Résumé

« Je ne peux pas imaginer ma vie sans ça! »
Le curling et la promotion de la santé :
une étude réalisée à l’aide
de la méthode photovoix

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Le curling est un sport très pratiqué dans les campagnes canadiennes, et nombre de femmes s’y adonnent. La santé des femmes en région rurale est plus à risque, comparativement à celle des femmes en milieu urbain, mais peu d’études se sont penchées sur les façons de promouvoir la santé de cette population. Cette étude examine l’influence du curling sur la santé des femmes des collectivités rurales. Un échantillonnage de 15 femmes et filles âgées de 12 à 72 ans et vivant dans deux communautés du sud-ouest de l’Ontario ont pris des photos, tenu un journal de bord et participé à deux rencontres en groupe pour discuter des effets du curling sur leur santé. Les résultats indiquent que le curling facilite les liens sociaux, améliore la santé physique et mentale, et constitue un soutien reconnu et visible en milieu rural. De toute évidence, le curling favorise, de façon significative, la santé et la vie collective des femmes de ce milieu. Il faudrait donc promouvoir davantage cette activité dans les collectivités rurales et étudier plus en profondeur la question du curling et de la santé des femmes dans ces communautés.

Mots clés : sport, curling, méthode photovoix
The sport of curling is an important activity in rural Canada, with many female participants. The health of women in rural Canada is much compromised compared to that of their urban counterparts, yet little research has explored ways to promote the health of rural women. This study examined the influence of curling on the health of women in rural Canada. A sample of 15 women and girls aged 12 to 72 from 2 communities in southwestern Ontario took pictures, kept logbooks, and participated in 2 group sessions to discuss the influence of curling on their health. The findings reveal that curling facilitates social connections, enhances physical and mental health, and provides a valued and visible way to support rural life. Clearly, curling promotes the health and community life of rural women in significant ways. More support for curling in rural settings is needed, and additional research on the topic of curling and the health of rural women is indicated.

Keywords: rural women’s health, sport, curling, photovoice

Women are the backbone of rural communities, essential to ensuring their health and sustainability (Sutherns, McPhedran, & Haworth-Brockman, 2004). Rural women often carry a triple or quadruple workload as they care for families as well as infirm and older community members, are employed off and on the farm in economically struggling agricultural communities, and contribute to, and often sustain, rural organizations and activities (Coward et al., 2006; Kubik & Moore, 2003). As a result of these heavy commitments, rural women are often isolated from friends and relatives. Small and decreasing rural populations limit social supports, which can further contribute to a sense of isolation and to mental health issues (Canadian Institute for Health Information, 2006; Keating, 2008). Furthermore, limited resources in rural settings restrict women’s ability to deal with health issues and promote their health (Leipert, 2010).

Engaging in recreation and team-sport activities may be one way for rural women to obtain practical, emotional, affirmational, and social support (Trussell & Shaw, 2007). As rural women tend to prefer social support and health advice that is provided by known others (Leipert &
George, 2008), the community contact afforded by curling clubs can increase access to social and other supports that advance the health of rural women, families, and communities.

While the role of sport and recreation in fostering social capital, health, and community development has been relatively well explored (Harvey, Levesque, & Donnelly, 2007; Seippel, 2006), the particular context of rural is much less studied. In one of the few studies of rural sports organizations, investigators in rural Australia found that sport and recreation were critical for community survival by providing “a sense of unity, by being a social leveler, by fostering a sense of trust, and contributing to social cohesion” (Townsend, Moore, & Mahoney, 2002, p. 4). Indeed, research into rural recreation has shown that “sporting clubs are usually the last organizations to fold in small declining communities, often lasting longer than local shops, pubs and churches” (Tonts, 2005, p. 142). Thus, despite demographic change and economic strain in rural areas, sport and recreation remain important. Benefits include opportunities for physical activity and social interaction, increased community pride, and a mentoring system for young and old alike to remain engaged (and residing) in rural communities (Mair, 2007, 2009). However, challenges such as the withdrawal of government support for sport and recreation have caused dramatic change, and responsibility for maintaining rural facilities has thus increasingly fallen on the shoulders of community members (Churchill, Plano Clark, Prochaska-Cue, Cresswell, & Ontai-Grzebik, 2007; Warner-Smith & Brown, 2002).

