

Exercise motivation and barriers among men and women of different age groups

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(Received: 14 January 2012; Revision accepted: 5 August 2012)

Abstract

Regular physical activity is beneficial to all individuals for a variety of reason, yet many individuals do not engage in sufficient physical activity. The purpose of this study was to establish exercise motivation and barriers among different age and gender groups. The study included 154 participants with 77 (50%) males and 77 (50%) females recruited from three different fitness centres. A survey was modified for this specific study from The Exercise Motivations Inventory 2 and The Exercise Causality Orientations Scale. Results showed that the most common perceived motives for exercise were 'general health', 'maintain fitness', to 'feel good', 'strength and endurance' and to 'feel energised'. The motives changed when comparisons were made between different age and gender groups. Females indicated 'control weight' to be a stronger exercise motive while the senior group agreed that exercise to 'manage stress' was more important. Common barriers for exercise included 'lack of time', focus on 'other priorities', the perception that 'daily routine provides a workout', 'lack of energy' and because of 'health issues'. Barriers to exercise among the groups included, 'I don't have an exercise partner' which was more of a concern among younger groups and a 'lack of knowledge' which was more prevalent among the senior groups. A variety of other motives and barriers were identified. The motives and barriers cited by participants in this study provide useful information and can be of assistance to health care providers by understanding exercise preferences in different age and gender groups and as a result addressing specific exercise barriers to promote exercise adherence.

Keywords: Exercise, motives, barriers.

How to cite this article:

Louw, A.J., Van Biljon, A. & Mugandani, S.C. (2012). Exercise motivation and barriers among men and women of different age groups. *African Journal for Physical, Health Education, Recreation and Dance*, 18(4:1), 759-768.

Introduction

There are a number of benefits associated with participation in physical activity. Some of these are: lowering the occurrence of a variety of CVD (cardiovascular diseases), hypertension, stroke, osteoporosis, type 2 diabetes, obesity, colon cancer and breast cancer (Thompson, 2009). Schutzer and Graves (2004) even claim that physical activity is one of the most important health behaviours in preventing chronic disease. Exercise is not only valuable for physical health, it also reduces

psychological ailments such as depression and anxiety (Potgieter, 2003). Despite these significantly supported benefits of exercise, many individuals live sedentary lives and don't participate in exercise. Gyms offer a variety of physical exercises among which are; weight training, spinning, yoga, pilates, swimming, squash, and Thai Bo. To understand exercise adherence we have to determine what motivates members to exercise on a regular basis and what barriers discourage them. Emery, Hauck and Blumenthal (1992) have shown that up to 50% of members drop out within 6 months of commencement of an exercise programme.

Motives that promote exercise participation are general health, weight management, stress reduction, pleasure, training for a sport, self-esteem and lifestyle habits. Exercise barriers can be described as demotivators, non-adherence or termination of exercise. It can also be described as an "excuse to stop exercise". More frequent barriers are known as primary barriers, moderate and minor barriers are described as barriers that are less common (Anshel, 2007). Barriers that discourage physical exercise are usually associated with a lack of time, laziness, more important priorities and a lack of motivation (Ebben & Brudzynski, 2008). Different types of barriers exist among men, woman and age groups. Time is an important factor among most groups, but greater differences exist with regard to lack of skill, safe environment to exercise and energy levels. Young adults experienced problems associated with the cost, lack of facilities, transport, an exercise partner (Canadian Fitness and Lifestyle Research Institute, 1996).

One has to take theses motivational factors and barriers into consideration to increase regular physical activity participation (Ebben & Brudzynski, 2008). In this study, we address the following three issues: (1) The motivational determinants for exercise adherence; (2) The barriers of exercise adherence; and (3) The differences among the motivational determinants and barriers between various population groups.

Methodology

Participants

The study recruited a total of 154 participants (77 males, 77 females) from three different fitness centres. Participants were grouped into the following age groups: <25 years, 25-34 years, 35-44 years and >44 years (Chinn et al., 1999). Participants in this study averaged a mean exercise participation level of four times per week as assessed in the questionnaire.

