

Study of the Level of Sports Addiction Among Students at the Faculty of Sports Science

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Abstract

The aim of this study was to investigate the exercise addiction of the students of the School of Physical Education and Sport and to determine the differences according to the type of exercise, age of exercise and load dynamics. The Exercise Addiction Scale (EBO-21) developed by Housenblas and Downs (2002) and the Turkish Validity and Reliability Study by Yeltepe and İkizler (2007) and the Personal Information Form were applied to the sample group. The sample of the study consisted of 245 athletes who regularly train at Afyon Kocatepe University School of Physical Education and Sports. Studies on this subject indicate that addiction to sports is similar to addiction to chemical substances due to the presence of withdrawal and tolerance symptoms. The results of the study presented show that self-confidence and athletic performance increase as the students' level increases. When evaluating exercise addiction by gender, it was found that female students were more likely than male students to consider physical problems and show self-control and interruption of exercise behaviour. When evaluated by age, exercise addiction was found to have decreased and been brought under control in older individuals, indicating progress in self-control of addiction.

Keywords: Exercise Addiction, Exercise Adherence, Psychopathological Symptoms

INTRODUCTION

Physical education, which is a complementary and integral part of general education, is a system of activities that ensures the development of movement skills, the development of neuromuscular coordination, social adaptation and the most efficient use of physical forces expended for the duration of work and social activities after school age, as well as the control of organs, methodical movement (Bucher ve Koenig, 1983; Haywood, 1989; Çamlıyer, 1999; Saniakçalı et al., 2022; Sığın et al., 2023). Nowadays, physical education and sports are conscious and planned activities aimed at the physical, social and emotional development of people, which are the main source of the growing generations, and are accepted as a complementary and integral part of general education (Yıldıran, 1996; Tunar et al., 2012). If we look at the definition of exercise addiction, exercise addiction is defined as the individual's control of the exercise routine, constantly increasing the duration, frequency and intensity of exercise in order to achieve the desired effect from exercise, not being able to spare time for family and friends due to the inability to give up exercising, exercising instead of participating in social activities, and rearranging the individual's life within the framework of exercise habits. (Coverley, 1987, Hausenblas et al. 2002). Exercise addiction is a condition in which a person becomes overly exercised, physically and mentally damaged, and their well-being is impaired. It is examined in four stages: the first is exercising just for fun and to stay in shape, the second is risk-averse, the person who realizes that he feels good during exercise turns to exercise to get away from the problems in his life. Third, as the person now depends on regulating his or her life according to a rigid exercise plan, injuries and social problems may occur. In the fourth case, the person is now addicted, his life is based on exercise, and he continues to exercise uncontrollably despite all the negative consequences

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(Szabo et al., 2015; Tunar et al., 2017). Although this phenomenon has been continuously studied, only the diagnostic criteria have evolved. Studies on the subject suggest that exercise addiction is a similar disorder to chemical dependency due to the presence of withdrawal and tolerance symptoms. It is a condition defined as an excessive willingness to engage in physical activity and exercise, to exercise despite the harmful effects of exercise, e.g. to exercise even when injured and to feel bad when inhibited (Jam et al., 2018). The fact that the term addiction is used for physical exercise and not for a biological substance causes confusion. In this context, the aim of the study was to discuss the extent of exercise addiction in students of Afyon Kocatepe University School of Physical Education and Sports by using the Exercise Addiction Scale related to the subject with different variables.

RESEARCH MODEL

In this study, which examines the level of sports addiction of Afyon Kocatepe University School of Physical Education and Sports students with different variables, a survey research model was applied. The survey research model is a research approach that aims to investigate a situation that has existed in the past or currently exists using a sample group selected from the population, including large groups.

Population and Sample

The population of the study consisted of 270 male and 150 female students studying at Afyon Kocatepe University School of Physical Education and Sports. The study sample consisted of a total of 245 students, 53 females and 192 males, studying at Afyon Kocatepe University School of Physical Education and Sports. Volunteers participated in the study.

Data Collection

The Exercise Addiction Scale (EBÖ-21) developed by Housenblas and Downs (2002), whose Turkish validity and reliability study was conducted by Yeltepe and İkizler (2007), and the personal information form were used to determine the students' exercise addiction.

Statistical Analysis

The questionnaires collected by the researcher were reviewed and those that were incomplete or incorrectly completed were excluded from the study. Subsequently, the valid and acceptable questionnaires of the questionnaires presented to the students were analyzed using SPSS 23 program. The normal distribution of the data was checked and it was found that the data had a normal distribution. When analyzing the data, descriptive statistics as well as frequency and percentage values were examined. The evaluation of the answers given was analyzed using the one-way Anova test of parametric tests. The significance level was assumed to be $p < 0.05$.

FINDINGS

Table 1. Frequency and Percentage Distribution of the Research Group

	Variables	Frequency	%
Gender distribution	Male	192	78.4
	Female	53	21.6
	Total	245	100

Table 1 shows that 78.4% of the 245 participants were male (192 people) and 21.6% female (53 people).

Table 2 Frequency and percentage distribution of students continuing their education at Afyon Kocatepe University School of Physical Education and Sports in terms of their sports major status

	Variables	Frequency	%
Distribution by branch	Football	78	31.8
	Basketball	25	10.2
	Volleyball	29	11.8
	Tennis	17	6.9
	Fitness	4	1.6
	Swimming	16	6.5
	Wrestling	3	1.2

	Handball	13	5.3
	Athletics	2	0.8
	Badminton	7	2.9
	Futsal	5	2.0
	Table tennis	6	2.4
	No branch	37	15.1
	Cymnastics	3	1.2
	Total	245	100

Table 2 shows that 31.8% of participants took part in football, 10.2% in basketball, 11.8% in volleyball, 6.9% in tennis, 1.6% in fitness, 6.5% in swimming, 1.2% in wrestling, 5.3% in handball, 0.8% in athletics, 2.9% in badminton, 2% in futsal, 2.4% in table tennis, 1.2% in gymnastics and 15.1% had no branch.

