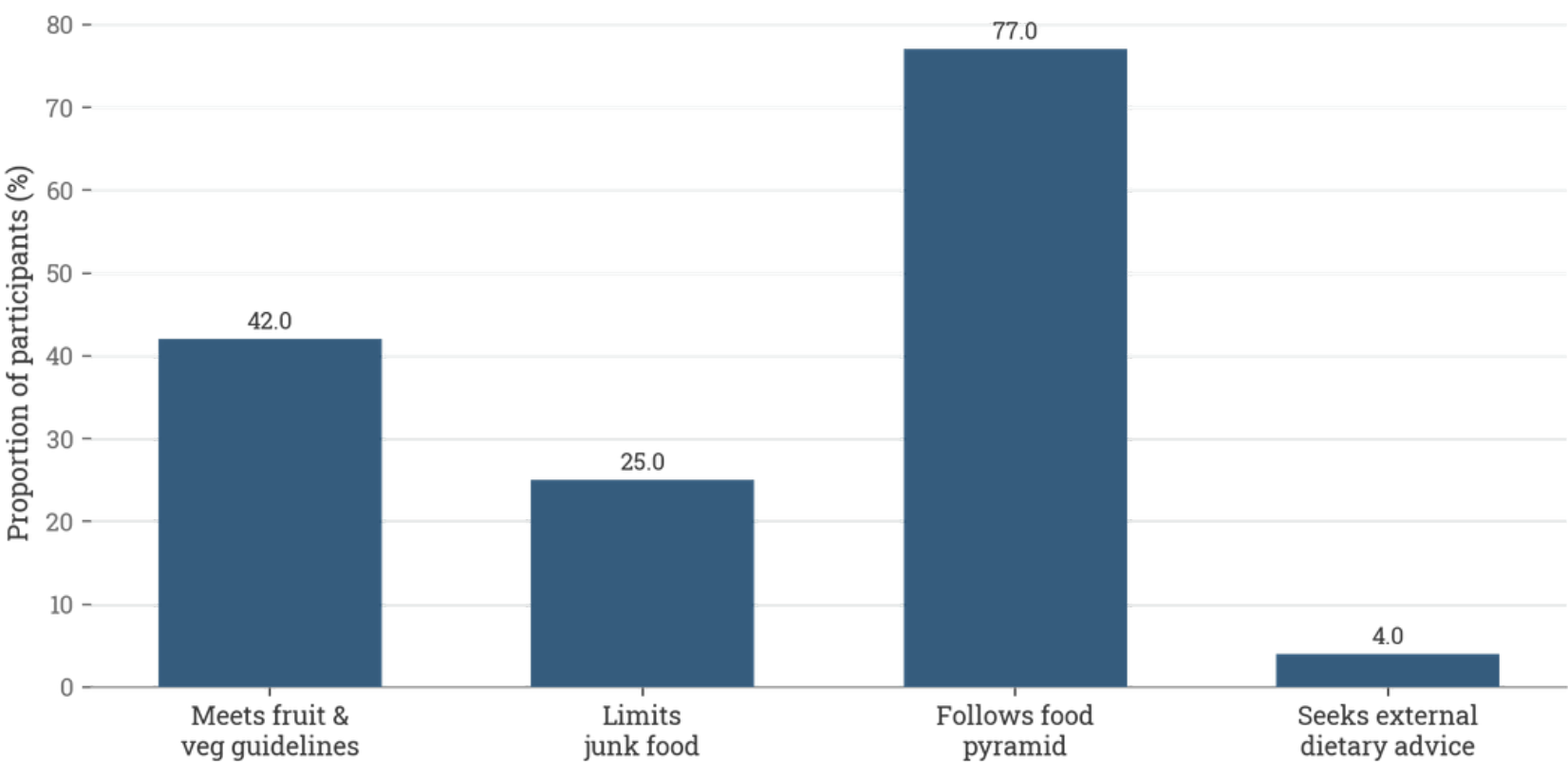
- Smoking rates were low: 47.8% never smoked, 37.3% were former smokers; current smoking (regular, social, or occasional) totalled 11.4%.
- Alcohol consumption was common: 74.7% current drinkers, 11.3% former drinkers, 13.9% never consumed alcohol.
- Among those responding to the low-risk drinking guideline question, 91.5% reported consumption consistent with low-risk guidelines.
- Overall, the cohort shows a relatively favourable smoking profile and mostly low-risk alcohol consumption patterns.

