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To cite this article: Chelsea Litchfield, Rylee A. Dionigi, Jaquelyn Osborne, Oli Sophie Meredith, Marissa Olsen, Ruth Crawford & Kelsey Richards (03 Jun 2024): Exclusion, belonging and mental wellness: the sporting and physically active leisure experiences of women in rural Australia, *Annals of Leisure Research*, DOI: [10.1080/11745398.2024.2358794](https://doi.org/10.1080/11745398.2024.2358794)

To link to this article: <https://doi.org/10.1080/11745398.2024.2358794>



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Published online: 03 Jun 2024.



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Exclusion, belonging and mental wellness: the sporting and physically active leisure experiences of women in rural Australia

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ABSTRACT

This study examined how access to, and experiences in, physically active leisure and/or sport impact on women's physical, social, and emotional health and mental wellness in rural or remote communities across Australia. The online, open-ended survey participants were 92 females, aged 18–76 years ($M=44$ years), including 64 women who were university educated, 20 aged 60 years and over, 10 from diverse sexual orientations and gender identities (SOGI) and seven First Nations Australians. Through a framework of intersectionality and an integrative theory for belonging, three key themes describing the women's experiences were uncovered: welcoming and inclusive spaces, mental wellness, and unwelcoming spaces and exclusion. Nuances across age, ethnocultural background and sexuality were identified in the data, as well as how intersections of gender and place/rurality affected women's perceived overall health and mental wellness. These findings have implications for sport and leisure programming and policies in rural contexts.

ARTICLE HISTORY

Received 28 March 2023
Accepted 10 April 2024

KEYWORDS

Age; exercise; gender; health; race; sexuality

Introduction

Sport participation and physically active leisure pursuits are significant in the social and emotional lives of Australians, particularly for women in rural and remote areas. Rural and remote communities¹ across Australia are often bonded by residents' sporting participation, interactions with teams and clubs (Spaaij 2009), and leisure or exercise groups (Brown and Pavey 2016). While sport, exercise and leisure have potential for social, cultural and emotional connections in rural areas, these physical activities can also marginalize individuals and groups based on age, gender, body type, ethnocultural background, (dis)ability and/or sexuality (Anderson and McGuire 2010). Notably, heterosexual masculinity can dominate in rural/remote communities and this dominance is often reinforced through sport/exercise practices (Hopwood and Connors 2002). Thus, the perspectives of

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women, including older and First Nation's women and females of diverse sexual orientations and gender identities (SOGI),² in leisure and sport research is necessary to foster inclusivity, belonging and wellness in rural areas. As such, this study examined how access to, and experiences in, physically active leisure pursuits and/or sport impacted on women's physical, social, and emotional health and wellness in rural/remote communities across Australia. In particular, it analysed how participant experiences intersected with identities of gender, age, ethnocultural background, and sexuality.

In this study, 'physically active leisure pursuits' refer to activities that involve bodily movements and social and mental stimulation, in which one engages for relaxation, health or fun, such as walking or other forms of exercise (Australian Government 2011). Sport is defined as physical activity (PA) which typically involves skill, competition, rules and organizations, setting it apart from similar activities or school sport (Dionigi and Gard 2018). This study forms part of a larger research project on the experiences of rural/remote Australians ($N = 144$, aged 18–76 years) in sport/PA, including local team sport competitions and/or individual sports, and physically active leisure pursuits such as walking, hiking, biking, and lifting weights with an exercise group. The findings reported in this study are specific to participants who identified as female ($n = 92$, aged 18–76 years, $m = 44$ years). Among this group of participants, there were 64 women who were university educated, 20 who were aged 60 years and over, 10 identifying as either lesbian, gay, queer, bisexual or pansexual and seven as First Nations Australians. For a study focussed specifically on our findings related to participants of diverse sexual orientations and gender identities from the wider study, see Meredith et al. (2023).

Sport, leisure and PA in Australia: belonging, exclusion and mental wellness

Sport, exercise and physically active leisure contexts can simultaneously allow for social and emotional connections, as well as discrimination and exclusion, among participants. These contexts also provide opportunities for participants to resist, conform to, and/or negotiate stereotypes of gender, age, ethnocultural background and/or sexuality in urban areas (Hillier 2005; Forsdike et al. 2022; Litchfield and Dionigi 2012; Mansfield et al. 2018; Willing and Shearer 2015). Personal experiences related to belonging and exclusion are shaped by identities, group dynamics and structural factors, and, consequently, one's sporting and leisure experiences can affect one's mental health and wellness in various ways.

A plethora of research signifies the importance of sport and leisure to Australians (see Adair and Vamplew 1997; Cashman 2002; and Melnick and Wann 2011), especially in rural and remote areas (Blood and Hoyer 2017; Spaaij 2009). Much of this research suggests that sport participation and its association with sporting clubs and teams are key to local rural/remote identities, community life and social cohesion. For example, a Parliamentary Inquiry into Australian rules football in Victoria determined that 'football/netball clubs are, to a significant degree, the 'glue' holding many small rural communities together' (cited in Spaaij 2009, 1134).

Furthermore, sport and physically active leisure pursuits provide opportunities for participants to engage in camaraderie, bonding, and social, cultural and emotional connection. Lyons and Dionigi (2007) showed how a sense of community manifested for older

men and women competing in sport and found that sport enabled older people to 'give back' to their local communities as participants, volunteer coaches and officials. Cashman explained that sport is an 'integral part of the Australian [and social] landscape' and has been significant in the history and development of the nation (2002, 25).

This study builds on research that the leading authors have conducted on the impact of sport on people with intersecting identities related to gender, sexuality and/or age. For example, Litchfield's (2011; 2013) research on recreational level field hockey players found that team sports can be contexts for women to share experiences in safe, affirming environments, feel a sense of community and develop positive identities, especially for women of diverse SOGI. Dionigi (2010; 2018) noted that older Masters sportswomen express feelings of empowerment and resistance to gender norms and stereotypes of ageing through their participation in sport. Combining their research, Litchfield and Dionigi (2012; 2013) found that a sense of community and belonging similarly manifested among women in Australian field hockey and like-minded older and middle-aged women in Masters sport or Veteran's hockey.

