

Examination of the Relationship Between the Reasons for Orientation to Sports Activities and Health Perceptions of Women Receiving Pilates Training

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Abstract

The main purpose of the study is to examine the relationship between the reasons for orientation to sports activities and health perceptions of women who receive pilates training. Female trainees who have received pilates training for at least one year under the roof of public education center in Ulus district of Bartın province were included in the study. There are 72 trainees in total in the research group determined by the facilitation method. "Sports Activities Orientation Scale" and "Perception of Health Scale" were used to collect data in the study. In the analysis of the data obtained, KruskalWallis test and Mann Whitney U test were used in SPSS package program. At the same time, Spearman rank difference correlation coefficient technique was used to determine the relationship between sub-dimensions of data collection tools. As a result of the research, no difference was found regarding the variables of age, education level and marital status of the participants. A significant difference was found in the "Socialization" sub-dimension of the scale of orientation towards sports activities in the occupational group variable. This difference is due to the fact that those with the "Private Sector" occupational group have a higher average score than the "Student" ones. A significant difference was found in the "Precision" sub-dimension of the health perception scale related to the monthly average income variable, and this difference is due to the higher average scores of the "2200 TL and Less" and "2201-3500 TL" groups than the "5001 TL and above" group. As a result of the correlation analysis of the sub-dimensions of both scales, it was found that there were low and medium level relationships. As a result; There is a relationship between the reasons for orientation to sports activities of women who take pilates training and their perception of health.

Keywords: Pilates, Orientation to sports activities, Perception of health.

Introduction

With the acceleration of technology, industrialization in societies and the increase in mechanization have caused many changes. In industrialized societies, technology has limited physical activity in most occupations and occupations with limited mobility emerged (Zorba, 2011).

It is known that in order to accept that an individual is healthy, he / she must feel healthy and be biologically healthy (Belek, 1998). Since the concept of health constitutes human life itself, it has existed for humans since the first day of human history. However, as societies reach certain goals, changes occur in the concept of health and understanding of health (Karacabey & Özmerdivenli, 2011). It can be thought that the changes in the understanding of health are caused by the new discoveries in the rapidly developing medical science, the changing nutrition culture, the importance of sports and sports nutrition. It has been stated that health is directly related to the inclusion of healthy living behaviors in the life of the individual and to ensure the continuity of these behaviors and to develop and maintain health (Alkan et al., 2017; Çaka et al., 2017).

The perception of health has emerged as a psychological concept that has been widely used in research topics in recent years. Ermiş (2020), found in his study that reformer pilates exercises increase the perception of health and quality of life in women. Many external factors such as crime rate in society, economic situation, concept of equality, friendship, environmental science, climate and air cleanliness are variables that directly affect the quality of life (Kabadayı, 2006). It is known that orientation towards sports activities contributes positively to the psychological development of the individual. Regardless of the physical equipment of the athlete, what will enable him to use this equipment in the best way is his orientation to sports and his motivation (Erpehlivan, 2008).

The main purpose of physical activities; To increase physiological performance and psychological resilience, to protect the form obtained from sports for many years, to reduce and prevent disruptions caused by sedentary life (Zorba & Saygın, 2013). The Pilates exercise method, developed by Joseph Pilates, was introduced to ensure the continuity of health, like other physical activities. Pilates is an exercise method that has been used for soldiers injured during World War I. Later, he took an active role in improving the injuries of athletes who were engaged in ballet. Until the 1980s, the Pilates exercise method was not well known. The benefits of increasing flexibility, balance and strength form have gained popularity in pilates in recent years. It has been stated that the Pilates method is a prerequisite for the integration of the whole body and mind as well as a physical exercise (Latey, 2001). Many studies reveal that pilates is one of the most preferred exercises in improving body composition. Şavkın (2014) studied 60 minutes of pilates training with 42 women for 8 weeks, 3 days a week, and found that pilates exercises revealed positive effects on body composition parameters. Sekendiz and Ark. (2007) revealed that sedentary women who did 5-week mat pilates exercise increased abdominal muscle endurance, leg strength and flexibility.

In our study conducted in the light of this information, the relationship between the reasons for orientation to sports activities and health perceptions of women who receive pilates training is examined.