WEIGHT PERCEPTION AND DIET

Weight Perception



Dietary Habits

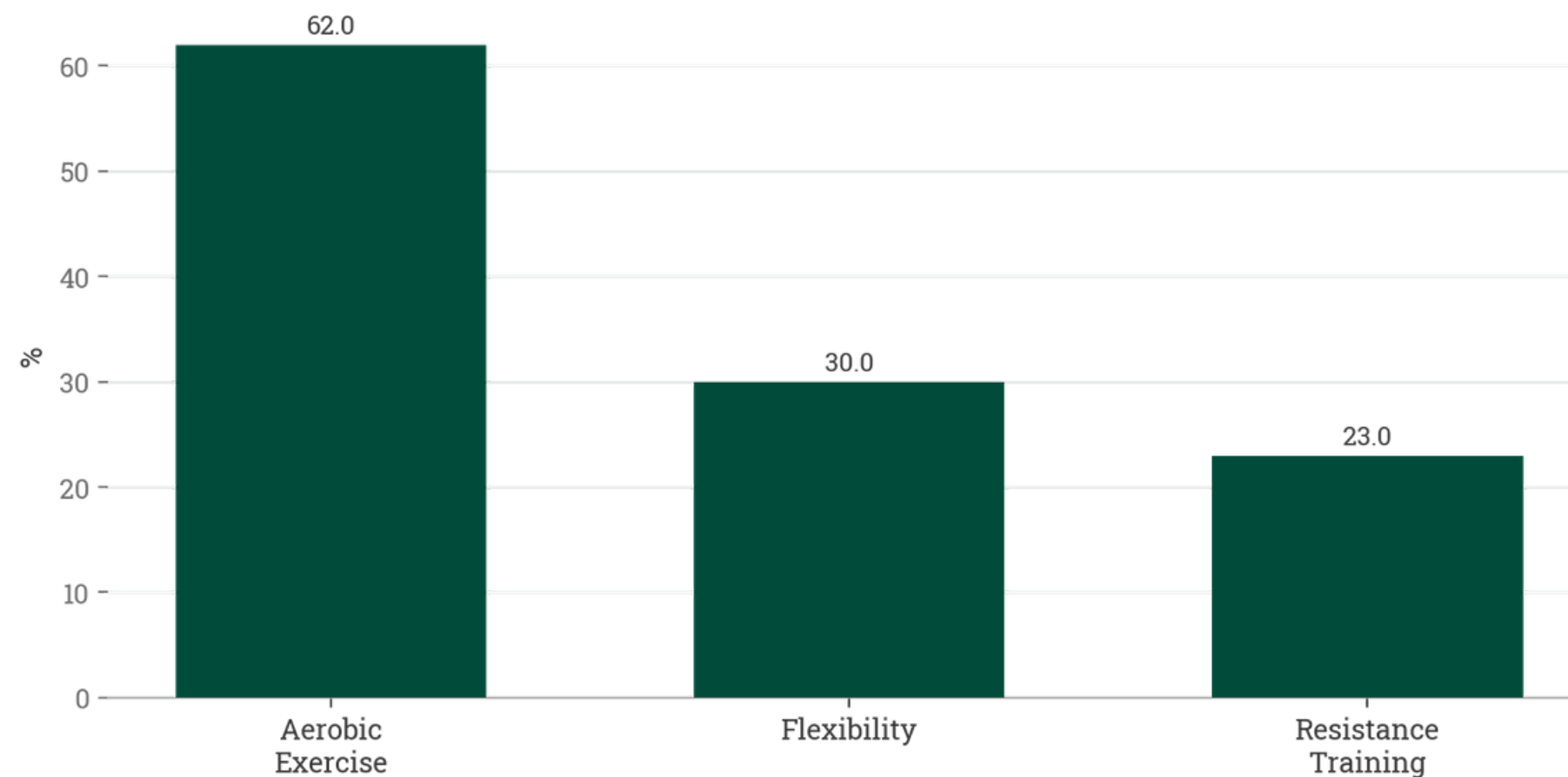


WEIGHT AND DIET: KEY FIGURES

- 51.8% perceived their weight as "about right"; 42.1% perceived themselves as "too heavy"; only 0.9% "too light."
- 58.4% reported meeting healthy eating guidelines; 76.9% reported limiting junk food; only 25.4% used the food pyramid as a guide.
- Formal nutrition support was uncommon: 11.1% attended weight-management programmes, 3.4% consulted a nutrition professional.
- Concerns regarding body weight remain common among older women, despite high levels of physical activity and sport participation.