In addition, the role of recreation, leisure, and sport in the lives of rural women is dramatically understudied. A few researchers have explored rural women’s involvement in sport and leisure and the extent to which their involvement has been shaped and limited by domestic roles such as child care and ideologies of wifehood, motherhood, and femininity (Aitcheson, 2003; Thompson, 1990). Thompson (1990) shows, for example, that women’s traditional labours of cooking and cleaning are often transferred to sports facilities and clubs through the expectation that women will provide home-made foods for concession areas and social events. In addition, women’s poorer access to funds and playing time, relative to men’s, indicates that they may be less able to pay league fees for ice time and to have the time to curl due to child care and other family responsibilities. Thus the traditional gendered understandings and expectations of women and their roles typical of rural settings can result in limited sport options and experiences, with concomitant effects on women’s physical, mental, and social health. However, exploration of rural women’s health as a consequence of their experiences with sport in
general and curling in particular is an area of research that has received virtually no attention.

This study focuses on the influence of curling clubs on rural women’s health for four important reasons. First, assessing the specific case of rural curling clubs (more than 60% of Canada’s curling clubs are located in communities with fewer than 10,000 people; Canadian Curling Association, 2004) provides a comprehensive snapshot of rural recreation activities across the country, a topic important for health and about which very little is known. Second, despite its long history in Canada (the first organized club in North America was the Montreal Curling Club, founded in 1807; Maxwell, 2002), few researchers have investigated the role of the curling club in small communities or the social and health aspects of the sport. Third, the study of curling is important in determining if and how factors such as lack of finances, an aging club membership, and volunteer burnout affect rural health (McConachie, 2007). Fourth, recent newspaper reports (e.g., McConachie, 2007) suggest the need to research the effect of factors such as decreasing numbers of rural women curlers and women’s balancing of family and community responsibilities on their participation in the sport.

The purpose of the study was to (1) examine the influence of curling and curling clubs on the social lives and health of rural women using photovoice, (2) explore how curling activities and meanings differ for women across selected diverse rural settings in Canada, and (3) determine how sport and recreation are to be understood within the contexts of gender and community change in rural areas. This ongoing national project is being conducted in Nova Scotia, Ontario, Manitoba, and the North West Territories. The Ontario data are presented here; data from the other research sites will be published when available. In this study, a rural community is defined as a population living outside a municipality of 10,000 or more residents (du Plessis, Beshiri, & Bollman, 2002).

Method

The study was informed by social capital (Lauder, Reel, Farmer, & Griggs, 2006) and feminist concepts and approaches (Olesen, 2000). Social capital, by exploring the nature of associations that express trust and reciprocity, can facilitate community participation in health promotion activities and bridge divides between policy-makers, practitioners, and academics. A feminist approach informs an understanding of rural women’s social lives and health in terms of power and control as these relate to personal and collective health, and the individual, sociocultural, economic, and contextual factors that influence health.
**Design**

Photovoice methods guided the design of the study. Photovoice, an innovative participatory qualitative research method that was originally designed for research with rural women (Wang, Burris, & Ping, 1996), gives study participants an opportunity to use cameras and logbooks to discuss information relevant to their communities and the study’s purpose. Photovoice photographs can act as a catalyst for discussion, visually document situations that are difficult to describe (such as rural isolation), and promote the empathy and understanding (“A picture is worth a thousand words”) that foster social change (Leipert, 2010; Wang & Burris, 1997).

**Setting and Sample**

Ethical approval was received from the University of Western Ontario. Women were recruited from curling clubs in two rural communities in southwestern Ontario selected for their extended distance from urban centres and their small populations. The two communities had populations of 1,200 and 3,000 and were more than an hour’s drive, over isolated roads, from the nearest urban centre. Inclusion criteria were being female and being a present or past member of a curling club in a rural setting.