Instruments

The Exercise Motivations Inventory 2 (EMI-2; Markland & Ingledew, 1997) and the Exercise Causality Orientations Scale (ECOS; Rose, Markland, & Parfitt, 2001) were modified to measure exercise motivators and barriers. The questionnaire was divided into four sections; (1) demographic information (2) exercise participation level (3) motives for exercise (4) barriers to exercise. The questionnaire employed a 5-point Likert scale ranging from 0 (not at all true for me) to 5 (very true for me) with fifteen exercise motivational themes and fifteen themes relating to exercise barriers. A pilot study was conducted on a group of 10 gym members to increase the validity of the study. The current survey was not tested for validity and reliability, though the adopted questions from EMI-2 and ECOS have been well reported in terms of their psychometric properties. The factorial validity of EMI-2 is strongly supported and the internal reliability ranged from .69-.95 (Markland & Ingledew, 1997). Rose, Markland, and Parfitt (2001) provided support for the factorial and convergent validity and reliability of the ECOS. The reliability of ECOS was measured with a Cronbach alpha of 0.75 and a test-retest coefficient of 0.74 (Rose, Markland & Parfitt, 2001).

Design

A cross-sectional, descriptive survey design was used to determine the exercise motives and barriers among gender and age groups. Cross-sectional studies assess the effects of maturation by selecting samples of participants from different age groups. Descriptive research attempts to describe the status of the study's focus without influencing it in any way. The survey is the most common method of descriptive research (Thomas, Nelson & Silverman, 2011).

Procedures

The Ethics Committee of the University of Zululand has approved this study. The study was conducted by surveying participants from three different fitness centres. Questionnaires were given to staff at the reception to hand out to gym members. An informed describing the purpose of the study was attached to the questionnaire. Participants had a choice of completing the survey at the gym or returning it the following day. Therefore, completing and returning the questionnaire already implied consent. The survey was conducted over a period of six weeks.

Statistical Analysis

Quantitative data analysis methods were employed. The rates of each theme were summed up to find the total score. The sums of the themes' scores were used to calculate and compare total motives and barriers among the different gender and age

groups. The results of the perceived exercise-motives and –barriers were presented using descriptive statistics.

Results and Discussion

Motives to exercise among gender

Figure 1 indicates the most common exercise motivator themes among gender as ‘general health’ and ‘maintain fitness’. This could be derived from the prevalence of obesity in today’s society that places great emphasis on being healthier and physically active (McArthur & Raedeke, 2009). To better understand the role of motivation in determining exercise participation Deci and Ryan (1985) propose placing motivation on a continuum ranging from extrinsic motivation (participating in exercise as a means to an end and not for its own sake) to intrinsic motivation (participating in exercise for its own sake).

The theme ‘strength and endurance’ was ranked third by males followed by ‘feel good’, while females categorized ‘control weight’ and ‘appearance’ in third and fourth place. Males rated the latter two motives in seventh and eighth positions. McArthur and Raedeke (2009) also found female’s appearance motive more significant than male’s.

