The Comparison of Life Quality between Users and Non-users of Municipal Sport Facilities (case study: Isfahan Municipal Sport Facilities)

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ABSTRACT
This study aims at comparing the quality of life between users and non-users of municipal sport facilities in 14 municipality areas of Isfahan city. The research method was Expostfacio kind. Statistical population of the present research includes all Isfahan citizens between 15 to 55, which according to the latest census in 2006, is 1,085,573 people. According to Cochran's formula and using cluster method, the sample size was identified 832 people (416 users and 416 non-users). The data has been collected by a modified version of Quality of Life Questionnaires (WHOQOL–BREEF), which its calculated Reliability coefficient was 0.80. Data analysis was done with SPSS software version 19 through descriptive and inferential statistics, inferential statistics was through t tests (p = 0.001). Analysis showed that there are significant differences between life' quality scores of users and non-users of municipal sport facilities city (p = 0.001, t=3.314). In other words, the subscales of physical health, mental health, environmental health, social relationships in users of municipal sport facilities were better than non-users that showed the positive role of exercise on quality of life indicators (physical health, psychological health, environmental health and social relations).

INTRODUCTION

According to medical scientist, sociologist, psychologist and others, human beings have various existence dimensions which can affect other dimensions or be affected by them(20). These dimensions include health dimensions in the areas of physical, mental, social and environmental which makes up the foundation for people’s quality of life. There is a close bilateral relationship between promoting health and life’s quality. Increasing persons’ health will lead to greater satisfaction, which by itself can improve enhance the quality of life. Conversely, by providing circumstances which lead to promoting life’s quality and it will testify the increased health.

Many people in various communities recognized the importance of exercise in maintaining health and vitality, and enhancing mental and physical abilities, therefore, some may participate in leisure time sports and activities, and others may compete in professional sports. Both leisure time sports and professional sports all do in places called Sport facilities (6). One of the biggest problems in big cities is the lack of Sport space and the improper distribution of them according to the population in each region. Moreover, inadequate financial resources of sport and youth offices financial for building athletic facilities are the other problem. With the onset of urbanization, expansion of urban population and its related problems, it is felt that more facilities for welfare of citizens needed. Isfahan Municipality is one of the organizations that established sporting venues across the city to promote the health of citizens.

The best approach in defining quality of life is the one by the World Health Organization (WHO). WHO described it as the people’s perception of the situation they live in as well as their cultural context and value system, their perception is defined based on their minimal expectations, standards and concerns [19]. It seems that examining the quality of life from one dimension is inadequate. Based on the WHO quality of life consists of four dimensions which the dimensions are working together and influenced by each other. The quality of life is a set of indexes that throughout of growth and longevity are affected. The four components are physical, mental, social and environmental. The scales that are made based on the WHO’s standard questionnaire of Quality of Life are one of the most widely tools used to study the four dimensions of quality of Life. The
individuals’ scores will be gathered by the questionnaire. By adding up the scores gained on these dimensions, the overall life’s quality will be determined. Several factors affect the quality of life, among them physical activity’s role is more striking and other factors such as healthy eating, stress management, smoking and personal hygiene are also effective (20).

In recent years, a number of researches have carried out on life’s quality of Iranian society and on its general and specific aspects. A study by Ahmadi Gatab et al [1] showed that there is a significant relationship between psychological health, happiness and life quality. The students, whose psychological health is higher, are happier and will have higher life quality. Mokhtari [9] concluded that there is a significant difference between the Life’s quality of participants and non-participants of public sports in Ardebel city. Saber’s research [12] revealed that among the elderly, the semi-active men have higher quality of Life rather than inactive men. The Aminshokravi [2] in his research concluded that active women in all quality of life measures show higher mean scores. Except in two indexes (physical functioning and role limitations due to emotional problems), other indexes show statistically significant differences in other measurements obtained (2). The Rahimzadeh results indicate that mental health of athletes is greater than non-athletes. There is a significant difference between athletes and non-athletes regarding Physical health (12). The positive role of exercise training in the management of public health and quality of life of people has been reported, though in some cases, different results are obtained. For example, the cardiovascular fitness program has no effect on fatigue, psychological distress and health-related quality of life was observed (16) or increased resistance to psychological disease with exercise was not observed (8). Vaez Mousavi results revealed that the life’s quality of female athletes in individual sports is more than those in team sports. In contrast, male athletes competing in team sports showed higher quality of life than those in individual. (17). Vuillemin et al, [18] revealed that only about 30% of the average of physical activity done in leisure time might be beneficial to the quality of life. The intensity of physical activity in leisure time is strongly associated to higher levels of health related to quality of life. Thomas et al’s [15] study indicated that there is a significant relationship between the quality of life and BMI (Body Mass Index) in increasing utilization of sport and healthy services. Aurelio et al in their research found that physical activity is a suitable tool in the treatment and prevention of physical and mental health illnesses. Shephard results suggest that aerobic exercises can also cause mental health, reduce mental and physical health problems and improve behavior. This improvement is the result of lively production that is produced due to exercise (13). Zielinska et al studied and evaluated the Life’s quality of students based on demographic and mental health variables, the results of the study revealed that there is no significant relationship between students’ age, sex and marital status, and their quality of life (21).

