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# From Their Perspective: A Qualitative Examination of Physical Activity and Sport Programming for Working Mothers

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### ABSTRACT

Research has long demonstrated the benefits of participation in sport, exercise, and physical activity, which include lower mortality and morbidity (National Heart Foundation of Australia, 2001; U.S. Department of Health and Human Services, 1996). Still, research demonstrates that 60–80% of adults are not active at a level sufficient to derive health benefits (Armstrong, Bauman, & Davies, 2000; Bowles, Morrow, Leonard, Hawkins, & Couzelis, 2002; Pate et al., 1995), and working mothers may face particular challenges in pursuing physical activity and sport (Jackson & Henderson, 1995). Utilizing the exercise psychology and women's leisure literatures, this study examines not only the barriers or constraints to participation, but also the ways that working mothers negotiate these barriers and, very practically, the ways that sport managers can better structure program offerings to increase access for this group (Bauman, Smith, Maibach, & Reger-Nash, 2006; Jackson & Henderson, 1995; Shaw, 1994). Forty-four working mothers from a university in the Southwestern United States participated in focus group inquiry regarding their physical activity and sport participation, barriers to participation, ways that they negotiated those barriers, and recommendations for change. Results indicated that rigid scheduling, guilt, and narrow programming constrained activity participation, and those constraints varied by marital status and social class. Negotiations included reframing entitlement to participation, garnering social support, and combating rigid work structures. Specific programming recommendations for sport managers as well as implications for social change are also discussed.

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Research has long demonstrated the benefits of participation in sport, exercise, and physical activity, which include lower mortality and morbidity (National Heart Foundation of Australia, 2001; U.S. Department of Health and Human Services, 1996). Individuals who are not physically active have been found to have higher incidence of coronary heart disease, diabetes, obesity, and colon cancer. Increased participation in sport or exercise has the ability to reduce some of these health problems, while also relieving emotional and psychological health issues such as stress and depression (Koltyn & Schultes, 1997; U.S. Department of Health and Human Services, 1996). Following continual recommendations from health advocates, major efforts to increase physical activity have been implemented in numerous countries (Armstrong, Bauman, & Davies, 2000; Bauman, Smith, Maibach, & Reger-Nash, 2006; Bowles, Morrow, Leonard, Hawkins, & Couzelis, 2002; National Heart Foundation of Australia, 2001). For example, Germany's "Sport for All" program has seen growth in both physical activity and sport nationwide (Green & Houlihan, 2005). Western Australia's "Walk WA" has seen increases in walking as physical

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activity (Government of Western Australia, 2007). The “Active Australia” campaign has also seen increases in walking and other exercise behaviors (Merom, Phongsavan, Chey, & Bauman, 2006).

Still, research demonstrates that 60–80% of adults are not active at a level sufficient to derive health benefits (Armstrong et al., 2000; Bowles et al., 2002; Pate et al., 1995). Further, exercise and physical activity rates tend to be lower among women, and particularly mothers of preschool children, even though many of these women were active prior to having children (Armstrong et al., 2000; Casperson & Merritt, 1995; Jackson & Henderson, 1995; Leslie et al., 2004; Merom et al., 2006; Thomsson, 1999; Verhoef & Love, 1992). Working mothers face some additional challenges (especially time-based) to participation in sport and physical activity (Brown, Brown, Miller, & Hansen, 2001; Miller & Brown, 2005; Shank, 1986; Shaw, 1985, 1991). In addition to leisure and physical activity studies, the work-family conflict (WFC) literature often highlights the notion of time strain in working adults, particularly in mothers. That is, as more and more women with children enter the workforce, they are constantly bombarded with difficulties dividing their time between work and family obligations, leaving little time for participation in sport and physical activity (Brown, Brown, & Powers, 2001; Netemeyer, Maxham, & Pulig, 2005; Vinokur, Pierce, & Buck, 1999).

