# Overcoming Limitations of Women's Involvement in Sports and Physical Exercises in Nigeria: Implications for National Productivity and Economy

Ifeanyichukwu Christian Elendu, Ph.D<sup>1\*</sup>, Bright Okanezi, Ph.D<sup>2</sup>

1. Department of Human Kinetics and Health Education, Faculty of Education,

University of Port Harcourt, Port Harcourt, Rivers State, Nigeria.

\* E-mail of the corresponding author: elelifey2k@yahoo.com

2. Department of Educational Foundations, Faculty of Education, University of Port Harcourt, Rivers State, Nigeria.

## Abstract

Sports and physical exercises are mirror of the society. The society is seen in sports and physical exercises just as sports and physical exercises are seen in the society. Physical exercises take place in a socio-cultural setting and are influenced by some socio-cultural forces. It is a global recognition especially among the feminists that women have equal right with men to participate in sports and physical exercises without any limitations. However, some societies including Nigeria have some socio-cultural barriers to women's involvement in physical exercises. The paper discusses the social, environmental, psychological, anatomical and physiological, and cultural limitations of women's involvement in sports and physical exercises in Nigeria, and their implications for national productivity and economy were highlighted. It was recommended among other things that adequate and accessible sports facilities and equipment should be made available for women at homes, workplaces and schools; more emphasis should be placed on sports and physical exercise education in all sectors of the society especially the educational institutions; and ministries of sports, culture and tourism, education and other sport-related institutions should sensitize people of the need for physical exercise by all.

Key words: Social, culture, anatomy, physiology, psychology, environment.

#### 1. Introduction

The issue of feminine and masculine expectations, responsibilities, and activities in the society has for years been a focus of discussion by sociologists all over the world. Feminists have always championed gender issues such as equity and equality in every facet of life including sports and physical exercise. The sports culture is dominated by males. The feminists are worried over men's dominance in sports, and discriminatory treatments suffered by women such as gender inequality and inequity in sports. Men have been naturally perceived to be different from women in cultural expectations and responsibilities in the society. Female folk constitutes a significant part of human population all over the world. There is a global view that feminine gender should be given equal treatment with their masculine counterparts in every aspect of societal lives. The female sex should not be unfairly treated in any societal activity including sports and physical exercises participation.

The issue is not participation in physical activity but physical exercise because everyone is involved in physical activity as long as the person walks, runs, swings arms, writes, jumps, hops, and gallops. It should be noted that not everybody is involved in physical exercise. Everyone is interested in prevention rather than cure of diseases. One of the preventive medicine practices is regular participation in moderate intensity physical exercises. For the past decades, involvement in sports and physical exercises is a health promotion strategy and behaviour of individuals irrespective of sex, age, religion, race, tribe, ethnicity, marital status and other social stratification or class in any society. Physical activity refers to any bodily movement that involves the muscle contraction, relaxation and expenditure of energy. For people to enjoy a healthy living, sports and physical exercises among other good health behaviours should be given its deserved attention.

Physical exercises are supervised and regular physical activities taken to maintain optimal level of physical fitness (Elendu & Chigbata, 2007). Physical exercise refers to physical activity done for the purpose of getting physically fit. Exercises occur in a supervised setting where time, place, activity, and participants may be restricted and with predetermined goal or goals, which may or may not be achieved (Orunaboka & Elendu, 2009). Sport refers to any highly organized physical activity which is recreationally or competitively performed by an

individual or individuals in a well specified and defined indoor or outdoor facility, with specific equipment and supplies, and rules and regulations made by a professional body for all participants.

A healthy lifestyle contributes to the quality of life (Rauzon, 2002). Physical exercise is an activity that takes place in a socio-cultural setting and an individual's participation or nonparticipation in it is influenced by many social and cultural factors. It is a fundamental human right of women to have access, and participate in sports, recreational activities and physical exercises in a positive and enjoyment environment without any limitations. Engagement in physical exercises is an individualistic behaviour. It is only the individual who decides to participate or withdraw from sports and physical exercises with the absence or presence of barriers or limitation. People failed to participate in sports and physical exercises or reduce their frequency of participation due to some actual or perceived barriers.

Shimer (1996) noted that an individual is more likely to participate in regular exercise if he/she enjoys the physical activity; believes that time can be found for exercise; believes that there are relatively few barriers to getting regular exercise; believes the benefits of exercise outweigh the costs; has friends or family members who exercise and support or both his or her getting exercise; feels safe exercising outdoor, near home, or work; and has access to an attractive and convenient exercise space near home or work.

Sedentary women have a greater occurrence of endometrial, cervix, and breast cancer (Sturgeon, Brinton & Berman, 1993; Bernstein, Henderson, Hanisch, Sullivan-Halley & Ross, 1994). Women's involvement in sports and physical exercises is very essential for their health. Zhang, Feldblum and Fortney (1992) reported that exercise among physically active women can reduce the risk of osteoporosis. Clapp, Rokey, Treadway, Carpenter, Artal and Warmes (1992) stated that active women experience less insomnia, stress, anxiety and depression. Regular physical activity reduces one's risk of coronary heart disease, hypertension, obesity, non-insulin dependent diabetes mellitus, osteoporosis, and certain forms of cancer (Bouchard, Shephard & Stephens, 1994).