Other scholars have researched belonging and 'safe spaces' for marginalized communities (women and individuals of diverse SOGI) in Australian rules football and soccer (Hargreaves 2001; Hillier 2005). Hargreaves (2001) argued that sport attracts women, lesbians in particular, because sport provides opportunities to belong to a community that allows for affirmation and exploration of genders and sexualities. On the other hand, Storr, Jeanes, and Rossi (2022) noted that more work is needed to address inclusion and exclusion in sport in Australia, especially in cricket where discrimination based on gender and sexuality is prevalent. Similarly, Drummond et al. (2019) studied approximately 40 sports in South Australia and reported participants having 'felt unsafe or vulnerable in a sporting environment as a result of their gender identification or sexuality' (4), which can affect participants' mental and emotional health. For example, in a qualitative case study on two female Australian field hockey players in their 50s, Forsdike et al. (2022, 102595) argued that sport can simultaneously help women 'manage their mental health through identity-work ... [and] be problematic for their mental health'. Therefore, women's mental wellbeing is affected by their sporting experiences, in positive and negative ways, which highlights the importance of fostering inclusion, identity affirmation and a sense of belonging through sport.

Despite exclusion occurring in sport, government and policy makers in Australia highly value inclusive sport participation (see Spaaij, Knoppers, and Jeanes 2020). For example, 'Australia's Sport 2030' policy aims to have a 'diverse and inclusive sport and physical activity sector that supports more Australians to be more active more often' (Australian Government 2018, 3; also see Spaaij, Knoppers, and Jeanes 2020). However, beyond this policy goal of increased population physical activity levels, very little focus relates to embracing inclusion and diversity in sporting clubs or exercise groups. In their study investigating the resistance to diversity in Australian sport, Spaaij, Knoppers, and Jeanes (2020) explained that the use of 'discursive practices served to preserve privilege by keeping underrepresented or marginalized population groups out or in the margins of the sports clubs' (366). In other words, although many sporting clubs may welcome players of diverse backgrounds, very little cultural change occurs to discursive practices at these clubs. According to Spaaij, Knoppers, and Jeanes (2020), the implication for sport policy development and practice is that 'sport policies that focus exclusively on

increasing participation amongst diverse and underrepresented groups will rarely lead sports organizations to embrace diversity and alter discriminatory practice' (372).

In the context of women's leisure pursuits, Brown and Pavey's (2016) longitudinal work on women's health in Australia showed that active leisure throughout mid/older age benefitted women's physical and mental health. Specifically, PA engagement was found to be associated with lower depression scores and better overall mental health and well-being among participants (Brown and Pavey 2016, 93). As such, Mutz (2021) explained that reducing participation in PA and exercise usually results in lower subjective well-being. Moreover, 'Leisure forms and practices afford people well-being experiences created in time and space and in connection with the cultural and physical environment and embodied and sensual experiences that characterise them' (Mansfield, Daykin, and Kay 2020, 3–4). For example, using a qualitative, post-structural feminist approach, Fullagar (2008) showed how leisure was an important site for 48 Australian women (including 24 from rural areas) recovering from depression to experience emotion, social connection and identity transformation. Additionally, Taylor found that 'leisure has assumed a continuum of roles in relation to cultural diversity ranging from suppression to celebration of difference' (2001, 535). This outcome was particularly the case for women from cultural minorities (Taylor 2001). Therefore, leisure experiences for women in Australia can vary greatly, particularly as they relate to mental wellness (Fullagar 2008; 2013).

While we have provided some insight into this phenomenon, little is still known about the sport and exercise experiences, including physically active leisure pursuits, among women in rural or remote communities across Australia, particularly in the context of COVID-19 pandemic lockdowns (when much of this data was collected).³ Therefore, the research question was: how do experiences in, and access to, physically active leisure and/or sport impact on women's physical, social, and emotional health and mental wellness in rural/remote communities across Australia and how does this process intersect with identities of gender, age, ethnocultural background and/or sexuality? The analysis of data specific to the female-identified participants in this study found that themes of belonging, inclusion, exclusion and mental wellness were important in their experiences of sports and leisure. As such, this research uses both the integrative theory of belonging (Allen et al. 2021) and intersectionality theory (Nash 2008) to frame our findings and discuss this phenomenon, thereby moving 'beyond the oppositions of psychology and sociology, individual and social meaning' in understanding women's lived experiences (Fullagar 2008, 36). In doing so, this study highlights the need to advance conceptualizations of belonging from the individual and group levels to incorporate structural inequities related to intersectional identities.

Theoretical framework

Intersectionality

This study drew from intersectionality theory (Nash 2008) to understand how the intersection of identities (rurality, ethnocultural background, age, gender, sexuality, body, etc.) affects access to, experience, and participation in, sport and physically active leisure pursuits. Intersectionality takes a sociological, feminist perspective adopting the

epistemological assumption that power relations produce the conditions which can impact people's practices, emotions, experiences and motivations.

Kimberle Crenshaw coined the term 'intersectionality' in 1989 to explain the ways in which black women are discriminated against that are both racist and sexist (1989). Crenshaw (1989) explained that from a legal and statute perspective, the experiences of black women cannot wholly be understood by examining race and/or gender separately. As Crenshaw further suggested, 'because the intersectional experience is greater than the sum of racism and sexism, any analysis that does not take intersectionality into account cannot sufficiently address the particular manner in which black women are subordinated' (1989, 140). The 'black woman athlete' inevitably includes the experience of being an athlete as an additional intersection to that of race and gender. There can be a differentiation of 'white woman athlete' and 'black woman athlete', which in part rests on the 'persistent historical myths' surrounding both the categories of 'black athlete' and of 'black woman' which 'construct black female athletes as masculine, hypersexualized and sexually undesirable' (Adjapong and Carrington 2014, 170). According to Adjapong and Carrington (2014), black women participating in sport often face a different set of assumptions than white women athletes about their 'femininity (or lack thereof) and their sporting ability' (169–170).

An intersectional lens allowed an analysis of the multiple forms of oppression, discrimination and/or exclusion experienced by several participants in this study (see Collins 2000; Nash 2008). As such, multiplicity is key in understanding how intersectionality works as a theoretical framework. As explained by Bandy (2014), categories such as gender and/or race are 'too simplistic to capture the complexity of lived experience' (22). Gender has individualized and contextualized meanings and not all women's experiences are the same (Bandy 2014, 22). Litchfield (2023) explained that it is 'inconceivable to describe two women in the same way, when diverse factors including age, skin colour, body shape, sexuality and ethnicity can differ greatly between individuals' (8). The current study examined the multiple meanings women attached to sport and physically active leisure involvement through the lens of intersectional identities such as gender, age, geographical location, ethnocultural identity and sexuality. Within this broader lens, we used an integrative theory of belonging (Allen et al. 2021) to interpret the findings related to reported experiences of inclusion, exclusion, social and emotional health outcomes and mental wellness. In contrast to the intersectional perspective, the integrative theory of belonging has a psychological emphasis on individual motivations and behaviours, as well as group dynamics, which is underpinned by the following assumptions.