In addition, WFC has been linked to health strains such as job stress (Netemeyer et al., 2005; Kinnunen, Geurts, & Mauno, 2004), depression (Allen, Herst, Bruck, & Sutton, 2000; Vinokur et al., 1999), decreased job and life satisfaction (Dixon & Sagas, 2007), decreased self-reported health (Allen et al., 2000), and increased parental and family distress (Kinnunen et al., 2004; Vinokur et al., 1999). Spector, Sanchez, Siu, Salgado, and Ma (2004) reported that it was not the overall work hours that led to these negative outcomes, but the stress and strain felt from trying to balance multiple roles. Thus, there is a growing situation in the workforce in many countries where individuals experience increasing stress and strain that leads to poor health, yet they have little available time (perceived or real) to participate in sport and physical activity that may actually help alleviate some of the stress and the deleterious health effects. While this trend affects both men and women in the workforce, it is especially pertinent to working mothers as they are often primary caregivers.

Organizations have responded with a variety of work-based sport and exercise programs. These programs, some of which have been around since the early 1900's (Chapman, 2003), typically have been designed with one or more of the following purposes in mind: 1) to increase the physical activity levels of employees, which can reduce absenteeism and increase productivity; 2) to increase social support around the activity, which aids retention and builds community among workers; and 3) to demonstrate organizational support for wellness, which can reduce work-family conflict and increase job satisfaction (Bowles et al., 2002). While many of these programs have been effective in promoting wellness in the workplace and some have even demonstrated benefits to corporate financial performance (Chapman, 2003), many of these programs have been designed with a “one-size-fits-all” mentality. However, working mothers may have unique concerns and demands placed on them. As evidenced by the low participation numbers among working women, a one-size-fits-all program may not meet the needs of this group (Hall, 1998; Jaffee, Lutter, Rex, Hawkes, & Bucaccio, 1999; Vinokur et al., 1999). For example, a nationwide study of sport and physical activity participation in Australia revealed that only 68.2% of working women participate in some form of sport or physical activity on a regular basis (National Centre for Culture and Recreation Statistics, 2006). A multi-worksites study in the United States indicated that only 44% of women participated in worksite physical activity programs, compared to 56% of men (Sorensen et al., 2005). Therefore, there is a continued need to examine ways that sport and physical activity participation (especially worksite based) could be increased within this population of marginal sport participants, and how we might better design sport and physical activity offerings to better include and/or bring back this specific group (see Frisby, 2005, 2006; Frisby & Hoerber, 2002).

The literature bases in both exercise psychology and leisure studies have been informative in examining the barriers (also termed constraints) faced by individuals seeking to participate in sport and physical activity. The exercise psychology literature has generally taken a motivational approach, examining the processes of change and the benefits and barriers to participation in populations in general (e.g., Bowles et al., 2002; Marcus & Simkin, 1993; Pate et al., 1995; Prochaska, Velicer, DiClemente, & Fava, 1988). The leisure literature, particularly on women's leisure, has taken a more socio-cultural approach (especially from a feminist perspective), examining socio-cultural constraints to participation and highlighting differences among sub-groups as they vary by race, class, social status, and life stage (see Henderson, 1990a, b, 1996; Henderson & Hickerson, 2007; Shaw, 1994 for reviews). The current study borrows from both approaches—motivational and socio-cultural—to examine the barriers and benefits regarding sport and physical activity participation among a group of working mothers.

Both Shaw (1994) and Henderson (1996) have argued, however, that examination of barriers or constraints is only a first step in the research process. Ultimately, Henderson (1996) argues, the goal of feminist research, as one socio-cultural approach, is to promote change and to correct the problems for women. Concurrently, Shaw (1994) has called for more research that examines “in what ways and under what circumstances do women resist [social norms] by negotiating constraints on their leisure choices?” (p. 19). Thus, in addition to examination of barriers or constraints, this study uses qualitative methodology to understand the ways that working mothers negotiate these barriers and, very practically, the ways that sport managers can better structure program offerings to increase access for this group (Bauman et al., 2006; Jackson & Henderson, 1995; Shaw, 1994). Such inquiry contributes to the theoretical literature by adding to our understanding of the meaning and negotiation of sport and physical activity in women's lives. It may also help facilitate positive individual and social change directed at improving the health and well-being of working mothers, addressing the needs of an underrepresented group and one that is highly likely to benefit from regular exercise and/or sport participation (Allen et al., 2000; Bowles et al., 2002; Frisby, 2005; Hall, 1998; Jaffee et al., 1999; Shaw, 1994; Vinokur et al., 1999).

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