



# The therapeutic value of golf

A resource for health and social care professionals



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## INTRODUCTION

There are many contradictory beliefs about golf, and whilst this may seem like an unusual way to introduce a guide all about golf, this is exactly where we need to begin. For some people, golf represents beautiful sweeping courses, competition, and camaraderie. For others, there are connotations of exclusion, elitism and 'having to drag a bag of heavy clubs up a hill!'

In this guide we hope to demonstrate golf's therapeutic potential, highlighting when positively and pro-actively delivered, supported, and adapted, golf can present an excellent alternative sport for people who may historically have experienced barriers to participating in physical activity and accessing community spaces.

The starting point of this guide can be traced back to a research evaluation that united various partners in the collaborative design of a healthcare intervention within a golf club. Utilising [Golf in Society's](#) wealth of experience in providing golf sessions for individuals with cognitive decline and Sport for Confidence's expertise utilising Occupational Therapists to promote good health and prevent ill-health, the establishment of a community-based partnership seemed inevitable. This collaboration led to a research project aimed at fostering learning and growth. United by a shared objective of delivering preventative healthcare in a community setting and using physical activity as an intervention tool, the research project commenced.

The research evaluation report can be accessed here: [Sheffield Hallam University Report](#).

The co-produced service delivery plans can be accessed [here](#).

While the research served as the initial foundation, the substance of this guide is primarily derived from the experiences and contemplations of healthcare professionals actively involved in the yearlong program. Weekly reflections and documentation by these Allied Health Professionals encapsulated insights gained from both the program and the Sport for Confidence model. This guide translates their accumulated knowledge into a practical resource beneficial for fellow healthcare workers. Emphasising learning and reflection as integral program components, the aim was not only to enrich individual perspectives but also to foster connections, share insights, and facilitate mutual learning among peers nationwide. The overarching intention was to ensure that the guide encompasses a diverse range of perspectives.

*" Golf should be considered as a highly adaptable sport for people of all ages who may experience barriers to participating in physical activity and accessing community environments. "*

Occupational Therapist





This guide is a true collaborative process involving both online and in-person workshops. Clinicians involved in the program joined forces with individuals with age-related disabilities, drawing upon their firsthand experiences with golf as a health intervention, healthcare professionals and students and impassioned healthcare lecturers, all of whom share a profound commitment to recognising and harnessing the therapeutic benefits of physical activity.

The perspective of different groups are interwoven into this guide to create a narrative which compliments the evidence base explored throughout this guide, highlighting how golf should be considered as a highly adaptable sport for people of all ages who may experience barriers to participating in physical activity and accessing community environments.

The purpose, therefore, is to provide practitioners with a pragmatic and research informed guide emphasising the therapeutic potential of golf. This includes addressing broader issues that arise when connecting sports with health, such as overcoming stigmatisation in sports and cultivating a sense of belonging within communities and public environments that may have been perceived as inaccessible in the past.

Sport For Confidence have a 'no labels approach' and work with people who may experience barriers to participating in physical activity and accessing community environments.

Sport is used as a therapeutic tool and the healthcare professionals work with individuals to achieve their personal life/occupational goals. Increased physical activity is often a secondary outcome, i.e. not the primary goal.

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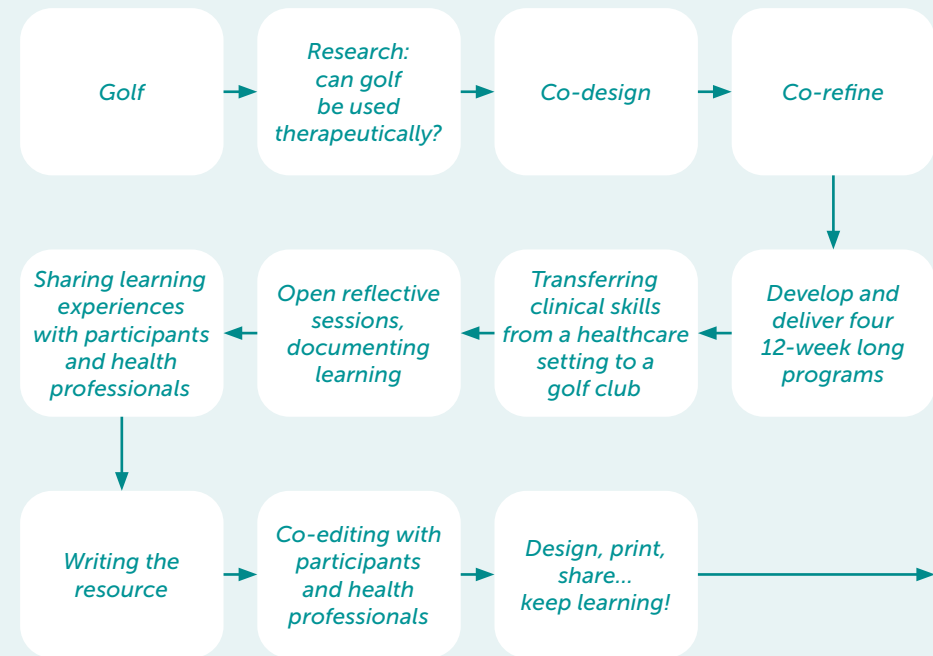
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Please click [here](#) or use the QR code to access the Golf in Society information poster.



This resource guides you through the educational journey undertaken by clinicians, students, and the community involved in the golf research program.

The subsequent pages will walk you through the year-long program and share our accumulated insights.



## What is golf?

**In practical terms golf is a sport which involves the use of a club and a ball. The aim being for players to hit the ball into a series of holes, across a course, using the least number of strokes possible.**

Golf can be played in a variety of settings and is often distinguished from other sports by having a non-standardised play area.

Courses and venues are in abundance in the UK and are found in coastal, rural, and urban areas. Typically, these are green spaces and are either publicly owned by local councils or are in private ownership. Most are served by additional facilities which may include function rooms, changing spaces and clubhouses.

Other environments include indoor, virtual and adventure golf.

## Traditional rules of play

- **Objective:**  
The goal is to hit a small ball into a series of holes in as few strokes as possible.
- **Teeing Off:**  
You start at the tee box. You can place the ball on a tee to make it easier to hit.
- **Order of play:**  
The player farthest from the hole goes first. After the first shot, the player farthest from the hole plays next.
- **Playing the ball:**  
You hit the ball with a club towards the hole. Each time you hit the ball, it counts as one stroke.
- **Fairway, rough, and hazards:**  
The course is divided into areas. The fairway is the well-maintained grass. If your ball lands in the tall grass (the rough) or a sand trap (a hazard), it might be harder to hit.
- **Putting:**  
When you get close to the hole, you use a putter to roll the ball into the hole. Putting usually takes place on the green.
- **Penalties:**  
If you hit your ball out of bounds, into a water hazard, or into certain other restricted areas, you'll have to take a penalty stroke and play again from a designated spot.
- **Scoring:**  
The fewer strokes you take to get the ball in the hole, the better your score. Each hole has a par score, which is the number of strokes an expert player should take. Your score is usually compared to par.
- **Ending the game:**  
After playing all the holes, the player with the lowest score wins.



