



GET AROUND ME

An investigative study into the impact COVID-19 has had on the mental health of country footballers in regional Western Australia and the role that country football clubs can play in supporting and connecting communities and individuals.

INITIAL FINDINGS

The COVID-19 Survey and subsequent Report is supplied in partnership between the WACFL and UWA's Young Lives Matter Foundation.



Family - Club & Social. **Feeling that it is a big family community.** The football club is always a safe and friendly environment where you can hang out with family and friends. **The socializing aspect.** Being a part of a team and catching up with friends. **Feeling like I belong.** Great place to make friendships and stay fit. **Everybody volunteers and it is not difficult to find people to contribute.** There is a real team spirit within the club, and we pride ourselves on being like an extended family. **Getting the community together.** Feeling a part of something bigger than myself. **Being able to let any troubles go for a while.** The mateship. **A feeling of being part of a club.** Circuit breaker from the weekly grind. **Brings people together for a common goal and social interaction.** It is the ability to meet people you would never normally meet in everyday life, in fact some become your lifelong mates. **Keeping fit.** The past and present players are very welcoming and always good for a laugh or a chat. **The social side.** The country club environment. **Bringing all walks of life together.** Having a beer with your mates talking. **Being part of a local team builds pride in our community.** Club & family involvement. **It really brings guys together that would otherwise not get a chance to meet.** It also allows our local FIFO population to integrate into our community. **Social group, getting around the club. Keeping fit.** The town really gets behind it. **It features in the newspaper, it helps me build connections in the community, it develops my skills, fitness and weight loss.** Sense of community and friendship group. **The members and the coaches are friendly and encouraging.** The people, good level of competition. **Mateship.** Connection with mates of different age groups and a place to feel a part of something good. **Community engagement.** The social aspect - team connection. **Creating a safe and family-oriented environment.** A place to work on yourself physically and mentally and being around a big group of diverse personalities to socialise and enjoy good times with footy club = family. **The best thing about my football club is the culture and how everyone is accepted into the club.** It's like one big family. **The social interactions with people.** How it brings people out of their workplaces such as tractors and farms into a club to catch up. **It's gives me time to forgot everything else.** The family you make within the team. **The community feel and the way it brings country towns together.** People keep playing at country clubs not because of the football itself but the culture at clubs, particularly the club I belong to, and the social scene. **The community & social interaction.** My team is like a family that I can always trust to be there. **The coming together of mates near and far and meeting new people that get involved.** Community gets behind us; everyone supports local competitions, and this means a lot to the players. **Being able to just do something for my fitness and have a little fun.** The uprise of the youth in the senior football club, and the success of the junior club. Brings the community together. **The people on the committee, the volunteers. Hardly any egos or club favourites.** Easy going nature. **Connection with the public and the locals and also the life members.** It's got a great vibe where you can come together and just play. **It brings the community together & helps others not part of our club.** We like playing football for fun. **Connection with mates.** Atmosphere and comradery. **We have a welcoming club that invites its members to have an opinion about how they feel like the club and how owe organisation can be improved.** Members are given a voice. **It's very friendly and they make you feel welcome.** The environment, everyone will know everyone. **Social side of it.** Meeting new people. **Able to see my friends.** The culture and always feeling a part of a team and club. **The support and care everyone has for each other, especially in times of need.** Culture. **The inclusivity it brings to the community.** People coming from an hour away to train and having a core group of people to hang out with. **Just getting around your mates.** The connectiveness of each team within the club. **The ability to come together and support each and every individual as if we were a big family as well as playing some awesome footy.** We have a great family club which brings new people down to the track, make great mates on field and off the field. **Providing a healthy sporting option for all ages & bringing community together.** Gives me something to look forward to and mateship. **Connection to not only my community but neighbouring communities.** Friendship, family atmosphere, networking being able to talk to people who understand personal and business issues plus with the increasing number of travelling players getting to meet people from different backgrounds gives you a better perspective on the wider community. **Once a commitment is made to be a part of footy and even the days when you can't be stuffed you still make the effort to go to training, games, busy bees and I've never regretted attending after initially not feeling up to going, the exercise and follow up socialising with mates is always a good thing.** Social and supportive. **The social aspect.** Running around having fun and then sitting down for a beer afterwards is great. **Saturday's there's camaraderie and teamwork that bonds blokes.** Community relations and common interest. **Belonging to a tribe.** The community, parents and love for Football. **Good crew for socialising, outlet form work/family, burn off energy & fitness in.** Female side integrating into club. **It's the highlight of the year, it brings the community together.** Lifelong friends and support are made at our club. **I have a joke and laugh on the field with the opposition too and don't take it too seriously.** The best way to meet and mingle with members of the community. **Very family orientated which is very appealing.** Socially brings a town together sense of town spirit and sense of belonging to a bigger group and creates new bonds and friendships. **The way in which playing football enables you to meet new people and form friendships.** With no football this year I had little to no contact with the vast majority of my teammates. **Sense of community.** Camaraderie and good family club. **The comradery and the mateship we all have with one another, not matter what grade we play in everyone is on the same level and look out for one another.** The best thing about our football club is the way our players can mix and associate with each other during the week and also on the weekends. **It also keeps everyone fit and healthy.** Exercise, having lots of acquaintances in the community. **Bringing community together.** Going to the pub after the games for dinner and to socialise. **It feels like a family and when you go into the club rooms and know everyone in there you feel comfortable and not out of place.** Play with all your friends and enjoying a beer and a laugh after the game. **See your mates on a regular basis for social interaction.** It also brings families together in smaller communities. **Gives the opportunity to help with younger generation through coaching from senior players.** Inclusiveness, community connection, social interaction. **Bringing people together from all demographics.**

The boysssss!

It feels like one big family.



CONTENTS

Executive Summary	4
Report Recommendations	6
Comparing Playing and Non-Playing 2020	7
Comparing Interesting Subsets	9
COVID-19 Survey Introduction	11
Survey Methodology	13
Conclusions	15
The Body of the Survey	16
Participate Survey and Consent / Q1 – 3	16
Demographics / Q4 – 7	16
Country Football / Q8 – 10	17
The Impact of Playing Football / Q11 – 14	18
Football Questions / Q15 – 18	19
Football Club Outreach / Q19 – 22	21
Travel / Q23	22
Health / Q24 – 28	23
Employment / Q29 – 30	25
PHQ-9 Patient Health Questionnaire / Q31	26
GAD-7 General Anxiety Disorder / Q32	29
Substances / Q33 – 36	30
Final Comments / Q38 – 40	32
Special Thanks	33
Appendix – Summary of Findings	34



EXECUTIVE SUMMARY

Background to the Study

In the 'Social Return on Investment' research conducted by ACIL Allen and commissioned by the West Australian Football Commission in August 2019, it highlighted the value that football plays in the WA community from both an economic and social perspective. Key findings were as follows: -

- WA delivered \$225M attributable social benefits to 75,941 participants involved in organised club-based football in 2016/17. For your average footy club member this means ~\$3,000 of social benefits directly related to being involved in club football;
- Economic benefits of organised club-based football create \$76.4M of benefit for participants through job matching, volunteering and increased productivity;
- Physical and mental health benefits, including suicide prevention, account for \$78.6M
- Personal wellbeing is the third largest category creating \$52.0M of benefit;
- Education related benefits create \$16.7M;
- Others benefits that have not been quantified include social inclusion, civic pride, empowerment, social connectedness, regional population stability, crime reduction and cultural integration;
- Community football clubs support local businesses and suppliers by spending their money in the local community;
- Overall the WA football industry contributed \$220.3M to the WA economy; and
- The economic value-added multiplier is 2.00. Every dollar spent by football in WA creates two dollars for the local economy. This compares favourably to other industries. For example, 1.43 for major mining companies in regional communities or 1.62 for the WA cruise ship industry.

COVID-19 presented the WACFL with the opportunity to endeavour to further measure the social benefit of their competitions with regards to the wellbeing of both their individuals and their communities. As the mess COVID-19 created spilled into the administration of the WACFL's 25 community associations, (spread evenly across the length and breadth of regional Western Australia), an almost equal portion of associations made the decisions to either play football or not play football in 2020. This created a binary split of the WACFL playing group and UWA's Young Lives Matter believed it would be of great benefit to measure the impacts and to assess the differences between these two groups.

For the first time, the WACFL had the opportunity to survey these two groups of players who either 'played' or 'did not play' football in 2020 (for no other reason than COVID-19), and ascertain if there were demonstratable social health benefits for those who played or disbenefits for those who were not able to play.



Strategic Findings

The findings of this study demonstrate that there is a definite, measurable benefit to the individual (in both a physical and mental health perspective) from participating in football. There is now an opportunity for the findings contained in this report to lead to further education, research and fiscal support to ensure the longevity of the local football clubs that fall under the WACFL's auspices.

Some of the major findings were as follows: -

- 1: 14.5% of respondents 'not playing' football in 2020 answered that their Mental Health was 'much worse than last year' as opposed to 1.5% of respondents who 'played';
- 2: One in four respondents answered that they would 'love' to learn more about issues such as addiction, mental health and wellbeing, community development etc. through the football club environment;
- 3: 94% of respondents indicated the football club was important for their physical health with 55.5% of respondents who are 'not playing' football in 2020 suggesting their physical health had deteriorated since last year, compared with 28.5% from those who 'played'. According to analysis of this data, players who 'gained weight' were the worst performing subset with regards to alcohol consumption and mental health testing;
- 4: Six respondents who 'didn't play' in 2020 indicated they had severe anxiety (according to the GAD-7 questionnaire) compared with only one who 'did play', despite the 'playing' sector having 56% more respondents; and
- 5: According to this data, playing football provided "a particular benefit to Aboriginal and Torres Strait Islanders' mental health (anxiety and depression measured by the PHQ9 and GAD7) which is striking" Prof. Sean Hood.

Whilst we were hopeful that the data would come back with some positive threads, the actual breakdown has been extremely enlightening and beneficial, and the majority of the data holds up to anecdotal perceptions around participating in a club.

This research will be of benefit to UWA's Young Lives Matters Researchers who are using a statistical approach to solving the societal creep of anxiety and depression amongst our emerging generations. The opportunity to apply their expertise to the WACFL's club and stakeholder network has been an exciting partnership with significant upside potential to apply industry knowledge to the far reaches of the state.

The report analysed each of the survey's 40 questions and a Summary of Findings can be found in the Appendix as well as data and observations in the body of the report.

We trust if you are reading this report you have the best interests of your community, club or a set of individuals at heart, and sincerely hope that you find this research to be of benefit to generate ideas on how the potential that sits within each club - and the individuals within it - can be harnessed.

REPORT RECOMMENDATIONS

Recommendations forthcoming from this report have been generated through analysing the statistical trends and identifying opportunities for further development. They fall broadly into the categories of Research; Promotion / Partnerships; and Programs / Initiatives.

Research

- 1) WACFL runs an annual 'Health Check' survey with a respondent goal of 3,000 – 5,000 with the potential to split the survey into players; volunteers; supporters; and parents of minors to ensure a community wide approach is taken. Future surveys would be more successful in garnering data if they were run in season. A unique approach is needed to get a higher rate of completions from the Kimberley and the Pilbara regions.
- 2) In partnership with appropriate agencies, WACFL is positioned to undertake further research regarding:
 - a) Further extrapolation of data to assess further society and fiscal benefit of participating in football;
 - b) Mental health effects of playing football on players and especially Aboriginal and Torres Strait Islander identifying footballers with a potential opportunity to assess the success (over time) of any implemented initiatives;
 - c) Reducing risk of mental health decline and suicide (especially in Aboriginal and Torres Strait Islander individuals) through participating in football and enhancing the football club's capacity;
 - d) For a significant 'deep dive' into alcohol and drug use amongst players, a much higher number of surveys would need to be completed to get a significant enough data set to pick up user trends;
 - e) Any relationships between club engagement of the individual and delinquency.

Promotion / Partnerships

- 1) It is recommended that WACFL look to formalise a partnership with the UWA's Young Lives Matter Foundation to ensure that vital research around mental health for their community and other potential partnership benefits are explored and capitalised on;
- 2) Short circuit communication to players through centralised / direct communication through establishing direct messaging and growing databases. Online newsletters and digital communication could provide a regular communication flow to individuals interested in learning / volunteering around physical and mental wellbeing through the country football environment;
- 3) WACFL should share report findings with existing and potential stakeholders such as: - WAFC, Healthway, LGA's, ADF, Insurance Commission WA, Road Safety Commission, RAC and other Government, Community Health, Commercial and Aboriginal organisations interested in considering potential research and programs targeting WACFL players;
- 4) WACFL should integrate these results into a stand-alone roadshow presentation to regional communities (Clubs) to further educate the country football fraternity on the role football clubs play in their community and the mental and physical health findings to come out of the report. Share results more broadly with Leagues, Clubs and stakeholders;
- 5) Create a promotional poster, digital content comparing the player who played football in 2020 and the one who didn't and the reported outcomes.

