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GENDER DIFFERENCES IN THE PERCEIVED BENEFITS AND OBSTACLES IN EXERCISE AMONG STUDENTS IN KOSOVO

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Abstract

With the purpose of identifying the gender differences in the level of physical activity and the perceived benefits and obstacles in exercise, a research was conducted on a sample of 324 respondents, randomly chosen from various faculties within the State universities in Pristina. The sample was divided into two sub-samples according to gender, i.-e 112 of them were of male and 212 female gender. The scale of benefits/obstacles from the EBBS exercise was applied to achieve this purpose. The data have been processed. The differences among the respondents were established by t-tests for independent samples. The male gender respondents perceive the sub-scales, the improvement of the physical performances, the psychological attitude and social interaction as greater advantages of exercise in comparison with the female respondents. In general, male respondents perceive more overall benefits from exercise as related to the female respondents. Although the vast majority of our sample recognized the exercise benefits, interventions still need to be designed to educate this young population about the necessity of establishing good habits in physical activity early in life, in order to reduce the risk of chronic diseases.

Key words: *physical activity; students; motivation, benefits; healthy behaviour*

Introduction

The world is faced with a new epidemic, which is the epidemic of inactivity. The human being has been created to move, walk and be physically active. From a historic viewpoint, physical abilities were a condition of sustenance and survival of the individual, the family and society. Nowadays there is a strong tendency in the opposite direction. Most men and women in the industrialized world have a sedentary lifestyle, or are only occasionally active. Technological novelties facilitated people's lives, raising the standard of living to a higher level, creating a large amount of free time, but, on the other hand, people were thrown into an ever-accelerating pace of life and work and tension, distanced from the basic, life-important activities, from the physical engagement of their organism.

The health consequences of such a development are great. Physical inactivity increases te risk for many diseases, as are the coronary diseases, brain strokes, high blood pressure, diabetes, colon cancer and maybe even breast cancer, that osteoporosis and fractures related to it (Jones et al, 1998,. Vuori, 1995). Furthermore, physical inactivity contributes in the reduction of physical and functional abilities of young and middle-aged people, thus increasing the risk of independence reduction later in life. Physical inactivity is one of the leading causes of occurence of diseases, and erduction of the quality of life; the increase of inactivity keeps intensifying these risks.

If the answer to the question of why people exercise can be summed up in one sentence: "Because exercise makes them feel better", than it is important to find a way to provide those who do not exercise with the opportunity to feel this benefit and start practicing this activity. Considering the recommendations of a large number of previous researches conducted so far, it is inevitable to assume a differential approach to promotion in working with different population groups.

Diagnosing the condition on which physical activity depends will provide experts in the field of kinesiology and medicine, as well as scientists and policy creators in the preparation of strategies educaitonal programs enabling for the promotion and inrease of interest in physical activity and sport in the student population, so that it becomes a part of their lifestyle. The obtained results will be useful for the public healthcare, in the direction of the reduction of the purcentage of chronical diseases and improvement of the quality of life. The importance of phycial activity is nowadays neglected in North Macedonia,

Albania and Kosovo and there is a serious trend of increase in obesity. Therefore, cardiovascular diseases are the biggest mortality factor. In order to decrease this epidemic, it is necessary to identify the determinants influencing the increase of physically active people, which shall, on the other hand, help in the creation of policies and social swirch towards the improvement of healthy behaviour.

Working methods

Sample of respondents

The research was carried out on a sample of 324 respondents drawn at random from several faculties in the State universities in Pristina. The sample is divided into two sub-samples according to gender, where 112 respondents were of male and 212 of female gender. The survey was carried out electronically by using the appropriate organisation of the works typical for this type of research. The respondents were treated as pursuant to the Helsinki Declaration.

Sample of variables

The data were collected by the method of a structured survey questionnaire. *Exercise Benefits/Barriers Scale [EBBS]:* The perceived benefits and obstacles of exercise were evaluated by the EBBS (Sechrist, Walker & Pender, 1987) questionnaire, divided into two scales: benefit evaluation and obstacle evaluation scale. The former scale consists of 29 statements and it is divided into five sub-scales: quality of life, physical performances, psychological benefits, social interaction and health prevention. The obstacle evaluation scale consists of 14 statements and is divided into four sub-scales: exercising milieu, time shortage, physical efforts and familial discouragement. The established internal consistency (alpha) of the exercise benefit and obstacle evaluation scales in the researches effected so far is between 0.95 and 0.86, the reliability determined by means of the test and re-test method was between 0.89 and 0.77 (Gyurcsik, et al., 2006). In this sample of respondents the internal consistency on the exercise benefit evaluation scale started from 0.91, and the one referring to the evaluation of the exercise obstacles started from 0.83. All the statements from the perceived exercise benefit and obstacle evaluation scale were assessed according to the Likert's pointing system by 1 to 4 points where 4 equals "I totally agree" 3 equals "I agree", 2 equals "I disagree" and 1 equals "I totally disagree".