Integrative theory for belonging

A sense of belonging is particularly important for the social and emotional health of certain groups, such as women, older people and individuals of diverse SOGI living in rural and remote areas, because they are often confronted by antagonism, stigmatization, exclusion and, sometimes, violence (Marlin, Lewis and McLaren, 2022). An integrative theory for belonging argues that feelings of belonging require individuals to develop competencies for belonging, be motivated to belong, and be provided with opportunities to connect with others, thus improving their overall health and wellness (Allen et al. 2021; also see Barnett et al. 2008). Opportunities for belonging refer to the availability of

'groups, people, places, times, and spaces that enable belonging to occur' (Allen et al. 2021, 92). However, it is uncommon to find an abundance of safe sporting opportunities for individuals from minority groups, such as women of diverse SOGI and individuals from non-Anglo backgrounds (Drummond et al. 2019; Storr, Jeanes, and Rossi 2022). If opportunities to belong exist, individuals need to have motivations for belonging, that is, 'a need or desire to connect with others', as well as feel comfortable seeking out like-minded others (Allen et al. 2021, 93–94). After failed attempts to connect with others, motivations for belonging can weaken and negatively affect an individual's social and emotional health, particularly in rural/remote communities where access to diverse social groups is limited (Marlin, Lewis, and McLaren 2022).

Perceptions of belonging, such as one's feelings and cognitions of experiences of inclusion and exclusion (Allen et al. 2021), are important for women, particularly women of colour, diverse SOGI or older women, who are more likely to face discrimination and abuse in sport/PA settings (either online or in person). For persons of diverse SOGI, perceptions of exclusion can lead to an avoidance of sport and PA more often than their heterosexual or cis-gendered counterparts (Symons, O'Sullivan, and Polman 2017; Meredith et al. 2023). Explorations of belonging have received scant attention in sports and leisure research (Allen et al. 2021), particularly among women in rural or remote areas of Australia. Therefore, it is important to consider the extent to which such women experience belonging, especially in contexts that tend to value masculinity, competition and patriarchy. For example, in the sociology of sport there is a long history of hegemonic masculinity in mainstream sports, with sport having an embedded ethos that is individualistic, masculine and competitive (Coakley 2011). This ethos runs contrary to minority groups seeking a sense of safety and 'refuge' through sport (Walseth 2006) or leisure (Fullagar 2008). Correspondingly, an integrative framework for belonging argues that when analysing a sense of belonging, one must examine broader contextual and environmental factors which affect it (Allen et al. 2021), such as gender and ageing norms, rurality and one's socialization into sport and/or physically active leisure. Therefore, although an integrative theory of belonging and an intersectional approach have different epistemological assumptions, combining them allows for a deeper examination of how structural factors and intersectional identities relate to individual and group experiences of sports and leisure in rural or remote areas. That is, our theoretical framework helped us to explain how both 'the macro' and 'the micro' shaped experiences in sport and physically active leisure for our participants.

Methods

Research design

This study took an exploratory approach to uncover the lived experiences and perspectives of women engaging in sport and/or PA across rural/remote Australia. Accordingly, this research is situated within the interpretivist paradigm, allowing individuals to share perspectives, lived experiences and socially constructed realities (Guba and Lincoln 2005; Patton 2015). Interpretivism accepts there are always other ways to interpret the lives, meanings and stories of those being researched (Denzin and Lincoln 2003). The overarching 'goal of interpretive research is not to discover universal, context and

value free knowledge and truth but to try to understand the interpretations of individuals about the social phenomena they interact with' (Rehman and Alharthi 2016, 55). The findings share the lived realities of the female-identified participants from their own frames of reference, rather than generalizing about all women in sport or physically active leisure across rural/remote Australia.

Data collection and analysis

Data was collected from November 2020 to late March 2021 using an anonymous online open-ended survey via the Survey Monkey platform to target adults in remote and rural areas of Australia who engage in sport and/or physically active leisure, as defined at the beginning of this article. Specifically, participants were asked indepth, open-ended questions about their access to sport and/or PA, any inclusion or exclusion issues they may have faced, as well as the impact of sport and/or PA on physical, social and emotional health. We also asked participants to report on their identities, health status, location, and past and current sport/PA involvement. Notably, data were collected during the COVID-19 pandemic and soon after lockdowns in many Australian states. It is also important to note that the researchers were a mix of female and gender-fluid identified, lesbian and heterosexual identified, and they all lived in rural or regional Australia at the time of the research. They also have expertise in qualitative research and range from early career researchers to senior academics.

Participants were recruited via purposive sampling; that is, they were recruited for a specific purpose or from a specific group (in this case, Australian adults from rural and remote areas), and by snowball sampling (Patton 2015). Snowball sampling involves asking initial contacts (or participants) to nominate others who are eligible for the study, thereby enabling a larger number of participants (Patton 2015). The findings from the open-ended questions were inductively thematically analysed through the use of codes (such as 'social connections', 'mental health', 'feeling excluded'), which resulted in raw themes that addressed the research question (Patton 2015). Further analysis involved combining these initial themes and developing relationships across them to establish higher order themes (i.e., more refined concepts representative of themes in the data; Miles, Huberman, and Saldana 2014). Once the higher order themes were determined (i.e., 'welcoming and inclusive spaces', 'mental wellness' and 'unwelcoming spaces and exclusion', the latter with one sub-theme: discrimination), the findings were deductively interpreted in relation to intersectionality and the integrative theory of belonging. This framework allowed us to represent the participants' reported experiences of exclusion, discrimination, inclusion, belonging and mental wellness through sport and physically active leisure in the context of rurality, remoteness, gender, ethnocultural background, sexuality and/or age norms.

Findings

Before presenting the key themes and sub-theme representing the experiences and perspectives of participants, data are presented on participant-reported identities, health status and past and current sport/PA involvement. Due to the number of participants in this study, these initial data are presented primarily in percentages across the

sample, thereby providing a context for the latter key themes and highlighting nuances across age, sexuality and ethnocultural background in the findings. In addition, when discussing the broader key themes from the open-ended questions (i.e., 'welcoming and inclusive spaces', 'mental wellness' and 'unwelcoming spaces and exclusion'), the use of frequency percentages in conjunction with participant quotes highlights the strength and/or commonality of certain responses across the sample.