Programs / Initiatives

- 1) Ensure recommendations are implemented and further beneficial research and development is achieved through sourcing external funding to employ a FTE Community Development Manager sitting within the WAFC Country team who can focus on the enhancement of WACFL's community development initiatives;
- 2) WACFL should create a Wellbeing Committee Portfolio position within each WACFL club who can provide leadership to the club community and tie the club in with local service providers and liaise with the WACFL's Community Development Manager;
- 3) Due to the potential significant benefit that can be achieved through the WACFL network, it is recommended that a Community Development Portfolio become a focus of a WACFL Executive Sub Committee and appropriate Executive Members are installed;
- 4) Utilise digital technologies to design an education / peer support program targeting players / leaders at each of the WACFL's 150 Clubs. This potentially creates a state-wide volunteer support network providing ongoing benefit to the community. Program modules could include:
 - a) A buddy system;
 - b) GAD-7 and PHQ-9 testing / Depression and Anxiety information;
 - c) Mental Health education;
 - d) Physical Health education;
 - e) Aboriginal Torres Strait Islander specific content;
 - f) Drugs and Alcohol;
 - g) Mentoring Development;
 - h) Other Novel ideas;
- 5) Encourage females to take up club leadership positions to help impart more wellness aspects / knowledge into club activities.

COMPARING PLAYING AND NON-PLAYING 2020

The following table compares the averages (mode answer and mean score) of those playing in 2020 and those not playing.

Each person in this subset was given a score between 1-5 for their answer with 1 representing the worst answer (from a wellbeing perspective) with 5 representing the best (or healthiest) answer. Therefore, a subset average score closer to five is the more positive answer.

QUESTION	MODE ANSWER / MEAN SCORE	PLAYING 2020 MODE ANSWER+ MEAN+ MEDIAN	NON - PLAYING 2020 MODE ANSWER+ MEAN+ MEDIAN
Q. 18 Which word best describes how connected you are to your Football Club?	Strongly (4)	Strongly (4) (4)	Strongly (3.9) (4)
Q. 19 How comfortable do you feel about talking to members of your football club about serious challenges you are going through?	Mod Comfortable (3.6)	Mod Comfortable (3.6) (4)	Neither comfortable nor uncomfortable (3.4) (4)
Q. 20 How comfortable do you feel about supporting a teammate going through a tough time (e.g. loss of a friend, mental health, drug addiction)?	Very Comfortable (4.3)	Very Comfortable (4.4) (5)	Mod Comfortable (4.2) (4)
Q. 21 Do you think the football club should be used to provide better support to the community to deal with the challenges of living in a regional community?	Probably Yes (4)	Probably Yes (4) (4)	Probably Yes (3.9) (4)
Q. 22 How willing would you be to learn about issues such as addiction, mental health and wellbeing, community development etc. through the football club environment?	I would like to (3.7)	I would like to (3.7) (4)	I would like to (3.7) (4)
Q. 24 How often do you use specified practices such as meditation, breathing exercises, prayer, gratitude, mindfulness or talk therapy to improve your wellbeing?	Occasionally (1.8)	Never (1.75) (2)	Occasionally (2) (2)
Q. 25 How would you describe your current body weight?	The same as last year (2.6)	The same as last year (2.7) (3)	A little heavier than last year (2.5) (2)
Q. 26 How would you describe your overall physical health in the last few weeks?	The same as last year (2.8)	The same as last year (3) (3)	A little worse than last year (2.5) (2)
Q. 27 How would you describe your overall mental health in the last few weeks?	The same as last year (2.9)	The same as last year (3) (3)	The same as last year (2.7) (3)
Q. 28 How positive do you feel about your future?	Somewhat Positive (4)	Somewhat Positive (4) (4)	Somewhat Positive (4) (4)
Q. 33 During this football season, approximately how many standard drinks did you consume in an average week?	6-10 (3.1)	6-10 (3) (3)	6-10 (3.2) (3)
Q. 34 During this football season, approximately how many days per week did you consume alcohol?	3-4 (3.5)	1-2 (3.4) (2)	1-2 (3.5) (2)



Findings

When comparing results from the respondents that either played football in 2020 or were unable to due to COVID-19 (Question 10) there appears to be some significant trends with regards to the positivity of the respondents. The above table affirms that respondents surveyed who played in 2020, responded more positively (almost across the board) which impacts these players perspectives, connection to community and mental and physical health.

Some of the most significant discrepancies between the two subsets include: -

- Q19 – People playing in 2020 were more comfortable disclosing personnel information to a teammate then those who didn't;
- Q20 – People playing in 2020 were more comfortable supporting a teammate going through a tough time;
- Q25 – Respondent who played football in 2020 bodies were similar to how they were in 2019, whereas the group that didn't have put on weight since last year;
- Q26 – People playing football in 2020 overall physical health was similar to how they were in 2019, whereas the group that didn't have declined;
- Q27 – There was also a decline in mental health for those not playing football in 2020, which is captured in finer detail in the PHQ-9 and the GAD-7 analysis below.

We believe the above discrepancies between players who played and didn't play are of significant importance and demonstrate the positive role that football clubs play on individuals and communities which potentially provides multiple positive benefits to the communities in which they exist such as: - better physical, mental and community health; and an increased preparedness to support one another.

COMPARING INTERESTING SUBSETS

The following table compares the averages (Mode answer and Mean score) of Aboriginal; Female; Pilbara, Wheatbelt, Regional Centres, 18-22-year old's and those under 40 years of age not playing football in 2020 due to COVID-19.

Each person in this subset was given a score between 1-5 for their answer with 1 representing the worst answer (from a wellbeing perspective) with 5 representing the best (or healthiest) answer. Therefore, a subset average score closer to five is the more positive answer.

QUESTION	MODE SCORE, MEDIAN SCORE	ABORIGINAL MODE / MEAN	FEMALE MODE	PILBARA MODE	WHEATBELT MODE	REG. CENTRES	18-22 Y.O. MODE	NOT PLAYING 2020
Q. 18 Connection to Club	Strongly (4) (4)	Strongly (4.2)	Strongly (3.8)	Strongly (4)	Strongly (4)	Strongly (4)	Strongly (3.8)	Strongly (3.9)
Q. 19 How comfortable are you talking?	Mod Comfortable (3.6) (4)	Neither comfortable nor uncomfortable (3.3)	Mod Comfortable (3.8)	Mod Comfortable (3.6)	Mod Comfortable (3.5)	Mod Comfortable (3.6)	Neither comfortable nor uncomfortable (3.3)	Neither comfortable nor uncomfortable (3.4)
Q. 20 How comfortable are you supporting?	Very Comfortable (4.3) (4)	Very Comfortable (4.2)	Very Comfortable (4.4)	Neither comfortable nor uncomfortable (4.3)	Moderately Comfortable (4.3)	Mod Comfortable (4.3)	Very Comfortable (4.4)	Mod Comfortable (4.2)
Q. 21 Clubs provide better support?	Probably Yes (4) (4)	Definitely Yes (4.4)	Probably Yes (4.2)	Probably Yes (4.3)	Probably Yes (3.9)	Probably Yes (4)	Probably Yes (4)	Probably Yes (3.9)
Q. 22 Would you like education?	I would like to (3.7) (4)	I would like to (3.8)	I would like to (4)	I would like to (3.8)	I would like to (3.7)	I would like to (3.8)	I would like to (3.6)	I would like to (3.7)
Q. 24 Mental Health Practices?	Occasionally (1.8) (2)	Occasionally (1.65)	Occasionally (2.1)	Occasionally (1.9)	Occasionally (1.8)	Occasionally (1.8)	Occasionally (1.9)	Occasionally (2)
Q. 25 Current Weight?	The same as last year (2.6) (3)	The same as last year (2.2)	The same as last year (2.7)	A little heavier than last year (2.6)	The same as last year (2.6)	The same as last year (2.7)	The same as last year (2.7)	A little heavier than last year (2.5)
Q. 26 Physical Health?	The same as last year (2.8) (3)	A little worse than last year (2.5)	The same as last year (3)	The same as last year (2.6)	The same as last year (2.7)	The same as last year (2.9)	The same as last year (3.2)	A little worse than last year (2.5)
Q. 27 Mental Health?	The same as last year (2.9) (3)	The same as last year (2.8)	The same as last year (2.9)	The same as last year (2.8)	The same as last year (2.8)	The same as last year (3)	The same as last year (3)	The same as last year (2.7)
Q. 28 Feelings about the future?	Somewhat Positive (4) (4)	Somewhat positive (3.6)	Somewhat positive (4)	Somewhat positive (3.8)	Somewhat positive (4.2)	Somewhat Positive (4.1)	Somewhat Positive (4)	Somewhat Positive (4)
Q. 33 Alcohol p.w.	6-10 (3.1) (3)	6-10 (3.1)	1-5 (3.6)	6-10 (3.2)	6-10 (3)	6-10 (3)	6-10 (3.1)	6-10 (3.2)
Q. 34 Alcohol Days p.w.	3-4 (3.5) (2)	1-2 (3.5)	1-2 (3.75)	1-2 (3.5)	1-2 (3.5)	3-4 (3.4)	1-2 (3.7)	1-2 (3.5)



Aboriginal Subset – reports highest in their connection to the football club and their desire to use football clubs to provide better support to their community. Reports lowest in a number of questions with regards to community, mental and physical health and their participation in activities that improve mental health. Aboriginal and Torres Strait Islander respondents were received from the Goldfields, Kimberley, Wheatbelt, Great Southern, Midwest, and Pilbara regions.

Female Subset – females have the weakest connection to club but not surprisingly reports highest in numerous questions with regards to outreach and perceptions of physical / mental wellbeing and alcohol consumption.

Pilbara Subset – we believed it was important to assess how the Pilbara Mining Industry was impacted by COVID-19. The subset didn't report being the outlier (highest or lowest) in any of the questions assessed albeit their view towards the future was low. They did indicate they were on average heavier than last year which is possibly a reflection on the competitions not commencing and an indication that football helps keep Pilbara players in healthier condition.

Wheatbelt Subset – the Wheatbelt subset was fairly neutral compared to other subsets. They did report being highest with regards to alcohol consumption. They also indicated they would be the least willing to engage in educational activities through their football club. Wheatbelt subset indicated they had the most positive feelings about their future which perhaps reflects the minimal impact COVID-19 has had on the agricultural sector.

Regional Centres – Regional Centres respondents indicated they were holding up well statistically with regards to physical and mental health. Perhaps this could be an indication of being involved with a larger community or the ability to partake in an active football season which most regional centres have done. This subset reported the highest consumption of alcohol with regards to drinks consumed and number of days per week they consume alcohol.

18-22-year old's – this subset was chosen to assess the impacts of COVID-19 on the young adult's subset. Along with females, this subset had the weakest connection to their clubs and was the least likely to engage in education programs based off their answers which is potentially linked to maturity levels. The subset seemed to be the least impacted by COVID-19 with regards to their physical and mental health and felt confident in supporting teammates if required which was a surprising positive.

Not Playing 2020 – The subset not playing football in 2020 was in many ways' poor performing with regards to respondent's perception of physical and mental health - performing lowest in both. They were also the lowest performing in terms of supporting teammates and least likely in engaging with education through the football club which indicates a significant opportunity is lost when football isn't taking place.

Recently Lost Job or Hours Due to COVID19 – although this subset is not charted, they did report significantly lower compared to other subsets with regards to question 27 with a score of 2.6 demonstrating the link between gainful employment and perception of mental health when also not playing football. They also recorded a score of 3.7 with regards to question 28 and their view of the future which is low.

Significant Weight Gain in previous 12 months – although this subset is not charted above, this groups data relating to mental health was alarming with them scoring the lowest results of all subsets for questions 26 (1.6), 27 (2.3) and 28 (3.5). Questions regarding alcohol were also well below the second lowest score (2.7) indicating a strong correlation between weight gain, alcohol and perception of mental decline.

COVID-19 SURVEY INTRODUCTION

The COVID-19 pandemic of 2020 has, in some way, affected every member of our society and in Western Australia the effects have been far reaching. From Esperance to the Kimberley and everywhere in-between, we have all been impacted in some way.

