

# **Influence Of Social Factors On Recreational Sports Participation Among Health Care Professionals In Federal Medical Centres, South-Western Nigeria**

**Saseyi Olaitan Olaoluwa**

*Department Of Human Kinetics and Health Education  
Lagos State University of Education Oto-ijanikin, Lagos state, Nigeria*

**Oyedele Akinsanmi Opeoluwa**

*Department Of Kinesiology, Sports Science And Health Education  
Lead City University, Ibadan, Oyo State, Nigeria*

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## **Abstract**

*Recreational sports participation (RSP) has been ascertained as an essential way of promoting the well-being of individuals. In spite of this, there is a scarcity of studies on RSP related issues, specifically among health care professionals (HCPs). This study therefore, examined influence of social factors on recreational sports participation among health care professionals in Federal Medical Centres (FMCs), South-western Nigeria. Descriptive survey research design was used, while a self-developed and validated questionnaire was used for data collection from seven hundred and twenty three (723) respondents. Descriptive and inferential Statistics of Pearson Product Moment Correlation and multiple regression were used for the analysis. The findings of this study revealed that, occupational demand ( $r=0.251$ ,  $p<0.05$ ), residential location ( $r=0.472$ ,  $p<0.05$ ) and availability of facilities /equipment ( $r=0.313$ ,  $p<0.05$ ) had positive relationship with RSP among HCPs in FMCs in South-western Nigeria. There was a significant joint influence of social factors of occupational demand, residential location and availability of facilities/equipment on RSP among the respondents ( $F_{(3,719)}=310.529$ ,  $p<0.05$ ). There was a significant relative influence of occupational demand ( $\beta=-0.247$ ,  $p<0.05$ ), residential location ( $\beta=-0.713$ ,  $p<0.05$ ) and availability of facilities / equipment ( $\beta=0.530$ ,  $p<0.05$ ) on RSP among the respondents. Occupational demand, residential location and availability of facilities /equipment had significant positive relationship with recreational sports participation among health care professionals in Federal Medical Centres in South-western Nigeria. There was a significant joint influence of social factors on recreational sports participation among the respondents. There was a significant relative influence of occupational demand, residential location and availability of facilities / equipment on recreational sports participation among the respondents. Recommendation was made that the management of Federal Medical Centres should create enabling environment for health care professionals that will reduce occupational demand for active participation in recreational sports.*

**Keywords:** *Recreational sports participation, Social factors and Health care professionals.*

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## **I. Introduction**

Active participation in recreational sports has been established to have preventive impact on certain types of ailments and medical challenges. In the long run, recreational sports have a big impact on human physiology and psychology and are a big part of leisure activities. As such, recreation has always been important to people in the contemporary world (Valenzuela et al, 2023). These activities have been proven to lower the risk of lifestyle-related illnesses such as diabetes mellitus, obesity, hypertension, cancer and cardiovascular disease (Ha et al., 2020). The current trend of events has shown that lack of participation is a global issue, despite the fact that it is receiving more attention (Valenzuela et al, 2023).

Recreational participation involves the activities that revitalize the body and mind and provide interest and enjoyment to free time. Recreational activities include activities like dancing, reading, swimming, strolling and playing games. Recreation is a vital part of daily life as a tool for resting, recuperation and rejuvenation (Amilarasi, 2023). This could be performed as an indoor or outdoor activity. The indoor activities include table tennis and ludo game, while football, mountaineering, cycling and some others can be performed as outdoor activities.

Participation in recreational activities promotes psychological wellbeing, reduces depression and anxiety; and also help to reduce tension through relaxation. This in turn, can help to face the challenges of life and develop a sense of personal accomplishment (Chelak, 2022). The World Health Organization (2003) opined that, through active participation in sporting activities, some degenerative circulatory disorder can be alleviated. Many people who suffer from degenerative circulatory disorders tend to be overweight, have high fat and cholesterol diets, live under emotional stress and fail to participate in regular exercises. Playing sport helps the participants stay in shape, improve endurance, boost self-esteem, provide guidance and aid weight control, organize their time, boost friendships, teamwork and build relationships with their peers and adults.

