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CHALLENGES IN SPORTS AND PHYSICAL ACTIVITY AMONG STUDENTS WITH POOR HEALTH CONDITIONS AT SECONDARY SCHOOL LEVEL

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ABSTRACT

Health issues such as pulmonary diseases like chest infection, asthma, tuberculosis, and neurological diseases like migraine are among the health problems that many students face. These health conditions have a negative impact on their school performance. While some students are able to perform well academically despite these risks, they are less fortunate to get benefits of sports and other physical activities in the schools due to their poor health conditions. Everyone's health, mobility, and disease progression are slowed when they engage in regular physical activity, but this is especially true for persons with poor health conditions or disabilities.

However, despite this, the degree of physical activity among people with poor health conditions is low. Children with poor health conditions are the primary focus of this study in order to gain a better understanding of the factors that influence healthful physical activity participation.

Convenience sampling was used to select a sample of 150 students with poor health conditions of secondary schools' level from Punjab, Pakistan. Questionnaire was used to collect data for this study. Descriptive and inferential stat methods were used to analyze data.

INTRODUCTION

Individuals who engage in regular physical activity can regulate their weight while reducing the threat of evolving prolonged diseases (including diabetes, high blood pressure, heart disease) (Centers for Disease Control and Prevention (CDC), 2019). Despite this, the level of physical activity among people with poor health conditions is very low. Lack of energy, fear of injury or consequences, an absence of accommodations, and an information and awareness gap were cited as obstacles to exercise by people who had rheumatoid arthritis, myelomeningocele or other health conditions. In addition to better physical health, participants indicated that they found it enjoyable and social to engage in physical activity (Buffart, et. al., 2009).

According to the findings of the study by Coates and Vickerman (2008), students with poor health conditions or impairments report fear of ridicule from classmates and feeling marginalized and experiencing self-doubt as a result of their lack of interaction with their peers (Coates and Vickerman, 2008; Dane-Staples, et al., 2013; Goodwin and Watkinson, 2000). In order for pupils to have a favorable experience, the physical education teacher's setting must be conducive (Goodwin and Watkinson, 2000). They (2000) concluded that marginalized students can have a positive experience of being included in sports if they feel empowered, can skillfully participate and are fully included in it.

Inactivity is a major factor, 20% of those aged 10 to 17 with special health care needs are fat, compared to 15% of those in the same age group without such needs (CDC, 2019). Among barriers to sports or physical activity is limited awareness of teachers to accommodate students with health conditions and disabilities (Engel-Yeger & Hamed-Daher, 2013; Stuart, et al., 2006) and modifying the materials according to their needs of students with health conditions for sports (Haibach et al. 2014). Students' concern of being humiliated and bullied in sporting activities, as well as a small range of options, are all cited as deterrents to participating in sports (De Schipper, et al., 2017).

The benefits of physical activity to one's mental, physical, and social health cannot be overstated (Biddle & Asare, 2011). Socialization among students with and without poor health conditions can be facilitated through physical activity. This offers a forum for enhancing social cohesiveness, and acceptance of diversity (Haegele, et al., 2015). Equality of opportunity to integrate into society is also promoted by this principle (Dane-Staples, et al., 2013). Aside from the health and fitness benefits, physical activity has a positive impact on one's life quality (Haegel & Porretta, 2015; Ilhan et al., 2021).

A lack of research on the experiences of individuals with poor health conditions participating in physical exercise is currently accessible, and it focuses on immediate impediments to involvement, rather than on the formation of physical activity habits across a person's life. There is a need to understand the hurdles that persons with poor health conditions face while transitioning from

school-based physical activity to lifelong activity. Because of this, the goal of this research is to identify the obstacles that prevent Pakistani children in poor health from participating in sports and physical activity. This could ensure that all children have equal access to sports and physical activity.

Questions Of the Study

Following were the questions of the study:

- What are the obstacles that prevent students with poor health conditions at secondary level education from participating in sports and physical activity?
- Is there any difference between the challenges faced by boys with poor health conditions and girls with poor health conditions at secondary level education in Pakistan?

RESEARCH METHODOLOGY

The research was primarily descriptive in nature. Students from secondary schools in Lahore, Faisalabad, and Gujranwala were population of the study. From the pool of these students, 150 students with poor health conditions were selected as sample studying at secondary school level. The sample approach employed in this investigation was convenient sampling. The information was gathered through the use of a questionnaire. Cronbach's Alpha for the questionnaire was 0.76, indicating that it was reliable. The descriptive and inferential statistics were used to analyze the information gathered.