Whether it was people's inability to travel freely, the effect on their employment, constraints on seeing family and friends or even participating in community activities such as playing a game of football, these restrictions require investigation to ascertain the impact they have had on individuals and our communities.

The WA Country Football League (WACFL) community is a network of 25 football associations who administer competitions for the state's 150 country football clubs. Each of these associations is made up of a volunteer committee with either a board of directors or a club delegates governance model managing the competition.

Year on year, all associations - which fall under the WACFL's auspices - commence their regular season between late March and early May. With the unprecedented events unfolding in 2020 around COVID-19, football seasons around the state were halted due to the impacts of the pandemic. The uncertainty of this situation and at times inability to ascertain when government restrictions would fully end, resulted in many of the WACFL's associations abandoning their 2020 seasons all together.

For these associations, there was simply too much uncertainty. For example, would crowds be able to attend matches? If not, how would that impact revenue opportunities? As such, a number of associations could not justify the significant planning, adjustments, volunteer effort and financial investment required to facilitate a meaningful football season without absolute certainty of it going ahead. The remaining associations believed the benefits of running a shortened season to connect their communities via football outweighed the risks. They believed that football could play an important role for their players, volunteers and supporters who use the local football club as their social hub.

As such, approximately 60% of WACFL associations season went ahead. The following list outlines those associations which played in 2020 and those that did not: -

WACFL LEAGUES PLAYING IN 2020	WACFL LEAGUES NOT PLAYING IN 2020
Eastern Districts FL	Avon FA
East Kimberley FL	Central Kimberley FL
Esperance Districts FA	Central Midlands Coastal FL
Gascoyne FA	Central Wheatbelt FL
Great Northern FL	Fortescue National FL
Great Southern FL	Goldfields FL
Hills FA	Lower South West FL
North Midlands FL	Mortlock FL
North Pilbara FL	Newman National FL
Ongerup FL	West Kimberley FL
Onshore Cup	
Peel FNL	
Ravensthorpe & Districts FL	
South West FL	
Upper Great Southern FL	

Associations playing or not didn't really take any particular pattern. Based on the above table, approximately half of the WACFL's 12,500 players would have been able to play football in 2020, and the other half would not.

This situation has created a unique opportunity to survey country footballers on their health and wellbeing and compare the results between the two groups (i.e. those who 'Played in 2020' versus those who 'Did not Play in 2020') to identify any patterns emerging from the data.

We were hopeful that these results would demonstrate football's and each club's role in building thriving regional communities and hope to use this data to partner with other entities interested in the health and wellbeing of regional Western Australians through the support of strong and vibrant football competitions. As a result, this could lead to more suitably resourced clubs, volunteers and individual education programs, healthy promotional messaging and adding a protective support layer around the members of the club's community to build more resilience into each community via the football club.



COVID-19 SURVEY PARTNERS

This exciting research project has been a partnership between the WACFL and the University of Western Australia's (UWA) Young Lives Matter Foundation. UWA is recognised as one of the top 100 universities globally. As a charity established within UWA, Young Lives Matters' unique approach brings together mathematicians with clinicians, psychologists with statisticians, bringing their combined knowledge to focus on one of the toughest problems in the research world: predicting the life-event contributing factors and resultant behaviours that lead to suicide.

Individuals involved with this research

- **UWA Industry Engagement team**
Samantha Tough, Fiona Allen and Rolee Kumar.
- **Sean Hood**
Professor Sean Hood is Head of Division of Psychiatry, Faculty of Health and Medical Sciences and is a member of the YLM Research Leadership team.
- **Robbie Glyde**
Robbie Glyde is a third year UWA Bachelor of Philosophy student majoring in Integrated Medical Sciences and Clinic Practice. His work on this project under Professor Hood's supervision was part of the Research Placement that he completed as part of his degree.
- **Joe Georgiades**
Joe Georgiades was General Manager for the WA Country Football League (WACFL) between 2011 and 2018 and was a Program Manager for the WACFL's Avon Leadership Pilot Program in 2019. Joe undertook this project on the WACFL's behalf on a consultancy basis.

SURVEY METHODOLOGY

The survey asked participants 40 questions in a bid to establish some data into how the WA country football community viewed: -

- The impact COVID-19 has had on their physical and mental health;
- The impact COVID-19 has had on their community;
- The impact COVID-19 has had on their alcohol and other drug consumption;
- The impact COVID-19 has had on how they viewed their futures;
- The impact COVID-19 has had on their careers; and
- The importance role that playing football has had on their wellbeing (physical and mental) as well as within their communities.

The average time of the survey to be completed was between 8-10 minutes.

Participants were asked to complete standardised anxiety (GAD-7) and depression (PHQ-9) self-rated questionnaires. This facilitates comparison to national and international data sets using a tried and tested methodology. Results from these two tests will be critical to ascertain the impact that participating in football can have on an individual's mental wellbeing.

The survey was conducted through digital channels (personal computers and mobile devices) and was linked to both the WACFL and UWA websites where it could be easily accessed by individuals in their own time.

Participation in this study was voluntary and all questions could be skipped if desired. This approach was recommended by the UWA Ethics Department and has led to a varying number of respondents to each question. The percentage shown next to each answer below is therefore tabulated by the number of respondents who answered that question.

Whilst we did ask participants to list their clubs, the survey was untraceable back to the individual to try to ensure the best possible quality (honesty) of answers while maintaining specific confidentiality.

PROMOTION

To promote the take up of the survey, the following promotional measures were implemented by WACFL and UWA staff: -

- 6) A joint media release was released launching the survey;
- 7) Radio interviews were carried out by Prof. Sean Hood (UWA) and WAFC Executive Manager -Country Football, Affiliates and Facilities Tom Bottrell;
- 8) Website articles were posted on the UWA and WACFL websites;
- 9) Letters sent by the WACFL to their affiliated associations and clubs;
- 10) Emails were sent to WACFL players including a link to the survey;
- 11) The survey link was texted (sms) to WACFL players; and
- 12) Various social media posts were posted.

The survey was done post season, thus foregoing the opportunity to have Club leadership personnel (i.e. president, coaches etc) available to encourage players to do the survey after training in a face-to-face environment. Distributing the survey between May and August would provide the greatest opportunity to grow survey completions in the future.

The text message (sms) delivered direct to players phones was far and away the most meaningful promotion with regards to conversions to survey completions indicating that direct and technology friendly promotion was the most impactful on the target market.

RESPONSE NUMBERS

The survey was opened on 21 September 2020 and closed off on 23 October. The table below summarises the tally of survey responses: -

QUESTION 10	RESPONSE NUMBERS	YES	NO	DNA
>40% Completed 18 - 40 y.o. (PLAYER)	283	156	124	3
>40% Completed 40+ y.o. (NON-PLAYER)	127	83	38	6
>40% Completed / DNA DOB Question	98	33	33	32
TOTAL	508			



The key target market for analysis of this report was the 283 survey responses who completed more than 40% of the survey and were under 40 years of age. Of this number, they were broken down further into either playing or not playing with over 100 respondents in each category who answered Question 10 that they played “Yes” or did not play “No” in an actual football season in 2020. We also received 127 responses from respondents over the age of 40 which we used to create an additional subset.

We felt these three sectors gave us a sound basis to compare respondent’s answers and identifying any significant trends.

DATA ANALYSIS

13) Comparing the “Yes” and the “No”

The critical question to help separate the data into two subsets was question 10: -

Q10 Is your local country football club playing in a proper season this year?

Comparing survey results into two different subsets based on whether players played or not, enabled investigation into potential impacts country football is having on the health and wellbeing of players when they can participate in a competition and when they cannot.

The data also enables us to look at how respondents answered the questions based on factors such as their age, location, sex and Aboriginal & Torres Strait Islander status.

Young Lives Matter researchers applied Independent-Samples T-tests, multivariate ANOVA, and means tests for continuous data. Mann-Whitney U test and medians were used for ordinal data analysis. Alpha = 0.05.

CONCLUSIONS

The WACFL's COVID-19 Impact Survey closed on 23 October and all in all 508 respondents participated: -

- 14) Under 40 Playing in 2020: 283
- 15) Under 40 Non-Playing in 2020: 127
- 16) Over 40: 98
- 17) TOTAL: 508

When comparing the responses from the different groups, it is clearly evident that the respondents who did not partake in a football season in 2020 were considerably worse off with regards to their physical and mental health than those who did. This finding was anticipated and demonstrated through the data.

What we now know is that a number of respondents' health and wellbeing took a significant step backwards in 2020, with the majority of these individuals coming from the Under 40 and not playing in 2020 groups.

What was perhaps less predictable is that these groups were also significantly less positive with regards to communicating to teammates, supporting teammates, partaking in education, and their connection to their club. This suggests that as time was spent away from the club, that these benefits were diminished.

The data did not demonstrate any strong relationships between playing or not playing football and the use of substances such as alcohol or drugs.

The data should give all football clubs confidence in the fact that they are providing a significant social benefit to players and their broader community through merely enabling matches and training to take place each year. Obviously if there can be an investment or improvement in the knowledge and programs offered to clubs and individuals, then this benefit can be further developed.

As well as a significant array of data for analysis, the report also provides Recommendations for the WACFL and potential partners to consider for implementation in the future to continue to develop its suite of services to offer to their club network - which spreads across the entire state. Through taking a proactive approach to the wellbeing or community development aspects of country football the WACFL can provide significant community enhancement in the areas and with the individuals who come through their club room doors.

Next steps would include imbedding a community development mindset amongst their own operations and also sharing this report far and wide to help identify organisations prepared to partner with the WACFL to enhance the communities in which country football clubs operate. It is hoped that the findings of this report will ensure that potential partners can gain a degree of confidence that any investment into Country Football results in a healthier individual ultimately leading to a more positive community.



THE BODY OF THE SURVEY

Participate Survey and Consent / Q1 - 3

Introductory

The Participation Survey and Consent section of the survey was a necessary requirement to be completed prior to participants undertaking the survey to ensure legalities were addressed. The UWA Ethics Department granted their approval of the survey prior to it being released.

Survey Questions

Q1 Are you 18 years of age or older?

Q2 Do you understand that this survey is entirely voluntary and that your confidential information will not be gathered or reported in a way that could identify you?

Q3 Do you agree to participate in this study?

Findings

n/a

Demographics / Q4 - 7

Introductory

Establishing some critical demographic data was done in this segment of the questionnaire. Knowing the respondents age, gender and ethnic group enables us to compare responses across subsets and how COVID-19 impacted them.

The year of birth also enabled us to ensure no underage respondents completed the survey and enabled us to segment the data so the predominant research could be done on an age group under the age of 40.

The Ethnic Group question enables us to compare results for Caucasian / white, Aboriginal and Torres Strait Islander and others.

Q4 What year were you born in?

Year of Birth	Response
<1979 (40+):	127 (31%)
1980 – 1990:	120 (29%)
1991 – 2000:	127 (31%)
>2000 - 2002:	36 (9%)
Blank:	98

Q5 What is your sex?

Sex	Response
Males:	368 (80.5%)
Female:	88 (19.25%)
Other:	1 (0.2%)
Blank:	51

Q6 What is your ethnic group?

Ethnicity	Response
Aboriginal or TSI:	24 (5%)
Asian:	1 (0.2%)
Caucasian:	422 (92%)
Other:	7 (1.5%)
Prefer not to say:	4 (1%)
Blank:	50

Q7 Did you register or intend to register in the 2019 or 2020 season of country football?

Registered	Response
Yes:	429 (93.5%)
No:	30 (6.5%)
Blank:	49

Findings

There was a higher than expected number of participants indicating they were older than playing age through their answers to the DOB question. Therefore, the data was separated from 18 - 40 years of age and over 40. Some respondents over the age of 40 may still be playing in a WACFL Association- however for this exercise they were placed in to the 40+ subset.

Aboriginal and Torres Strait Islanders make up approximately 20% of the WACFL's entire player network but only 5% of survey respondents identified as that. An Aboriginal and Torres Strait Islander subset was created and compared on page 9 with some significant findings in the PHQ-9 and GAD-7 sections.

Approximately 20% of the respondents answered that they were female which was a higher than expected participation rate and a pleasing aspect of the data with 88 total respondents. A 'female' subset was created and is compared on page 9.

A significant number of respondents started but didn't complete the entire survey which lead to a loss of potential data. Respondents who completed less than 40% of the data were dismissed from the overall analysis.

Further analysis of location and age profiles is done in the *Comparing Subsets* section above.