It is also believed that, recreational activity is linked with a number of health benefits, including improved mental health. Physical activity may lead to improved quality of life, reduced anxiety, reduced risk of depression, improved cognition, reduced risk of dementia, and improved sleep (Marquez, 2020). Recreation opportunities provide a means for social interaction that can help to break down the barriers of unfamiliarity, fear and isolation. During recreation and leisure time, people are less concerned with differences and more concerned with having fun. The strength of a community is increased through recreation activities that allow people to share their cultural and ethnic differences (Marquez, 2020).

On the other hand, the issue of inactivity has become an epidemic in Nigeria society, because of the sedentary lifestyle of a large proportion of Nigerian citizens regardless of their disciplines. Inactivity of individual increases the causes of mortality, doubles the risk of cardiovascular diseases, diabetes and obesity and increases cancer, high blood pressure, anxiety and depression. The combination of inactivity and overweight is responsible for a great number of sudden deaths in Nigeria in recent times (Chelak, 2022).

Several factors may affect individuals' participation in recreational activities, particularly social gender inequality. When the average values of the attitudes exhibited by individuals toward sub-dimension by their gender was reviewed, it was observed that females faced more constraints than males on any sub-dimension (psychology of individual, lack of information, facilities, lack of friend, time and lack of interest) in terms of participation in recreational activities (Güliz, 2022). In line with this, there is a need for regular participation in physical activities for the purpose of attaining total wellness. However, there is a paucity of studies on recreational sports participation, specifically among professionals in health care sector. This study therefore, investigated the influence of social factors on recreational sports participation among health care professionals in Federal Medical Centers in South-western Nigeria.

### **Statement of the Problem**

Globally, recreational sports participation has been established as a necessary approach of promoting the well-being of individuals. Furthermore, active participation in recreational sports has preventive impact on certain types of ailments and medical challenges. In the long run, recreational sports have a big impact on human physiology and psychology and are a big part of leisure activities. In spite of this, there is a scarcity of studies on recreational sports participation related issues, specifically among health care professionals in Federal Medical Centres. This study therefore, examined influence of social factors on recreational sports participation among health care professionals (HCPs) in Federal Medical Centres (FMCs), South-western Nigeria.

## **II. Aim And Objectives Of The Study**

The aim of this study was to investigate the influence of social factors on recreational sports participation among health care professionals in Federal Medical Centres, South-western Nigeria.

The objectives of this study are to:

1. establish the relationship between occupational demand, residential location, availability of facilities/equipment and recreational sports participation among health care professionals in Federal Medical Centres in South-western Nigeria.
2. examine the joint influence of social factors (occupational demand, residential location and availability of facilities/equipment) on recreational sports participation among health care professionals of Federal Medical Centres in South-western Nigeria.
3. examine the relative influence of occupational demand, residential location and availability of facilities/equipment on recreational sports participation among health care professionals of Federal Medical Centres in South-western Nigeria.

### **Research Question**

1. What is the relationship between occupational demand, residential location, availability of facilities/equipment and recreational sports participation among health care professionals in Federal Medical Centres in South-western Nigeria?

### **Hypotheses**

The following hypotheses were formulated and tested at 0.05 significance level.

1. There is no significant joint influence of social factors (occupational demand, residential location and availability of facilities/equipment) on recreational sports participation among health care professionals of Federal Medical Centres in South-western Nigeria.
2. There is no significant relative influence of occupational demand, residential location and availability of facilities/equipment on recreational sports participation among health care professionals of Federal Medical Centres in South-western Nigeria.

## **III. Methodology**

### **Research Design**

The descriptive survey research design was used for this study. Consequently, data were collected from health care professionals of Federal Medical Centres in South-western Nigeria.

### **Population of the Study**

The population of this study included health care professionals of Federal Medical Centres in South-western Nigeria.