Use the QR Code to access  
England Golf's Beginners Guide to Golf

## Clothing – what to wear

Golf is traditionally played in all weathers so wearing smart/ casual layers, a raincoat, and trainers are fantastic ways to be prepared for all conditions.



## Equipment

**In adapted golf sessions, the most common clubs for outdoor and indoor sessions are a driver, chipper/wedge, and putter. Each are available in a variety of sizes, moulded grips and in left or right-handed versions**

Interactive and enjoyable indoor sessions can be created with access to a putter or chipper, a roll of masking tape and plastic or foam golf balls suitable for indoor use. Chipping nets and putting mats can create a more authentic feel.



Driver



Chipper/Wedge



Putter



## Golf values

Golf is a game steeped in tradition and as such there are many universal rules and values which support players to enjoy the game. Here are a few of the important ones:

- **Integrity and respect:**  
Golf etiquette emphasises self-regulation and fair play. Players are expected to be honest, responsible for their actions and respectful of each other. Excessive noise and sudden movements are discouraged especially when others are about to swing.
- **Safety:**  
A priority, avoid walking across another player's line of sight especially when they are taking a shot, and always shout "Fore!" if a shot may endanger others.
- **Perseverance and personal growth:**  
Golf, like any sport, takes time to become proficient in. Players may face many obstacles, so be patient and persevere. Always speak with a coach if you are unsure or require guidance to master a new skill.
- **Course and equipment care:**  
Golfers are expected to treat all equipment with care, avoid stepping on clubs and repair divots where possible. Many golf courses are in outdoor spaces, so a healthy respect for nature is encouraged.
- **Community:**  
Golf encourages camaraderie, friendship, and social connection.
- **Equality and diversity:**  
England Golf (amateur golf's governing body) have launched a campaign strategy to address equality, diversity and inclusion in the sport, for more on this search [#TogetherInGolf](#)



## RESEARCH EVALUATION SUMMARY

**The research project by Golf in Society aimed to offer an alternative healthcare delivery for older adults facing cognitive decline and frailty by repurposing golf clubs as Healthy Aging/Research Hubs.**

Golf in Society, a social enterprise, leveraged its expertise in using golf to inspire older individuals with health conditions. The project, supported by [UK Research and Innovation](#), Small Business Research Initiative (SBRI) funding, introduced a 12-week intervention combining physiotherapy and occupational therapy in therapeutic golf sessions. The initiative targeted older adults with early-mid stage cognitive decline or age-related physical impairment, taking place at selected golf clubs in the South Yorkshire Region. Researchers from Sheffield Hallam University conducted a comprehensive evaluation, including physiological and biomechanical measurements at the Advanced Wellbeing Research Centre. Caregivers' perspectives were explored through qualitative and self-report wellbeing data analysis, aligning with Sheffield Hallam's mission to transform lives and AWRC's commitment to innovative solutions promoting physical activity for all. The project also involved interviews with service providers and stakeholders to gather diverse perspectives on the program's impact.

The report investigates the care giver and service provider experience of the [Golf in Society](#) programme through both qualitative and quantitative research methods. Caregiver and participant interviews explored perspectives on the program's process and impact. Service provider interviews included Occupational Therapists, student Occupational Therapists, and a staff member.

Results from caregiver and participant interviews highlighted motivations, positive impacts, and aspects that worked well, such as the warm-up and support from delivery staff. Recommendations were generally positive, with participants expressing a desire for the program to continue. Service provider interviews emphasised the importance of Occupational Therapists' involvement, flexibility in program delivery, and success factors, such as promoting golf inclusivity and changing perceptions.

Overall, the program demonstrated significant benefits in physical health, well-being, and social connections for both participants and caregivers, with staff finding the experience personally rewarding. This project is in line with the NHS long term plan guidance<sup>(1)</sup> which sets out the need to champion local social enterprises and community interest companies, in order to tackle inequality and can also be highlighted as one of the effective and innovative approaches used to reduce health inequalities<sup>(2)</sup>.

See the full report here: [Sheffield Hallam University Report](#)



## Why a collaborative process?

There are barriers to being active<sup>(3)</sup>, particularly within certain populations, such as disabled people, older adults, people with long-term or major health conditions (see [Uniting the Movement](#) and the [Active Lives Survey](#)), many of the groups whom healthcare professionals work with on a daily basis. However, healthcare is not currently interwoven into the landscape of sport and physical activity, and the connection from a health service to a community venue which offers an opportunity to be active is not always easy to access for multiple reasons. The golf research complements the work of Sport for Confidence which tests a new approach, directly connecting health, physical activity, sport and community.

The clinical team involved in the golf project aim to share the lessons they have learned through this resource, however in recognition that we alone do not have all the answers, it was felt that a collaborative approach to creating a resource was essential.

Using co-production principles several Occupational Therapist led collaborative workshops were held with participants in the Golf in Society Research Project, Occupational Therapists, Physiotherapists, and other healthcare professionals invested in Golf as a Therapeutic Activity.



## Co-production

**Co-production is a dynamic and collaborative process that involves working in partnership by sharing power among people who use services<sup>(4)</sup>.**

Our aim was to create a meaningful resource with the active participation of a diverse range of people connected to the golf research, Sport for Confidence, healthcare professional and academics interest in golf as a therapeutic tool collectively exploring ways to reframe healthcare to incorporate the use of physical activity as a preventative tool.

On page 15-16 you will find narratives from our Co-Production partners, who have generously given their time and lived expertise to help shape this resource and give voice to the experience of being involved in the Golf in Society research project.

Although research ethics and confidentiality prevent us from sharing personal information, the value of these contributions are not lost on those involved.

*" If they can see that people like us have been involved in golf, maybe that will encourage them, that they can do it too. "*

Susan

**Co-production values – Social Care Institute for Excellence (SCIE)<sup>(4)</sup>:**

- **Equality:** Ensuring that everyone has an equal say in decision-making processes and are valued for their contributions.
- **Diversity and inclusion:** Proactively addressing diversity challenges is crucial for effective co-production.
- **Accessibility:** It strives to create an environment where everyone feels welcome and heard.
- **Reciprocity:** Insights, skills, and time are exchanged for meaningful outcomes.
- **Risk-aware culture:** Embracing uncertainty, learning from mistakes, and adapting to achieve better results.

**Have you got a positive outcome to share from reading this resource?**

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[info@sportforconfidence.com](mailto:info@sportforconfidence.com)

The Co-production event with professionals was facilitated online and involved over twenty professionals who contributed their insights into using physical activity within their practice. Key stakeholders involved in these sessions include Senior lecturer Karen Newberry, and OT, turned Golf Club Manager Nat Matchett. On the following pages you will find insights into how this community of practice, invested in using Golf as a Therapeutic activity are working towards our collective mission to make golf an accessible opportunity for people.

# GOLF & HEALTHCARE: VIEWS FROM THE COMMUNITY

## Golf, an opportunity for occupational enrichment

As an occupational therapist interested in the value of physical activity, I am also passionate about enabling people to experience occupational enrichment; put simply this concept is about facilitating people to try out new occupations or activities that may enrich what they do in their daily lives. For me it has to be more than just physical activity for the sake of physical activity, and golf can provide so much more!

People can face many barriers to participating in physical activity, however many of these are not as apparent in golf as in some other sports. For example, in many sports arriving at a leisure centre can be daunting; navigating the often large multifloored building and the changing rooms, both with lots of sensory stimulation can be challenging. Golf can provide a quieter environment more suited to many people's needs.