Reviewing results of studies on the effect of exercise on the citizen's quality of life, it can be concluded that apparently, the type and duration of exercise will lead to different outcomes. Furthermore, the role of physical activity on quality of life in health is significant when participating in various sports and exercises happens regularly not on the recreational bases. By considering this, the life’s quality of Isfahan residents using municipal sports is important for Isfahan Municipality. Considering the review of the prior studies, the researcher aims to find the quality of life among those who participate in sports classes of 14 municipality areas of Esfahan city.

Methodology:

Present research was descriptive, Expost facio kind. Statistical population of the present research Includes all citizens between 15 to 55 year old living in Isfahan, that according to the latest census in 2006, their population 1,085,573 citizens. According to Cochran's formula and cluster method, the sample size was identified 812 citizen (416 user and 208 none user) that they have chosen accidentally and randomly. Researcher selected her samples from 14 municipality areas of Isfahan city, except Area 3 for not having a municipal specific gym. It should be noted that all citizen users of MSF (Municipal Sport Facilities) participating in this study, are those 15 to 55 year citizens who did various sports activities in Isfahan municipal sport venues at least twice a week for more than 6 months. Non-users of Municipal Sport Facilities included all 15 to 55 year citizen living in Isfahan but not exercising via any sport venues.

The data has been collected through a questionnaire, which has two parts. The first part is designed for gathering bio data (age, marital status, income's rates, jobs) and the next part, is a modified version of the quality of life questionnaires (WHOQOL-BREF) including 36 questions in 5-Likert scale, for evaluating quality of life in four aspects including (physical health, mental health, environment health, social relationship). Reliability of questionnaires was calculated through Cranach's Alpha, which was 0.80. Data analysis was done with SPSS software version 19 through descriptive and inferential statistics, inferential statistics was through t tests (p = 0/001).

Results:

In users and non-users of MSF’s group, 50% were men and 50% were women. In MSF’s users group 43.9% of samples were single and 56.1% married. In the none-users group, 35.8% owas single and 64.2% married.
Most of samples in users’ group were at the age range of 15-24 years old (35.3%) and in none-users at the age range of 25-34 years old (39.8%). In users’ group 67.9% of samples earn less than 100 dollars and 6.4% earn more than 200 dollars. In none-users’ group 78.5% of samples earn less than 100 dollars and 4.3% earn more than 200 dollars. In users’ group 73.9% of samples use Municipal Sport Facilities twice a week and 10/4 of them use Municipal Sport Facilities more than 3 times a week.

As shown in table 1 between quality of life scores in users and none users of MSF of Isfahan city, there is significant difference (p = 0.001). In addition, the users’ quality of life score mean are more than none users, which means the quality of life in users is better than the none users (Table 1).

**Table 1: Comparison of the quality of life scores between users and non-users of MSF (Municipal Sport Facilities).**

<table>
<thead>
<tr>
<th>Variables of Life</th>
<th>Group</th>
<th>Number</th>
<th>Mean</th>
<th>Standard Deviation</th>
<th>t</th>
<th>Significance level (p)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>users of MSF</td>
<td>416</td>
<td>129.88</td>
<td>22.55</td>
<td>3.314</td>
<td>0.001</td>
</tr>
<tr>
<td></td>
<td>non-users of MSF</td>
<td>416</td>
<td>123.15</td>
<td>26.38</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

According to table 2, the subscales of physical health and mental health, environmental health and social relationship in users of MSF were better than non-users of MSF, and it reveals that Isfahan citizens who participate in MSF classes show better Quality of Life in all subscales (table 2).