### **Sample and Sampling Techniques**

The sample size for this study is seven hundred and twenty three (723) health care professionals. Simple random, proportionate and purposive sampling techniques were used to select seven hundred and twenty three (723) health care professionals from the three selected medical centres. These selected medical centres were Federal Medical Centre, Ebute Meta, Lagos State, Federal Medical Centre, Abeokuta, Ogun State and Federal Medical Centre, Owo, Ondo State. The researchers obtained approval for the study from the authorities of the three selected medical centres. Likewise, consents of the respondents were sought for before the instruments were administered.

### **Instrument**

Questionnaire was used as instrument for this study. The instrument was titled Social Factors and Recreational Sports Participation Questionnaire (SFRSPQ). The questionnaire was subjected to reliability test; which yielded coefficient value of 0.83.

### **Method of Data Collection and Analysis**

The researchers used three research assistants to collect the data. Descriptive Statistics of frequency counts and percentages were used to analyse the socio-demographic variables. Pearson Product Moment Correlation was used to analyse the research question. Multiple Regression analysis was used to test hypotheses one and two at 0.05 level of significance.

## **IV. Results And Discussion Of Findings**

The results and discussion of findings are stated as follows:

### **Socio-demographic Characteristics of the Respondents:**

**Table 1: Descriptive Analysis of Respondents' Distribution by Sex**

Sex	Frequency	Percent
Male	382	52.8
Female	341	47.2
Total	723	100.0

Table 1 reveals that male respondents were over half (52.8%), while the female were less than half (47.2%). This implied that the sampled male respondents were more than their female counterparts.

**Table 2: Descriptive Analysis of Respondents' Distribution by Age**

Age	Frequency	Percent
30 years and below	261	36.1
31-40 years	357	49.4
41-50 years	52	7.2
51 years and above	53	7.3
Total	723	100.0

Table 2 reveals that less than half of the respondents (49.4%) were between 31-40 years, over one quarter (36.1%) were 30 years and below, few (7.3%) were 51 years and above, while few (7.2%) were in the age range of 41-50 years.

**Table 3: Descriptive Analysis of Respondents' Distribution by Occupation**

Occupation	Frequency	Percent
Physiotherapists	66	9.1
Nurses	164	22.7
Medical Laboratory Professional	122	16.9
Dentists	11	1.5
Medical Doctors	137	18.9
Nutritionist & Dietician	24	3.3
Public Health Officers	17	2.4
Pharmacists	73	10.1
Dental Technicians	26	3.6
Medical Record Officers	83	11.5
Total	723	100.0

Table 3 reveals that many of the respondents (22.7%) were nurses, a significant number of the respondents (18.9%) were medical doctors, a considerable number (16.9%) were medical laboratory professionals, and some respondents were medical record officers (11.5%) and pharmacists; while few respondents (1.5%) were dentists.

### Research Question

The below research question was answered.

**Research Question 1:** What is the relationship between occupational demand, residential location, availability of facilities /equipment and recreational sports participation among health care professionals in Federal Medical Centres in South-western Nigeria?

**Table 4: Correlation Analysis of Relationship between Social Factors and Recreational Sports Participation**

Variable	Mean	Std. Dev.	Recreational sports participation	Occupational demand	Residential location	Availability of facilities /equipment
Recreational sports participation	25.50	5.31	1			
Occupational demand	6.74	2.25	0.251**	1		
Residential location	8.95	2.27	0.472**	0.159**	1	
Availability of facilities /equipment	7.99	1.69	0.313**	0.220**	0.381*	1
N=723 Sig. (2-tailed): Occupational demand=0.000 Residential location=0.000 Availability of facilities /equipment=0.000						

*Correlation is significant at 0.05 alpha level ( $p < 0.05$ )*

Table 4 shows that occupational demand ( $r=0.251$ ,  $p<0.05$ ), residential location ( $r=0.472$ ,  $p<0.05$ ) and availability of facilities /equipment ( $r=0.313$ ,  $p<0.05$ ) were independently tested significant on recreational sports participation among health care professionals in Federal Medical Centres in South-western Nigeria. It implied that occupational demand, residential location and availability of facilities /equipment had significant positive relationship with recreational sports participation among health care professionals in Federal Medical Centres in South-western Nigeria. Furthermore, it was revealed in the table that correlation coefficient's magnitude of occupational demand, residential location as well as availability of facilities /equipment were weak. The positive relationship implied that a favourable occupational demand, residential location as well as availability of facilities /equipment for the respondents would influence the recreational sports participation among health care professionals in Federal Medical Centres in South-western Nigeria.