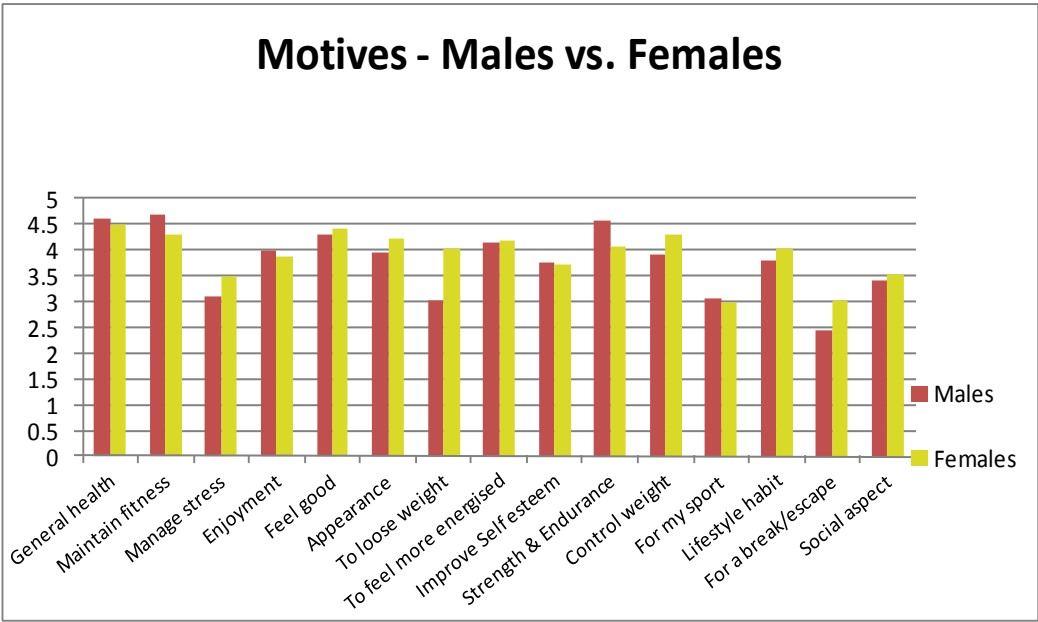


Figure 1: Mean scores of motives among males and females.

Grossbard, Lee, Neighbors and Larimer (2009) clarify this by their observation among gender preferences in cultural standards for ideal body types. They documented that for females a thin physique represents attractiveness and a more muscular build signifies success and power for males.

Both males and females ranked to *'feel energised'* in fifth place. Males placed *'enjoyment'* as their sixth motive, while females positioned it as their ninth motive. McArthur and Raedeke, (2009) support this as they too found that male's enjoyment motive is greater than female's. The type of exercise activity can affect an individual's motive to participate in exercise. Enjoyment is related to intrinsic motivation which is a key factor in exercise adherence, this emphasize the importance for individuals to enjoy the type of exercise they choose. Less common themes were identified as *'social aspect'*, *'manage stress'*, *'training for sport'* and *'escape/break'*.

Overall, there were more similarities between exercise motives among males and females than there were differences. Results reveal that males and females had both intrinsic and extrinsic reasons for participating in their exercise activities, however higher levels of intrinsic motivation were reported. This illustrates that exercise participation were more for pleasure and satisfaction than out of extrinsic motives. Moreover, extrinsic factors have been linked to exercise initiation, while intrinsic factors are associated with greater exercise adherence (McAuley, 1992).

Motives to exercise among age groups

Motivational patterns among age groups are presented in Table 1. In the under 25 year age group *'appearance'* was greater perceived than to *'feel energised'* which was essential to the 25-34 year age group. Research has reported that older individuals are more satisfied with their appearance when compared to younger individuals (Van Norman, 2010).

To *'control weight'* was a greater concern in the 35-44 year age group, while *'enjoyment'* was a prerequisite for the above 44 year age group. Exercise to *'manage stress'* was vital to this group while in the under 25 year age group this motive was ranked last. This could indicate that the under 25 year age group has other means to relieve stress such as social activities, or because they lead less anxious lifestyles. However, the intrinsic association with the latter two barriers among older participants should not be overlooked. *'Lifestyle habit'* was ranked much lower in the above 44 year age group when compared to all other age groups. A possible explanation for this could be that levels of physical activity decline with age seeing that increased effort is required to perform daily activities, which in turn could lead to older adults avoiding physical activity (Schutzer & Graves, 2004).

Table 1: Top ten motives among age groups

AGE GROUPS			
<25	25-34	35-44	>44
General Health	Fitness	General Health	General Health
Fitness	General Health	Energy	Feel good
Strength/Endurance	Strength/Endurance	Control weight	Fitness
Feel good	Feel good	Strength/Endurance	Enjoyment
Appearance	Energy	Feel good	Control weight
Habit	Appearance	Habit	Stress
Enjoyment	Control weight	Fitness	Appearance
Control weight	Self Esteem	Loose weight	Energy
Energy	Habit	Appearance	Loose weight
Self Esteem	Social	Self Esteem	Self Esteem

Data show that body-related concerns were more dominant among the under 25 and the 25-34 year age groups. This is consistent with exercise being extrinsic to younger age groups as the activity is done to achieve an extrinsic outcome such as improved appearance. These findings indicate that extrinsic factors are stronger exercise motives in younger adults whereas motivation for exercise among older adults is linked to intrinsic factors. This suggests that the type of motivation to exercise is likely to change over lifespan.