PHYSICAL ACTIVITY GUIDELINES

Participants Meeting Exercise Guidelines



- 62.3% met aerobic physical activity guidelines all or most of the time; 31.6% sometimes; 6.1% never.
- Resistance training was less common (21.4% participated), though 84.0% of those who did met recommended guidelines.
- Flexibility training was reported by 29.2%, of whom 74.2% met recommended levels.
- Pitch and Putt appears to contribute substantially to aerobic activity – resistance and flexibility training represent an opportunity for future health promotion.

SECTION 4

Impact, Recommendations & Next Steps

IMPACT AND CONTRIBUTION

- The first national evidence base examining Pitch and Putt participation among women aged 55+ in Ireland.
- Findings demonstrate that Pitch and Putt is associated with perceived physical, psychological, and social benefits and supports sustained engagement across later life.
- As a shorter-duration, accessible, community-based sport, Pitch and Putt is well positioned to provide opportunities for physical activity, social connection, and lifelong participation.
- The study identified a cyclical pattern of participation, whereby women enter, exit, and later re-engage with the sport across different life stages.
- This generates an important evidence base for future policy development, programme planning, evaluation, and investment decisions within Pitch and Putt Ireland.

RECOMMENDATIONS: CONTEXT

- Pitch and Putt is a member-centred, community-oriented sport; findings illustrate its contribution to inclusive, accessible, lifelong participation.
- A notable finding was the cyclical pattern of participation: women often began playing at a younger age, left during childrearing, caregiving, employment, illness, or other commitments, and returned later in life.
- This aligns with Sport Ireland's Women in Sport Policy and the PPI Women in Sport Strategy 2026–2029, both of which emphasise reducing barriers and creating opportunities for re-engagement.
- The strong representation of women in middle and older age groups highlights PPI's unique position in supporting active ageing and lifelong physical activity.
- Returning participants represent a particularly important target group for future participation initiatives.

RECOMMENDATIONS: FOR POLICY MAKERS

- Integrate Pitch and Putt within active ageing, community sport, and health promotion initiatives.
- Continue to support investment in accessible and inclusive sports that facilitate lifelong participation and re-engagement.
- Recognise the role of community-based sports in supporting physical, mental, and social well-being among older women.

RECOMMENDATIONS: FOR PPI AND CLUBS (1/2)

- Continue implementing initiatives that support female participation across all stages of life, recognising many women leave and later return due to family, caregiving, employment, or health.
- Develop beginner-friendly participation pathways and introductory programmes for women and girls, including trial participation and supported entry into club membership.
- Promote flexible, social, and non-competitive participation formats that encourage enjoyment, social connection, and sustained engagement.
- Strengthen community outreach and recruitment initiatives that emphasise accessibility, affordability, inclusivity, and social benefit.
- Support the development of female ambassador and mentorship initiatives to encourage participation and foster peer support.

RECOMMENDATIONS: FOR PPI AND CLUBS (2/2)

- Increase the visibility of female participants, volunteers, coaches, officials, and leaders through communications, events, and promotional activities.
- Create and promote pathways for women to engage in leadership, governance, coaching, officiating, volunteering, and club development roles.
- Continue to review club environments, facilities, scheduling practices, and policies to ensure they remain welcoming, inclusive, and accessible for women of all ages and abilities.
- Explore partnerships with schools, universities, Local Sports Partnerships, community organisations, and active ageing groups to broaden participation pathways.
- Use the findings of this study to inform future monitoring and evaluation of female participation, retention, and re-engagement.

RECOMMENDATIONS: FOR RESEARCHERS

- Conduct longitudinal studies examining the long-term health, well-being, and participation outcomes associated with Pitch and Putt.
- Explore factors influencing participation, retention, and re-engagement across the life course.
- Examine the role of Pitch and Putt in supporting active ageing, social connectedness, and community engagement among diverse population groups.