Country Football / Q8 - 10

Introductory

Establishing the location of the respondent at Question 8 enables us to compare the data between regions and how they handled COVID-19 based on the regions given.

Question 9 enabled us to research which clubs got the highest number of respondent and access how they promoted the survey to their players.

Question 10 was critical as it was the question which splits the data to ascertain if there was a beneficial impact through the facilitation of football in 2020.

Q8 Which region is your football club in?

Region Respondents Club is Based	Total	Playing 2020	Non-Playing
Close to Perth – 55 respondents from 14 clubs.	55 (11.5%)	34	20
Kimberley –18 respondents from 9 clubs.	18 (4%)	1	15
Pilbara – 36 respondents from 11 clubs.	36 (8%)	22	15
Agriculture (Midlands and Wheatbelt) – 142 respondents from 42 clubs	142 (30%)	51	88
Regional Centres: 211 respondents from 48 clubs.	211 (44%)	149	57
Other:	17 (3.5%)	15	2
Blank:	29		1
	508	272	198

Q9 Which football club do you play at?

The WACFL club with the highest response rate was Kalgoorlie City FC with 12 responses. If each club was able to get this many responses, there would have been 1,800 overall responses to the survey. 124 clubs had at least one response which represents 83% of clubs responding. The average number of participants per club was between 3-4 which could be significantly grown by activating club leadership.

Q10 Is your local country football club playing in a proper season this year?

	Total	Yes	No	Blank
Under 40	283	156	124	3
Over 40	127	83	38	6
No DOB Given	98	34	33	32
Total:	508	272 (58%)	195 (42%)	41

Findings

272 surveys answered 'Yes' to question 10 and 195 surveys answered 'No'. Refining these numbers further to 'players' numbers (under 40 y.o.) were 156 'Yes' and 124 'No'. It was pleasing to get over 500 responses.

All in all, there was a fairly even spread of respondents from amongst clubs and regions which was pleasing. This indicates that communication did in fact get out to the majority of clubs, however, the average respondents per club was approximately 3.

The Impact of Playing Football / Q11 - 14

Introductory

Question 11 was only provided to people who answered 'No' to Question 10 which explains the large number of respondents who 'did not answer' (DNA).

Q11 What has been the impact on your community of your football club not running a competition this year?

Response	Total
Very Negative:	46 (26%)
Moderately Negative:	82 (46.5%)
Neutral:	38 (21.5%)
Moderately Positive:	5 (3%)
Very Positive:	5 (3%)
Blank or DNA:	332 (%)

Q12 How necessary is having a football club playing a competition this year to the health of your community?

	Total	Playing 2020	No Playing 2020	40+
Not at All:	5 (1%)	3 (1.5%)	2 (1.5%)	0
A Little Important:	8 (2%)	4 (2%)	3 (2%)	1 (1%)
Somewhat Important:	44 (10%)	16 (9%)	19 (13.5%)	9 (8%)
Moderately Important:	98 (22.5%)	44 (24%)	33 (24%)	19 (17.5%)
Very important:	280 (64.5%)	114 (63%)	82 (59%)	81 (74%)
Blank	73			

Q13 How necessary is having a football club playing a competition this year to your physical health?

	Total	Playing 2020	No Playing 2020	40+
Not at All:	11 (2.5%)	2 (1%)	4 (3%)	5 (4.5%)
A Little Important:	14 (3%)	4 (2%)	7 (5%)	3 (2.5%)
Somewhat Important:	44 (10%)	16 (9%)	14 (10%)	14 (13%)
Moderately Important:	108 (25%)	47 (26%)	38 (27%)	22 (20%)
Very important:	257 (59%)	112 (62%)	76 (55%)	65 (60%)
Blank:	74			

Q14 How necessary is having a football club playing a competition this year to your mental health?

	Total	Playing 2020	Non-Playing 2020	40+
Not at All:	15 (3.5%)	6 (3.5%)	6 (4.5%)	3 (2.5%)
A Little Important:	19 (4.8%)	8 (4.5%)	4 (3%)	7 (6.5%)
Somewhat Important:	44 (10%)	18 (10%)	19 (14%)	7 (6.5%)
Moderately Important:	110 (25.5%)	46 (25%)	43 (31%)	19 (17.5%)
Very important:	246 (57%)	103 (57%)	67 (48%)	73 (67%)
Blank:	74			

Findings

A large number of respondents (72%) who were unable to play football due to COVID-19 answered that not running a competition in 2020 had a negative impact on their community with 26% answering that it had had a very negative effect on their community. 5.6% said that not playing in 2020 had a positive impact on their community although no further information was given.

64% of respondents to Question 12 indicated that a football club was 'very important' to the health of their community. Overall 3% of respondents answered that a club was not important to their community and 97% indicated it was important. Respondents not playing in 2020 tended to respond less favourably than those currently connected to their club through having matches and training in 2020. This suggests there may be a loss of connection to the Club for respondents who didn't play in 2020. There also seemed to be a greater appreciation of the role the Club plays in the community the older we get as the 40+ year old's responses were the strongest of the three subsets.

The connection between playing football and physical health was appreciated most strongly by those playing in 2020. 59% of respondents of Question 13 indicated that a football club was 'very important' to their physical health. This number was 62% for those playing in 2020 and 55% from those who did not. Overall 6% of respondents answered that a club was not important to their physical health and 94% indicated it was important. This important connection is further highlighted in Question 25 and 26 below.

57% of respondents of Question 14 indicated that a football club was 'very important' to their mental health which was slightly less than a similar question on physical health. Overall 8% of respondents answered that a club was not important to their mental health and 92% indicated it was important. Respondents 40+ saw the most benefit to their mental health through participating in a football club and those not playing in 2020 were significantly lower than those that did. This connection is further highlighted in Question 27 below.

Interestingly, results later in the report (Question 31-32) indicate a decline in both anxiety and depression responses for those who did not play football in 2020 when compared to those who did.

Football Questions / Q15 - 18

Introductory

Questions 15 - 16 was done on a light-hearted basis and to help get some data on the level of support of AFL clubs and WAFL clubs.

Question 17 was critical to help paint a picture of the importance of ensuring all of the WACFL's 150 clubs continue in 2021 despite the challenges that numerous clubs had to deal with by not having a season in 2020. This question highlights the impact to a small town if a football club folded.

Question 18 further highlights the importance of the club by asking individuals of their connection to club.

Q15 Which AFL club do you go for?

AFL Team	Responses
West Coast Eagles:	188 (43%)
Fremantle Dockers:	70 (16%)
Other:	167 (39%)
None:	8 (2%)
Blank:	75

Q16 Which WAFL club do you go for?

WAFL Team	Responses
Claremont Tigers:	47 (11%)
East Fremantle:	36 (8.5%)
East Perth:	30 (7%)
Peel Thunder:	24 (5.5%)
Perth Demons:	41 (9.5%)
South Fremantle:	62 (14.5%)
Subiaco Lions:	42 (9.8%)
Swan Districts:	43 (9.8%)
West Perth:	40 (9.3%)
None:	66 (15%)
Blank:	77

Q17 If your football club folded this year, which of these answers best describes what you would do next year?

Action	Responses
Stop playing sport:	96 (23%)
Play another Sport:	92 (22%)
Play for another football team:	191 (45%)
Move to another town:	7 (1.5%)
Other:	37 (9%)
Blank:	85

Q18 Which word best describes how connected you are to your Football Club?

	Total	Playing 2020	Non-Playing 2020	40+
Loosely:	6 (1.5%)	4 (2%)	1 (.7%)	1 (1%)
Somewhat:	16 (4%)	8 (4%)	6 (4.3%)	2 (2%)
Average:	79 (18.2%)	33 (18%)	29 (21%)	17 (15%)
Strongly:	196 (45%)	75 (41.5%)	75 (54%)	44 (41%)
Extremely:	136 (31.5%)	61 (34%)	28 (20%)	44 (41%)
Blank:	75			

Findings

Interestingly with Question 17, 23% of respondents answered that they would stop playing sport all together if their Club folded, with the risks of that demonstrated further in this report (Question 26) when we look at the decline in physical health of those who were unable to play in 2020 due to COVID-19. 2% said they would move to another town if their club folded.

Question 18 indicates the emotional connection respondents felt towards their club and indicates a very positive emotional feeling to Clubs by respondents. 79% (almost 4 out of five) of respondents answered “Strong” or “Extremely” which is a very positive result and these respondents would be considered very ‘sticky’ supporters of the club.

Only 5% indicated a loose or somewhat (the lowest two answers) connection to their club with the remainder marking ‘average’ or stronger. We can see from the data a significant difference in the levels of connection from those playing in 2020 and those who did not.

When reading the final comments below (Question 38 -40) given from some respondents unable to play in 2020, there was a fair degree of disappointment that football didn’t go ahead. Conversely, it appears those that were able to play in 2020 have a stronger positive connection as do those in the 40+ bracket who were the strongest respondents.

Analysis of subsets indicates that the younger demographics (18 -22 y.o.) had the lowest feelings of connection to club indicating it could either be a generational trait or something that is grown over time or longevity at a club.

Football Club Outreach / Q19 - 22

Introductory

This series of questions was to establish the willingness of respondents to engage in activities to do with support and education in the football club environment.

Q19 How comfortable do you feel about talking to members of your football club about serious challenges you are going through?

	Total	Playing 2020	Non-Playing	40+
Very Uncomfortable:	18 (4%)	5 (2.5%)	9 (6.5%)	4 (3.5%)
Slightly Uncomfortable:	65 (15%)	30 (16.5%)	30 (21.5%)	4 (3.5%)
Neither Comfortable nor Uncomfortable:	86 (20%)	33 (18.5%)	32 (23%)	19 (17.5%)
Moderately Comfortable:	170 (39%)	76 (42%)	45 (32.5%)	47 (43%)
Very Comfortable:	94 (22%)	36 (20%)	23 (16.5%)	35 (32%)
Blank:	75			

Q20 How comfortable do you feel about supporting a teammate going through a tough time (e.g. loss of a friend, mental health, drug addiction)?

	Total	Playing 2020	Non-Playing	40+
Very Uncomfortable:	8 (2%)	1 (0.5%)	4 (3%)	3 (2.75%)
Slightly Uncomfortable:	17 (4%)	7 (4%)	8 (6%)	2 (1.75%)
Neither Comfortable nor Uncomfortable:	20 (4.5%)	8 (4.5%)	7 (5%)	4 (3.5%)
Moderately Comfortable:	171 (39.5%)	68 (37.5%)	56 (40%)	45 (41%)
Very Comfortable:	218 (50%)	97 (53.5%)	64 (46%)	55 (50.5%)
Blank:	74			

Q21 Do you think the football club should be used to provide better support to the community to deal with the challenges of living in a regional community?

	Total	Playing 2020	Non-Playing	40+
Definitely Not:	4 (1%)	1 (0.5%)	1 (0.7%)	2 (1.8%)
Probably Not:	25 (6%)	10 (5.5%)	12 (8.5%)	3 (2.7%)
Maybe:	85 (20%)	37 (20.5%)	31 (22%)	16 (14.5%)
Probably Yes:	168 (39%)	77 (42.5%)	50 (36%)	37 (34%)
Definitely Yes:	152 (35%)	56 (31%)	45 (32%)	51 (47%)
Blank:	74			

Q22 How willing would you be to learn about issues such as addiction, mental health and wellbeing, community development etc. through the football club environment?

	Total	Playing 2020	Non-Playing	40+
Very Unwilling:	5 (0.5%)	2 (1%)	3 (2%)	
Somewhat Unwilling:	25 (2.5%)	10 (5.5%)	7 (5%)	8 (7.5%)
Neutral:	138 (32%)	61 (34%)	48 (34.5%)	26 (24%)
I would like to:	161 (37%)	75 (41.5%)	50 (36%)	35 (32%)
I would Love to:	105 (24%)	33 (18%)	31 (22.5%)	40 (36.5%)
Blank:	74			

Findings

In Question 19, a large portion (61%) of respondents indicated that they felt comfortable 'Moderately' or 'Very' speaking to teammates about serious challenges they were going through. One in five (19%) of respondents indicated they felt uncomfortable ('Slightly' or 'Very') speaking to others. This is a positive finding. Participants that played football this season stated that they were more comfortable talking to members of their football club about serious challenges they were going through than those who did not play this season (U=117965, p=0.012).