Material and Method

Research Model

Relational screening model was used to determine the reasons for orientation to sports activities and health perception attitudes of women who have received 60 minutes of second level pilates training 3 days a week for 1 year at Bartın Ulus Public Education Center. This study is a quantitative study in terms of evaluation of data.

Research Group

The universe of this research consists of 72 women who have been doing mat pilates for 1 year at Bartın Ulus Public Education Center in 2019-2020. The research group consists of women who participate in the surveys on a voluntary basis and answer the questions in the survey completely.

A personal information form, sports activities orientation scale and health perception scale were applied to the participants. Exercises for strength and flexibility for the spine, hips, legs, shoulder circumference and the whole body from Pilates mat movements were performed.

Data Collection Tools

‘‘Personel Information Form’’, ‘‘Sports Activities Orientation Scale’’ and ‘‘Health Perception Scale’’ were used in the study to collect data.

Personel Information Form

In the sutdy, ‘‘Personel Information Form’’ was used in order to reach the personal informstion of the participants.This form consists of 5(five) items determinedby the researcher. These substances; It includes age, educational status, occupational group, marital status and average monthly income.

Health Perception Scale

It was developed by Diamond et al (2007). Turkish reliability and validity studies were carried out by Kadiođlu ve Yıldız (2012). While the internal consistency of the scale varied between .60 and .76 in the sub-dimensions, the ovverall total score was .77 Cronbach’s Alpha value. The scale is in 5 point Likert type , consists of the 15 items and 4 sub-dimensions. The Cronbach Alpha value for the sub-dimensions is .76 for the ‘‘Control Center’’; .63 for ‘‘Self Awareness’’; .71 for ‘‘certainty’’; it is .60 for ‘‘Importance of Health’’ (Kadiođlu & Yıldız, 2012).

Sports Activities Orientation Scale

Sports Activities Orientation Scale was developed by Pons et al (2006). The Turkish validity and reliability study was carried out by evik et al (2019). The scale is five point Likert type scale with 15 items and 3 sub-dimension. The internal consistency of the scale was found to be .87 Cronbach Alpha in total. .75 for socializing; .87 Emotion searching and .75 for İnformation search (evik et al., 2019).

Data Analysis

SPSS 23.0 packaged software was utilised for data analysis. Arithmetic averages and standard deviations of the answers gathered from scales was calculated parametric test assumptions were examined according to independent variables about sub-problems and scale total score averages of participants and Mann Whitney U test was carried out for paired comparisons and Kruskal Wallis test was carried out for multiple comparisons out of non-parametric tests.

Spearman’s rank-difference correlation coefficient(r) was utilised in an attempt to detect the relation between sub-dimension of scales in accordance with answers of study group. In the analysis significance level was taken as ‘‘0.05’’.

Findings

Results of data which were gathered about demographical properties of women who do regularly pilates and counted in research sample were included in this section. Findings to women’s demographical properties were acquired from the answers which were given to ‘Personal Info’ section. Number of persons (N) and percent value (%) related to findings are in the table right below.

Table 1. Percentage distribution of participant group according to demographical information.

Variable	Group	N	%
Age	18-24 age	15	20.8
	25-30 age	48	66.7
	31-36 age	3	4.2
	37-42 age	6	8.3
Education Status	Primary-Secondary school	5	6.9
	High School	7	9.7
	University	60	83.3
Occupational Group	Housewife	16	22.2
	Officer	26	36.1
	Private Sector	17	23.6
	Student	13	18.1
Marital Status	Single	50	69.4
	Married	22	30.6
Average Monthly Income	2200 TL and below	24	33.3
	2201-3500 TL	23	31.9
	3501-5000 TL	19	26.4
	5001 TL and above	6	8.3
Total		72	100

As seen in Table 1 participants’ demographical information (Age, Educational Status, Occupational Group, Marital Status, Average Monthly Income) who were counted in the research was given by percentage distribution.

Table 2. Kruskal Wallis test results of participant group tendency reason scale to sport activities and sub-dimension of health perception scale towards age variable.