### Hypotheses

The following hypotheses were tested at 0.05 level of significance:

**H<sub>01</sub>:** There is no significant joint influence of social factors (occupational demand, residential location and availability of facilities/equipment) on recreational sports participation among health care professionals of Federal Medical Centres in South-western Nigeria.

**Table 5: Summary of Regression Analysis of Joint Influence of Social Factors on Recreational Sports Participation**

R=0.751 R <sup>2</sup> =0.564 Adj. R <sup>2</sup> =0.563 Std. Error=3.51512						
Model	Sum of Squares	Df	Mean Square	F	Sig. (p value)	Remark
Regression	11510.750	3	3836.917	310.529	0.000	Significant
Residual	8884.000	719	12.356			
Total	20394.750	722				

As revealed in table 5, it was found that the linear combination of social factors of occupational demand, residential location and availability of facilities/equipment was tested significant on recreational sports participation among health care professionals of Federal Medical Centres in South-western Nigeria ( $F_{(3,719)}=310.529, p<0.05$ ). The result yielded a coefficient of multiple regression of 0.751 and multiple R-square of 0.564. The result also revealed that adjusted R<sup>2</sup>=0.563; indicating that about 56.3% of variance was accounted for by the independent variables. This means that, there was a significant joint influence of social factors (occupational demand, residential location and availability of facilities/equipment) on recreational sports participation among health care professionals of Federal Medical Centres in South-western Nigeria. The null hypothesis was therefore rejected.

**H<sub>02</sub>:** There is no significant relative influence of occupational demand, residential location and availability of facilities/equipment on recreational sports participation among health care professionals of Federal Medical Centres in South-western Nigeria.

**Table 6: Summary of Regression Analysis of Relative Influence of Social Factors on Recreational Sports Participation**

Model	Unstandardized Coefficients		Standardized Coefficients	t	Sig.	Remark
	B	Std. Error	Beta			
(Constant)	31.092	0.903		34.440	0.000	
Occupational demand	-0.587	0.060	-0.247	-9.770	0.000	Significant
Residential location	-1.670	0.063	-0.713	-26.701	0.000	Significant
Availability of facilities/equipment	1.664	0.085	0.530	19.602	0.000	Significant

Table 6 shows occupational demand, residential location and availability of facilities/equipment, the unstandardized regression weight (B), the standardized error of estimate (SEB), the standardized coefficient, the t-ratio and the level at which the t-ratio was significant. As indicated in the table, occupational demand ( $\beta=-0.247, p<0.05$ ), residential location ( $\beta=-0.713, p<0.05$ ) and availability of facilities/equipment ( $\beta=0.530, p<0.05$ ) were independently tested significant on recreational sports participation among health care professionals of Federal Medical Centres in South-western Nigeria. This means that there was a significant relative influence of occupational demand, residential location and availability of facilities / equipment on recreational sports participation among health care professionals of Federal Medical Centres in South-western Nigeria. The null hypothesis was therefore rejected.

## V. Discussion Of Findings

The findings of this study on socio-demographic characteristics of the respondents revealed that, male respondents were over half, while the female were below half. This implied that the sampled male respondents were more than their female counterparts. In addition, less than half of the respondents were between 31-40 years, over one quarter were 30 years and below, few were 51 years and above, while few were in the age range of 41-50 years. Furthermore many of the respondents were nurses, a significant number of the respondents were medical doctors, a considerable number were medical laboratory professionals, and some respondents were medical record officers and pharmacists; while few respondents were dentists.