Question 20 asked a similar question around supporting teammates going through a tough time. Answers were even stronger than question 19 with 89% of respondents indicating that they felt comfortable ('Moderately' or 'Very') supporting teammates going through a serious challenge. The highest of the three subsets above was respondents who played in 2020 which is a positive benefit from playing football. 50% of total respondents were 'Very Comfortable' which is a positive primer for providing players more information. 5% of respondents indicated they felt 'Uncomfortable' which is a potential opportunity for improvement. On average, those who played this season stated that they were "very comfortable" (median = 5) doing this, whereas those who did not play were on average only "moderately comfortable" (median = 4).

Question 21 asked respondents if they felt the club could do more to educate and support their community. 73% of respondents indicating that they felt positively ('Probably Yes' or 'Definitely Yes') towards the club playing a positive role here. 6.7% were unsupportive. This is strong evidence of the opportunity for WACFL and its partners to run education and information to playing groups through the football club network.

Question 22 drilled down into the respondent's preparedness to learn more through the football club. 61% gave a positive response with 24% (nearly one in four) indicating they would 'Love' to which was a strong sign. The over 40+ age bracket marked 36% that they would 'Love' to learn more about issues through the Club. 7% gave a negative response.

Travel / Q23

Introductory

This section asked an important question around the travel times that players undertook each week to participate in football. Significant travel times obviously increase the risk of partaking in the playing of football.

Q23 On average, how many kilometres do you travel per week to training and football?

Distance	Answers
0-50km:	205 (47%)
50-100km:	87 (20%)
100-200km:	61 (14%)
200-400km:	57 (13%)
400+ km:	23 (5%)
Blank:	75

Distance	0-50km	50-100km	100-200km	200-400km	400+	Total
Close to Perth	10 (72%)	2 (14%)	2 (14%)	0	0	14
Reg. Centres	29 (58%)	5 (10%)	5 (10%)	3 (6%)	8 (16%)	50
Wheatbelt	13 (16.5%)	18 (23%)	16 (20%)	24 (30%)	8 (10%)	79
Pilbara	6 (66%)	1 (11%)	1 (11%)	1 (11%)	0	9
Kimberley	11 (78.5%)	1 (7%)	1 (7%)	1 (7%)	0	14

Findings

18.5% of respondents travelled over 400kms per week to participate in football matches and training. Extrapolated out this would be approximately 2,500 players in the WACFL network. Data suggests that Wheatbelt and North West Leagues are the most significant travellers to partake in football in the state.

Health / Q24 - 28

Introductory

These questions focused on health (mental and physical) of respondents.

Question 24 looks to gauge how involved our players are in the development of their mental health.

Questions 25- 27 are critical for analysis of those playing and not playing.

Q24 How often do you use specified practices such as meditation, breathing exercises, prayer, gratitude, mindfulness or talk therapy to improve your wellbeing?

	Total	Playing 2020	Non-Playing	40+
Never:	190 (44%)	90 (50%)	55 (39.5%)	43 (40%)
Occasionally:	157 (36%)	61 (34%)	54 (39%)	40 (37%)
A Few Times a Week:	51 (12%)	17 (9.5%)	20 (14.5%)	13 (12%)
Daily:	25 (6%)	10 (5.5%)	6 (4.5%)	9 (8.5%)
More than once Daily:	9 (2%)	2 (1%)	4 (3%)	3 (2.5%)
Blank:	76			

Q25 How would you describe your current body weight?

	Total	Playing 2020	Non-Playing	40+
Much heavier than last year:	19	5 (3%)	9 (6.5%)	5 (5%)
A little heavier than last year:	179	67 (38%)	67 (48.5%)	42 (39%)
The same as last year:	176	81 (46%)	46 (33.5%)	48 (45%)
A little lighter than last year:	39	15 (8.5%)	12 (8.5%)	11 (10%)
A lot lighter than last year:	13	8 (4.5%)	4 (3%)	1 (1%)
Blank:	82			

Q26 How would you describe your overall physical health in the last few weeks?

	Total	Playing 2020	Non-Playing	40+
Much worse than last year:	31 (7.5%)	6 (3.5%)	21 (15%)	4 (4%)
A little worse than last year:	134 (31.5%)	44 (25%)	56 (40.5%)	31 (29%)
The same as last year:	172 (40%)	83 (47%)	36 (26%)	52 (48.5%)
A little better than last year:	77 (18%)	37 (21%)	21 (15%)	18 (16.5%)
Much better than last year:	13 (3%)	7 (4%)	4 (3%)	2 (2%)
Blank:	81			

Q27 How would you describe your overall mental health in the last few weeks?

	Total	Playing 2020	Non-Playing	40+
Much worse than last year:	24 (5.5%)	3 (1.5%)	20 (14.5%)	1 (1%)
A little worse than last year:	91 (21.5%)	32 (18%)	32 (23%)	25 (23.5%)
The same as last year:	236 (55%)	96 (54%)	71 (51.5%)	67 (62.5%)
A little better than last year:	54 (12.5%)	33 (18.5%)	12 (8.5%)	8 (7.5%)
Much better than last year:	22 (5%)	13 (7.5%)	3 (2%)	6 (5.5%)
Blank:	81			



Q28 How positive do you feel about your future?

	Total	Playing 2020	Non-Playing	40+
Very Negative:	1 (0.25%)	0	1 (0.7%)	0
Somewhat Negative:	26 (6%)	9 (5%)	11 (8%)	5 (4.5%)
Neutral:	55 (13%)	26 (15%)	20 (14.5%)	9 (8.5%)
Somewhat Positive:	191 (45%)	84 (48%)	57 (41.5%)	47 (44%)
Very Positive:	151 (35.75%)	56 (32%)	48 (35%)	46 (43%)
Blank:	84			

Findings

Question 24 indicated that 80% of respondents only occasionally or less focused on exercises to improve their mental health. 43% indicated that they never did. There would be an opportunity here to increase the players awareness of such concepts.

Question 25 shows that 46% of respondents were heavier than last year. An additional 14% of players who did not play football in 2020 due to COVID-19 had put on weight since last year with an additional 3.5% stating they are much heavier than respondents who played. This suggests there is a strong link between playing football and physical health. Respondents had gained more weight where their season was cancelled ($W=22803, p=0.024$).

Question 26 shows that whilst 28.5% of respondents who played in 2020 indicated their physical health was worse than last year, this number was alarmingly 27% higher (55.5%) for respondents who were not playing. It was also 11.5% higher for the ‘Much Worse’ answer. There was a significantly difference for those who played this season vs those who didn’t ($U=15100, p<0.001$). COVID-19 has had a negative impact on the health of country footballers with the impact being more sever on those who were unable to play in 2020.

Question 27 shows that 19.5% of respondents who played in 2020 indicated their mental health has deteriorated from last year. 37.5% of respondents who did not play football in 2020 indicated that their mental health was worse than last year with 14.5% of respondents in this category indicating it was ‘Much Worse’ compared to 1.5% in the Playing subsection. This is a strong indication that players have struggled with their mental health without having football played in 2020 ($U=15794, p<0.001$).

Players who played in 2020 were slightly more positive about their futures then those who did not albeit the data indicates the overall community has been fairly resilient to the impacts of COVID-19 experienced in regional WA.



Employment / Q29 - 30

Introductory

This series of questions investigates the impact that COVID-19 had on the employment of the Country Football Community.

Q29 What was your employment status prior to COVID-19?

Employment Type	Answers
Casual:	33 (7.5%)
Part Time:	21 (5%)
Full Time:	283 (65%)
Volunteer:	8 (2%)
Stay at Home Parent:	2 (0.5%)
Unemployed:	13 (3%)
Self Employed:	64 (15%)
Other:	11 (2.5%)
Blank:	73

Q30 How has COVID-19 affected your work?

Employment Type	Answers
Same:	292 (72%)
Needed to take Unpaid Leave:	6 (1.5%)
Needed to take Annual Leave:	3 (0.75%)
Lost my job:	15 (4%)
Was unemployed so no impact:	2 (0.5%)
Increased my hours:	28 (7%)
Hours were reduced:	47 (12%)
Other:	12 (3%)
Blank:	86

Findings

COVID-19 doesn't appear to have had too much impact on the bulk of the players work commitments with the main interruption resulting in the loss of hours (12%) and loss of jobs (4%). See comments page 10.

PHQ-9 Patient Health Questionnaire / Q31

Introductory

The Patient Health Questionnaire (PHQ) is a self-administered version of the PRIME-MD diagnostic instrument for common mental disorders. The PHQ-9 is the depression module, which scores each of the 9 DSM-IV criteria as “0” (not at all) to “3” (nearly every day).

The PHQ-9 asks nine questions related to tendencies related to depression. These answers are then scored, and the respondent is given a combined score which categorizes them as either having ‘Minimal’, ‘Mild’, ‘Moderate’, or ‘Sever’ depression.

In addition to making criteria-based diagnoses of depressive disorders, the PHQ-9 is also a reliable and valid measure of depression severity. These characteristics plus its brevity make the PHQ-9 a useful clinical and research tool.

In the below table, results from surveys are split upon the respondents answer to question 10 of the survey which asked if respondents are playing in the 2020 season or not.

PHQ 9 Results Playing v Non-Playing	Playing 2020	Non-Playing	Total
Minimal Depression	141 (62%)	83 (54%)	224 (59%)
Mild Depression	59 (26%)	41 (27%)	100 (26%)
Moderate Depression	23 (10%)	17 (11%)	40 (10.5%)
Moderately Severe Depression	5 (2%)	9 (6%)	14 (3.5%)
Severe Depression	0	3 (2%)	3 (1%)

PHQ 9 Results Comparing Gender	Male	Female	Total
Minimal Depression	185 (61%)	33 (48.5%)	218 (57%)
Mild Depression	82 (27%)	17 (25%)	99 (26%)
Moderate Depression	26 (8.5%)	13 (19%)	49 (13%)
Moderately Severe Depression	8 (2.5%)	4 (6%)	12 (3%)
Severe Depression	2 (0.66%)	1 (1.5%)	3 (1%)

PHQ 9 Results for Aboriginal & Torres Strait Islander (ATSI)	Non ATSI	ATSI Playing	ATSI Non-Playing	Total ATSI
Minimal Depression	215 (60%)	4 (57%)	0 (%)	4 (26.6%)
Mild Depression	93 (26%)	2 (28.5%)	4 (50%)	6 (40%)
Moderate Depression	38 (10.5%)	0 (%)	1 (12.5%)	1 (6.6%)
Moderately Severe Depression	10 (3%)	1 (14.3%)	1 (12.5%)	2 (13.3%)
Severe Depression	1 (0.3%)	0 (%)	2 (25%)	2 (13.3%)

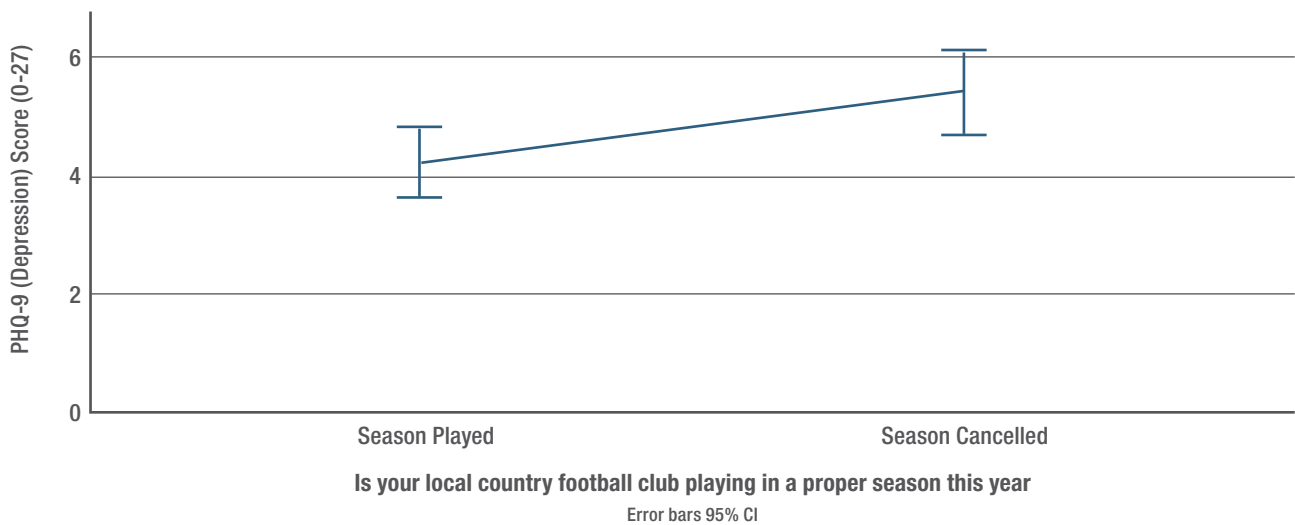
Findings

Overall – most responders (58%) rated as having minimal depression. There appears to be a definite margin between those who played and did not play and them being either minimally or severely depressed in favour of playing football as a mental health protective factor.