Barriers to exercise among gender

Figure 2 illustrates the top three barriers among gender as ‘lack of time’, ‘other priorities’ and ‘daily routine provides a work out’.

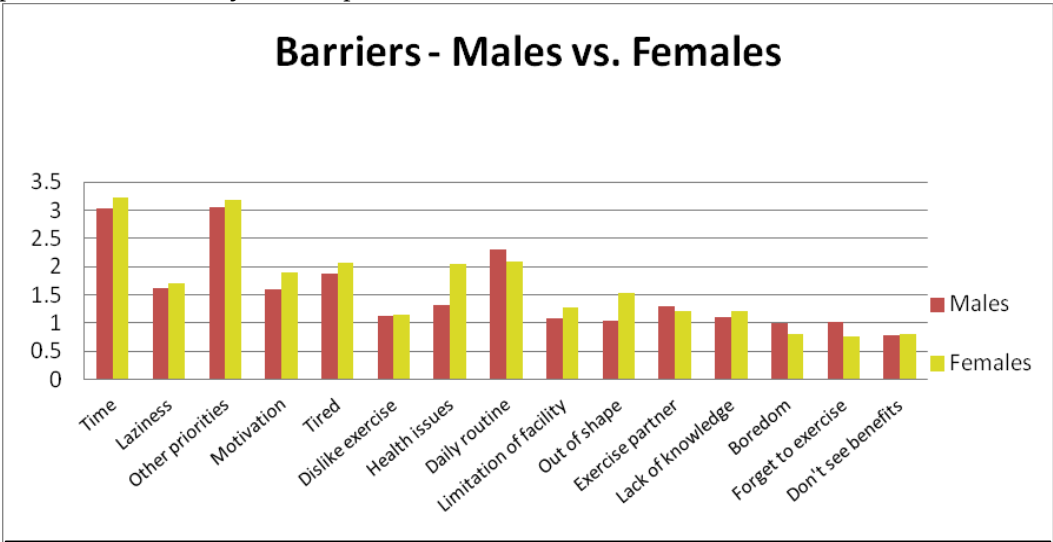


Figure 2: Mean scores of barriers among males and females.

Lack of time is probably the most common barrier across a number of studies (Ebben & Brudzynski, 2008; Lovell, Ansari & Parker, 2010; Van Norman, 2010). Other major barriers found in a previous study were '*tired*' and '*lack of motivation*' (Canadian Fitness and Lifestyle Research Institute, 1996). In the present study the latter barriers were ranked fourth and sixth by both males and females. Being too '*lazy*' to exercise and '*health issues*' were barriers ranked in the fifth and seventh position among males and vice versa for females. '*Limitation of facility*' and being '*out of shape*' were more of a concern to females than for males.

These barriers have shown to have an indirect effect on physical activity through self-efficacy and self-motivation. Self-efficacy, in an exercise context, is also known as "barriers self-efficacy" which McAuley (1992) defines as the belief of an individual's ability to overcome barriers to regular exercise. An individual with a high level of self-efficacy will persist in physical activity despite obstacles such as feeling tired. Silliman, Rodas-Fortier and Neyman (2004) found that males appear to be more confident with their body image. Previous research supports this finding where they reported that males have higher efficacy to overcome barriers than females (Thogersen-Ntoumani & Ntoumanis, 2006). This may suggest that females have more pressure to conform to social norms in terms of appearance which contributes to low self-efficacy (Lovell, Ansari & Parker, 2010). Weak exercise barriers were reported as '*forgot to exercise*', '*exercise is boring*' and '*not seeing benefits*'.

