

## **Comparison Quality of Life between Male users and Non-users of Municipal Sport Facilities in 14 municipality areas of Isfahan city**

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### **Abstract**

**This study aims at comparing the quality of life between male users and non-users of municipal sport facilities in 14 municipality areas of Isfahan city. The research method was descriptive, Expost facio kind. Statistical population of the present research includes all men between 15 to 55 residents in Isfahan, which according to the latest census in 2006, is 538865 men. According to Cochran's formula and using cluster method, the sample size was identified 416 men (N=416). The data has 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 ( $p = 0/001$ ). The result indicates that, there is a significant difference between the Facility users and non-facility- users' quality of life. The result has also revealed that physical and mental health of male users was better than non-user ones. However, according to data analysis, there is no significant difference between male users and none users of Municipal Sport Facilities (hear after MSF) regarding their environment and social health scores.**

**Key words:** Quality of Life, male users, male non-users, Municipal Sport Facilities (MSF).

### **Introduction**

One of the today's popular researches is related to quality of life, which is also demanding among people. Therefore, governments all over of the world should pay more attention to the quality of life and try to decrease the incidents of the physical and mental illnesses and deaths related to it, provide health services, and increase physical, mental and social welfare of people. And this welfare could be reached through (paying attention) physical activities.

Improving the health and quality of life are bilateral and closely related to each other. By increasing health, people will be more satisfied which leads to higher quality of life. Conversely, with building the circumstances which leads to higher quality of life, people's health will increase. Many people in various communities recognized the importance of exercise in maintaining health and vitality, enhancing mental and physical abilities, and compete in Sports, recreation and leisure, and others as well as athletics or professional athlete but Leisure sports or athletics sports all done in places called Sport facilities (Jalali, 2008). Lack of Sport space and the proper distribution of the population in each region, inadequate and lack of financial resources of sport and youth offices financial resources for building athletic facilities is one of the biggest problems in big cities. Due to urbanization and urban population growth and related problems, it feels that the more facilities for welfare of citizens are needed. Isfahan Municipality is one of the organizations that established sporting venues across the city to promote the health of citizens. If public sport comes into consideration, and suitable exercise

programs are defined for all age groups as well as sports fields and facilities, people will turn more to exercise. Research has shown that access to parks and recreational facilities has significant impact on participation in physical activities (Frank, 2001). Mattson (2004) believes that the factors involved in health are good nutrition, exercise, creative activities, decreasing stress and increasing physical and mental health. It seems that 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 (WHO, 1998).

The study of quality of life is important from several aspects; first, it represents an assessment of the services and programs that have been set to improve the individual and social groups' quality of life. On the other hand, it is a suitable way (tool) to assess the effectiveness of recreational and healthy policies, and measurements (Liu, 2006). In addition, some researchers, such as Bougsty et al (1983) have noted that measuring quality of life can be helpful in identifying community's needs in order to promote health services and special programs.

In recent years, a number of researches have carried out on quality of life and its general and specific aspects. Research results Ahmadi Gatab et al (2011) 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 (2009) concluded that there is a significant difference between the quality of life between participants and non-participants of public sport in Ardebil city. In this regard, Lyndsoy (2008) showed that there are significantly lower rates of depression and suicide among male and female athletes than non-athletes. Vuillemin et al (2008) 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 study (2007) 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.

Considering the review of the prior research and importance of the present study which aimed at comparing quality of life in male users and none users of municipal sport facilities in 14 municipality areas of Esfahan city.

Considering the review of the prior research and importance of the quality of life and other dimensions in male' life, present study aimed at comparing quality of life in male users and none users of municipal sport facilities in 14 municipality areas of Esfahan city.