Intersecting identities of participants

For the wider study, 144 participants completed the survey. This study focuses on the 92 participants who identified as female, aged between 18 and 76 years (mean = 44 years). Notably, 20 of these women were aged 60–76 years (mean = 68.5 years) and this subset of participants allowed us to draw out findings relevant to older women in the sample. Approximately 72% of all female participants identified as either 'Australian', 'Anglo-Saxon' or 'Caucasian', 12% identified as non-Australian nationalities (e.g., 'English German', 'Fijian/Chinese' and 'Irish, Scottish, Indigenous Canadian') and 8% identified as First Nations Australian (including one aged over 60 years). Around 80% of participants identified as heterosexual, while 10 individuals (including two aged over 60 years) identified as either lesbian (two), gay (two), queer (three), bisexual (four) or pansexual (one). Of these 10 women of diverse SOGI, seven held a post-graduate degree and six described their racial or ethnic background as Caucasian and or/Anglo or Gaelic.

The majority of the 92 female participants (~73%) were married or in a de-facto relationship, around 20% were single and 7% of women were either widowed or divorced. A high proportion of participants were university educated (~70%, including 25% with postgraduate qualifications), around 11% held Technical and Further Education (TAFE) or Diploma qualifications and around 15% had completed secondary schooling. Approximately 95% of participants identified as 'middle class', 'upper middle class' or 'lower middle class', while three participants (all under the age of 60 years) defined their socio-economic status as 'lower class', and these three participants included two Indigenous/First Nations identified women and another identifying as 'mixed race'. Notably, the participants self-identified in these categories, because the open-ended survey did not provide a pre-set framework relating to ethnocultural background or class. Around 77% of participants were employed in full-time, part-time, casual and/or self-employed capacities; approximately 15% of participants were retired, two were unemployed, and two were students. Within the sub-set sample of older women ($n = 20$, 60–76 years), 65% were retired, one was semi-retired, while two were part-time and two full-time employed.

Self-reported health

To get a sense of perceived holistic health and wellness, participants were asked to rate their physical, social and mental health. Approximately 75% of the women defined their physical health as either 'good' or 'very good', with 15% of participants describing their physical health as 'neutral'. Around 10% of participants (only one over 60 years) described their physical health as 'poor' or 'very poor', and four participants (one aged 73 years) noted a disability.⁴

In terms of mental wellness, approximately 80% of the women felt their mental health was 'good' or 'very good', around 17% described their mental health as 'neutral' and six participants described their mental health as 'poor'. Notably, of those who reported their mental health as 'neutral', one participant identified as gay, one as lesbian and one as bisexual. Of those reporting 'poor' mental health, one identified as bisexual and two identified as being Indigenous.

As such, half of the participants of diverse SOGI in the sample and nearly one third of the Indigenous-identified participants reported 'poor' or 'neutral' mental health. These percentages show that comparatively more participants from minority cultural and sexuality identities rated their mental health as either neutral or poor. In contrast, among the older women (aged 60 years and over), 85% rated their mental health as either 'good' or 'very good', with the remaining 15% stating 'neutral'. No older women rated their mental health as 'poor'. These findings reveal the intersections and nuances across age, ethnocultural background and sexuality embedded in our key themes, as will be later shown.

Physical activity (PA) and sport involvement: past and current

The women reported engaging in a variety of physical activities and sports, including walking (~34%), gym classes (~29%), team sports (~17%), running (~9%) and individual sports (~9%). A further 24% of participants said they engaged in other leisure activities, including water sports, croquet and equestrian activities. Additionally, approximately 12% said they currently had roles 'off the field', including coaching, refereeing or administration positions at sporting clubs. Incidentally, around 62% of the women explained that they had carried out such roles 'off the field' in the past (coaching-34%; sports administration-17%; and refereeing-11%). Only two women (47years, heterosexual, English and 21years, heterosexual, Aboriginal) indicated they did not participate in PA at least once a week.

Approximately 80% of participants were currently involved in PA two or more times per week and 14% engaged in PA one time per week. Around 14% of women said they had played sport at a representative level at some point in their lives, and 24% described their current level of sporting activity as competitive (the latter included one participant over the age of 60 and one First Nations identified participant). Although no participants of diverse SOGI identified their current level of sporting activity as competitive, five had competed in competitive sporting competitions in the past. A further 61% described their current level of PA as recreational or social (including 80% of women 60 years+). As such, participants cited team sports (~25%), walking/running (~23%) and gym classes (~17%) as activities they participated in for social reasons. Approximately 21% of participants said they presently participated in individual sports and other physical activities for social reasons. In fact, 'interacting with other people' through sport, exercise and leisure activities was the dominant social benefit as reported by approximately 82% of participants.

Overall, the women sampled, particularly those aged 60 years+, appeared to be relatively physically and socially active, as well as having typically engaged in sport across their lifespan. For instance, approximately 64% of participants reported always feeling welcomed and included in all PA and/or sports that they have been involved in throughout their lives. The following theme describes how sport and physically active leisure contexts provided belonging, connections and friendships for many women living in rural or remote Australia.

Welcoming and inclusive spaces for women

The women reported on a variety of social benefits that they gain from participating in sport, exercise and/or PA. Specifically, they used the words ‘belonging and connections’, ‘welcoming’ and ‘supportive’, as well as ‘like-minded people sharing connections’ to describe the social experiences they gained from their sports and leisure pursuits. These findings were common across women of different ages, sexualities and cultural or ethnic backgrounds. For instance, Denise, a 55-year-old, self-identified ‘lesbian, Caucasian’ said that participation in sport and PA was about, ‘Developing friendships, belonging, social contact’. Likewise, Meg said the benefits of participating in sport and PA included ‘Friendships, sense of community and belonging, setting a good example for my children, shared interest with my husband and extended family’ (aged 37years, heterosexual, Caucasian) and Allyssa, a 35-year-old, heterosexual, Indigenous Australian explained, ‘I enjoy spending time with like-minded people who enjoy adult time and physical activities’. Similarly, ‘It’s a great way to connect with my friends each week’, reported Megan (aged 49years, heterosexual, Caucasian).

Evidently, friends or friendships were important to these women and, notably, for women aged in their early 30s, ‘friendships’ was the most dominant social benefit mentioned, for example:

I have made lifelong friends through sport socialisation. (Erin, 30years, heterosexual, White/Australian)

Meeting good people, forming friendships, a sense of belonging from being part of a team. (Penny, 32years, bisexual, White Anglo-Saxon)

Gain new friendships ... meet with people of similar interests. (Eve, 31years, heterosexual, Caucasian)

Whereas, highly active older women made specific reference to gender, age or family, respectively, when describing social benefits of sport and PA, such as, ‘contact with other women’ (Nat, 68years, heterosexual, Anglo-Saxon) and ‘Regular interaction with similar aged like-minded people’ (Teresa, 62years, heterosexual, White Anglo-Australian), and ‘Connection with family and friends’ (Shelley, 72years, heterosexual, Anglo-Saxon). Moreover, several older women from diverse cultural backgrounds described how welcomed they felt at times of change, such as after loss, ‘Very much so and great support when my husband died’ (Margaret, 74years, heterosexual, UK-Australian), relocation, ‘I have recently moved from [town] but will say there is a terrific welcoming social and racing cycling community in [the town]’ (Elizabeth, 64years, heterosexual, Australian), or taking on a new activity in later life, ‘At the gym yes I do feel welcome’ (Jan, 63years, Aboriginal, heterosexual).