Comparing whether or not the respondent played this season, respondents scored significantly higher on the PHQ-9 if they did not play this season ($t=2.527$, $df=261.436$, $t= 0.012$). No respondent who played this season rated as severely depressed; this rating was only seen in those who did not play this season.



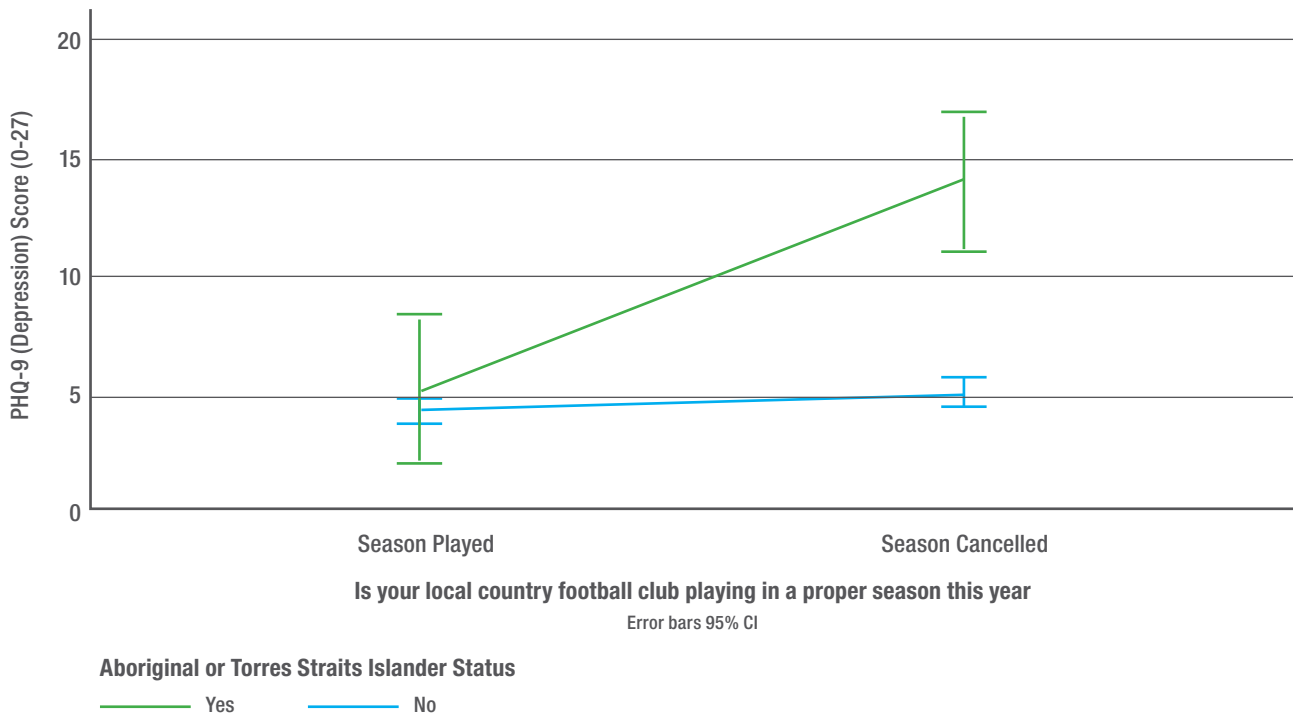
PHQ-9 Score according to Season Played



Overall, women recorded higher PHQ-9 scores than men ($t=2.296$, $df=85.681$, $p=0.024$). On average, women rated as having mild depression whereas most men rated as minimal depression ($U=12024$, $p=0.014$). Women consistently recorded higher PHQ-9 scores than men ($F=7.463$, $df=1$, $p=0.007$). Scores were statistically higher for all participants when the season was cancelled ($F=4.38$, $df=1$, $p=0.037$), but this did not also vary by sex ($F=0.011$, $df=1$, $p=0.915$).

Overall, Aboriginal and Torres Strait Islander peoples identifying participants recorded higher PHQ-9 scores than other ethnic groups ($t=2.456$, $df=14.288$, $p=0.027$). On average, they rated as having mild depression whereas most other responders rated as minimal depression ($U=3741$, $p=0.003$). On average, PHQ-9 scores for Aboriginal and Torres Strait Islander responders (mean = 9.87) was about double that for non- Aboriginal and Torres Strait Islander (mean = 4.49).

PHQ-9 Score according to Season Played and Aboriginal or Torres Strait Islander status



Striking depression (PHQ-9) findings were observed for Aboriginal and Torres Strait Islander participants who played football this season vs those who did not. These individuals consistently recorded higher PHQ-9 scores than non- Aboriginal and Torres Strait Islander ($F=19.233$, $df=1$, $p<0.001$). Although PHQ-9 scores were statistically higher for all participants when the season was cancelled ($F=17.725$, $df=1$, $p<0.001$), this was markedly worse for Aboriginal and Torres Strait Islander responders who did not play this year (Season x ATSI effect: $F=12.674$, $df=1$, $p<0.001$). Thus, not being able to play football in the 2020 football season was associated with a highly significant increased (PHQ-9) depression score in Aboriginal and Torres Strait Islander people – identifying individuals in contrast both (i) Aboriginal and Torres Strait Islander individuals who did play and (ii) non- Aboriginal and Torres Strait Islander individuals. The magnitude of the change in depression score is also clinically significant – it's about the same as the effect that one would expect to see with an antidepressant medication.

Depression and Suicide

We conducted a post-hoc analysis of PHQ-9 item 9 (“Thoughts that you would be better off dead or of hurting yourself in some way.” within the past 2 weeks).

Overall, 91.5% of participants did not have any suicidal or self-harm thoughts in the fortnight preceding the survey. 88% of those who did not play this season have never had suicidal or self-harm thoughts, in contrast to 93% of those who did play.

Those who did not play scored significantly worse on this measure of suicide and self-harm thoughts ($U=20331$, $p=0.046$). No participant who played football this season self-rated the most severe item (self-harm or suicidal thoughts nearly every day), in contrast to 3 survey participants whose season was cancelled.

Over one quarter (26%) of Aboriginal and Torres Strait Islander responders had some level of self-harm / suicidal thoughts, in contrast to less than on-in-ten (7%) of non- Aboriginal and Torres Strait Islander responders; this difference was highly statistically significant ($U=3286$, $p = 0.006$).

Women consistently recorded a different distribution of PHQ-9 item 9 (suicide or self-harm) scores than men ($U=18184$, $p=0.023$), however no clinically meaningful difference could be determined from our dataset.

GAD-7 General Anxiety Disorder / Q32

Introductory

Generalized anxiety disorder (GAD) is one of the most common mental disorders; however, there is no brief clinical measure for assessing GAD. The GAD-7 test was developed to give a brief self-report scale to identify probable cases of GAD and evaluate its reliability and validity. The GAD-7 is a valid and efficient tool for screening for GAD and assessing its severity in clinical practice and research.

The GAD-7 asks seven questions related to anxious tendencies. These answers are then scored, and the respondent is given a combined score which categorizes them as either having 'No', 'Mild', 'Moderate', or 'Sever' anxiety. The categorisation acts as a mere indicator as opposed to a diagnosis.

GAD – 7 Results	Playing 2020	Non-Playing	Total
No Anxiety	165 (71%)	99 (66.5%)	264 (69%)
Mild Anxiety	52(22%)	27 (18%)	79 (21%)
Moderate Anxiety	15 (6.5%)	17 (11.5%)	32 (8.2%)
Sever Anxiety	1 (0.5)	6 (4%)	7 (1.8%)

GAD – 7 Results	Male	Female	Total
No Anxiety	209 (70%)	46 (64.5%)	255 (69%)
Mild Anxiety	60 (20%)	18 (25.5%)	78 (21%)
Moderate Anxiety	23 (8%)	6 (8.5%)	29 (8%)
Sever Anxiety	6 (2%)	1 (1.5%)	7 (2%)

GAD – 7 Results	Not ATSI	ATSI Playing	ATSI Non-Playing	Total ATSI
No Anxiety	252 (70.5%)	4 (66.6%)	2 (22.2%)	6 (40%)
Mild Anxiety	71 (20%)	2 (33.3%)	4 (44.4%)	6 (40%)
Moderate Anxiety	28 (8%)	0 (%)	1 (11.1%)	1 (6.6%)
Sever Anxiety	5 (1.5%)	0 (%)	2 (22.2%)	2 (13.3%)

Findings

Over 2/3 of responders (69%) rated as not at all anxious. The combined percent of respondents who had 'Moderate' to 'Severe Anxiety' based of the GAD-7 test results was 7% for respondents who played in 2020 and 16% of those who did not.

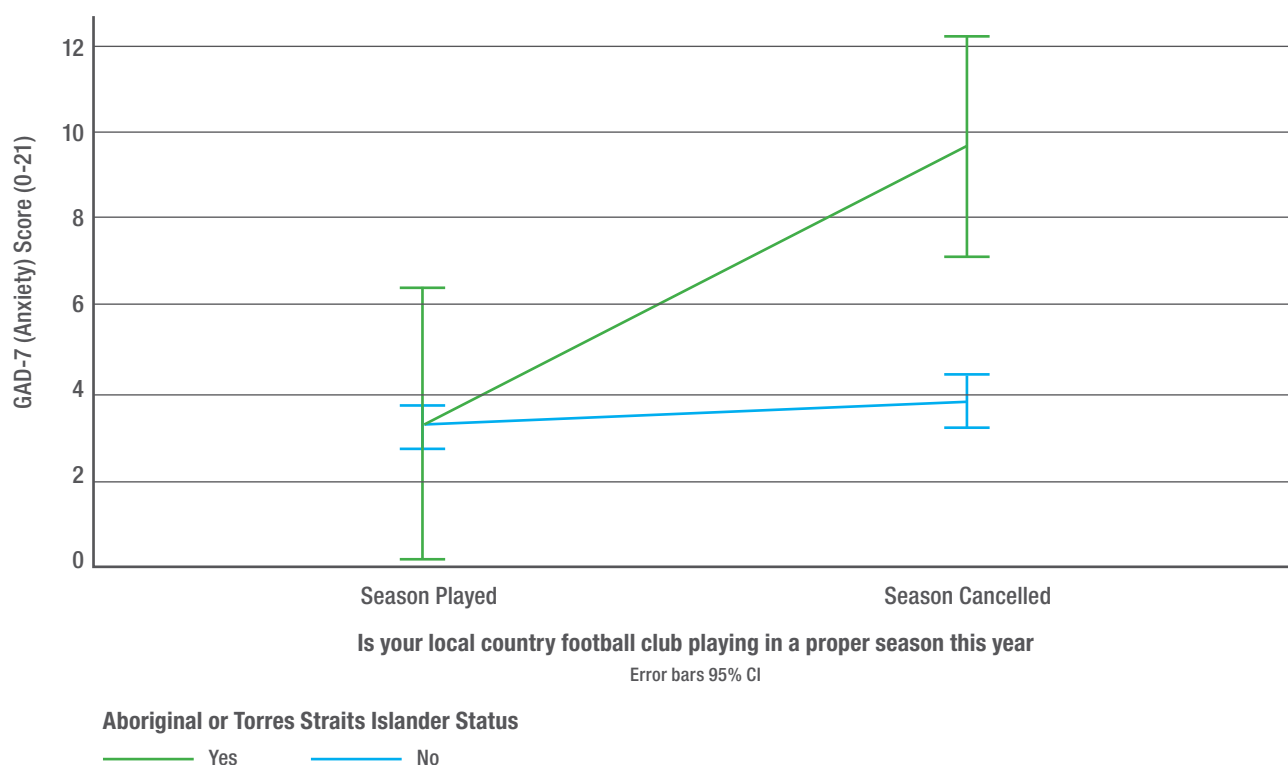
6 respondents who didn't play in 2020 results indicated they had severe anxiety as opposed to one who did play, despite the 'playing' sector having 56% more respondents.

Comparing whether or not the respondent played this season to their GAD-7 results, respondents scored significantly higher on the GAD-7 if they did not play this season ($t=2.349$, $df=258.935$, $t= 0.020$) meaning they were experiencing higher degrees of anxious tendencies and behaviour.