These findings may be explained by categorizing the diverse barriers into internal and external barriers. Internal barriers refer to personal thoughts, perceptions and feelings about exercise such as '*lack of motivation*', '*I am out of shape*' and being too '*lazy*'. External barriers are the product of an individual's environment and lifestyle such as '*lack of time*', '*other priorities*' and '*daily routine provides a work out*' (Griffin, 2006). Taking the above into account, data show that the perceived external barriers are more important than the perceived internal barriers among both males and females. Moreover, internal barriers to exercise have been found to be inversely related to participation in physical activity (Daskapan, Tuzun & Eker, 2006).

Barriers to exercise among age groups

Table 2 outlines the top ten barriers among age groups, '*health issues*' was identified as a barrier that gained incentive value with age (Canadian Fitness and Lifestyle Research Institute, 1996). Another barrier to exercise amid this group was '*lack of knowledge*' of exercise. O'Neill and Reid (1991) agree that ignorance of sufficient exercise is a barrier for older adults since they tend to perceive that they participate in adequate amount of physical activity.

Table 2: Top ten barriers among age groups

AGE GROUPS			
<25	25-34	35-44	>44
Time	Time	Other priority	Health
Other priority	Other priority	Time	Work routine
Work routine	Tired	Work routine	Time
Tired	Work routine	Health	Other priority
Lazy	Motivation	Tired	Knowledge
Motivation	Out of shape	Lazy	Motivation
Out of shape	No partner	Motivation	Tired
Dislike Ex	Lazy	Facility	Lazy
No partner	Facility	Out of shape	Dislike Exercise
Facility	Health	Knowledge	Out of shape

Limited views of successful aging portrayed by the media may also affect older adults to believe in their abilities to retain health throughout lifespan (Van Norman, 2010). The younger groups’ exercise habits were not much affected by their knowledge and valued an exercise partner more than the older groups. Additional barriers mentioned in the under 25 year age group were ‘*lack of transport*’, ‘*hangover*’ and that Sundays were their ‘*rest day*’ which they did not exercise. The two middle groups agreed that ‘*other priorities*’ such as work and family responsibilities were an important factor that kept them away from the gym. This could indicate the overlapping responsibilities among adults in these age categories such as being a worker, a spouse and a parent.

These findings demonstrate the influence of the distinct transitions taking place as adults progress through age on the nature of perceived barriers to exercise. However, results show that external barriers were cited as the most common type of barrier to exercise among all age groups. Research has documented that individuals reporting external barriers to exercise are more likely to overcome exercise barriers (Chinn et al., 1999).

Conclusion

Motivation answers the “why” question of behaviour (Potgieter, 2003). It explains why participants continue to exercise. Potgieter (2003) concludes that motivation is the function of direction and energy and identifies direction, intensity and persistence as the main three aspects of motivational behaviour. Direction refers to choosing or avoiding a specific activity, intensity refers to how hard the individual is trying and persistence refers to the adherence of the activity. It is thus, crucial to understand what motivate individuals to exercise in order to promote exercise adherence. The motives and barriers cited by participants in this study provide useful information and can be of assistance to

health care providers by understanding exercise preferences in different age and gender groups and therefore, promoting exercise adherence by addressing specific exercise barriers (Schutzer & Graves, 2004). In the exercise environment a variation in motives and barriers can be expected because of difference in a population group. Emery, Hauck and Blumenthal (1992) suggest that older participants may have more barriers to exercise due to health problems. Although people over the age of 65 years are more vulnerable to chronic diseases some of them believe that they are too old or too weak to participate in physical activity (Schutzer & Graves, 2004). Canadian Fitness and Lifestyle Research Institute (1996) showed that males and females have different exercise motives. Various cultures and geographic regions may also influence the perception of exercise motives and barriers (Ebben & Brudzynski, 2008). The significant age and gender differences among exercise motives and barriers place great emphasis on the need for future research to design exercise interventions addressing motives and barriers specifically related to gender and age groups.

Acknowledgement

The authors would like to thank the study participants as well as all gym staff for their assistance.

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