Clearly, many of the women in this study experienced welcoming and inclusive spaces, and thereby perceptions of belonging, through activities involving social connections, friendships and sharing time with like-minded individuals. The finding that socializing was a key benefit for women, regardless of intersections of identities of age, ethnocultural background and sexuality, indicates that when women feel they belong (in their rural context) they experience many social health benefits akin to what is commonly reported across sports and leisure contexts. In addition to this, approximately one fifth of participants specifically cited mental health benefits from such participation and these findings are expanded upon in the next theme.

Mental wellness

In relation to identifying specific motivations for engaging in PA, sport and/or exercise, around 21% of participants cited physical benefits as their strongest motivation, while 18.5% cited mental health benefits, 13% cited emotional health benefits and 11% of women reported social health benefits. For example, Ash reported, 'physical and mental health, social gain, friendships' (19years, heterosexual, Australian) and Beth said, 'I do it for myself, mental health and physical wellbeing' (57years, heterosexual, Australian).

At the same time, a large proportion of women mentioned a variety of interrelated motivators. For instance, approximately 20% of participants cited a combination of mental and physical motivators: 'As I'm home all day I find my mental state worse than usual and getting out and exercising helps' (Jasmine, 21years, heterosexual, Caucasian). An additional 20% cited benefits to mental, physical, emotional and social health combined as their strongest motivators, such as 'Friendship, inclusion, healthy mind, supporting community' (Janelle, 51years, heterosexual, Australian/Scottish). Notably, 35% of females aged 60 years and over cited all of these benefits as their strongest motivators to be active:

Good for mind and soul and wellbeing. (Kim, 76years, heterosexual, European)

mental and physical wellbeing. (Deidre, 62years, did not disclose sexuality, Australian)

Friendships, mental health. (Helen, 72years, heterosexual, English/Scottish)

As such, nearly 80% of participants reported benefits *beyond* physical health, with them citing mental, emotional and social health benefits as the (or one of the) strongest motivators to participate in exercise. Collectively, we refer to these latter health benefits (that go beyond the physical benefits of sports/physically active leisure) as 'mental wellness', and this outcome was reported by women of diverse ages, sexualities and ethnic/cultural backgrounds. For instance, Hannah, a 55-year-old, heterosexual, self-identified 'Aboriginal' woman stated, 'Clear mind and feeling better' as her main motivation for sport and exercise participation.

With respect to age, sexuality and ethnocultural background, many middle-aged, 'white'/Anglo-Saxon, heterosexual women stressed the importance of mental wellness, such as, 'It's just great for my mental health' (Kat, 42years, heterosexual, 'White') and 'Setting and achieving goals. Self-worth' (Celia, 42years, heterosexual, European) and 'emotional well-being with exercise – head space' (Fiona, 57years, heterosexual, Anglo-Saxon). Furthermore, other women highlighted the connection between social, emotional and mental health in comments such as:

Better relationships with work colleagues, know more people in the community, better mental health which makes me want to be more social. (Tanya, 50years, pansexual, Anglo-Saxon)

gain better mental health, good socialising with different people with the same interests. (Danielle, 39years, heterosexual, Caucasian)

The above findings provide insight into how women develop competencies for belonging through their involvement in sport and physically active leisure pursuits, regardless of age, ethnocultural background and/or sexuality, which provides women with perceptions and experiences of belonging that contribute to their mental wellness and holistic health.

In addition, when the participants were explicitly asked if they experienced any mental and emotional health benefits from participating in sport and/or PA, the reported benefits included an improvement to mental health generally (~67%), stress relief (~31.5%), clearer mind (~24%), and healthier mental health due to the social connections made (~24%). For example, Jess said, 'it clears my mind and makes me feel better' (45years, heterosexual, Caucasian) and Darcie explained that: 'My stress levels are low when I'm exercising' (58years, heterosexual, White Australian). Millie, an 'Indigenous Australian', commented:

There are absolutely mental health benefits that I achieve from participating in sport and physical activity and that is one of the main reasons I make time to participate. I participate for fitness but more so these days I participate as a form of stress relief, escapism, socialisation and to have a clearer mind. (35 years, heterosexual)

Most of the participants reported a combination of more than one mental health benefit. For example, 50% (or 10) of women aged 60 years and over in the sub-set sample ($n = 20$ females aged 60–76) discussed socialization as beneficial to their mental and emotional health: 'Huge benefits from taking part in [aqua aerobics] class and socializing afterwards' (Margaret, 74years, heterosexual, UK-Australian) and 'Cycling is wonderful for clearing the mind whilst getting fit, riding with a small group and having conversation afterwards at a local coffee spot is a great social activity' (Elizabeth, 64years, heterosexual, Australian). It was not only older women, but also women aged in their 20s and 30s who valued the connection between socializing and mental, emotional and physical health:

great stress relief, socialisation, clear mind, fitness, meeting people/sharing same experiences as people in the same boat as you. (Elise, 32years, heterosexual, Australian)

YES!!! clearer mind, stress relief (*sic*), socialisation, fitness, release of endorphins, better sleep. (Talia, 28years, heterosexual, Australian)

These findings further support the notion that mental wellness is a key benefit for women when they feel they have opportunities for belonging, regardless of their age, interests or location.

Notably, some women made specific reference to sport and exercise helping to manage their depression, anxiety, stress and/or emotional instability. For example, Marizanne said, 'Yes. I suffer from depression and anxiety at times and physical activity always helps alleviate some stress and clears my mind a little', (24years, heterosexual, South African) and Georgia commented, 'I experience depression and anxiety and find that participating in sport and physical activity helps me feel better mentally' (34years, heterosexual, Australian). Likewise, Sophie explained that 'If I don't do sport I feel less happy and less able to cope with issues that happen in life. Doing sport makes me feel better physically, so I feel better mentally and am emotionally more stable' (45years, heterosexual, Australian). For Nicole, mental health benefits were the main driver for participation, 'Yes, it is a big reason I exercise'.