**Data Collection**

Participants provided written informed consent and then took part in picture-taking, logbook recording, and two group interview sessions in their community. Both sessions were audiorecorded. In the first, the orientation session, which lasted about 1 hour, each participant was given a disposable camera, received instructions in its use, and was requested to take pictures depicting roles played by curling clubs as sport and community places for rural women and how curling and curling clubs influence the health of rural women. Participants were asked to provide a Letter of Information to and obtain written consent from individuals whose pictures they wished to take. Each participant was also provided with a notebook to keep a log of what was photographed and any other data relevant to the study. One week after receiving these materials, participants were contacted to support progress. Logbooks and cameras were retrieved 2 weeks after distribution. Print and digital versions of the photographs were made for the researchers; duplicate prints were made for the participants.

In the second, 2-hour, group session, each participant selected from her own prints two pictures that represented the role and significance of curling and curling clubs for rural women’s health and social life. These
pictures formed the basis of the subsequent discussion. Participants were also asked to title the two pictures as a way of obtaining their meaning and significance. Probes encouraged elaboration and clarification by the photographer as well as by the other participants. At the end of the session, participants completed a brief sociodemographic survey.

Further data collection occurred as the researchers visited rural curling rinks and engaged in conversations about physical and sociocultural aspects of the rink, such as the roles of women and others, how the rink was used, and the effects of use on the social lives and health of rural women. These researcher observations and perspectives were recorded in field notes and included in the analysis.

**Data Analysis**

During the second group session, the participants took part in the analysis by selecting, contextualizing, and codifying their photographs (Wang, 1999). In selecting, participants choose to talk about the two pictures that they find most significant. In contextualizing, participants take a critical stance on their pictures based on the acronym SHOWNED: What do you see here? What is really happening here? How does this relate to our lives? Why does this facilitator or barrier exist? What can we do about it? In codifying, participants discuss “issues, themes, and theories that arise from their photographs” (Wang, 1999, p. 188).

Logbooks, audiorecordings of group sessions, and field notes were transcribed verbatim and then analyzed by a minimum of two researchers using a content analysis process (Patton, 2002). Line-by-line reviews were conducted to identify and code key words and phrases regarding roles that curling clubs play as sport and community places for women (e.g., women as curlers) and how curling clubs influence rural women’s social lives (e.g., a place for socialization) and health (e.g., for recreation in winter). Themes and patterns were discovered within and across transcripts, participants, and the two settings. The qualitative computer program NVivo was used to assist with labelling and retrieving codes and themes during analysis (Ulin, Robinson, & Tolley, 2005). Descriptive statistics summarized the sociodemographic data.

The photographs were analyzed using a three-part procedure based on the work of Oliffe, Bottorff, Kelly, and Halpin (2008). In the first stage of analysis, preview, the researchers view participants’ photographs along with the titles and narratives about each to understand intended representations and to situate participants within the context of their photographs. In the second stage, cross-photo comparison, the researchers develop themes that are reflected in the entire collection of photographs. In the final stage, theorizing, the researchers may develop abstract understandings by linking themes to the theoretical framework of the study.
Rigour and Trustworthiness

To ensure rigour and trustworthiness, (a) the group sessions were audiorecorded and transcribed verbatim; (b) transcribed data were edited to accurately represent the recorded data; (c) research themes were based on participants’ perspectives, language, and pictures; (d) transcribed information and pictures were reviewed by a minimum of two investigators, to ensure interpretive rigour; and (e) an audit trail of raw data and analytical memos will be kept for a minimum of 7 years (Graneheim & Lundman, 2004).

Results

The sample comprised 15 girls and women aged 12 to 72. Three participants were aged 12 to 17, the majority \( (n = 8) \) being middle-aged (40–60 years; \( n = 6 \)) or older (65 and 72 years; \( n = 2 \)). Five participants lived on farms and 10 lived in one of the two towns that had populations of 1,200 and 3,000. Most were employed \( (n = 8) \). Curling experience ranged from less than 1 year \( (n = 1) \) to 16 years or more \( (n = 3) \), with the majority having curled 3 to 10 years \( (n = 8) \).

Participants took a total of 305 pictures. Analysis of these pictures and of the group and logbook transcripts gave rise to four themes related to the influence of and importance of curling for the health of rural women. Pseudonyms are used in the presentation of quotes by participants.