People can be apprehensive about participation in sport, assuming that their existing level of fitness is too low to participate. Golf is very easy to grade to meet an individual's needs, in terms of both mental health and physical strength and endurance. People can very quickly become involved, participating to the level they are able, and then develop from there.

The benefits of being in green spaces are becoming more well researched; the majority of golf courses provide this connection with nature and the outdoors in a very accessible way. Alongside this many people find social situations challenging, but the opportunity to walk and talk whilst playing golf provides an added opportunity for peer support, friendships and developing a sense of community. Golf could be an overlooked opportunity for many people to gain greater health and wellbeing.

*Karen Newberry, Senior Lecturer in Occupational Therapy, University of Derby.*



## Golf as an assessment tool

Golf has such great therapeutic value of engaging a person in valued occupation(s) that can bring meaning and purpose to a person's life. Golf not only improves physical fitness, but mental and social well-being and we can include this as part of holistic rehabilitation 'toolbox', just like any other activity or sport.

There are so many benefits using golf as an assessment and treatment tool. We are used to assessing for cognitive, physical, and social difficulties, grading and adapting the activities to meet a person's needs. For example, in golf we might simplify instructions or encourage mobility through walking and not taking the buggy. Did you know we can cover over 10,000 steps during a round of golf!

Golf equipment can also be adapted and the use of the 'one club' negates the need for a golf bag for those with mobility issues or a range of clubs to aid those with dementia.

Golf can also incorporate other wider goals set by the client, for example improving social skills, coping with stress, anger management, improving concentration and memory and providing access to green space.

*Nat Matchett, Occupational Therapist and Owner of Brierly Forest Golf Club.*



## Placement opportunities

Providing placement opportunities for students has provided a unique experience and opportunity for knowledge exchange:

*“Physiotherapists can liaise with golf coaches to teach golfers exercises to strengthen muscles active in the golf swing and adjust their swing technique to minimise injury”.*

*Hannah Iguchi (Student Physiotherapist)*

*“Golf encouraged physical activity; addressing issues related to mobility and coordination. Additionally, it stimulated cognitive functions such as problem-solving, concentration, and memory. The social aspect of golf further contributed to [participants] emotional well-being, fostering a sense of community and connection. The use of adaptive equipment, simplified rules, and modified courses allowed patients of varying cognitive and physical abilities to engage in the activity, promoting inclusivity”.*

*Student Occupational Therapist.*

*“A physiotherapist could implement biomechanical assessments to identify potential injury risks, educate on proper warm-up techniques, and develop personalised injury prevention plans to enhance overall well-being and longevity on the course.”*

*Naseem Zainab (Student Physiotherapist)*

By utilising occupational therapy and physiotherapy concepts in these settings we can encourage golf clubs and even gyms and sports centres to open their space.

## Golf, physical activity and real world research

Engagement in physical activity can help people living with complex health conditions to experience improved mental and physical wellbeing. However, as a physiotherapist working in neurological rehabilitation, I was aware of the barriers and challenges which can prevent older adults or people with long term conditions from taking part in activity.

Real world research projects which deliver and evaluate accessible activity interventions help us to develop innovations which support participation regardless of severity of impairment. The ‘Golf Hubs as Health Clubs’ project was a fantastic example of how a research team was able to partner with third sector organisations to create and deliver an inclusive golfing intervention which benefitted older adults living with health changes and their carers.

*Dr Rachel Young (PhD), Chartered Physiotherapist & Senior Research Fellow, Sheffield Advanced Wellbeing Research Centre (AWRC).*

## LEARNING FROM LIVED EXPERIENCES

To illustrate the therapeutic value of golf, we have provided a range of narratives from people who participated in the co-production sessions following their engagement in the [Golf in Society](#) research project. These people represent a cross section of participants in the study and have intersecting identities including: golf enthusiasts, people new to the sport and carers who may have used the sessions to access respite or who actively engaged in the programme.

*Please note that names and other identifying information have been changed to promote confidentiality.*

### Changing perceptions of self

Gail experienced a personal shift through participating in golf, challenging her initial doubts about what she could achieve. *“I had poor expectations of what I could achieve, playing golf”.* However, golf became a gateway to a community where she felt a sense of belonging.

The impact wasn’t confined to the golf course—it reached into her daily life, alleviating the isolation she felt at home. *“Coming here has made me feel different, given me something to talk about. I really enjoy doing it, look forward to doing it. I still feel pain at home, but when I am here, I don’t.”*

The adapted golfing community, with its acceptance and understanding of diverse challenges, stood out. *“We all have something wrong with us. So, there is a sense of acceptance? So, we accept.”* Gail emphasised the role of a supportive environment, appreciating the welcoming and inclusive atmosphere.

### Because I can do this, I can do that

For Peter, golf emerged as an unexpected catalyst, reshaping his perspective and opening doors to new possibilities. Through participation in the project, Peter gained confidence, realising that participating in golf not only improved physical abilities but transcended into broader aspects of life.

*“Because I can do this (golf), I can do other things, like joining a local all-ages football group,”* he reflected, breaking down myths about exercise limitations associated with aging. Engaging in an enjoyable activity brought subtle yet impactful changes, enhancing awareness, movements, and overall motivation.

The therapeutic potential extended beyond the golf course, influencing activities like driving and even fostering the courage to embrace football. *“I have played two 7-a-side games now. Coming here (golf) and socialising gave me that confidence because, even though it’s football, and it’s all men, they all have some reason for going apart from the football.”* Learning golf provided a unique avenue for physical improvement.



## Storytelling and new health narratives

The reintroduction to golf has been significant for Christine and Robert, a welcoming space where so much else in society is off limits due to Robert's health condition.

*"Robert has been able to access this for far longer than he would have been able to access anything else. It's been the one thing that has kept us both going really".* Golf, a sport Robert engaged in and excelled at, has become more than just recreation; it's a lifeline for both of them.

The journey began with a physiotherapy led series of virtual golf sessions and continued through Golf in Society. Overtime, participation in Golf in Society transformed into a tight-knit community, a refuge where Robert, despite physical limitations, finds contentment and Christine can feel assured that Robert is in safe hands, *"The small numbers feel more like a family; you don't feel lost in the numbers."*

The positive impact extends beyond the golf course, influencing their family dynamics. *"When I talk to my kids about how dad is, it is often negative. But, when he has been golfing, it is always more positive."* This shift in occupational identity is a testament to the transformative power of golf.

## We aren't sporty and golf isn't what you expect

In a life without hobbies, finding purpose becomes a challenge. When the occupational therapist suggested outdoor activities, hesitation arose. The perception of not being sporty loomed large, casting doubts on the suitability for Stephen and Susan. Yet, after leaving the hospital, a call from the OT, spurred them to give golf a chance—a decision they're grateful for.