Data processing methods

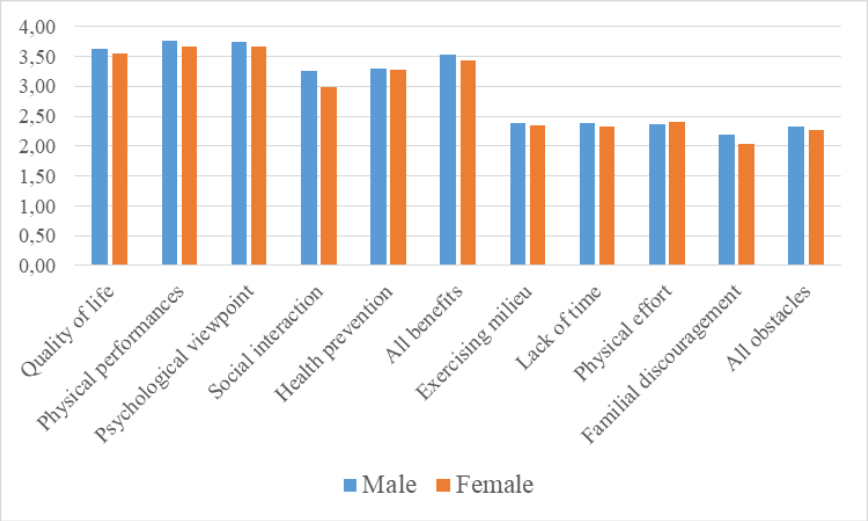
The standardized results referring to the evaluation of the overall benefits and obstacles, as well as for each sub-scale (the total assessment of the scales and sub-scales is the average value from the statements included in the scale or in the subscales) were calculated for each respondent. The differences among the respondents were identified by t-tests for independent samples. The data were treated by the SPSS for Windows Version 26.0 statistical package.

Results

The single-factor analysis of variance was applied with the purpose of determination whether there are any gender-related differences on the level of the perceived benefits and obstacles of exercising. The results of the analysis are demonstrated on Table 1.

Table 1. Gender differences on the level of perceived benefits and obstacles of exercise

	Male		Female		t	df	Sig.
	Mean	SD	Mean	SD			
Quality of life	3,62	0,46	3,55	0,54	1,77	731	0,077
Physical performances	3,76	0,37	3,67	0,45	2,65	731	**0,008**
Psychological viewpoint	3,75	0,35	3,66	0,43	2,85	731	**0,005**
Social interaction	3,26	0,61	2,98	0,76	5,05	731	**0,000**
Health prevention	3,29	0,69	3,28	0,66	0,20	731	0,843
All benefits	3,54	0,40	3,43	0,47	3,10	731	**0,002**
Exercising milieu	2,39	0,75	2,34	0,74	0,87	731	0,383
Lack of time	2,39	0,81	2,32	0,86	1,20	731	0,231
Physical effort	2,36	0,84	2,40	0,86	-0,71	731	0,479
Familial discouragement	2,19	0,98	2,04	1,02	1,94	731	0,052
All obstacles	2,33	0,75	2,27	0,75	1,00	731	0,316



Graph 1. Gender differences on the level of perceived benefits and obstacles of exercise

The review of Table 1 leads to the conclusion that statistically significant uni-variants between-group gender differences were determined in the following subscales: physical performances, psychological viewpoint, social interaction and all the benefits. The amounts of the arithmetical means and the level of statistic importance lead to the conclusion that in the male respondents the subscales referring to the improvement of physical performances, psychological viewpoint, social interaction are perceived are a greater benefits of exercising as compared to the respondents of female gender.
Also, the male respondents generally perceive more overall benefits of exercise in respect of the respondents of female gender. No statistically important differences in the subscales for evaluation of benefits of exercise, quality of life and health prevention were identifie among male respondents; the same holds for all subscales for the evaluation of exercise obstacles. Also, there were no generally determined differences on the exercise obstacles evaluation scale between respondents of male and female gender.

Discussion

The appropriate physical activity is of key importance for the well-being and quality of life (McAuley & Rudolph, 1995). University is a very important institution in the promotion of health-improving behaviors. It is considered that this age group is suitable and can easily be influenced in the change of behavior in a positive direction. Also, this is a period where individuals can establish habits that can persist into adulthood (Wallace et al., 2000). Therefore, the university milieu is a key possibility to promote good and physically active behavior. But the lack of sufficient data related to the perception and the attitudes of the student population towards exercising limits the designing of efficient interventions for the promotion of physical activity.

The male respondents perceive that physical activity will help them improve their physical performances, their psychological viewpoint, social interaction and, in general, they perceive more benefits from exercise than the respondents of female gender. No differences were detected among the respondents of male and female gender in the subscales and the scale for evaluation of exercise obstacles.

The initiatives in health education and promotion of physical activity in universities can reach higher efficiency level if they are directed towards education of the respondents who do not exercise in order to increase the ratio between the benefits and obstacles which would stimulate them to maintain physically active lifestyle that would influence health improvement.

Although the great majority of our sample recognized the benefits of exercise, interventions should still be designed to educate this young population about the necessity of establishing good habits of physical activity early in life, in order to reduce their risk of chronic diseases in future.

Conclusions

The following conclusions can be drawn from the obtained results: Statistically important univariant inter-group differences among the respondents of male and female gender were identified in the following

subscales: physical performances, psychological viewpoint, social interaction and all other benefits. The amounts of the arithmetic means and the level of statistical importance lead to the conclusion it can be concluded that the male respondents perceive the subscales of improvement of physical performance, the psychological viewpoint, social interaction as greater exercise benefits as compared to the respondents of female gender. Also, the male respondents generally perceive more overall benefits of exercise than the female ones.

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