Facilitating Social Connections

The young women in the study said that curling fostered a sense of closeness with teammates and other women. One of the participants termed her teammates her “curling family.” Another young participant stated that the rink was like a “second home” due to the acceptance and support she felt there.

Curling also provided a rare opportunity for participants to connect with other women and men in the community. Mary, a woman in her thirties with four young children, said she looked forward to her weekly curling match as a way to connect with adults. “For women with little children in the house,” she explained, “between changing diapers, picking up after them, runny noses, bottles, colic time et cetera, it feels great to get out and have a more stimulating conversation.” Mary also valued curling as “a great bonding [opportunity] for women . . . one of the rare times rural women socialize with other adults on a personal level.” These comments and the accompanying pictures reveal some of the traditional roles, such as primary child-care provider, that rural
women still often play, and their valuing of the limited opportunities in small rural communities for social engagement, particularly with women.

The value of curling in offering opportunities for social interaction and camaraderie among the women and between the women and men curlers, who were often the participants’ husbands and partners, was also evident in the titles and logbook comments. Curling provided opportunities to interact before games, as teams gathered and chatted, and after games, when teams took part in the curling tradition of having a beverage together after a match. For participants who were employed, curling was also often a valued opportunity to share with their husbands and partners an enjoyable social experience. Laura explained: “Curling has been a great way for my fiancé and I to spend time together. We are both really busy with our jobs, but we look forward to Tuesday nights as a chance to get out of the house and have some fun away from work.”

In addition, curling on a weekly basis fostered not only closeness with partners but also connections with the community. Christine noted, “My husband’s not from the community and didn’t know anyone here... curling is the... way he got to know people in the community.” Laura, also new to the area, explained how curling helped her and her partner to integrate into the community: “We play together, we volunteer together. We have social times after the games together. It’s a great way to meet people as a new person to the community.” Facilitating social connections was especially important for those who were new to the area and worked full time, often in distant locations, and thus had few opportunities to socialize locally and become involved.

The nature of curling, whereby players of all ages, abilities, and backgrounds are accepted and welcomed (Maxwell, 2002), fostered the acceptance and involvement that participants enjoyed, valued, and remarked on. For example, Jennifer, a senior curler, noted the value of “stick curling,” where older players can use a stick to throw curling rocks, thus avoiding the need to bend down, which can be a problem with aging hips and knees. “[The stick] is a fabulous invention. I’m so excited about the stick because I know there’s [some of that experience] down the road [for me].” Teresa, a coach with the youth programs, revealed that the inclusivity of curling extended to children and the lesser abled: “[There’s] one little guy in our youth program... [who] doesn’t have full mobility... he can’t get down in the hack properly, so he sort of crouches, bent over, instead. But he’s such a curling enthusiast.” The inclusivity of curling was important in these rural communities, where populations were small and declining and where experience in the sport was varied. It fostered a sense of community and social cohesiveness, helping the small, isolated communities to remain viable.
Enhancing Physical and Mental Health

For several participants, their comments and emphatic tone of voice indicated that curling was vital to their mental and physical health in winter. Some participants described the physical exercises and stretching that they did to stay fit for the sport. One retired woman did 30 minutes of aerobics and 15 minutes of yoga daily to “keep [my] flexibility . . . and my muscles in shape for the rigours of curling . . . strong back, legs, and arms are important for curlers. . . . Most people find sports difficult in their senior years because they simply have not kept their bodies in shape.”

For all participants, especially the middle-aged and older women who formed the majority of the sample, and who often form the majority of rural residents (Keating, 2008), enhancement of physical health was a clear benefit. Most rural communities have few sport and fitness resources. Although hockey is prevalent in many rural communities, it is not a sport that women tend to take up. In addition, getting outside for exercise during the long winter months, when ice and snow increase the risk of falling and being injured, is not appealing and is even impossible in inclement weather. Thus, the opportunities for physical exercise that curling affords were most welcome. “Curling really motivates me to keep in shape,” said Jennifer. “It really does. It’s a big motivator.”