KNOWLEDGE EXCHANGE AND FUTURE PLANS

- Findings will be disseminated through Pitch and Putt Ireland, Sport Ireland networks, academic publications, conference presentations, and stakeholder engagement.
- They provide an additional evidence source to inform future implementation, monitoring, and evaluation relating to female participation, retention, active ageing, and lifelong engagement.
- Future work will focus on evaluating participation initiatives, exploring longitudinal health and social outcomes, and further examining Pitch and Putt as an accessible, inclusive, lifelong sport.

DECLARATIONS

- Funding: This study was funded by the Sport Ireland Research Grant Scheme (2024).
- Conflict of Interest: The authors declare no conflicts of interest.
- Ethical Approval: Approved by the UCD Human Research Ethics Committee (LS-24-91/LS-25-08).
- Acknowledgements: We thank all participants, the PPI National Executive Committee, Ger Holland, Frances Ryan, Miriam Valentine, Norma Duffy, and Pitch and Putt Ireland for their invaluable support.
- Data Availability: Available from the corresponding author on reasonable request.

SECTION 5

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SECTION 6

Appendices

A. Demographic & Participation Profile B. Committee Skills C. Health Status
D. Health Behaviours E. PROMIS-10 F. Qualitative Themes

A. DEMOGRAPHIC AND PARTICIPATION PROFILE

Mean age = 66 years · Average years playing = 17.5 · Average rounds per week = 3

AGE GROUP (N = 122)

	n	%
55–65	55	45.1
66–75	42	34.4
76–85	22	17.9
86+	3	2.4

PROVINCE, VALID RESPONSES (N = 110)

	n	%
Ulster	11	10.0
Munster	35	31.8
Leinster	64	58.1
Connacht	0	0.0

OCCUPATION (N = 121)

	n	%
Retired – not volunteering	45	37.2
Retired – volunteering	25	20.7
Employed – part-time	18	14.9
Employed – full-time	16	13.2
Unemployed/homemaker – not seeking employment	12	9.9
Unemployed – seeking employment	2	1.7
Self-employed	2	1.7
Carer	1	0.8

LIVING ARRANGEMENTS (N = 122)

	n	%
Alone	31	25.4
Partner	64	52.5
Children	9	7.4
Pets	3	2.5
Housemates/tenant	2	1.6
Partner/children	6	4.9
Partner/children/pets	3	2.5
Partner/pets	4	3.3

STOPPED PLAYING PITCH AND PUTT (N = 110)

	n	%
Yes	41	37.3
No	69	62.7

REASONS FOR STOPPING (N = 22)

	n	%
Illness	13	59.0
Injury	9	41.0
Other commitments	17	77.3

INJURY DETAIL (N = 5)

	n	%
Hit by a ball	2	40.0
Broken rib	1	20.0
General musculoskeletal injury	2	40.0

HOW PARTICIPANTS FIRST HEARD ABOUT PITCH AND PUTT (N = 116)

	n	%
From somebody I know	98	84.5
Other (advertisements etc.)	18	15.5

REASONS FOR PLAYING - TOP RESPONSE CATEGORIES (N = 116)

	n	%
To participate in the sport	20	17.2
Family/spouse played and encouraged me to join	16	13.8
To make new friends	15	12.9
To enhance friendships	7	6.0
To improve physical health	6	5.2
To improve physical health/make new friends	4	3.4
To improve physical/mental health/make new friends	4	3.4
To participate in the sport/make new friends	5	4.3

B. COMMITTEE- AND CLUB/PLAYER-DERIVED SKILLS (N = 27)

Skill	Committee n	Committee %	Club/player n	Club/player %
Communication	16	59.3	8	29.6
Teamwork	19	70.4	12	44.4
Networking	12	44.4	4	14.8
Planning	10	37.0	4	14.8
Budgeting	6	22.2	4	14.8
Organising	16	59.3	7	25.9
Decision making	11	40.7	6	22.2
Problem solving	9	33.3	6	22.2
Leadership	10	37.0	6	22.2
Evaluation	4	14.8	2	7.4
Professionalism	4	14.8	4	14.8
Commitment	14	51.9	6	22.2
Motivation	8	29.6	6	22.2
Social media	7	25.9	3	11.1