Table 3 Frequency and percentage distribution of age of students at Afyon Kocatepe University School of Physical Education and Sports

	Variables	Frequency	%
Age distribution	17-18	18	7.3
	19-20	84	34.3
	21-22	77	31.4
	23-24	50	20.4
	25-26	15	6.1
	27+	1	0.4
	Total	245	100

Table 3 shows that 7.3% of the total of 245 participants were 17-18 years old, 34.3% were 19-20 years old, 31.4% were 21-22 years old, 20.4% were 23-24 years old, 6.1% were 25-26 years old and 0.4% were 27 years old or older.

Table 4. Norm Tables of the Results of the Exercise Addiction Scale of the Research Group by Age

	Age	N	Mean	Std deviation	p
I exercise consistently to achieve the desired effect/benefits	17-18	18	3.17	1.383	0.326
	19-20	84	3.37	1.421	0.155
	21-22	77	3.47	1.420	0.162
	23-24	50	3.20	1.340	0.190
	25-26	15	2.27	1.280	0.330
	27+	1	5.00	.	.
	Total	245	3.29	1.412	0.090
I spend too much time exercising	17-18	18	2.50	0.924	0.218
	19-20	84	3.14	1.153	0.126
	21-22	77	3.10	1.304	0.149
	23-24	50	3.02	1.134	0.160
	25-26	15	2.07	0.799	0.206
	27+	1	5.00	.	.
	Total	245	3.00	1.198	0.077
I consistently increase my exercise frequency to achieve the desired effect/benefits	17-18	18	3.39	1.195	0.282
	19-20	84	3.31	1.439	0.157
	21-22	77	2.91	1.471	0.168
	23-24	50	3.48	1.328	0.188
	25-26	15	2.47	1.407	0.363
	27+	1	5.00	.	.
	Total	245	3.18	1.429	0.091
I exercise for longer than expected	17-18	18	2.39	1.243	0.293
	19-20	84	3.13	1.342	0.146
	21-22	77	3.09	1.216	0.139
	23-24	50	3.12	1.272	0.180
	25-26	15	2.07	0.961	0.248
	27+	1	2.00	.	.
	Total	245	2.99	1.287	0.082
I exercise to avoid feeling tense	17-18	18	3.06	0.873	0.206
	19-20	84	3.05	1.405	0.153
	21-22	77	2.78	1.119	0.128
	23-24	50	3.18	1.320	0.187
	25-26	15	2.00	1.000	0.258
	27+	1	3.00	.	.
	Total	245	2.93	1.265	0.081

In Table 4, no statistical difference was found between the sub-dimensions 'I exercise continuously to achieve the desired effect/benefit', 'I spend too much time exercising', 'I increase my exercise frequency continuously to achieve the desired effect/benefit', 'I exercise longer than I expect and I exercise to avoid getting nervous' of the students' exercise addiction scale scores by age ($p>0.05$).

DISCUSSION AND CONCLUSION

In examining the rates of individuals with exercise addiction, it has been found that students with an advanced age of onset to exercise and students who have made exercise their lifestyle exhibit symptoms of exercise addiction. In studies on this topic, it has been shown that young people's motives and motivations to participate in sports differ from those of other age groups, and this difference is also evident in relation to gender, which increases participation rates and reasons (Korur et al 2013; Lapa & Ardahan, 2009).

Consciousness begins when the individual starts to ask himself why he is exercising so much. In the meantime, individuals begin to recognise changes in their mindset, even if only to a certain degree. It is believed that as individuals begin to develop an awareness, it may be beneficial for them to gradually reduce the amount of time they spend exercising and use that time for other activities. As with any addiction treatment, there may initially be withdrawal symptoms (restlessness, tension, distress, etc.). However, these symptoms are predicted to diminish as hormonal balance is established and disappear over time.

According to the results of the exercise addiction scale in the present study, the average age of the participants was 21.9 years. The highest sport participation was football at 31.8%, 15.1% non-branch and 11.8% volleyball. The gender distribution was 78.4% male and 21.6% female. When sports addiction was assessed by age, it was found that sports addiction decreased and was brought under control in older individuals and there seems to be progress in self-control of addiction ($p<0.05$).

It was found that there was no correlation between sports addiction and age variables in either the university students or the physically active individuals. This study is consistent with previous studies. In contrast to these studies, Paksoy (2021) found in his study that participants who were older tended to have higher scores on the sub-dimensions of the Exercise Addiction Scale depending on the age variable, namely scores on the sub-dimensions of Overfocus and Emotional Change.

In the present study, they found that a higher level of physical activity is closely related to sports addiction. Similarly, Tekkurşun Demir and Türkeli (2019) found in their study that university students studying at sports science faculties belong to the risk group. In the studies conducted on different groups, it is found that groups that do more sports are also more addicted to sports (Zırhlıoğlu, 2011).

The results of the study presented show that self-confidence and athletic performance increase as the students' level increases. When evaluating the degree of sports addiction by gender, it was found that female students are more likely than male students to consider physical problems, control themselves and take a break from sports. The evaluation by age shows that sports addiction decreases and is under control in older people. It can be said that there has been progress in the self-control of addiction.

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