Curling enhanced participants’ mental health by giving them something to look forward to and be engaged in during the cold, dark days of
winter. This is especially important in rural settings where activities are confined by small populations and limited amenities. Chloe, a 13-year-old participant, said that curling “keeps you entertained if you don’t have anything to do.” Grace, aged 72, explained that curling “gives you something to look forward to, and as you get older you have less and less of those things.” Dolores was the mother of two teenage curlers who frequently took part in bonspiels (curling competitions) out of town: “If we didn’t curl, I would go nowhere all winter long.” These comments reveal that curling provides impetus to be active and involved in rural settings that offer few opportunities for interaction and involvement. In addition, curling gives women and families opportunities to curl in other communities, thereby widening the scope for social interaction and strengthening mental health.

In the larger of the two communities an improved economic situation and quality coaching for schoolboys led to competitive curling opportunities in other parts of the province. Participants noted the sense of pride that resulted when the home teams did well. Jennifer, aged 65, said, “I’ve curled for 40-some years, and to see what these young people [boys] can do in a short period of time is absolutely amazing.” Amelia, a 17-year-old, was inspired by the curling successes: “Seeing that on the ice makes you think that one day we could actually be [at the Olympics].” Photos similar to picture 3 were taken by several participants. These, together with their comments, reveal how curling served as a facilitator of pride and accomplishment — past, present, and future.
Thus curling can promote women’s health, affirm rural residents’ pride and confidence in their community, and provide inspiration and hope for the future.

Providing a Valued and Visible Way to Support Rural Life

The participants in the study found value in contributing to their communities; they realized that in small, isolated places the contributions of everyone are needed to keep the community viable and to keep programs such as curling available. Thus they frequently discussed and took pictures depicting ways that their participation at curling rinks contributed to community life. For example, a few weeks earlier the smaller town in the study (pop. 1,200) had hosted a provincial youth bonspiel, and the women were instrumental in hosting and catering for over a hundred competitors and their friends, families, and coaches, as well as spectators. Dorothy, an elderly club member and active community volunteer, described her experience of the event: “I wish I [had] . . . kept track of how many hours I actually put in. I know one day it was . . . almost 14 hours, just in one day, and that wasn’t even including any legwork that was done ahead of time . . . And that’s only with one club, and I like to volunteer for a lot [of organizations].” For a club with only 17 female curlers, hosting this event was a significant accomplishment, and the participants were duly proud.

Participants also took on major responsibilities in managing the day-to-day life of the rink. For example, Jennifer championed and arranged
the Friday-night, teen, and other league events each week, and Teresa and her husband taught the Little Rocks program every Sunday so that young curlers could learn the sport. These were impressive commitments, especially since Teresa worked full time during the week, making a daily round-trip commute of 3 hours in wintry weather on country roads, and Jennifer was heavily involved in many other community activities. These women were sustained by their belief in curling for building and nurturing the quality of community life, as indicated in picture 4 and the following comments: “The curling club is such a big part of the community, especially in a small, rural town like ours” . . . “community is important for mental health” . . . “sense of belonging and sense of being part of something — and the curling club itself is a community” . . . “we play together, we volunteer together, we have social times.”

Nonetheless, the participants’ work at the rink added greatly to the substantial volunteer work they took on in the community, and it resulted in overextension and burnout for some. Mary was a novice curler and a mother of young children: “[In] a small town, sometimes volunteers are hard to come by, so some women volunteer in many organizations. This leaves little time for anything else.”

Nevertheless, they wanted to keep the rink in their own community, in spite of challenges related to volunteering and a low rate of curling participation by community members. One study participant remarked, “Every community in the area . . . has a club. And everybody’s struggling for members and financially, so it’s sort of which club is going to last
longer and maybe pick up a few more members when the club in [the other] town closes, if we can last longer than them. Which is really unfortunate.” Carol, a frequent curler, cited one of the benefits of having a rink in her own town: “Well, if [the club is] in your town, you don’t have to drive a lot. It’s just convenient.”

Clearly, participants were very committed to their communities and to curling. They realized that in small communities a high level of volunteering was necessary to sustain services and programs.

**Curling as a Means of Enhancing the Health of Rural Women**

Participants valued curling highly for its promotion of and enrichment of social, mental, and physical health. However, they said that curling required more support by schools, the community, and the club itself if it was to survive and thrive in rural settings.