C. LONG-TERM HEALTH CONDITION (N = 116)

	n	%
Yes	41	35.3
No	75	64.7

DOES PITCH AND PUTT HELP THE CONDITION? (N = 39)

	n	%
Yes	28	71.8
No	2	5.1
Unsure	9	23.1

TYPE OF CONDITION (N = 122)

	n	%
Musculoskeletal	11	8.9
Cardiovascular	10	8.1
Respiratory	3	2.4
Gastrointestinal	1	0.8
Endocrine	8	6.5
Neurological	2	1.6
Cancer	5	4.1
Other	3	2.4
Multiple conditions	9	7.3

PAIN LOCATION (N = 122)

	n	%
Head/face	6	4.9
Neck	13	10.7
Shoulder	14	11.5
Elbow	5	4.1
Wrist/hand	10	8.2
Mid/low back	36	29.5
Hip and pelvis	5	4.1
Knee	15	12.3
Ankle/foot	5	4.1
Multiple locations	23	18.9

PAIN DURATION (N = 66)

	n	%
During the past week only	2	3.0
>1 week but <1 month	9	13.6
>1 month but <3 months	7	10.6
>3 months	48	72.7

PERCEIVED BENEFITS OF PITCH AND PUTT

Domain	N	Strongly agree n	Strongly agree %	Agree n	Agree %	Neutral n (%)
Physical health	119	97	81.5	21	17.6	1 (0.8)
Mental health	115	89	77.4	25	21.7	1 (0.8)
Social health	116	90	77.6	26	22.4	0 (0.0)

D. SMOKING HABITS (N = 115)

	n	%
No, I have never smoked	55	47.8
Yes, I smoke regularly	7	6.1
Yes, I smoke socially	2	1.8
Yes, I smoke very occasionally	4	3.5
I used to smoke but I quit	43	37.3
I have never smoked but I vape	4	3.5

SMOKING FREQUENCY - CURRENT SMOKERS (N = 11)

	n	%
Every day	7	63.7
A few times per week	2	18.1
Once or twice a month	1	9.1
A few times per year	1	9.1

ALCOHOL USE (N = 115)

	n	%
Yes	86	74.7
I used to but not anymore	13	11.3
No, I have never drank alcohol	16	13.9

ALCOHOL GUIDELINE ADHERENCE (N = 82)

	n	%
Meets guidelines	75	91.5
Does not meet guidelines	7	8.5

WEIGHT PERCEPTION (N = 114)

	n	%
About the right weight	59	51.8
Too heavy	48	42.1
Too light	1	0.9
Not sure	6	5.3

DIETARY AND EXERCISE HABITS

Measure	N	n	%
Healthy eating guidelines	113	66	58.4
Limits junk food	117	90	76.9
Uses food pyramid	118	30	25.4
Seeks dietary advice (any)	117	17	14.5
Meets ACSM aerobic guidelines (all/most)	114	71	62.3
Resistance training	117	25	21.4
Flexibility training	113	33	29.2

E. PROMIS-10 GLOBAL HEALTH QUESTIONNAIRE

Category	GPH n	GPH %	GMH n	GMH %
Approximately / above population average	52	45.6	89	78.1
Below population average	38	33.3	20	17.5
Well below population average	24	21.1	5	4.4

PROMIS-10 SUMMARY SCORES

- T-score estimate for General Physical Health: ≈ 44.4
- T-score estimate for General Mental Health: ≈ 47.9
- T-scores are standardised with a mean of 50 and a standard deviation (SD) of 10.
- GPH percentile scores ranged from approximately 2.1 to 65.9; GMH percentile scores ranged from approximately 13.1 to 81.6.

F. QUALITATIVE THEMES FROM OPEN-ENDED RESPONSES

- Qualitative responses supported and enriched the quantitative findings, highlighting the social, emotional, and experiential value of Pitch and Putt for women aged 55+.
- Five recurring themes emerged: Belonging and Social Connection, Emotional Wellbeing, Persistence Despite Health Challenges, Community Motivation and Accessibility, and Barriers.

1. BELONGING AND SOCIAL CONNECTION

“It's like a second family.”

“The people are what keep me coming back.”

2. EMOTIONAL WELLBEING

“It lifts your mood straight away.”

“A great escape from everyday worries.”

3. PERSISTENCE DESPITE HEALTH CHALLENGES

“Even after my knee replacement, I came back.”

“It keeps me going despite the aches.”

4. COMMUNITY MOTIVATION AND ACCESSIBILITY

“It doesn't take all day like golf.”

“Affordable and close to home.”

5. BARRIERS

“More seating would help.”

“Walking distances can be challenging at times.”



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