### **Material and Method**

Present research was descriptive, Expost facio kind. Statistical population of the present research includes all males between 15 to 55 year old living in Isfahan, that according to the latest census in 2006, their population 538865 man. According to Cochran's formula and cluster method, the sample size was identified 416 men (208 user and 208 none user) that they have chosen in accident and random. Researcher selected her sample from 14 municipality areas of Isfahan city, except Area 3 for not having a Municipal specific gym. It should be noted that all male users of MSF (Municipal Sport Facilities) participating in this study, are those 15 to 55 year men who did various sports activities in Isfahan municipal sport venues at least twice a week for more than 6 months. Male non-users of Municipal Sport Facilities included all 15 to 55 year men 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-BREEF) 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. Analyzing data was done via descriptive and inferential statistics (t test); Significance level for hypothesis testing was  $\alpha < 0/01$ .

### **Results**

The results of this study are presented in descriptive and inferential sections. Table (1) presents some of the individual characteristics of the subjects.

**Table 1: Description of individual characteristics of subjects**

Variables	levels	Percent
Age	25-34 years old	36.5
	45-55 years old	13
Marital status	single	34.4
	Married	63.9
Job	employees	28
	Self-employed	35
Income's rates	less than 100 dollars	67.2
	Between100to200dollars	27

As shown in table1, most of samples were at the age range of 25-34 years old (36.5%) and the minimum frequency was related to the age range of 45-55 years old (13%), 34.4% of samples were single and 63.9% were married. 28% of male were employees and 35% were self-employed. 67.2 percent and 27 percent of samples earn less than 100 dollars and between 100 to 200 dollars respectively.

As shown in table2 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 scores mean are more than none users, which means the quality of life in users is better than the none users (Table 2).

**Table 2: comparison of the quality of life scores between male users and non-users of MSF (Municipal Sport Facilities)**

Variables	Group	Number	Mean	Standard Deviation	t	Significance level (p)
Quality of Life	users of MSF	208	130.03	22.55	3.125	0.012
	non-users of MSF	208	121.79	21.28		

According to table 3 the subscales of physical health and mental health in male users of MSF Were better than non-users of MSF, however, there was no significant difference between the environment health and social relationship scores in users and non-users of MSF(table 3).

**Table 3: Comparison Quality of Life subscales scores in male users and none users of MSF (Municipal Sport Facilities)**

Variables	Group	Number	Mean	Standard Deviation	t	Significance level (p)
Physical health	Users of MSF	208	32.39	5.07	6.001	0.001
	Non users of MSF	208	29.12	5.73		
Mental health	Users of MSF	208	39.01	6.43	5.850	0.001
	Non-user of MSF	208	35	7.08		
Environment health	Users of MSF	208	40.60	7.72	0.835	0.404
	Non-user of MSF	208	39.93	7.70		
Social relationship	Users of MSF	208	18.03	4.49	0.656	0.512
	Non-user of MSF	208	17.74	4.51		

## Discussion and Conclusion

Analysis indicated that between quality of life scores of male users and none users of MSF, there is a significant difference ( $p < 0/001$ ) and the users of MSF's quality of life scores mean are more than none users that means the quality of life in users is better than the quality of life of 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. Vuillemin and colleagues (2008) showed that higher intensity leisure time physical activity is more strongly associated with higher levels of health related quality of life. However, the researches of Fortinm et al (2008) and Shin (1999) 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.

The findings of this research indicate the positive role of sport in promoting physical and mental health of male users of Isfahan's MSF; however the findings also revealed no significant difference between the environment health and social relationship of male users and none-users of MSF. Many studies have stated that higher physical fitness is associated with doing more exercise; moreover, participating in sports activities is beneficial in promoting physical fitness and vitality. Brach (2004) showed that regular exercise has more preventive benefits on physical dimensions, In addition, many psychologists recommend moderate aerobic exercise for improving mental health, Lindsoy's study also showed there is significantly a lower rate of depression and suicide among male and female athletes than non-athletes. Nevertheless, it is inconsistent with Nekouei's findings, since her findings reveal the same physical health between female athletes and non-athletes.

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.

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