The young participants in one of the communities noted that coaching in the local secondary school (grades 8 to 12) was limited and tended to favour the boys’ curling teams. This focus on the boys’ teams may have been related to the fact that the boys had been quite successful in bonspiels throughout the province; several participants took pictures of these events and commented on the successes. Although usually a coach for the girls was available, apparently coaching was taken less seriously for the girls than for the boys. Study participants explained that the girls’ coaches did not require formal coaching experience or qualifications. Helen, the mother of a young female curler, revealed an ironic perception of the inadequacy of girls’ coaching: “You just need a warm body, really.”

Several women noted that learning to play in their youth helped them to continue curling, improve their skills, and return to the sport later in life. Mary was involved in the youth program, where several of her children played: “I think if there was more of a regular [youth] league . . . if boys and girls started younger and loved it, [it] would carry on to their adulthood.” In addition, youth curling provides an opportunity for socializing, which is important in rural settings considering the lack of social and recreational amenities. Helen was the mother of two teenage curlers: “I think it’s important for the kids because there’s not much to do in town. We have no theatre. If you’re not a hockey player . . . [you] can curl here every night of the week if [you] want, and then we do put [our son] in bonspiels . . . so we go away on weekends.”

Thus participants believed that coaching is important for all youths, including girls, and should be taken seriously in schools, whether or not the youths are competitively successful in their curling endeavours. They felt that better coaching in schools would give curling, with all of its health benefits, a better future as a viable sport for rural communities.
Other factors also affected the viability of curling in the two settings, and further highlighted the need for curling support. Participants noted that curling and hockey were the two major sports in their communities and that hockey competed with curling for the time, money, and dedication of community members (especially parents). They said that hockey often won out, with parents and children spending more time at the hockey arena than at the curling rink. Dolores, a mother of two teenage curlers, said that curling “is not a high-profile sport — always second to hockey.” In addition, the recent closure of a large factory had resulted in a loss of jobs and the movement of people out of the community. These losses of income and residents had lowered the number of people who could afford to or were available to curl. Furthermore, a community centre that had recently been built in the town offered indoor recreation facilities such as a weight room and a walking track; this appealed to many residents, both young and old.

As a result, participants in the study noted that curling club membership had been decreasing and therefore one club made the decision to reduce daytime curling hours. However, this decision served to reduce curling recruitment and retention, especially among older women, who liked to curl during the day. Recommended solutions included retaining the daytime schedule and seeking other sources of revenue such as local businesses or increasing membership fees. However, participants noted that raising fees might serve to exclude those with lower incomes, a growing issue in these communities. Teresa was a member of the club’s executive: “We were talking about whether the fee increase . . . [is] going to be too much for . . . seniors . . . We don’t want to lose seniors.”

Participants also noted that more media coverage and celebration of curling activities and victories would help to support the sport. They compared the “overabundance” of local and national hockey reporting to the meagre coverage of curling events. Thirteen-year-old Chloe commented, “Hockey’s promoted on, like, everything, on TV, anywhere . . . but they don’t have anything for curling.” A mother of young children noted, “You hear about the awesome hockey players in the NHL, and the kids look [up] to them . . . [This doesn’t happen] so much in curling.” Participants believed that local bonspiel winners should be given more prominence in local newspapers and schools, and that television should devote more coverage to curling events, especially women’s events such as the annual national Scotties Tournament of Hearts. Girls’ achievements should be acknowledged more as well, according to Amelia, a 17-year-old competitive curler: “Last year when [the boys] won all those things, they got put on the [school] announcements. When [the girls] won gold last year, it wasn’t even on the announcements at all. [But] at least they [the boys] got . . . recognition.” Participants saw local
coverage of curling as symbolizing the valuing of rural achievements and as reflecting pride in and commitment to rural communities and ways of life.

In summary, participants valued curling as important to their health and the health of their communities. They not only curled but also committed substantial time, effort, and funds to the support and enrichment of their curling club. Although the women’s commitments sometimes exceeded their resources, they nonetheless persisted in offering their services and looked for ways to further advance curling activities in their communities.