Unsurprisingly, given gender stereotypes and the common link between poor body image and poor mental health, many women in their 30s made explicit mention of their 'body' and 'fitness' as key factors connected to their mental health:

My mental health benefits hugely from any kind of physical exercise. I love seeing what my body can achieve, relieving stress, and feeling accomplished after I finish. (31years, heterosexual, Caucasian)

I believe there is a direct link between my fitness and my overall mental health and resilience levels. (Bea, 37years, heterosexual, Caucasian)

I run purely for the mental health benefits and to get fit. It relieves stress, clears the mind. And by being fit, you are happier with your body image which ... is better for your mental health. (Vanessa, 38years, heterosexual, White New Zealander)

With regards to stress relief and anxiety, there was a reciprocal relationship identified by participants of varying ages, cultural backgrounds and sexualities in terms of how sport participation and/or high-risk leisure pursuits can simultaneously cause and alleviate stress and/or acute bouts of anxiety. For example, Renee said:

I definitely have anxiety related to paragliding (just from fear of making an error and hurting myself) which I need to overcome each time I fly. (Renee, 42years, identified as 'Extremely gay', Australian, Irish, Scottish, Indigenous Canadian)

Similarly, others explained that:

I do get anxious around competing however the benefits largely outweigh this. Once I begin the sport my concerns are eased. However I think this level of stress is beneficial to my performance. (Nadia, 20years, heterosexual, White-Australian)

Yes, PTSD, OCD and Anxiety when placed in competitive environment- several significantly abusive coaches. Anorexia and (its induced depression) ... Anxiety if not time to exercise. (Keira, 40years, heterosexual, Australian 4th-generation)

Often, this anxiety and stress was related to competitive sport, where participants would feel anxiety before matches and competitions. For example, 'I also get extremely anxious before games to the point where I feel as though I need to be sick', said Alana (21 years, heterosexual, 'Caucasian'). Others explained:

I am a fairly competitive person so there is always anxiety that comes with that. (Kat, 42years, heterosexual, White)

I do get anxiety around competition and set high expectations for myself and become disappointed when I don't achieve what I set out to. I'm learning to deal with that though. Competition will be the reason for my 'retirement' before my body gives out. Mentally it can be quite taxing. (Nicole, 29years, heterosexual, White-Australian)

One older participant reported feeling self-doubt, embarrassment and anxiety, 'Only [mental/emotional health issues] when you are feeling unfit and are silly enough to doubt your ability and feel anxious at the start, the cycling soon relieves it' (Elizabeth, 64years, heterosexual, Australian). For this participant, cycling both causes and relieves mental factors related to anxiety and a lack of confidence. Overall, 75% of the older women in the sub-sample (20 females aged 60 years and over), reported no mental health issues related to their participation in sport, exercise or PA. However, around 30% of all participants explained that they have felt excluded or unwelcome in sport and/or PA spaces, as described in the next theme.

Unwelcoming spaces and exclusion in sport and physically active leisure contexts

While sport, exercise and physically active leisure clearly provided opportunities for belonging, holistic health and wellness, when asked about any experiences or feelings of exclusion in such settings, there were many stories shared by women of diverse identities. Penny, who self-identified as 'White Anglo-Saxon' and bisexual, explained: '... I felt a bit on the outside in teams where there's already strong friendships amongst the players' (32years). Similarly, a 32-year-old heterosexual, Caucasian, Grace, said, 'Yes [to feeling unwelcome or excluded]. Mainly due to unfriendly groups'. Others who played sports commented, 'Some team sports e.g. netball can sometimes be very clicky (*sic*) and not as welcoming as they have most likely already been bonded together for many years' (Karina, 25years, heterosexual, 'White British/Australian') and 'Moved to a new town and wanted to join hockey club. They said no, I was not a local' (Ellie, 42years, heterosexual, Aboriginal-Australian). These quotes highlight the 'double-edged sword' of small towns across rural/remote Australia. That is, on the one hand, as in the theme above, sport can be a context for community and belonging for people in these areas, whereas when 'outsiders' move to these small towns, they are not always welcomed or included, particularly for individuals seeking team sports. The above findings of exclusion also seem to be the result of social network dynamics at the micro level, rather than exclusion based on broader socio-cultural factors.

Feelings of exclusion were also identified in exercise, gym or recreational settings, among women of different ages and sexualities, yet they were all living in the same town, such as:

... in a yoga course with a small group of participants who knew each other already, from elsewhere or at least from previous terms at yoga. (Wendy, 55 years, bisexual, Anglo-Gaelic Australian)

There has (*sic*) been times where cliques have formed. Some are from being in a certain gym, others are because they may work together or in the same field. I feel a little on the outside when relating to that. (21 years, heterosexual, Caucasian)

Some gym facilities are not welcome (*sic*) to women and some of the yoga studios I have attended are definitely unwelcoming in terms of small or elite groups of people who have a high level of ability and do not wish to teach beginners. (Jane, 54years, heterosexual, Australian non-Aboriginal)

The last quote draws attention to (lack of) ability, age and gender all playing a role in women experiencing unwelcoming spaces, a finding which is extended in the following quotes:

As a 30 YO in tennis. I wanted to start to play for social reasons, but no one would partner me as I was not good enough. (Ruth, 71years, heterosexual, Australian)

Yes [felt unwelcome/excluded] – Due to my age & physical shape. (Lise, 57years, heterosexual, Australian)

Of further concern, approximately 24% of participants had either experienced or observed discrimination in their sporting, exercise or leisure experiences.

Identity-based discrimination

Participants shared stories of discrimination in the form of racism, ableism, sexism, weight discrimination, socio-economic exclusion, ageism, transphobia and general discrimination or exclusion in various PA contexts in rural/remote Australia. The above findings on self-reported health and mental wellness showed that, compared to heterosexual Anglo women, significantly more participants from minority cultural and sexuality identities rated their mental health as neutral or poor. The stories shared by the women below about their experiences of discrimination based on one's identity/ies align/s with our percentages above, which indicated that half of the participants of diverse SOGI in the sample and nearly one third of the Indigenous identified participants reported poor or neutral mental health. That is, compared to heterosexual Anglo women, more participants from minority cultural and sexuality identities rated their mental health as neutral or poor, which may be a result of them experiencing the discrimination they describe below in this sub-theme.