Initially sceptical, the fear of pulling a caddy around dissolved in the welcoming environment of indoor activities and the prospect of social engagement. Susan, aware of the isolating nature of dementia, found respite in the accepting and accommodating environment. *"It's very inclusive; everybody has different abilities, but the coaches adapt to your needs. It's a very welcoming space."*

Engaging in this unexpected physical activity brought about transformative results. *"When Stephen went for the tests at twelve weeks at the Wellbeing Centre, he was so much faster, like Road Runner! You can see how effective it is,"* Susan expressed, while Stephen added, *"It made my day."*

## FRAMING GOLF THROUGH A HEALTH CARE LENS

**As a physical activity golf requires players to integrate sets of skills across a multitude of different domains. Swinging a club to strike a ball demands; co-ordination, grip strength, balance, and postural control(5,6). Players must also utilise their working memory, visual processing, and planning skills(6).**

Golf like other sports elevates physical activity by incorporating a set of rules (task specific exercises) to follow or goals to achieve; providing further opportunities to grade activity demands and scaffold the environment to ensure performance and participation are optimised(7,8).

The benefits of playing golf on a regular basis include improved physical and cognitive health(9) and social capital(10) with more people typically playing into old age compared with sports such as football or rugby(6). Although access to golf clubs in the UK has been historically impacted by elitism and prejudice(11) these associations are not universal. A Japanese government study suggested that Golf is the most popular activity for men regardless of age, economic status, or geographical location(12).

Whilst the association with golf being a sport for older adults may be justified, there are a plethora of studies which demonstrate the health benefits across different population group, including people with chronic pain, stroke, Parkinson's, and dementia(13,7,8). In addition, Golf has been utilised to promote strength and balance in falls prevention work(9), alleviate carer burden and elevate physical activity levels within this population(7,14).

In therapeutic rehabilitation work for people with substance misuse(13). And as an adapted physical activity/ educational tool to further develop social skills in young autistic people(5).

Unifying these studies is a central theme around the social impact of golf (13,7,5,10,8,12) with findings suggesting that golf is a highly adaptable group sport(12,13) and therapeutic intervention, with the potential to significantly alleviate participant symptoms of depression and increase the frequency of laughter (12). In addition to enhancing feelings of social connectedness, belonging and occupational identity(13,12,7).

Furthermore, whilst there are many health benefits associated with social prescribing into outdoor green spaces(15) engaging and interactive golfing activities can be replicated with minimal resources and in alternative environments in other settings and with minimal resources(5,12).

[See adaptive golf by Tom Pipes on page 22.](#)

The literature review has highlighted key articles concerned with the therapeutic and health benefits of golf.

[Please also see the following table of direct evidence.](#)

*" I have enjoyed it immensely I didn't realise how much technique was involved before you even hit the ball. "*

**Participant comment after an inclusive golf activity.**

# WHAT IS THE EVIDENCE-BASE?

| DIRECT EVIDENCE  |   |   |  |  |
|--|---|---|--|--|
| PUBLICATION  | AIMS OF STUDY   | PARTICIPANTS  | DESIGN   | KEY FINDINGS   |
| <p><b>Brief Report: The Utility of a Golf Training Program for Individuals with Autism Spectrum Disorder (ASD)</b></p> <p><b>Journal of Autism and Developmental Disorders</b><br/>Springer</p> <p>(1)</p> | <p>To evaluate the efficacy of a 6-week golf training program that was created as an enjoyable, recreational activity to stimulate motor skills and social / communicative functioning in individuals with ASD.</p>   | <p>46 Participants with a prior diagnosis of ASD age between 16-24 years took part in a six-week golf training programme.</p> | <p>12 group lessons with each 45-min session containing a specially designed lesson plan that delivers golf instruction incorporated with targeted autism learning objectives e.g. all sessions focus on two learning objectives; one golf-related (i.e. putting or getting the ball in the air) and one life-skill related (i.e. complimenting another player).</p> | <p>Participants displayed significant increases in receptive/expressive communication skills, social skills, regulatory skills, and motor skills. All participants improved on at least one outcome measure, and significant increases in all measures (communication skills, social skills, motor skills, and regulatory skills) were detected.</p>   |
| <p><b>Development of a community-based golf and exercise program for people with Parkinson's disease</b></p> <p><b>Complimentary Therapies in Clinical Practice</b></p> <p>(5)</p>                         | <p>The Design and implementation of a golf and exercise program for people with Parkinsons Disease Based on community need, evidence, and clinical expertise.</p>   | <p>8-12 Participants with a diagnosis of Parkinsons Disease.</p>  | <p>Programme consisted of two equal components: golf instruction and exercise instruction over six 90-minute sessions.</p>   | <p>The opportunity to play golf enabled participants to engage in a recreational activity and to socialize. Positive impact of fellowship with other participants was reported. Furthermore, the increase from 63% to 100% of participants, from before and after the program respectively, who reported they would be able to go golfing shows participants were able to return to, or continue with, an activity they enjoy after completion of the program.</p> |
| <p><b>Specific types of sports and exercise group participation and socio-psychological health in older people.</b></p> <p><b>Journal of Sports Sciences</b></p> <p>(12)</p>                               | <p>To identify: (1) the prevalence of specific sports and exercises engaged by older people in a group and (2) the association between the type of group sports and exercises and self-rated health, depressive symptoms, and frequency of laughter among community dwelling Japanese older people.</p> | <p>131,962 older people responded to a self-report questionnaire by mail.</p>   | <p>Participants were queried on their frequency of sports clubs or exercise group participation, Self-rated health, depressive symptoms and frequency of laughter.</p>   | <p>This study results indicate that golf and walking were popular activities among the participants regardless of age, income, and geographical location. Further, they had greater self-rated health, lower depressive symptoms, and greater daily laughter compared with those who did not participate the groups.</p>   |
| <p><b>Experiences of playing golf as a part of the treatment and rehabilitation process among patients in substance use disorder treatment</b></p> <p><b>Journal of Substance Use</b></p> <p>(13)</p>      | <p>To describe how some patients in Substance Use Disorder (SUD treatment in Norway experience playing golf during their treatment stays and how these experiences can potentially influence the patients during and after SUD treatment</p>  | <p>Seven people who were current or former SUD patients</p>   | <p>Qualitative semi structured interviews were analysed using interpretative phenomenological analysis and thematic analysis</p>   | <p>Three themes emerged: 1. Negative stereotypical perceptions of golf and golf players which changed through engagement. 2. The versatility of golf was secondary to the social interaction, which was the most valuable and motivating aspect of the intervention and 3. The participants had positive experiences playing golf that they saw as valuable for developing social networks and for becoming more open-minded about trying new activities.</p>      |