Women recorded similar GAD-7 scores to men ($F=0.894$, $df=1$, $p=0.345$). There was no interaction observed between sex and season cancelled on GAD-7 scores ($F=0.006$, $df=1$, $p=0.939$).

Striking anxiety (GAD-7) findings were observed for Aboriginal and Torres Strait Islander participants who played football this season vs those who did not. These individuals consistently recorded higher GAD-7 scores than others ($F=8.325$, $df=1$, $p<0.001$). Although GAD-7 scores were statistically higher for all participants when the season was cancelled ($F=11.335$, $df=1$, $p<0.001$), this was markedly worse for Aboriginal and Torres Strait Islander responders who did not play this year (Season x ATSI effect: $F=7.712$, $df=1$, $p=0.006$). Thus, not being able to play football in the 2020 football season was associated with a highly significant increased (GAD-7) anxiety score in Aboriginal and Torres Strait Islander -identifying individuals in contrast with both (i) Aboriginal and Torres Strait Islander individuals who did play and (ii) non-Aboriginal and Torres Strait Islander individuals. The magnitude of the change in depression score is also clinically significant.

GAD-7 Score according to Season Played and Aboriginal or Torres Strait Islander status



Substances / Q33 - 36

Introductory

This section investigates the substances (alcohol and drugs) used by the country football community throughout 2020. Whilst the question around drugs may be awkward and may not have always been answered accurately, it was hoped to see some patters immerge between those who played football in 2020 and those who did not.

Q33 During this football season, approximately how many standard drinks did you consume in an average week? (A standard drink contains 10 grams of alcohol e.g. 285mL of full-strength beer, 100mL of wine, 30mL of spirits etc.)

	Total	Playing 2020	Non-Playing	40+
0:	35 (8.75%)	10 (6%)	12 (10%)	13 (12.5%)
1-5:	141 (35.25%)	62 (36.5%)	41 (33.3%)	38 (37%)
6-10:	103 (25.75%)	42 (25%)	33 (27%)	24 (23.5%)
11- 20:	79 (19.75%)	36 (21%)	28 (23%)	15 (14.5%)
20+:	42 (10.25%)	19 (11%)	9 (7.5%)	13 (12.5%)
Blank:	108			

Q34 During this football season, approximately how many days per week did you consume alcohol?

	Total	Playing 2020	Non-Playing	40+
0:	35 (8.75%)	9 (5.5%)	11 (9%)	14 (13.5%)
1-2:	187 (46.75%)	84 (50%)	64 (52%)	38 (37%)
3-4:	124 (31%)	56 (33%)	33 (27%)	33 (32%)
5-6:	39 (9.75%)	13 (7.5%)	11 (9%)	14 (13.5%)
7:	15 (3.75%)	7 (4%)	4 (3%)	4 (4%)
Blank:	108			



Q35 During the past 3 months, which of these illicit drugs have you consumed?

Drugs*	Yes	Playing 2020	Non-Playing	40+
Methamphetamines:	2 (0.5%)	2 (1%)	0	0
Cannabis:	34 (8%)	19 (10.5%)	12 (9%)	3 (3%)
Cocaine:	13 (3%)	7 (4%)	6 (4.5%)	0
Ecstasy:	21 (5%)	11 (6%)	10 (7.5%)	0
Prescription drugs not prescribed to me:	14 (3.5%)	4 (2%)	8 (6%)	2 (2%)
None:	331 (79%)	140	94	97
Blank:	115			

Q36 During the past 3 months, approximately how many days per week did you use illicit drugs on average?

	Total	Playing 2020	Non-Playing	40+
0:	350 (89%)	143	106	98
1-2:	38 (9.5%)	21 (12.5%)	13 (10.5%)	3 (3%)
3-4:	2 (0.5%)	0	1 (1%)	1 (1%)
5-6:	2 (0.5%)	1 (0.5%)	1 (1%)	
7:	2 (0.5%)	2 (1%)		
Blank:	114			

Findings

The *Substances* section of the report is the section that least reflects a positive correlation between those playing or not playing and the subsequent behaviours.

There doesn't seem to be strong correlation either way between respondents playing and not playing and their alcohol and other drug consumption. Rather the patterns seem to be around location and subsets. See further analysis of subsets undertaken later in this report.

It was pleasing to see players respond honestly to the Drugs section albeit with only 11% of respondents indicating that they used drugs in the past three months, it was hard to detect any patterns of drug use apart from a strong leaning to the under 40 age group. Cannabis was the most significant drug used with 8% of respondents using. There was also a high number of respondents who avoided this section.

*Some respondents ticked multiple drugs which is why the numbers provided may look higher than actual respondents.

Final Comments / Q38 - 40

Introductory

The final section of the survey allowed respondents to provide feedback to three questions regarding their club and the current situation. Below are ten interesting answers from each question.

Q38 What works well about country football? (What is the best thing about your country football club?)

- It brings people together and gives people a purpose. A team sport is about life and the friends and experiences last a lifetime. Most importantly is the support that is given because of the TEAM environment.
- the sporting family it creates and the ability to support everyone not just players through good and bad.
- It plays a big part in social gathering for everyone to get out have a catch up and watch a group of people play awesome footy.
- Mateship, community, togetherness.
- We have a good team where young boys/ men can play football & represent their community.
- It brings the community together! And have friendships with people that last a lifetime.
- The friendships that you build, the sense of belonging that you have with your club where you always have friends to support you during difficult times.
- The community and support. There is much more there than people think.
- Sense of belonging.
- The best thing about our football club is the way our players can mix and associate with each other during the week and also on the weekends. It also keeps everyone fit and healthy.

Q39 Please make suggestions for what you would like to change about country football. (What would you like to change about your country football club?)

- All Saturday Football.
- More support from our local shire so it doesn't cost a fortune to run the club allowing us to spend more on sporting equipment and fun days etc for the people.
- Change the way we approach training & getting together in our football club.
- Less alcohol at the grounds so there's less trouble and everyone's heads home safely.
- Try and get more people to volunteer as the same people do the same jobs every year and it takes its toll.
- Not so many paid players or players from other towns.
- Juniors playing on the same day, creates a better environment for the younger people and more people would hang around
- They should have gone ahead with footy even if it was modified a bit (shorter season).
- At least win a game.
- Pretty disappointing we didn't play a season this year. Too many people have been bored as hell with no footy and drinking too much and getting fat!

Q40 Do you have any other comments?

- Government both State and Federal understand the importance of Sport to the well-being of communities. Investment from all of Government into facilities and structures that ensure sport, particularly Football, to be played in all of our communities.
- I hope this survey shows how important not only country football, but all sports are to the country town communities.
- Mental health has definitely had a raised profile over the last decade which has been great. Perhaps team chaplains might help if there are willing people.
- AFL game in general across the Western Australia inland and northern regions is missing out on plenty of talent due to a lack of funding training camps etc.
- Our town's club is in the worst position I have ever seen it.
- Football and other sports are the life blood of community. I also assist in Junior sports and it has been huge for juniors to be able to play this year. This brings a great deal of personal satisfaction.
- I think the Leagues that took the option to close this year let a lot of people down and will find it very difficult to resume at the same level as before.
- We have been very fortunate to have our football season run so smoothly and hope we can continue this into the future.
- Great survey great topic would love to discuss this a lot further as it is dear to my heart. Given I am Bi-Polar.
- I personally believe sporting clubs have a huge role to play in the overall health of country towns. Being all age group / gender inclusive means, everyone has an opportunity to get involved/participate as much as they are willing to. The greater the effort the greater the reward for the whole community.

Findings

When reading all feedback, the words 'community', 'family' and 'friendships' continued to emerge further demonstrating the strong role that country football clubs have in providing the critical social interaction and sporting endeavour needed to keep the young participants physically and mentally healthy.



SPECIAL THANKS

The COVID-19 Survey and the subsequent report could not have been possible without the help of the following individuals and agencies:

- WACFL Players who courageously partook in the survey;
- Young Lives Matters Researchers and support staff;
- The WACFL Executive for their support of this project;
- University of Western Australia Media team;
- Samantha Tough, UWA Pro Vice Chancellor Engagement for helping bring the project to life;
- Robbie Glyde- UWA Student who coordinated the survey and data collation phase;
- WACFL staff who administer Country Football competitions in Western Australia and approved the survey;
- WACFL Leagues & Clubs who promoted the survey to their players;
- Media agencies who promoted the survey;
- UWA Ethics Department;
- COZ Marketing Pty Ltd for conceptual design, promotion and execution;
- John Georgiades for strategic guidance;
- Photographic image providers; and
- Yvette Ricciardello for her graphic design.



APPENDIX

SUMMARY OF FINDINGS

Findings Q. 8-10

272 surveys answered 'Yes' to question 10 and 195 surveys answered 'No'. Refining these numbers further to 'players' numbers (under 40 y.o.) were 156 'Yes' and 124 'No'.

There was a fairly even spread of respondents from amongst clubs and regions.

Findings Q. 11-14

A large number of respondents (72%) who were unable to play football due to COVID-19 answered that not running a competition in 2020 had a negative impact on their community with 26% answering that it had had a very negative effect on their community.

64% of respondents of Question 12 indicated that a football club was 'very important' to the health of their community. Overall 3% of respondents answered that a club was not important to their community and 97% indicated it was important. Respondents not playing in 2020 trended to respond less favourably than those currently connected to their club through having matches and training in 2020. This suggests there may be a loss of connection to the Club for respondents who didn't play in 2020. There also seemed to be a greater appreciation of the role the Club plays in the community the older we get as the 40+ year old's responses were the strongest of the three subsets.

The connection between playing football and physical health was appreciated most strongly by those playing in 2020. 59% of respondents of Question 13 indicated that a football club was 'very important' to their physical health. This number was 62% for those playing in 2020 and 55% from those who did not. Overall 6% of respondents answered that a club was not important to their physical health and 94% indicated it was important.

57% of respondents of Question 14 indicated that a football club was 'very important' to their mental health which was slightly less than a similar question on physical health. Overall 8% of respondents answered that a club was not important to their mental health and 92% indicated it was important. Respondents 40+ saw the most benefit to their mental health through participating in a football club and those not playing in 2020 were significantly lower than those that did.

Findings Q. 15-18

23% of respondents answered that they would stop playing sport all together if their Club folded, 2% said they would move to another town if their club folded.

Question 18 indicates the emotional connection respondents felt towards their club and indicates a very positive emotional feeling to Clubs by respondents. 79% (almost 4 out of five) of respondents answered “Strong” or “Extremely”.

Only 5% indicated a loose (the lowest answer) connection to their club with the remainder marking ‘average’ or stronger. We can see from the data a significant difference in the levels of connection from those playing in 2020 and those who did not.

Findings Q. 19-22

In Question 19, a large portion (61%) of respondents indicated that they felt comfortable ‘Moderately’ or ‘Very’ speaking to teammates about serious challenges they were going through. One in five (19%) of respondents indicated they felt uncomfortable (‘Slightly’ or ‘Very’) speaking to others. Participants that played football this season stated that they were more comfortable talking to members of your football club about serious challenges they were going through than those who did not play this season (U=117965, p=0.012).

Question 20 asked a similar question around supporting teammates going through a tough time. 89% of respondents indicating that they felt comfortable (‘Moderately’ or ‘Very’) supporting teammates going through a serious challenge. The highest of the three subsets above was respondents who played in 2020 which is a positive benefit from playing football. 50% of total respondents were ‘Very Comfortable’ which is a positive primer for providing players more information. 5% of respondents indicated they felt ‘Uncomfortable’ which is a potential opportunity for improvement. On average, those who played this season stated that they were “very comfortable” (median = 5) doing this, whereas those who did not play were on average only “moderately comfortable” (median = 4).

Question 21 asked respondents if they felt the club could do more to educate and support their community. 73% of respondents indicating that they felt positively (‘Probably Yes’ or ‘Definitely Yes’) towards the club playing a positive role here. 6.7% were unsupportive.

Question 22 drilled down into the respondent’s preparedness to learn more through the football club. 61% gave a positive response with 24% (nearly one in four) indicating they would ‘Love’ to. The over 40+ age bracket marked 36% that they would ‘Love’ to learn more about issues through the Club. 7% gave a negative response.



Findings Q.23

18.5% of respondents travelled over 400kms per week to participate in football matches and training. Data suggests that Wheatbelt and North West Leagues are the most significant travellers to partake in football in the state.

Findings Q.24-28

Question 24 indicated that 80% of respondents only occasionally or less focused on exercises to improve their mental health. 43% indicated that they never did.