Contrastingly, with regard to the women aged over 60 in the sample ($n = 20$, aged 60–76 years), 80% said they had not observed or experienced discrimination, which corresponds with our finding above that 85% of women 60 years and over rated their mental health as either good or very good compared to others their age, with the remaining 15% stating 'neutral', and none of them rating their mental health as poor. However, Ruth said she experienced, 'physical exclusion based on my lack of ability in the sport, I wasn't given the opportunity to learn it [growing up]' (71years, heterosexual, Australian), which is reflective of gender norms where older women were not given as many opportunities as boys in their younger years to participate or develop skills and knowledge in sport. Jodie (66years, Irish, heterosexual) experienced discrimination, 'Only back in the 1970/80s', which aligns with a time period when gender discrimination was more apparent in society, especially in countries like Ireland and Australia, where the participant had lived. Two other older women explained that they had observed discrimination in sport based on body type and ethnocultural background, respectively:

School sport discrimination for those overweight or with a disability. (Teresa, 62years, heterosexual, White-Australian)

Not directed at me but I am aware of racism in sports. (Jan, 63years, heterosexual, Aboriginal)

A younger, self-identified 'Aboriginal' participant reported racism directed at her, 'I have experienced a large amount of racism in [sport] as a player, spectator and volunteer' said Lily (21years, heterosexual). Julie recalled hearing stories of (trans)gender discrimination, as well as reported being a victim of racism in a leisure context:

One young person told me how they wanted to join the boys footy team with all of their friends. Apparently they were told no because of their birth gender. I have experienced racist comments during a paramotoring course. (41years, queer, Fijian/Chinese and White-Australian)

Similarly, Renee shared another story of (trans)gender discrimination, this time in a small-town sports context, in addition to personally being mistreated by men based on her body type:

... a young transgendered boy in my small town who was told he couldn't participate in the boy's football team with all of his friends because they said he was 'a girl'. I've also had a

couple of men say something negative about my weight when I've been riding my bike around town. (42years, extremely gay, Australian, Irish, Scottish, Indigenous-Canadian)

Gender discrimination was not only discussed in overt ways as described above, but also in terms of men targeting women in the online world, for instance, Nicole explained, '... I have also observed discrimination due to gender. Mainly online directed at female athletes by males' (29years, heterosexual, White).

Moreover, discrimination based on socioeconomic status has been witnessed by women in rural communities:

I have seen over the years discriminated against for their socio-economic status (*sic*). (Kat, 42years, heterosexual, White)

Observed young people in our town being excluded as they don't have the finances or mode of transport to be involved in out-of-town competitions. (Ems, 52years, heterosexual, Australian Anglo-Saxon)

As a result of unwelcome sporting environments, exclusion and/or discrimination based on various identities and factors experienced or observed by the participants, and the associated perceived lower levels of mental health and wellness, a majority of women reported on their reluctance to participate in sport or PA at certain points in their lives, especially those of sexual and racial minority groups. This reluctance was perhaps tied to women feeling they do not have the required skills or fitness, which was in part shaped by gender, racial and societal norms tied to sports and PA.

Discussion

The purpose of this study was to examine how access to, and experiences in, physically active leisure and/or sport participation impacted on women's physical, social and emotional health and mental wellness in rural/remote communities across Australia. In addition, it examined how this process intersected with identities of gender, age, ethnocultural background and/or sexuality. The online, in-depth survey data revealed that at the core of the women's experiences of sports and leisure was a sense of belonging and/or exclusion, that was shaped by social dynamics, as well as intersecting and diverse identities (and social norms) of age, ethnocultural background, place/rurality, gender and sexuality, all of which ultimately affected the overall health of female participants. As highlighted in the second theme, mental wellness was reported by women to be an important benefit and reason for participation in sport and physically active leisure, with a sense of belonging and social connection inextricably linked to mental health. Of note, many middle-aged, white/Anglo Saxon, heterosexual women stressed the importance of mental wellness, which corresponds with the middle-class preoccupation with health and fitness in western society (see Fullagar 2003). In particular, the women's perceptions of their ability, fitness and competitive levels, affected their sense of confidence, belonging, connectedness, exclusion and/or discrimination in sports, exercise and leisure contexts. This gendered and intersectional experience, in turn, impacted women's reported holistic health and motivation to participate in such activities in their rural/remote communities in multiple and complex ways.

The intersectional lens framing our analyses (see Bandy 2014; Crenshaw 1989; Nash 2008) brought to the fore the nuances across gender, age, ethnocultural background

and sexuality in the data, as well as how the intersections of these identities with place/rurality affected women's perceived ability, skill level, social, emotional health and mental wellness. For example, age played a key role in shaping women's experiences, with none of the women aged 60 years and over rating their health as 'poor', and many of them were highly active, socially engaged and well educated. Therefore, according to Allen et al.'s integrative theory of belonging (2021), these older women have developed the competencies for belonging, including grasping cultural 'norms' and social skills, that are required for sustained involvement in sport and physically active leisure. These findings align with previous research by Dionigi (2010; 2018) on the experiences of older female athletes who, despite not exclusively living in rural/remote Australia, were a similarly 'privileged' group of women expressing a sense of community, health, personal empowerment and resistance to cultural norms of gender and ageing through their late life sport-as-leisure participation.

While some older women in the current study referred to age as a factor negatively affecting their perceived health, ability or fitness levels, for the majority of these women, being older was tied to better mental wellness and social connectedness, especially when compared to the experiences of many women under 60 years of age. For example, the women of diverse SOGI and ethnoculturally diverse backgrounds reported the lowest mental health and the highest experiences of exclusion and discrimination in sport, exercise and/or leisure settings. These findings relating to discrimination based on gender, ethnocultural background and/or sexuality are similar to those reported by Storr, Jeanes, and Rossi (2022) and Drummond et al. (2019, 4) who found that participants have not perceived a sense of belonging or 'have felt unsafe or vulnerable in a sporting environment'. Moreover, it was shown that, compared to heterosexual Anglo women, more participants from minority cultural and sexuality identities rated their mental health as neutral or poor. This is not surprising considering the work of Taylor (2001), who argued that leisure was often a more challenging space for women with cultural diversity. Therefore, although sport and leisure are often understood as sources of mental wellness and good health for women, our findings offered a more nuanced view of how leisure can affect women's mental health and emotional wellbeing in positive and negative ways, which supports feminist leisure research (e.g., Forsdike et al. 2022; Fullagar 2003; 2008; 2013).

The first theme, *Welcoming and Inclusive Spaces*, showed that most of the women appeared to be somewhat currently active, social and engaged in sport, leisure and exercise communities, such as team sports (~25%), walking and running (~23%) and gym classes (~17%), which provided opportunities for developing social, sporting and PA skills, and thereby a sense of belonging in such spaces. Through applying Allen et al.'s (2021) integrative framework of belonging, it becomes clear how these socialization and educational processes can promote or limit women's opportunities and motivations for belonging based on gender. For instance, the final sub-theme showed how discrimination can thwart female's capacity to develop competencies for belonging.