## DIRECT EVIDENCE

| PUBLICATION   | AIMS OF STUDY   | PARTICIPANTS   | DESIGN   | KEY FINDINGS   |
|---|---|--|--|--|
| <p><b>Exploring the Effects of a Golf Program on Psychological and Social Wellbeing for People With Dementia, Carers, and Staff</b></p> <p>Journal of Aging and Physical Activity<br/>(7)</p> | <p>Provide an initial exploration of the physical, psychological, and social effects of a golf program for people with dementia, carers and staff.</p>  | <p>Ten people living with dementia and five carers participated in a 6-week golf program, facilitated by golf centre staff.</p>  | <p>An indicative thematic analysis focusing on semantic themes</p>   | <p>Five central themes were identified: emotion, respite, losing the "dementia" label, friendship/camaraderie, and improving relationships. Another theme was that the participants, carers and staff all felt the programme should have continued beyond the 6 week period.</p>   |
| <p><b>The relationships between golf and health: a scoping review</b></p> <p>British Journal of Sports Medicine<br/>(9)</p>   | <p>A scoping review to identify the existing gaps in evidence and document impacts of golf on health where these data were available. Research question: What is known about the relationships and effects of golf on physical and mental health?</p> | <p>301 studies met the criteria for the scoping review.</p>  | <p>Relevant published primary and secondary studies as well as grey literature were identified. Data extracted using a standardised tool, to form (1) a descriptive analysis and (2) a thematic summary.</p> | <p>Golf is associated with physical health benefits that include improved cardiovascular, respiratory and metabolic profiles, and improved wellness. Limited evidence related to golf and mental health. Practitioners and policymakers can be encouraged to support more people to play golf, due to associated improved physical health and mental well-being, and a potential contribution to increased life expectancy.</p>  |
| <p><b>Meaningful Activity for Persons With Dementia: Family Caregiver Perspectives</b></p> <p>American Journal of Alzheimer's Disease &amp; Other Dementias<br/>(14)</p>                      | <p>This study explores the concept of meaningful activity, as defined by caregivers of people living with dementia.</p>   | <p>Family caregivers of PWDs, who provide 3 hours of care over 3 days/week, were interviewed after 6 months of cholinesterase inhibitors (ChEIs) therapy.</p>                  | <p>Caregiver responses to the open-ended question 'What do you believe getting involved in activities outside the home means for someone with dementia' were assessed.</p>                                   | <p>The importance of activity for both caregivers and people living with dementia as well as the need to support caregivers to enable people living with dementia to continue to participate in meaningful activity were highlighted. The positive effects of activity related to...providing targeted support for both caregivers and participant. Supporting activity participation may be effective in improving the individuals sense of self, daily functioning, and improve the well-being of the caregiver.</p> |
| <p><b>Playing the long game: Exploring the phenomenon of dementia-friendly golf</b></p> <p>Dementia<br/>(10)</p>  | <p>This study investigates the unexplored accessibility of golf for older people with dementia using interviews and observations of Scottish Participants in social enterprise led golfing activities.</p>  | <p>Twelve people were interviewed including three people living with dementia, three carers, one older adult participant and five staff members from the social enterprise</p> | <p>Qualitative approach to develop an understanding of the lived experience of people living with dementia playing golf using interviews and thematic analysis</p>   | <p>Golf is an accessible activity for people living with dementia. It provides an opportunity for social connection and contributes to overall well-being. However, there are still social barriers that need to be addressed. These include the stigma associated with the abilities of individuals with dementia and the perception that golf is primarily a middle-class and male-dominated sport.</p>  |

# ADAPTIVE GOLF

**Adaptive golf needs a tailored and personalised approach which modifies gameplay to encourage and engage individuals who may typically face challenges accessing the sport.**

This inclusive approach may involve adapting the active play environments to include indoor facilities, such as the driving range or simply using a community space with adaptive equipment. The putting, and chipping greens can often be more accessible for people who cannot walk long distances. Sessions may incorporate additional adaptations, including designated spaces for rest between turns and the use of adapted clubs designed to enhance grip strength.



Indoor settings have great potential for groups and one-to-one sessions, allowing for further modifications to the game parameters. This not only extends access through colder seasons but also provides additional opportunities to adjust activity demands and provide necessary support. Adaptive golf simplifies gameplay, making it accessible to practitioners with minimal resources – just one or two clubs (e.g., a putter and chipper), coloured tape, and an even surface are sufficient to offer an inclusive and enjoyable physical activity experience.

Adapted golf acts to strive for inclusivity in game play. Meaning that any practitioner, with access to one or two clubs (i.e. a putter and chipper), coloured tape and an even surface can provide an inclusive and enjoyable physical activity even with limited resources and across health and social care settings, within scope of practice!

Scan the QR code (or [click here](#)) to see PGA Pro Tom Pipes, demonstrating adaptive golf skills



*“ I am the head teaching professional at a Golf Club in South Yorkshire. After turning professional at the age of 20 my passion has always been coaching. I teach an array of different ages and abilities to ensure that golf is fun and inclusive for everyone. While spending time with Golf In Society we go from playing on a full size 18 hole golf course, down to indoor putting and chipping games. This can keep people enjoying the physical activity of golf and benefit from the many social experiences too. ”*

Tom Pipes, PGA Pro

## Golf in Society Model of Practice: Golf Activator Role

*“ I am a Golf in Society Golf Activator, and my role involves promoting our service to individuals, organisations and care services that help people facing challenges like Alzheimer’s, stroke, dementia, Parkinson’s disease, frailty, loneliness, and depression. We aim to get people involved in our sessions, which offer mental, physical, and emotional stimulation through activities like golf in a safe and friendly environment. These sessions also provide a chance to socialize and feel part of a meaningful and enjoyable community.*

*We offer a free 1-hour trial session, which can be arranged online or over the phone. This allows them to see if they like the experience and helps us understand their needs and suitability. If they wish to continue, we can book people into a regular 2-hour sessions which are run at various Golf venues nationwide. If needed, we can work with community transport partners to offer better transport sustainability and therefore improve access to our groups.*

*Our goal during sessions is to give participants something to look forward to each week and to give caregivers either an opportunity to join or some much valued free time, knowing their loved ones are being cared for. When participants arrive, we meet with them individually to check in on how their week has been. This helps us identify any issues they might be experiencing, which could affect their participation in activities.*

*During the sessions, we provide one-on-one care if needed, tailored to each person’s needs. We ensure that our warm-up and activities offer mental and physical stimulation and are enjoyable and safe. We also provide refreshments and breaks if needed.*

*At the end of each session, we offer refreshments, giving everyone a chance to socialise and share experiences. We also award the “Champagne Moment” trophy to the standout participant, encouraging a bit of friendly competition and ensuring everyone gets a chance to win regularly. Promoting inclusivity and sense of achievement which in turn benefits feelings of self-belief, confidence, and hope. ”*

Charles Jardine, Golf Activator, Golf In Society



# COGNITIVE WARM-UP

Neurological physiotherapist Shraddha Kadam incorporated targeted warm-ups in addition to physical warm-ups to enhance cognitive function and overall wellbeing.

See example activities below and how these can be graded and adapted and which skills they are targeting.

Click [here](#) to read more about the cognitive warm-up.

*“ When considering physical fitness, the focus often gravitates towards weightlifting and improving aerobic capacity, overlooking the fact that all bodily movements are orchestrated by the mind. ”*

**Shraddha Kadam**

## Coloured Cones Diagonal Toe/Hand Touch

### Activity:

Cones of various colours are spread across the floor, as depicted in the image above. The participant is instructed to stand upright at the central spot between the cones. They will then await verbal instructions from the therapist, who will call out colours randomly corresponding to the cones positioned on the floor. Alternately this activity can be switched to a seated activity including upper body bilateral movement e.g. therapist / support roles will hold out four cones in front of the seated participant for them to touch with their hands on instruction.

### Task demands and grading:

The therapist will alter the sequence of colour sequences in verbal cues and also vary the speed of the instructions given. The participant is required to tap on the coloured cones positioned whenever a colour is called out. Cones situated to the right of the participant will be tapped with the right foot, while cones on the left side will be tapped with the left foot.