Lower Dimensions	Age Group	N	Average	df	x ²	p
Socializing	18-24 age	15	30.50	3	1.654	.647
	25-30 age	48	37.98			
	31-36 age	3	36.50			
	37-42 age	6	39.67			
Seeking Emotion	18-24 age	15	38.73	3	1.027	.795
	25-30 age	48	36.98			
	31-36 age	3	30.33			
	37-42 age	6	30.17			
Seeking Knowledge	18-24 age	15	41.57	3	1.955	.582
	25-30 age	48	34.70			
	31-36 age	3	29.50			

Control Center	37-42 age	6	41.75	3	.712	.870
	18-24 age	15	37.63			
	25-30 age	48	36.75			
	31-36 age	3	39.83			
Accuracy	37-42 age	6	30.00	3	.867	.833
	18-24 age	15	36.47			
	25-30 age	48	37.59			
	31-36 age	3	32.83			
Importance of Health	37-42 age	6	29.67	3	2.417	.490
	18-24 age	15	39.57			
	25-30 age	48	36.21			
	31-36 age	3	46.17			
Self Consciousness	37-42 age	6	26.33	3	.940	.816
	18-24 age	15	40.43			
	25-30 age	48	35.10			
	31-36 age	3	33.33			
	37-42 age	6	39.42			

According to Table 2 in the result of analysis based on age variable, no significant differentiation occurred in participant group's tendency to sports activities and sub-dimension of health perception scale.

Table 3. Kruskal Wallis test results of participant group tendency reason scale to sport activities and sub-dimension of health perception scale towards educational status variable.

Lower Dimensions	Educational Status	N	Average	df	χ^2	p
Socializing	Primary-Secondary school	5	30.10	2	.533	.647
	High School	7	37.93			
	University	60	36.87			
Seeking Emotion	Primary-Secondary school	5	30.30	2	.481	.786
	High School	7	36.93			
	University	60	36.97			
Seeking Knowledge	Primary-Secondary school	5	38.60	2	.057	.972
	High School	7	35.93			
	University	60	36.39			
Control Center	Primary-Secondary school	5	21.80	2	2.714	.257
	High School	7	39.07			
	University	60	37.43			
Accuracy	Primary-Secondary school	5	28.80	2	1.154	.562
	High School	7	41.93			
	University	60	36.51			
Importance of Health	Primary-Secondary school	5	17.00	2	4.762	.092
	High School	7	36.50			
	University	60	38.13			
Self Consciousness	Primary-Secondary school	5	39.30	2	1.002	.606
	High School	7	29.21			
	University	60	37.12			

According to Table 3 in the result of analysis based on educational status variable, no significant differentiation in terms of statistical was detected in participant group’s tendency to sports activities and sub-dimension of health perception scale.

Table 4. Kruskal Wallis test results of participant group tendency reason scale to sport activities and sub-dimension of health perception scale towards occupational group variable.

Lower Dimensions	Occupational Group	N	Average	df	χ^2	p	Difference
Socializing	(1) Housewife	16	35.44	3	10.586	.014	3>4
	(2) Officer	26	38.29				
	(3) Private Sector	17	46.09				
	(4) Student	13	21.69				
Seeking Emotion	(1) Houewife	16	37.63	3	.807	.848	-
	(2) Officer	26	36.56				
	(3) Private Sector	17	38.68				
	(4) Student	13	32.15				
Seeking Knowledge	(1) Housewife	16	46.16	3	4.542	.209	-
	(2) Officer	26	33.73				
	(3) Private Sector	17	32.47				
	(4) Student	13	35.42				
Control Center	(1) Housewife	16	37.97	3	.784	.853	-
	(2) Officer	26	34.31				
	(3) Private Sector	17	35.71				
	(4) Student	13	40.12				
Accuracy	(1) Housewife	16	45.69	3	4.270	.234	-
	(2) Officer	26	32.67				
	(3) Private Sector	17	36.09				
	(4) Student	13	33.38				
Importance of Health	(1) Housewife	16	32.22	3	1.264	.738	-
	(2) Officer	26	38.90				
	(3) Private Sector	17	35.09				
	(3) Student	13	38.81				
Self Consciousnes	(1) Housewife	16	30.94	3	2.657	.448	-
	(2) Officer	26	37.60				
	(3) Private Sector	17	34.94				
	(4) Student	13	43.19				

According to Table 4 A significant differentiation ($p < 0,014$) was detected in ‘Socialization’ sub-dimension of participant group’s tendency scale to sports activities in the result of analysis based on occupational group variable. No significant differentiation was detected in ‘Seeking emotion’ and ‘Seeking Knowledge’ sub-dimensions. No significant differentiation occurred in the sub-dimensions which are ‘Control Center’, ‘Accuracy’, ‘Importance of Health’, ‘Self Consciousness’ of health perception scale.