The outcomes of this study on research question one revealed that, occupational demand, residential location and availability of facilities /equipment were independently correlated significantly with recreational

sports participation among health care professionals in Federal Medical Centres in South-western Nigeria. It implied that occupational demand, residential location and availability of facilities /equipment had significant positive relationship with recreational sports participation among health care professionals in Federal Medical Centres in South-western Nigeria. Additionally, it was revealed that correlation coefficient's magnitude of occupational demand, residential location as well as availability of facilities /equipment were weak. The positive relationship implied that a favourable occupational demand, residential location as well as availability of facilities /equipment for the respondents would influence the recreational sports participation among health care professionals in Federal Medical Centres in South-western Nigeria. The outcome of this study is in line with the finding of a previous study which revealed that social factors of religion and societal expectations are crucial in determining individuals' likelihood of engaging in recreational sports (Yusuf, 2022).

The finding of this study on hypothesis one revealed that the linear combination of social factors of occupational demand, residential location and availability of facilities/equipment was tested significant on recreational sports participation among health care professionals of Federal Medical Centres in South-western Nigeria. The finding also establishes that about 56.3% of variance was accounted for by the independent variables. The finding implied that there was a significant influence prediction of social factors (occupational demand, residential location and availability of facilities/equipment) on recreational sports participation among health care professionals of Federal Medical Centres in South-western Nigeria. This outcome of this on joint influence of social factors established that the combination of social factors of occupational demand, residential location and availability of facilities/equipment had significant impact on in ability of the health care professionals of Federal Medical Centres in South-western Nigeria to participate optimally in recreational sports participation. The outcome of this study on joint influence of social factors was in line with the finding of a previous study which established that social environment had influence on sports participation (Lawler, et al. 2022).

The social factors, including occupational demand, residential location and availability of facilities/equipment, also played a crucial role in determining participation levels. These results align with existing literature. For instance, a study found that individual lifestyle choices and skill proficiency are critical determinants of sports participation (Oyeyemi, et al., 2021). Similarly, another study highlighted that occupational commitments and residential environments significantly influenced physical activity engagement among Nigerian adults (Payne, et al., 2021). Furthermore, a study emphasized that the availability and accessibility of recreational facilities are positively associated with increased participation in physical activities (Payne, et al., 2021).

In hypothesis two, the finding of this study revealed that occupational demand, residential location and availability of facilities / equipment were independently tested significant on recreational sports participation among health care professionals of Federal Medical Centres in South-western Nigeria. This means that there was a significant relative influence of occupational demand, residential location and availability of facilities / equipment on recreational sports participation among health care professionals of Federal Medical Centres in South-western Nigeria. It implied that occupational demand, residential location and availability of facilities / equipment independently had significant impact on in ability of the health care professionals of Federal Medical Centres in South-western Nigeria not to participate optimally in recreational sports participation. The outcome of this study on relative prediction of social factor of residential location was in line with the finding of previous study which established that living environment has influence on sports participation (Lawler, 2022).

## **VI. Conclusion**

Conclusion was made in this study that, occupational demand, residential location and availability of facilities /equipment had positive relationship with recreational sports participation among health care professionals in Federal Medical Centres in South-western, Nigeria. There was a significant joint influence of social factors of occupational demand, residential location and availability of facilities/equipment on recreational sports participation among the respondents. There was a significant relative influence of occupational demand, residential location and availability of facilities / equipment on recreational sports participation among health care professionals of Federal Medical Centres in South-western Nigeria.

## **VII. Recommendations**

Based on the findings of the study, the following recommendations were made.

1. The authorities of Federal Medical Centres in South-western Nigeria, should create enabling environment for health care professionals to ensure that occupational demand is reduced. This is to confirm that occupational demand is reduced for them to participate actively in recreational sports.
2. The management of Federal Medical Centres in South-western Nigeria should also ensure that facilities and equipment are made available for recreational sports participation. This is also to ensure that facilities and equipment are available to influence the participation of health care professionals in recreational sports.

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