### Skills:

This activity targets overhead movements, opens the upper chest, enhances upper limb mobility, and encourages upward eye gaze, thereby improving visual perception and sitting balance.



## Hopscotch

### Activity:

Coloured hoops are arranged on the floor, rather than walking straight through, participants are required to alternate between placing both feet in one hoop and one foot in the next two hoops – a bit like playing hopscotch.

### Task demands and grading:

Changing the hoop pattern/ arrangement can increase or decrease the complexity. Instructing the participant to stand in certain colours adds a cognitive element to the task.

### Skills:

Reacting quickly to the therapist's commands enhances reaction time, focus, working memory and decision-making capacity. This activity primarily targets standing balance, walking balance, obstacle navigation, coordination, visual depth perception, and overall strength and mobility.



## Hula Hoop Pass

### Activity:

Participants are required to hold coloured hula hoops above their heads passing these to the person seated behind them.

### Task demands and grading:

Altering the direction of transfer and the speed of the activity promotes engagement and adds an element of fun.

### Skills:

This activity targets overhead movements, opens the upper chest, enhances upper limb mobility, and encourages upward eye gaze, thereby improving visual perception and sitting balance.



# ACTIVITY ANALYSIS

Activity analysis is a core occupational therapy skill, and involves determining the typical demands of an activity, the range of skills involved in its performance, and the meanings that might be associated with it.

This activity analysis of golf is provided as a starting point to prompt reasoning and thinking. It is not therefore exhaustive in terms of the many forms and environments in which participation in golf could potentially be enabled. The activity analysis has been informed by both the World Health Organisations' International Classification of Functioning, Disability and Health (16) and the Occupational Therapy Practice Framework(17).

Golf can be played individually or as a group. Can be adapted to be played indoors and outdoors and to suit all ages and abilities. Golfing activities can be graded and adapted as required.

## Cognitive

- Oriented and awareness of surroundings, position of self in space, following route directions.
- Strategic thinking and logical sequencing processes.
- Concentration on game and related activities.
- Score keeping.
- Retain information about rules of the game.
- Emotional response to winning or losing, potential sense of achievement.

## Sensory

- Form, size, shape and colour of ball determined through sensory information.
- Vestibular functions and balance to enable positioning, manipulation and striking of ball.
- Sensory demands of the game and playing environment will need to be considered and adapted carefully to enable meaningful participation. For example, unpredictable weather conditions.

## Cardiovascular

- Golf is a low impact aerobic activity which can improve cardiovascular fitness gradually over time without overexertion. Varying levels of exertion possible depending on individuals' exercise tolerance (e.g. walking around course).
- Sufficient blood pressure to enable movement and postural control.
- Respiration functions to enable participation, though may require modification in specific incidences (for example pacing of play for a player with a respiratory condition).
- Consideration will need to be given to physical endurance, aerobic capacity, stamina and fatigability, with play being adapted accordingly.

## Speech

- No specific voice and speech demands, though playing the game provides opportunities for verbal interaction with fellow players in relation to rules, scoring and encouragement.
- Player may wish to ask for assistance at times, but can adapt communication to gesturing, writing, pictures, or symbols if required.

## Neuro-Musculoskeletal

- Conventionally a standing game requiring postural control or support, though can be adapted to seated.
- Joint, muscle and movement functions to enable grip of club, swing of arms and forward and back.
- Development of hand-eye co-ordination through participation, as well as bi-lateral integration and crossing of the mid-line during club manipulation and swing.



## Motor

- Fine motor control and co-ordination for gripping the golf club with the fingers.
- Co-ordinated strokes of ball with controlled pace and direction.
- Grip strength, balance, endurance and stamina required.
- Gross motor control of the arm to swing.

## Process

- Initiates steps associated with playing golf and completes in a logical manner.
- Adjusts performance to try different methods of positioning and alter direction and pace of the stroke.
- Process skills can be developed as participation in golf progresses, for example through taking on a leadership role in terms of turn-taking and/or scoring.

## Social Interaction

- Co-operation/sportsmanship.
- Approaches or initiates interaction with team-mates, may involve speech and/or gestures.
- Places self an appropriate distance from other players during the game.
- Takes their turn and gives other players the freedom to take theirs.
- Social interaction skills can be developed through playing golf, for example the regulation of emotion through winning or losing.

## Equipment & Resources

- Golf putters (left and right-handed).
- Golf balls (different weights and colours).
- Tees.
- Golf putting mat (suitable for indoor or outdoor activity).
- Chairs (to provide relief from standing long periods).
- Various equipment for grading and adapting activity to suit different levels of ability. To include cones/chipping nets/targets.

## Relevance & Meaning

- Playing golf gives the individual the opportunity to participate in a physical activity, either in a group or on their own, with the potential to enhance both physical and mental well-being.
- It can also promote increased confidence and/or autonomy in a unique setting.

## Sequencing

- Playing golf involves various steps, depending on stage of participation: preparing to take shot, waiting for your turn, hitting the ball, scoring, collecting the balls, moving to next hole (if applicable). If playing according to golf rules the player furthest from the hole takes the next step following all players teeing off.

## Social

- Can be played individually, 1:1 between participant and tutor or in a group setting.
- Group engagement can help foster social connections and therefore reduce feelings of social isolation.
- Players may need to be conscious of other people's turns.
- Co-operative – players can support each other verbally and encourage other team members.
- Friendly competition can promote positive dynamics and sportsmanship.
- Personal causation – feelings of success.
- Listening, self-expression and self-regulation of emotions by winning/losing.