Question 25 shows that 46% of respondents were heavier than last year. An additional 14% of players who did not play football in 2020 due to COVID-19 had put on weight since last year with an additional 3.5% stating they are much heavier than respondents who played. This suggests there is a strong link between playing football and physical health. Respondents had gained more weight where their season was cancelled ($W=22803$, $p=0.024$).

Question 26 shows that whilst 28.5% of respondents who played in 2020 indicated their physical health was worse than last year, this number was alarmingly 27% higher (55.5%) for respondents who were not playing. It was also 11.5% higher for the 'Much Worse' answer. There was a significant difference for those who played this season vs those who didn't ($U=15100$, $p<0.001$).

Question 27 shows that 19.5% of respondents who played in 2020 indicated their mental health has deteriorated from last year. 37.5% of respondents who did not play football in 2020 indicated that their mental health was worse than last year with 14.5% of respondents in this category indicating it was 'Much Worse' compared to 1.5% in the Playing subsection. This is a strong indication that players have struggled without having football played in 2020 ($U=15794$, $p<0.001$).

Players who played in 2020 were slightly more positive about their futures than those who did not albeit the data indicates the overall community has been fairly resilient to the impacts of COVID-19 experienced in regional WA.





Findings Q.29-30

COVID-19 doesn't appear to have had too much impact on the bulk of the players work commitments with the main interruption resulting in the loss of hours (12%) and loss of jobs (4%).

Findings Q31

Overall – most responders (58%) rated as having minimal depression. There appears to be a definite margin between those who played and did not play and them being either minimally or severely depressed in favour of playing football as a mental health protective factor.

Comparing whether or not the respondent played this season, respondents scored significantly higher on the PHQ-9 if they did not play this season ($t=2.527$, $df=261.436$, $t=0.012$). No respondent who played this season rated as severely depressed; this rating was only seen in those who did not play this season.

Overall, women recorded higher PHQ-9 scores than men ($t=2.296$, $df=85.681$, $p=0.024$). On average, women rated as having mild depression whereas most men rated as minimal depression ($U=12024$, $p=0.014$). Women consistently recorded higher PHQ-9 scores than men ($F=7.463$, $df=1$, $p=0.007$). Scores were statistically higher for all participants when the season was cancelled ($F=4.38$, $df=1$, $p=0.037$), but this did not also vary by sex ($F=0.011$, $df=1$, $p=0.915$).

Aboriginal and Torres Strait Islander identifying participants recorded higher PHQ-9 scores than other ethnic groups ($t=2.456$, $df=14.288$, $p=0.027$). On average, these responders rated as having mild depression whereas most non-Aboriginal and Torres Strait Islander responders rated as minimal depression ($U=3741$, $p=0.003$). On average, PHQ9 scores for ATSI responders (mean = 9.87) was about double that for non-Aboriginal and Torres Strait Islander (mean = 4.49).

Striking depression (PHQ-9) findings were observed for Aboriginal and Torres Strait Islander participants who played football this season vs those who did not. These individuals consistently recorded higher PHQ-9 scores than others ($F=19.233$, $df=1$, $p<0.001$). Although PHQ-9 scores were statistically higher for all participants when the season was cancelled ($F=17.725$, $df=1$, $p<0.001$), this was markedly worse for Aboriginal and Torres Strait Islander responders who did not play this year (Season x ATSI effect: $F=12.674$, $df=1$, $p<0.001$). Thus, not being able to play football in the 2019-2020 football season was associated with a highly significant increased (PHQ-9) depression score in Aboriginal and Torres Strait Islander - identifying individuals in contrast both (i) Aboriginal and Torres Strait Islander individuals who did play and (ii) non- Aboriginal and Torres Strait Islander individuals. The magnitude of the change in depression score is also clinically significant – it's about the same as the effect that one would expect to see with an antidepressant medication.

Depression and Suicide

We conducted a post-hoc analysis of PHQ-9 item 9 (“Thoughts that you would be better off dead or of hurting yourself in some way.” within the past 2 weeks).

Overall, 91.5% of participants did not have any suicidal or self-harm thoughts in the fortnight preceding the survey. **88% of those who did not play this season have never had suicidal or self-harm thoughts, in contrast to 93% of those who did play.**

Those who did not play scored significantly worse on this measure of suicide and self-harm thoughts (U=20331, p=0.046). No participant who played football this season self-rated the most severe item (self-harm or suicidal thoughts nearly every day), in contrast to 3 survey participants whose season was cancelled.

Over one quarter (26%) of Aboriginal and Torres Strait Islander responders had some level of self-harm / suicidal thoughts, in contrast to less than one-in-ten (7%) of non- Aboriginal and Torres Strait Islander responders; this difference was highly statistically significant (U=3286, p = 0.006.

Women consistently recorded a different distribution of PHQ-9 item 9 (suicide or self-harm) scores than men (U=18184, p=0.023), however no clinically meaningful difference could be determined from our dataset.

Findings Q. 32

Over 2/3 of responders (69%) rated as not at all anxious. **The combined percent of respondents who had ‘Moderate’ to ‘Severe Anxiety’ based of the GAD-7 test results was 7% for respondents who played in 2020 and 16% of those who did not.**

6 respondents who didn’t play in 2020 results indicated they had severe anxiety as opposed to one who did play, despite the “playing” sector having 56% more respondents.

Comparing whether or not the respondent played this season to their GAD-7 results, respondents scored significantly higher on the GAD-7 if they did not play this season (t=2.349, df=258.935, t= 0.020) meaning they were experiencing higher degrees of anxious tendencies and behaviour.

Women recorded similar GAD-7 scores to men (F=0.894, df=1, p=0.345). There was no interaction observed between sex and season cancelled on GAD-7 scores (F=0.006, df=1, p=0.939).

Striking anxiety (GAD-7) findings were observed for Aboriginal and Torres Strait Islander participants who played football this season vs those who did not. These individuals consistently recorded higher GAD-7 scores than non- Aboriginal and Torres Strait Islander (F=8.325, df=1, p<0.001). Although GAD-7 scores were statistically higher for all participants when the season was cancelled (F=11.335, df=1, p<0.001), this was markedly worse for Aboriginal and Torres Strait Islander responders who did not play this year (Season x ATSI effect: F=7.712, df=1, p=0.006). **Thus, not being able to play football in the 2019-2020 football season was associated with a highly significant increased (GAD-7) anxiety score in Aboriginal and Torres Strait Islander identifying individuals in contrast with both (i) Aboriginal and Torres Strait Islander individuals who did play and (ii) non- Aboriginal and Torres Strait Islander individuals. The magnitude of the change in depression score is also clinically significant.**

Findings Q 33-36

The *Substances* section of the report is the section that least reflects a positive correlation between those playing or not playing and the subsequent behaviours.

There doesn’t seem to be strong correlation either way between respondents playing and not playing and their alcohol and other drug consumption. Rather the patterns seem to be around location and subsets.

11% of respondents indicating that they used drugs in the past three months, it was hard to detect any patterns of drug use apart from a strong leaning to the under 40 age group. Cannabis was the most significant drug used with 8% of respondents using. There was also a high number of respondents who avoided this section.

Findings 38-40

When reading all feedback, the words ‘community’, ‘family’ and ‘friendships’ continued to emerge further demonstrating the strong role that country football clubs have in providing the critical social interaction and sporting endeavour needed to keep the young participants physically and mentally healthy.



Family - Club & Social. **Feeling that it is a big family community.** The football club is always a safe and friendly environment where you can hang out with family and friends. **The socializing aspect.** Being a part of a team and catching up with friends. **Feeling like I belong.** Great place to make friendships and stay fit. **Everybody volunteers and it is not difficult to find people to contribute.** There is a real team spirit within the club, and we pride ourselves on being like an extended family. **Getting the community together.** Feeling a part of something bigger than myself. **Being able to let any troubles go for a while.** The mateship. **A feeling of being part of a club.** Circuit breaker from the weekly grind. **Brings people together for a common goal and social interaction.** It is the ability to meet people you would never normally meet in everyday life, in fact some become your lifelong mates. **Keeping fit.** The past and present players are very welcoming and always good for a laugh or a chat. **The social side.** The country club environment. **Bringing all walks of life together.** Having a beer with your mates talking. **Being part of a local team builds pride in our community.** Club & family involvement. **It really brings guys together that would otherwise not get a chance to meet.** It also allows our local FIFO population to integrate into our community. **Social group, getting around the club. Keeping fit.** The town really gets behind it. **It features in the newspaper, it helps me build connections in the community, it develops my skills, fitness and weight loss.** Sense of community and friendship group. **The members and the coaches are friendly and encouraging.** The people, good level of competition. **Mateship.** Connection with mates of different age groups and a place to feel a part of something good. **Community engagement.** The social aspect - team connection. **Creating a safe and family-oriented environment.** A place to work on yourself physically and mentally and being around a big group of diverse personalities to socialise and enjoy good times with footy club = family. **The best thing about my football club is the culture and how everyone is accepted into the club.** It's like one big family. **The social interactions with people.** How it brings people out of their workplaces such as tractors and farms into a club to catch up. **It's gives me time to forgot everything else.** The family you make within the team. **The community feel and the way it brings country towns together.** People keep playing at country clubs not because of the football itself but the culture at clubs, particularly the club I belong to, and the social scene. **The community & social interaction.** My team is like a family that I can always trust to be there. **The coming together of mates near and far and meeting new people that get involved.** Community gets behind us; everyone supports local competitions, and this means a lot to the players. **Being able to just do something for my fitness and have a little fun.** The uprise of the youth in the senior football club, and the success of the junior club. Brings the community together. **The people on the committee, the volunteers. Hardly any egos or club favourites.** Easy going nature. **Connection with the public and the locals and also the life members.** It's got a great vibe where you can come together and just play. **It brings the community together & helps others not part of our club.** We like playing football for fun. **Connection with mates.** Atmosphere and comradery. **We have a welcoming club that invites its members to have an opinion about how they feel like the club and how owe organisation can be improved.** Members are given a voice. **It's very friendly and they make you feel welcome.** The environment, everyone will know everyone. **Social side of it.** Meeting new people. **Able to see my friends.** The culture and always feeling a part of a team and club. **The support and care everyone has for each other, especially in times of need.** Culture. **The inclusivity it brings to the community.** People coming from an hour away to train and having a core group of people to hang out with. **Just getting around your mates.** The connectiveness of each team within the club. **The ability to come together and support each and every individual as if we were a big family as well as playing some awesome footy.** We have a great family club which brings new people down to the track, make great mates on field and off the field. **Providing a healthy sporting option for all ages & bringing community together.** Gives me something to look forward to and mateship. **Connection to not only my community but neighbouring communities.** Friendship, family atmosphere, networking being able to talk to people who understand personal and business issues plus with the increasing number of travelling players getting to meet people from different backgrounds gives you a better perspective on the wider community. **Once a commitment is made to be a part of footy and even the days when you can't be stuffed you still make the effort to go to training, games, busy bees and I've never regretted attending after initially not feeling up to going, the exercise and follow up socialising with mates is always a good thing.** Social and supportive. **The social aspect.** Running around having fun and then sitting down for a beer afterwards is great. **Saturday's there's camaraderie and teamwork that bonds blokes.** Community relations and common interest. **Belonging to a tribe.** The community, parents and love for Football. **Good crew for socialising, outlet form work/family, burn off energy & fitness in.** Female side integrating into club. **It's the highlight of the year, it brings the community together.** Lifelong friends and support are made at our club. **I have a joke and laugh on the field with the opposition too and don't take it too seriously.** The best way to meet and mingle with members of the community. **Very family orientated which is very appealing.** Socially brings a town together sense of town spirit and sense of belonging to a bigger group and creates new bonds and friendships. **The way in which playing football enables you to meet new people and form friendships.** With no football this year I had little to no contact with the vast majority of my teammates. **Sense of community.** Camaraderie and good family club. **The comradery and the mateship we all have with one another, not matter what grade we play in everyone is on the same level and look out for one another.** The best thing about our football club is the way our players can mix and associate with each other during the week and also on the weekends. **It also keeps everyone fit and healthy.** Exercise, having lots of acquaintances in the community. **Bringing community together.** Going to the pub after the games for dinner and to socialise. **It feels like a family and when you go into the club rooms and know everyone in there you feel comfortable and not out of place.** Play with all your friends and enjoying a beer and a laugh after the game. **See your mates on a regular basis for social interaction.** It also brings families together in smaller communities. **Gives the opportunity to help with younger generation through coaching from senior players.** Inclusiveness, community connection, social interaction. **Bringing people together from all demographics.**

The boysssss!

It feels like one big family.