On the other hand, many women in this study experienced, crafted and sought out welcoming and inclusive spaces, which created perceptions of belonging within team sports, outdoor leisure, and exercise settings that involved social connections, friendships and spending time with like-minded individuals. The finding that socializing was a key benefit for these women, regardless of intersections of identities of age, ethnocultural background and/or sexuality, indicates that, in alignment with Allen et al.'s (2021) theory, when women feel they belong and when they have opportunities for belonging

(in their rural/remote context) they can experience the many common social and emotional health benefits of sports and leisure that go beyond physical benefits and contribute to mental wellness. These feelings of a sense of community, inclusiveness, self-expression and social support have been found in other research on older women in team sports (Litchfield and Dionigi 2012; 2013) and women of diverse SOGI in field hockey (Litchfield 2011; 2013), Australian rules football and soccer (Hargreaves 2001; Hillier 2005). In extending these past findings, the women in the current study described how competing in sport can simultaneously cause and relieve stress and anxiety, and several women explicitly explained how sport, exercise and physically active leisure positively addressed their mental health issues, such as depression, which is consistent with research by Brown and Pavey (2016) and Fullagar (2008).

Allen et al.'s (2021) integrative framework highlights the foundational importance of the acquisition of certain competencies for belonging, including grasping and developing the cultural 'norms' or 'languages' and social skills relevant to a particular context. In the context of sport and PA, the cultural 'languages' and practices of navigating these spaces are gendered and often readily available to boys and men, thereby reinforcing the homogeneity of a patriarchal society, as was revealed in the third major theme, *Unwelcoming Spaces and Exclusion*, when the women spoke about not feeling 'good enough', not being competitive or highly skilled, or excluded due to 'age & physical shape'. Further, cultural 'norms' in mainstream sports and most gyms are centred around heteronormative, male bodies and their gendered occupation of these spaces (Hopwood and Connors 2002). In leisure contexts, feminist leisure researchers highlight that leisure is simultaneously a place for the reproduction of, and resistance to, gendered relations of power (Mansfield et al. 2018).

Navigation of these cultural and gendered norms exceeds the question of individual capacity for understanding them, it is also about resisting or negotiating dominant notions of age, sexuality, ethnocultural background and/or gender. This process can enable individuals to develop competencies for belonging that can motivate them to belong and, ideally, lead to them experiencing perceptions of belonging in such spaces. For instance, similar to young women in rural Sweden (see Gotfredsen et al. 2022), some women in our study created leisure spaces of their own by relying on their agency and capacity to negotiate structural constraints. However, it was not only macro level factors that affected feelings of belonging among our participants. The final theme also provided numerous examples of micro level group dynamics and the formation of 'cliques' making some women feel unwelcome and excluded in sport and leisure contexts. Therefore, by using Allen et al.'s (2021) integrative framework for belonging, and combining this with an intersectional lens, both the macro and micro factors that shape belonging and exclusion were revealed. Our findings of belonging and exclusion showed how inextricably linked competencies for belonging, opportunities for belonging, motivations to belong and perceptions of belonging are for women of diverse and intersecting identities of sexuality, age and/or ethnocultural background in rural/remote areas of Australia.

Conclusions/implications

Overall, the findings highlight the 'double-edged sword' of small towns across rural/remote Australia. That is, on the one hand, sport, exercise and leisure settings can be

places of community, belonging and wellness for women of diverse identities in these areas, whereas on the other hand, when former 'outsiders' move to these small towns, they do not always feel welcomed or included. In addition, when social norms of masculinity, competitiveness and physical prowess dominate these sport and exercise spaces, many women can feel marginalized, inadequate and are reluctant to participate, especially Indigenous women and women of diverse SOGI. Thus, further research is needed on this inclusion/exclusion, macro/micro and local/relocator dilemma in rural/remote Australia, especially given the popular perception that small towns are welcoming and offer a sense of community and given that sport and physically active leisure spaces are typically understood as the 'glue' that binds rural/remote towns across Australia (Spaaij 2009). Moreover, the current study is one of the first known studies to combine an integrative theory for belonging (Allen et al. 2021), a framework which has been used frequently in education and psychology, with intersectional theory (Bandy 2014; Crenshaw 1989; Nash 2008), a lens typically found in critical sociology, and use them in a sports and leisure context to interpret rural women's experiences, thereby paving the way for similar future research using this effective approach.

The findings have implications for sport and leisure programming and policies in rural contexts as these tend to focus on the needs of the dominant societal group (heterosexual males) rather than consider the diverse identities of women and the impact this has on experiences of inclusion or exclusion. For instance, our findings provide further evidence that policies such as 'Australia's Sport 2030', while important to support more people being physically active, need to be observed alongside dedicated policies that will lead sporting organizations to embrace diversity and provide guidelines for addressing discriminatory practices and exclusion in sport (see Spaaij, Knoppers, and Jeanes 2020). At a practical level, our research has shown that women can create or find sport and PA spaces that enable belonging, however this requires skills in navigating cultural norms and resisting dominant notions of age, sexuality and gender, as well as overcoming 'small town cliques', discrimination and a reluctance to participate, while seeking out opportunities for belonging and mental wellness. As such, fostering a sense of belonging and promoting holistic health in rural/remote Australia requires policy makers in sport and leisure to consider the needs and identities of individuals in these communities and a deep understanding of the local, cultural and social contexts in which people live.

Notes

1. For the purposes of this study, the term 'rural and remote' is defined using the Australian Standard Geographical Classification System (ASGS). Thus, 'rural/remote' refers to areas outside Australia's major cities that are inner regional, outer regional, remote or very remote areas: Australian Bureau of Statistics. (2018). Australian Statistical Geography Standard (ASGS) Volume 5 – Remoteness structure, cat. no. 1270.0.55.005. <https://www.abs.gov.au/ausstats/abs@.nsf/mf/1270.0.55.005>
2. Some of the female participants identified as having diverse sexual orientations and gender identities or SOGI (see Altman 2018).
3. Lockdowns refer to periods of time, from days to months, where people were essentially confined to their homes and only allowed out within 5km of their residences for essential reasons such as exercise, food shopping and medical care. These lockdown periods were held at various times between 2020 and 2021 in Australia.

4. One participant did not elaborate on their disability, two participants explained that they suffered both physical and mental disabilities and the final participant had a physical disability.

Disclosure statement

No potential conflict of interest was reported by the author(s).

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