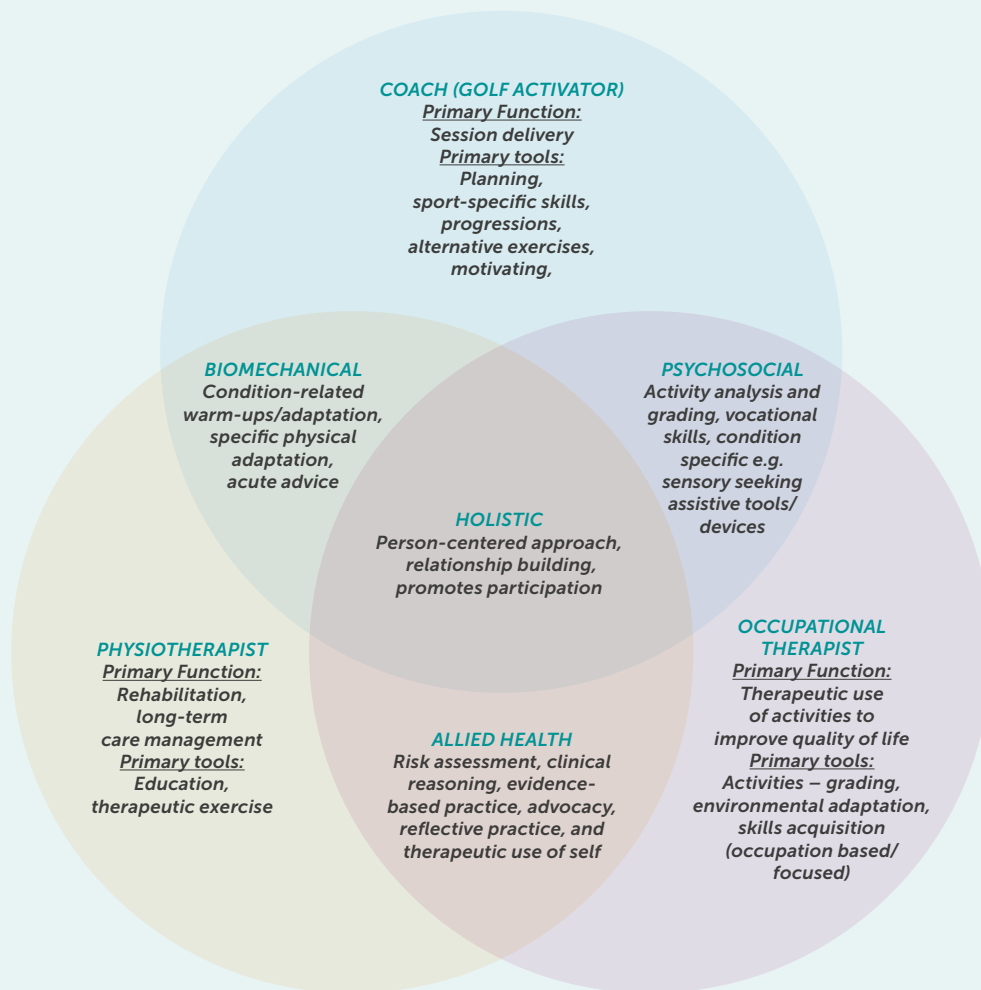
## Space

- A clear well-lit open space. Can be played both outdoors and indoors.

# DISTINCTIVE & COMPLEMENTARY SKILL MIX

As healthcare professionals we are used to working within a multi-disciplinary team, but working in the golf environment encouraged the team to be clear about our unique skills, our scope of practice, professional boundaries and how we can compliment and work together to cultivate a therapeutic environment.

A physiotherapy student observed the team and created this Venn diagram which nicely illustrates a simplified understanding of the differing but complementary roles.



" From talking to practitioners involved with the project, the therapeutic properties of golf are clear in a model like this. The combination of the OT role and the PT role provides a unique holistic treatment option in the context of golf. improving referral pathways and providing more insights into interventions like this can only benefit the health of so many.. "

**Max Omo, Physiotherapy Student**

" A golf club environment has the potential to be the perfect working environment for occupational therapists to apply all their skills without the restrictions of a biomedical approach. Golf, seen through and supported by an occupational approach, has the potential for so much than building physical capabilities (which in itself is so important!). The golf environment can be a place where people can build skills, learn about themselves and others, understand their health and how it impacts on their hopes and thoughts for the future. All the while the OT will work in partnership with the participants, building on strengths and capabilities. "

**Occupational Therapist**

" Physiotherapy and Occupational therapy can be beneficial within a golf setting serving the community for both recovery and rehabilitation, but more importantly improvement of health and quality of life. There are numerous opportunities for health and wellbeing, with aspects appealing to all groups such as green space for walking, shorter games, social golf groups, beginner classes; Physios and OTs can use these to help promote healthy living and provide useful guides for injury prevention and recovery. "

**Esme McGennett-Halliwell, Physiotherapy Student**

" The coaching role aims to promote mental, physical, and emotional stimulation through golf activities for disabled people and their supporters. Sessions offer a safe environment in which opportunities to access physical activity and readymade social/ peer support are facilitated. We ensure our activities are tailor made to support inclusion, celebrating success and participation, boosting feelings of improved self-confidence and self-worth. "

**Golf Coach**

# DESIGNING INCLUSION, CREATING BELONGING

The session delivery was designed using a quality improvement tool to explore how to design inclusive practice into the sessions delivered within the Golf in Society intervention. Considerable attention was given to ensure people felt they were welcome in the space.

Although the occupational therapist did not explicitly explore themes of belonging prior to the intervention, through co-producing the guide and talking to participants, the theme of belonging has become more prevalent and is a theme that is worthy of further exploration as it corroborates with the experience at Sport for Confidence. Belonging is a crucial aspect of health and wellbeing(18,19) and is considered a fundamental human need with significant impacts on mental, physical, social, economic, and behavioural health outcomes(18). People with health conditions, impairments, disability, and intersecting identities experience barriers to participation (and by extension belonging) as documented by Hammel(20).

We have created the table opposite, informed by the Ecological and the Social Determinants of Health theories as referenced in Hammel(20). The table depicts how different social environmental factors and levels influenced participation within the Golf as Therapeutic Activity setting.

## Outcome Measures

Here is a selection of outcome measures which are relevant to the practice environment when considering sport as a therapeutic intervention. A more detailed exploration of these can be found [here](#).

- The Timed Up and Go (TUG)
- Falls Efficiency Scale (FES-I)
- Fatigue Severity Scale (FSS)
- EQ-5D-5L
- Warwick and Edinburgh Well-being scale

The Allied Health Professions (AHP) Outcome Measures UK Working Group (2019) created a checklist to help guide decision making when choosing outcome measures. Click [here](#) to access their resource.



|                         | BARRIERS  | SUPPORTS   |
|-------------------------|---|--|
| <b>SOCIETAL (MACRO)</b> | Societal and cultural attitudes such as stigma and prejudice. For example, historic elitism in golf(11) influencing participation and opportunities.                                    | <p>Policies which actively promote the value of physical activity and inclusion agendas. <a href="#">See page 32-33.</a></p> <p>Model of practice which supports prevention and enablement: Sport for Confidence Prevention and Enablement Model (PEM). <a href="#">See link.</a></p> <p>England Golf Strategic Framework for Equality, Diversity, and Inclusion <i>#TogetherInGolf</i>.</p> <p>Human Rights Act (1998) and Equality Act (2010).</p> <p>The World Federation of Occupational Therapists (WFOT) have a position statement on occupational therapy and human rights. <a href="#">See link.</a></p> |
| <b>COMMUNITY (MESA)</b> | Geographical location and available transport options.  | <p>Sustainability through partnership working with other voluntary sector organisations including community transport.</p> <p>Golf presents highly adaptable physical activity which can be facilitated in traditional urban/rural courses or in alternative venues such as community centres, corporate venues (i.e. football clubs) and/or outreach work into care homes.</p>  |
|                         | Willingness of golf/sports centres to accommodate adaptive golf opportunities.  | <p>Golf managers can choose to be affiliated to England Golf and belong to the Golf Club Manager Association (GMCA) both organisations promote strategies around improving golfs image including inclusive practice and accessibility. <a href="#">See Top Tips on page 34.</a></p>  |
|                         | Knowledge and awareness gaps which inhibit access e.g. session activity cost, payment options (cashless).   | <p>Taking an informed approach to educate and advocate for and on behalf of people to challenge inaccessible spaces.</p>   |
| <b>PERSONAL (MICRO)</b> | Changes in personal circumstance affecting Motivation, Performance and Participation  | <p>Ensuring people in immediate social support roles (personal / professional) have access to information and resources which encourage an informed approach.</p>  |
|                         | Values and beliefs: impacting self-perception due to ill health, social support, age, gender, sexuality role, responsibilities, ethnicity, finances and or not identifying as 'sporty'. | <p>Golf coaches/activators/volunteers/students often have lived experience and receive relevant training e.g. condition specific and moving and handling people.</p> <p>Integration of OT/PT roles who can provide additional support and guidance e.g. environmental assessment, grading and scaffolding, adapting, compensatory strategies and therapeutic exercise.</p>   |



# POLICY & SIGNPOSTING

## Physical Activity

### **PHE (2021) Understanding and Addressing Inequalities in Physical Activity:**

A greater emphasis should be placed on partnership working among stakeholders to address inequalities and support sustained engagement in physical activity.