Table 5. Mann Whitney U test results of participant group tendency reason scale to sport activities and sub-dimension of health perception scale towards marital status variable.

Lower Dimensions	Marital Status	N	Average	z	p
Socializing	Single	50	34.73	-1.096	.273
	Married	22	40.52		
Seeking emotion	Single	50	35.10	-.864	.387
	Married	22	39.68		
Seeking	Single	50	36.24		

Knowledge	Married	22	37.09		
Control Center	Single	50	39.03		
	Married	22	30.75	-1.553	.120
Accuracy	Single	50	33.75		
	Married	22	42.75	-1.685	.092
Importance of Health	Single	50	39.56		
	Married	22	29.55	-1.882	.060
Self Consciousness	Single	50	37.08		
	Married	22	35.18	-.357	.721

According to Table 5 in the result of analysis based on marital status variable, no significant differentiation in terms of statistical was detected in participant group’s tendency to sports activities and sub-dimension of health perception scale.

Table 6. Kruskal Wallis test results of participant group tendency reason scale to sport activities and sub-dimension of health perception scale towards average monthly income variable.

Lower Dimensions	Average Monthly Income	N	Average	df	x ²	p	Difference
Socializing	(1) 2200 TL and below	24	29.73	3	4.517	.211	-
	(2) 2201-3500 TL	23	41.11				
	(3) 3501-5000 TL	19	37.13				
	(4) 5001 TL and above	6	43.92				
Seeking Emotion	(1) 2200 TL and below	24	35.75	3	1.806	.614	-
	(2) 2201-3500 TL	23	36.41				
	(3) 3501-5000 TL	19	40.37				
	(4) 5001 TL and above	6	27.58				
Seeking Knowledge	(1) 2200 TL and below	24	40.33	3	3.987	.263	-
	(2) 2201-3500 TL	23	39.80				
	(3) 3501-5000 TL	19	29.47				
	(4) 5001 TL and above	6	30.75				
Control Center	(1) 2200 TL and below	24	39.08	3	2.861	.414	-
	(2) 2201-3500 TL	23	39.59				
	(3) 3501-5000 TL	19	32.58				
	(4) 5001 TL and above	6	26.75				
Accuracy	(1) 2200 TL and below	24	43.58	3	9.013	.029	1>4
	(2) 2201-3500 TL	23	38.41				2>4
	(3) 3501-5000 TL	19	31.13				
	(4) 5001 TL and above	6	17.83				
Importance of Health	(1) 2200 TL ve Altı	24	39.73	3	2.220	.528	-
	(2) 2201-3500 TL	23	33.35				
	(3) 3501-5000 TL	19	38.76				
	(4) 5001 TL and above	6	28.5				
Self Consciousness	(1) 2200 TL and below	24	35.56	3	.770	.857	-
	(2) 2201-3500 TL	23	35.15				
	(3) 3501-5000 TL	19	37.24				
	(4) 5001 TL and above	6	43.08				

According to Table 6 No significant differentiation was detected in ‘socialization’, ‘seeking knowledge’ and ‘seeking emotion’ sub-dimension of tendency to sports scale towards average monthly income. No significant differentiation was detected in the "Control Center", "Importance of Health" and ‘Self Consciousness’ sub-dimensions of the health perception scale. However, a significant difference was detected in the "Accuracy" sub-dimension and this difference is due to the higher average scores of the "2200 TL and Less" and "2201-3500 TL" groups than the "5001 TL and above" group.

Table 7. The results of the Spearman’s rank-difference correlation coefficient test of the participant group’s reasons for tendency towards sports activities scale and sub-dimensions of the health perception scale.