Strengths and Limitations

A strength of this study is its exploration of an important rural resource—the sport of curling—and the implications of this sport for the health of rural women and girls, which are understudied populations with many health challenges. A limitation of the study is that the research represents a small sample of women and girls in one Canadian province. We need more research in rural settings throughout Canada and in other curling countries to determine the health effects of and supports for curling among women and girls. Additional research methods, such as grounded theory, would facilitate our understanding of factors that affect curling among women and girls and the processes by which these two populations address issues and participate in curling to promote their health.

Discussion

There has been little research exploring the effects of curling—or any other sport or physical activity—on the health of rural women. This study provides important information, especially as the health of rural women is generally compromised and would significantly benefit from promotion activities (Leipert, 2005) and because curling is a popular sport in many rural settings (Maxwell, 2002). The results indicate that curling should be further developed as a health promotion resource for rural girls and women. Nurses, in their role as advocates, could help to promote curling in rural areas. In addition, similar to the participants in this study, nurses new to a rural community could participate in curling as a way to connect with and get to know the community, and vice versa (Best Start Resource Center, 2010).

However, several issues compromised the ability of the women in this study to benefit from the health promoting effects of curling. Work at home and in distant locations, the financial precariousness of many rural curling clubs, and the expectation of significant volunteering at the club and in the community limited the ability of some women to take up
curling — and indeed limited their interest in doing so. The changing nature of rural work and rural populations (Kubik & Moore, 2003), limited community and club finances (Mair, 2007), and considerable volunteer work, especially by women (Petzelka & Mannon, 2006), are common issues in rural settings. However, this study revealed that the smaller the community the greater the burden on club members to keep the club viable. For example, the smaller club had no manager or ice-maker, so members took turns filling these roles, thus adding to their volunteer responsibilities. However, their volunteering did provide participants with opportunities for identity-building and for profiling themselves publicly. As the contributions of rural women are often invisible and taken for granted (Kubik & Moore, 2003; Leipert, 2005), these opportunities can be significant, yet care must be taken to ensure that extensive volunteering does not add to the exploitation of rural women’s community commitment. In addition, participants noted that curling facilities are under-supported in small towns, which are dominated by hockey, a sport that women do not typically engage in. Given participants’ valuing of curling as a health promotion activity, the participation of rural girls and women in the sport needs to be taken seriously and supported more effectively.

Small, under-populated rural communities often lack the resources to address these systemic issues in ways that advance women’s health through curling. As with other issues related to women’s health in rural settings, such as insufficient health promotion (Leipert, 2010) and treatment services (Sutherms et al., 2004), provincial and federal support is needed. In addition, local governments and provincial and national sports organizations, such as Sport Canada and the Canadian Curling Association, could give curling clubs the kind of support that is provided to other rural recreational facilities such as hockey arenas and community centres. Such support could help rural curling clubs to develop policies and practices while meeting expenses and providing a valuable community resource.

Although the women in this study usually took primary responsibility for gendered activities, such as planning, preparing, and serving meals and cleaning up after club events, men assisted with some of these activities, especially the obtaining and serving of food. This sharing across traditional gender roles is promising and may indicate changes in other responsibilities that have been traditionally gendered, such as child care. Further research is needed to explore if and how women are supported in taking on curling roles that have been associated with men, such as board membership, ice preparation, and coaching.

The study found both immediate and long-term health benefits of curling. Immediate benefits include increased social contact, which facil-
icates mental health, and opportunities for physical activity, which improves physical health. Long-term benefits include a lifelong interest in and active participation in the sport and opportunities for community pride and enhanced self-esteem through competition, such as in provincial bonspiels and even the Winter Olympics. For girls from small towns and farms especially, local inspirational opportunities are rare. Rural settings tend to be traditional in terms of gender expectations (O’Lynn, 2010); thus a future that veers from expectations could provide alternative ideas and options for rural girls. In other curling countries, young people are supported in curling high schools, called curling gymnasia in Sweden (Katja Gillander Gadin, personal communication, May 8, 2010), where enriched coaching and curling opportunities serve to enhance competitive success and self-esteem. The development of enriched curling support in Canadian schools could also increase self-esteem and opportunities for girls in rural settings. More research in Canada and abroad, in countries such as Sweden, could deepen our understanding of how the mental and physical health of youths and women might be better promoted in rural curling contexts.

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