### **WHO (2016) European Region Physical Activity Strategy 2016-2025:**

The need to address the overall accessibility of physical activity for the most marginalised members of society, which will in turn address tackling the risk of ill-health. To promote collaboration from government right through to the public health sector and sports organisations.

### **WHO (2021) Fair Play:**

Building a strong physical activity system for active people: A focus on programmes that offer fully inclusive opportunities for each stage of life. Achievable with an emphasis on better links between local, regional, national, and international organisations.

### **Sport England Uniting the Movement Strategy (2021):**

Launched in 2021 this 10-year strategy focuses on transforming lives and communities through sport and physical activity, tackling recovery and reinvention, connecting communities children and young people, active environments and health and wellbeing.

### **All Our Health (2019) Physical Activity:**

Highlights the association of physical inactivity and death in addition to the estimated cost of £7.4billion/annum. This report notes that 25% of people would be more physically active if they were advised by a healthcare professional.

## Allied Health Professional Practice

### **All Our Health (2019) Health Disparities and Health Inequalities:**

Actions to address health inequalities need to focus firstly and swiftly on improving health of those with the poorest health outcomes which should be evidence based, outcomes oriented, systematically applied, scaled up appropriately and appropriately resources to narrow the outcomes gap.



## Voluntary Sector

### **NICE (2016) Community Engagement:**

Improving health and wellbeing and reducing health inequalities. Ensuring collaborative work between communities, voluntary sector organisations and statutory services on all aspects of health and wellbeing initiatives.

### **Voluntary, Community and Social Enterprise (VCSE) Health and Wellbeing Alliance:**

A partnership which co-ordinates joint working between health and social care and health focused voluntary sector representatives.

### **All Our Health (2019) Community Centred Practice:**

Community-centred approaches can be more effective than traditional settings in improving the health and wellbeing of marginalised groups. Underlying principles such as participatory, non-clinical and strengths based approaches, collaborative partnership working, utilising community assets and addressing barriers to engagement, supporting peer roles and understanding the link between social and emotional needs and physical and mental health.

## Golf

### **England Golf Strategic Framework for Equality, Diversity, and Inclusion 2022-2025 #TogetherInGolf:**

Establishes a series of guidelines for national bodies and local clubs.

## Signposting

**Research Report** can be found here: [Sheffield Hallam University Report](#)

**Co-Produced Service Delivery Plan** can be found [here](#).

### **Sport For Confidence Moving OTs Community of Practice**

Sign up to [movingOTs@sportforconfidence.com](mailto:movingOTs@sportforconfidence.com) #movingOTs or contact [info@sportforconfidence.com](mailto:info@sportforconfidence.com)

**Sheffield Hallam Advanced Wellbeing Research Centre** can be found [here](#).

**Golf In Society Taster Session Booking Form** can be found [here](#).

**Adapted Golf Video Resources** can be found [here](#).

Download and print our communication tool: **Golf Lingo Bingo** [here](#).

**Specialist Provision** – you can access our Therapeutic Use of Snooker, Cycling, Table Tennis and Boccia guides [here](#).

# TOP TIPS

## Advice for working with golf clubs and sports venues

by Nat Matchett

### Find mutual benefits

Like healthcare settings, Golf managers have many things landing on their desk, with governing bodies announcing priorities and committing to making golf more sustainable, accessible, and inclusive for all.

### Support the transition

OTs are gatekeepers at the end of healthcare system and can bring disabled people or people living with major health conditions to their business but with a clear rationale of the personalised support needed for sustainably.

### Collaborate with coaches

Work with the sports coach or personal trainer to develop safe and effective exercise programs to achieve their members fitness but also their occupational or life goals. For example, consider older adults with knee replacements when they are compensating for pain, developing poor movement or how a group exercise could be developed for specific conditions such as arthritis, Parkinson's disease, and cancer.

### Build networks

Golf managers may be connected to national organisations and are often affiliated to England Golf and belong to the Golf Club Manager Association (GMCA) for personal and professional development. The GMCA have regular regional meets where they invite speakers to talk about managing stress and mental health. They will also connect with wildlife charities for improving substantiality golf courses. So, get a foot in the door and offer to talk about the benefits of occupational therapy within their settings.

### Know local resources

Familiarise yourself with local councils and wellbeing networks. They often have connections to charities, private practices, and sports centres.

### Utilise winter months

Since golf is seasonal, take advantage of the quieter winter months to reach out to golf managers. This is when they focus on updating safety measures, finances, developing offers and planning for the upcoming year.

# COMMUNICATION TOOL: 'GOLF LINGO BINGO'

**Striking up a conversation about golf may be the last thing on your mind when you are in a busy practice environment or visiting a service user at home.**

Feedback from participants in the co-production sessions highlighted the value of health professionals being informed, able to offer knowledge, answer questions and alleviate anxiety. Susan shared: "I could have quite easily thought nah. Because we didn't have enough knowledge of it [golf], I thought we'd be pulling a caddy around!".

The All Our Health (2019) Physical Activity Report states that 25% of people would be more physically active if they were advised by a healthcare professional.

**We have therefore designed this tool to be a starting point to facilitate a conversation about golf and physical activity and its therapeutic potential.**

You will see on the Golf Lingo Bingo card a series of topics and images which reflect the experience of participating in golf as a therapeutic activity from the perspective of our co-production partners. This tool can be used to generate conversation about golf as a meaningful activity. And as a vehicle to explore people's thoughts, feelings, and expectations. Here are a couple of example conversation starters:

- Have you ever thought about playing golf?
- Have you ever been involved in sport?
- What does golf mean to you?

*The Golf Bingo Lingo card can be reproduced, printed and/or photocopied.*

Access the printable version [here](#).



## GOLF LINGO BINGO

|  |  |  |   |   |  |   |
|--|--|--|---|---|--|---|
| Tea or Tee?<br><small>See p6-7</small> | Support<br><small>See p15-16</small>   |  | Laughter<br><small>See p17</small>  | New Skills<br><small>See p26-27</small>           | 3 Minute Rule<br><small>See p6-7</small>   | <br><small>See p6-7</small> |
| Fairway<br><small>See p6-7</small>     | <br><small>See p6-7</small> | New Stories<br><small>See p15-16</small>   | Health & Fitness<br><small>See p17</small>  |   | Etiquette<br><small>See p8</small>   | Social Connections<br><small>See p12-13</small>   |
|  | Carer Support<br><small>See p15-16</small>   | Accessible & Inclusive<br><small>See p22-23</small>                                  | Friendship<br><small>See p15-16</small>   | Valued<br><small>See p12-13</small>               | <br><small>See p22-23</small> | Confidence<br><small>See p22-23</small>   |
| Belonging<br><small>See p30-31</small> | Elitest<br><small>See p17</small>  |  |  | Scan the QR Code to view more fun golf activities |  |                            |

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