		Socializing	Seeking Emotion	Seeking Knowledge	Control Center	Accuracy	Importance of Health	Self Consciousness
Socializing	r							
	p	1						
Seeking Emotion	r	.459**						
	p	.000	1					
Seeking Knowledge	r	.142	.393**					
	p	.233	.001	1				
Control Center	r	-.079	.129	-.092				
	p	.511	.279	.440	1			
Accuracy	r	.171	.278*	.180	.399**			
	p	.152	.018	.130	.001	1		
Importance of Health	r	.188	.293*	.135	.192	.194		
	p	.114	.013	.258	.107	.103	1	
Self Consciousness	r	.238*	.348**	.246*	.275*	.122	.337**	
	p	.044	.003	.037	.019	.307	.004	1

As seen in Table 7, between the emotion seeking sub-dimension and socialization, a positive moderate relation ($r = .459^{**}$) between the seeking knowledge sub-dimension and the seeking emotion sub-dimension ($r = .393^{**}$) a positive relation, while there was a positive low-intensity correlation ($r = .278^*$) in the accuracy and seeking emotion sub-dimensions, a moderate positive ($r = .399^{**}$) correlation was found between the accuracy and control center sub-dimensions. There was a low and positive relationship ($r = .293^*$) between the importance of health sub-dimension and the seeking emotion sub-dimension, while there was statistically meaningful relation ($r = .238^*$) in self-consciousness and socialization, there was moderately positive relation ($r = .337^{**}$) between sub-dimensions of self-consciousness and importance of health.

Discussion and Conclusion

The human being has taken an active role in along struggle from past to present to reach a quality and health life. Eventhough the constantly developing Technologies seem to make life effortless, they cause the Daily activity intensity to decrease gradually, moving life is one of the most important problems for a large number of who spend all day in front of a computer and fulfill all their needs over the internet. People who move less day by day also move away from healthy eating over time (Bek, 2008). It is thought that this of situation health in the person.

In this direction, our study was conducted with 72 women between the ages of 18-42 who participated in mat pilates training for one year in the results of our study, a significant difference was found in the socialization sub-dimension of the occupational group variable of the reasons for orientation towards sports activities scale and the health perception scale ($p > 0,05$). This difference is thought to reveal the need for socialization that people working in the public and private sectors have a higher average, studies have shown that apart from biological factors, many factors such as education, age, chronic illness, gender, smoking, addiction and income level also affect perception of health (Bobak et al., 2000; Mikolajczyk et al., 2008). In another study, Özüdoğru (2013), reported a generally significant difference in

the comparison of participants quality of life according to their physical activity levels. The mentioned literature supports our research findings. The stress brought about by business life leads people to the desire to spend their leisure time in a better quality and more productive and to seek new people. Çubuk (2019), found a moderately significant positive correlation between the health perception of the research group and physical activities including sports and exercise, which are one of the leisure activities. It is thought that the city where the participants live, socio-cultural opportunities, the type of exercise preferred the degree of difficulty, the fact that the exercise is done in a group or individually and its popularity level contribute greatly to socialization. In a study on the subject Vergili & Yalman (2012), applied a 12 week pilates exercise program on 153 healthy women aged 20-55 for at least two years and examined the effects of calisthenic and pilates exercise on health-related quality of life and that calisthenic- pilates exercise were associated with health found that it improved the quality of life. In a study on the subject Gillison et al. (2009), revealed the difference between low intensity exercise and moderate- intensity exercise performed collectively and found that the exercise that increase the physical quality of life of individuals are medium intensity exercises. Perception of health is measured by the individuals personal response to a question about his own health and includes individual thoughts and emotional aspects of one's own health behavior (Şenol et al., 2010). In our study, a significant difference was found in the precision dimension of the monthly average income variable ($p < 0,05$). This difference is due to the fact that the average scores of the "2200 TL and below" and "2201-3500 TL" groups are higher than the "5001 TL and above" group. As the income level of a person decreases he begins to worry about health exercises and is thought to be due to his desire certainty that his health is good.

As can be seen it has been observed that our research findings and the literature examined have produced results in a largely similar direction. As a result; a low and medium level positive correlation was found in the correlation coefficient analysis of our research findings and positive correlation was found between the reasons for orientation the sports activities and health perceptions of women who received pilates training.

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