**Table 2: Comparison Quality of Life subscales scores in citizen users and none users of MSF (Municipal Sport Facilities).**

<table>
<thead>
<tr>
<th>Variables</th>
<th>Group</th>
<th>Number</th>
<th>Mean</th>
<th>Standard Deviation</th>
<th>t</th>
<th>Significance level (p)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physical health</td>
<td>Users of MSF</td>
<td>416</td>
<td>29.69</td>
<td>6.15</td>
<td>3.683</td>
<td>0.001</td>
</tr>
<tr>
<td></td>
<td>Non-users of MSF</td>
<td>416</td>
<td>28.09</td>
<td>5.88</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mental health</td>
<td>Users of MSF</td>
<td>416</td>
<td>35.53</td>
<td>7.62</td>
<td>4.758</td>
<td>0.001</td>
</tr>
<tr>
<td></td>
<td>Non-user of MSF</td>
<td>416</td>
<td>32.83</td>
<td>7.88</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Environment health</td>
<td>Users of MSF</td>
<td>416</td>
<td>38.81</td>
<td>8.16</td>
<td>2.650</td>
<td>0.001</td>
</tr>
<tr>
<td></td>
<td>Non-user of MSF</td>
<td>416</td>
<td>37.19</td>
<td>8.56</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Social relationship</td>
<td>Users of MSF</td>
<td>416</td>
<td>17.04</td>
<td>4.73</td>
<td>3.368</td>
<td>0.001</td>
</tr>
<tr>
<td></td>
<td>Non-user of MSF</td>
<td>416</td>
<td>15.92</td>
<td>4.73</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Discussion:**

Analysis indicated that between quality of life scores of Isfahan users and none users of MSF, there are a significant difference (p < 0.001). The quality of life’s mean scores of Isfahan citizens using MSF are more than those who do not use MSF, that means the quality of life in users’ group is better than the none users. Result of several researches also indicated that the beneficial effect of exercise and physical activity on quality of life, which is consistent with the current study. However, the researches of Fortin et al [5] and Shin [14] have indicated no relationship between physical activity and quality of life; this may be due to differences of life conditions such as environmental and geographic conditions (5, 14).

Many studies have stated that higher fitness is associated with higher exercise, and Participation in sports activities is useful in promoting physical fitness and vitality (4). Mental health status is one of the quality of life’s indexes, which in this case users of MSF show better results, mean while the results were in consistence with the findings of many other studies. In addition, many psychologists recommend moderate aerobic exercises for improving mental health, Lindsay’s findings revealed that there is significantly a lower rate of depression and suicide among male and female athletes than non-athletes. However, there are other studies that have shown contrary results, these studies sought the effects of recreational activities on some health indexes (indicators) (8, 16). Comparing the other quality of life subscales between the users and non-users of MSF, it became clear that MSF’s users had better social and environmental health than the non-users. This finding shows that participating in Municipal sports classes not only cause the differences in physical health subscales but also cause differences in people’s social relationships regarding family and social life.

Overall, these findings indicate that athletes are not just benefit in various sports field from physical, social and psychological benefits of exercise, Although a number of research done in this field regarding health, physiology, weight control with regular exercise programs and special features, have shown such helpful and constructive effects. Therefore, it is possible to promote the quality of life especially health related indexes by participating in routine daily exercises. This fact gain importance by considering the age conditions and cultural context of Iran and especially Isfahan. This study just analyzed some aspects of life’s quality; however, if the other aspects were measured it was likely to have different out comes. It seems though that subscales like physical and psychological health will show no or little difference. It is worth mentioning that in this study, the individuals’ notion of feeling and understanding of life was measured. To gain more definite results, it could be
possible to measure some health indicators quantitatively through other measures of psychological research, like BMI.

Overall, based on the research’s findings, it was concluded that building and increasing sport Facilities across the city of Isfahan and implementing a regular exercise program by citizens can lead to higher quality of life for male citizens. Considering the findings of the current study, it is suggested that the city managers, including managers of sports and youth agencies, municipalities, town councils, and etc should identify wastelands in different areas of Isfahan city and use them to develop sport areas and provide the necessary facilities for the citizens. In addition, authorities should develop sport culture and inform people about the role of sport in their lives and attract people’s attention in participating in sport classes. Considering the age and population distribution of each district, authorities should design a comprehensive plan of sport facilities and distribution sport venues justly in different urban areas.

REFERENCES

[18] Vuillemin, A., 2008. Leisur Time Physical Activity And Health Related Quality Of Life,