RESULTS

Table No.1 Challenges reported by students with poor health conditions for sports participation

S.No	Which of the following challenges are experienced by students with poor health conditions for sports participation?	Reported percentage
1	Inadequate opportunities of sporting events	67%
2	Discrimination by the society	75%
3	Safety issue	78%
4	Inaccessible environment	65%
5	Lack of awareness of sports instructor with the needs of those with poor health	82%
6	Lack of latest technology to facilitate needs of those with poor health	85%
7	Lack of acceptance from healthy peers	72%
8	Sports are too competitive	64%
9	Lack of cooperation from peers	68%
10	Bullying from healthy fellows	72%
11	Low socio-economic status of family	58%
12	Dearth of support from family	64%
13	Over protected and extra conscious parents	68%
14	Negligence and ignorance of students with poor health by family members	60%
15	Lack of interest and motivation	65%

16	Fitness issues	70%
17	Lack of self-efficacy in performing pa	65%
18	Lack of information and awareness	70%
19	Inferiority complex	65%
20	Fear of injury	75%
21	Being dependent of others for pa/exercise	58%
22	Fear of mockery	65%
23	Sports incapability owing to restricted experiences	60%

Table No. 1 indicates challenges confronted by students with poor health conditions in sporting activity. Most commonly reported obstacle was lack of latest technology to facilitate needs of those with poor health as reported by 85% respondents. An additional obstacle as stated by 82% students was lack of awareness of sports instructor with the needs of those with poor health.

Safety issues (stated by 78%), discrimination by the society (described by 75%), fear of injury (told by 75%), lack of acceptance from healthy peers (conveyed by 72%), bullying from healthy fellows (stated by 72%) and fitness issues (stated by 70%) were among few other reported barriers.

Table No. 2 t-test statistics based on gender of respondents.

	Gender of the respondents	**Number of respondents**	**Mean**	**Std. Deviation**	**Std. Error Mean**	**df**	**t-value**	**p-value**
mean	Female	75	4.0243	.29072	.03357	148	.227	.820
	Male	75	4.0139	.27078	.03127			

Table No 2 shows a no significant difference in statistically calculated mean of male and female students with poor health conditions regarding challenges faced by them in sports and physical activity. The value of t is .227, with a p-value of .820 which is greater than $\alpha = .05$. Therefore, it is concluded that there is no difference in challenges faced by male and female students with poor health conditions in sports and physical activity.

Table No. 3 t-test statistics based on grade of respondents

	Grade of respondents	**Number of respondents**	**Mean**	**Std. Deviation**	**Std. Error Mean**	**Df**	**t-value**	**p-value**
mean	Secondary	75	3.9739	.28787	.03324	148	-1.997	.048
	Higher secondary	75	4.0643	.26624	.03074			

Table 3 indicates t-value of -1.997, with a p-value of .048 which is not greater than $\alpha = .05$. This shows that there was a significant difference between the challenges faced by students with poor health conditions secondary and higher secondary classes in sports and physical activity.

Table No. 4 t-test statistics based on nature of institute

	Nature of institute	Number of respondents	Mean	Std. Deviation	Std. Error Mean	Df	t-value	p-value
mean	Government	75	3.9739	.28787	.03324	148	-1.997	.048
	Private	75	4.0643	.26624	.03074			

Table No 4 indicates a significant difference in calculated mean of students with poor health conditions studying at government and private schools regarding challenges faced by them in sports and physical activity. The value of t is -1.997, with a p-value of .048 which is not greater than $\alpha = .05$ at confidence interval of 95. Therefore, it is concluded that there is statistically significant difference in challenges faced by students of government and private schools with poor health conditions in sports and physical activity.

DISCUSSION

As a resource-constrained country, Pakistan lags far behind in terms of eradicating all difficulties to physical activity for students with poor health conditions. The findings of the current study revealed a number of obstacles that students with poor health conditions face when participating in sports and physical activity. The most frequently mentioned obstacles were lack of latest technology to facilitate needs of those with poor health, lack of awareness of sports instructor with the needs of those with poor health, discrimination by the society, bullying from healthy fellows and lack of acceptance from healthy peers. As previously stated by Haegele and others (2015), Rimmer and others (2004) and Jaarsma and others (2014), as well as by Lieberman and others (2013), an absence of peers, unequal access to resources, and a dearth of reliable transportation are all recurrently cited obstructions for people with diseases or disabilities.

Personal hurdles to involvement in sports have been identified in the current research, including fitness concerns, inferiority complexes, and a fear of scorn, among others. Other studies have shown that medical condition, expenditures, and the non-availability of practicing with fellow students are all constraints to sporting activities (Dane-Staples, et al., 2013; Jaarsma, et al., 2013; DeSchipper, et al., 2017).

According to the study's findings, parents who are too concerned about their children's health and whose household has a low socioeconomic status prevent their children from participating in sports and other physical activities. The expenditures connected with participation in sports have been shown to be a reported barrier to physical activity by Scelza, et al., (2005) and Jaarsma et al. (2014). Research on people with disabilities has yielded similar results (Wright, et al., 2019).

Findings from this study show that male and female students with poor health conditions face the same challenges in sports and physical activity, regardless of their gender. A statistically significant difference existed between the two groups of students with poor health conditions of secondary and higher

secondary classes as well as those studying at government and private schools in sports and physical activity.

CONCLUSIONS

Students with poor health conditions in Pakistan face numerous challenges when it comes to participating in sports or physical activities because of a hostile environment, a lack of cooperation from their peers, a family's low socioeconomic status, a low self-esteem, a fear of criticism, and a lack of exposure to the sport.

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