Women can clearly benefit by participating in a regular exercise programme. However, initiating and maintaining an exercise programme is a difficult task for many women (Rauzon, 2002). Although, it is now more acceptable for women to be involved in physical activity, participation rates are low (Rauzon, 2002). Understanding the barriers that limit an individual's involvement in physical activity can provide critical information. Women are underrepresented in the percentage of those participating in regular and vigorous physical activity (Gill, Overdorf & College, 1992). Women have been shown to be less likely than men to participate in vigorous exercise and sports and less likely to be physically active on a regular basis (Gill, Overdorf & College, 1992; Stephens, Jacobs & White, 1985; Yoshida, Allison & Osborn, 1988). The difference in the proportion of men and women in sports and physical exercises participation is an actual or perceived internal or external factor or force which poses a challenge or obstacle that result to one's inability to perform, continue in an activity or a reduction in the frequency with which an activity is performed. Limitations or barriers could be seen in one's non-participation or reduction in the frequency of participation in sports and physical exercises participation in sports and physical exercises participation in sports and physical exercises below to one's inability to perform, continue in an activity or a reduction in the frequency with which an activity is performed. Limitations or barriers could be seen in one's non-participation or reduction in the frequency of participation in sports and physical exercises participation deprive someone of the potential benefits such as health and fitness

The fitness of Nigerian citizens especially the workforce is important for high productivity and economic development. Women as part of workforce need fitness through physical exercises in order to be productive and contribute to national economy. Therefore, limitations to their participation in physical exercises call for investigation. Again, if the fifth goal of United Nations Millennium Development Goals (MDGs) of improving maternal health is to be achieved through physical exercise, then there is need to examine and address the limitations faced by women in their involvement in sports and physical exercises in every society. Thorough understanding of the barriers or limitations to sports and physical exercises participation, and information on pattern of sports and physical exercises provide baseline for intervention for any individual or groups in the society.

This is why this paper focused on x-raying the socio-cultural limitations of women's involvement in sports and physical exercises in Nigeria for proper intervention that would be aimed at ensuring improvement in their participation rates. The paper discusses the socio-cultural, environmental, psychological, anatomical and physiological limitations to females' participation in sports and physical exercises for national productivity and economy.

#### 2. Social Limitations

Bouchard, Shephard and Stephens (1994) reported that social factors such as social support are significant correlates of exercise behaviour. Social limitations to women's involvement in physical activity include lack of

social support, role conflict, lack of equal opportunities and limited role models (Rauzon, 2002). Sexual violence against women such as sexual harassment is a limitation to their initiating and maintaining physical exercise programme. Lack of support from parents, husbands, siblings, friends, peers and social institutions constitute serious limitations to females' exercise behaviour. The women are more likely to participate in exercise when they see or have a physical exercise role model, which the absence of it constitutes a limitation. Most adolescent females often look forward to seeing a woman who is either standing as a mother, sister, friend, or peer that participates in physical exercise. Adequate and equal media coverage is not given to females who participate in sports and physical exercises compared to their male counterparts.

## **3.** Environmental Limitations

Inconvenience, inaccessible programme locations, work conflicts, lack of time and energy, and medical problems can hinder long-term participation in physical activity (McAuley & Jacobson, 1991). Hinderances to participation in physical activity for women are lack of time and money, safety, resources such as facilities, equipment and instruction, and support Jones (1987). Reasons for low physical activity participation rates for women include lack of transportation; lack of money, due to the lower socioeconomic status a woman faces; and problems of safety and security in traveling alone to a facility and exercising at night (Bryant & McElroy, 1997). Women's experiences of sexual abuse and harassment in the sporting environment constitute a serious barrier to their involvement in physical exercise and sport programmes. Unfavourable and non-supportive sports facilities is one of the factors that determines one's exercise behaviour pattern. Unavailability, inadequacy, inaccessibility, unaffordability, inproximity and insecurity of sports facilities scare its potential users especially women.

## 4. Psychological Limitations

Rauzon (2002) stated that psychological barriers to a woman's participation in exercise include role conflict, low self esteem, or absence of role models. Yoshida, Allison and Osborn (1988) reported that the perceived barriers to women participation in physical activity include lack of time due to work, health reasons, and lack of energy, motivation, or need. Self defeat, anxiety and mistrust is a barrier to a woman's participation in exercises. Fear of injury, low self esteem and body image limits women's involvement in physical exercises. Some women see themselves as not having the skills, and courage to participate in physical exercises. The non-motivation of women into physical exercise affects their involvement. Lack of internal and external motivation also affects women's participation in physical exercises. Most women see physical exercise as something that is not safe for them in terms of injury and as such they develop fear for participation.

#### 5. Anatomical and Physiological Limitations

Physiological limitations to women's involvement in physical activity include smaller lung capacity, and limited musculoskeletal functions (Rauzon, 2002). The physical fitness status of physically active woman cannot be compared with that of a physically active man. Generally, the strength and endurance ability of the muscles of a woman may hinder her participation in high intensity exercises. According to Orunaboka and Kemebradikumo (2007), women have looser joints, delicate tendons, have twice as much body fat as men, and smaller muscle mass. They further noted that women have smaller heart size, lower blood volume, lower red blood cells, higher heart rate, smaller stroke volume, smaller thorax and less lung tissue. Women's smaller heart size, lower blood volume, lower red blood cells, higher heart rate, smaller stroke volume, smaller thorax and less lung tissue and lung tissue have implications on the type, frequency, duration and intensity of the physical exercise or sports which they engage in.

#### 6. Cultural Limitations

Women who choose to participate and even get involved in sporting careers are stigmatized by the society as not choosing a recognized and profitable career (Orunaboka & Kemebradikumo, 2007). The demands placed on women from paid employment, housework, child rearing, and lower socioeconomic levels hinder their involvement in exercises (US Department of Health and Human Services, 2000). All women face pervasive and invasive messages about how women's bodies should look, move, and develop and they face rigid social definitions of attractiveness (Lonsdale, 1990). Sex role stereotypification strongly influences women's

participation or nonparticipation in physical activity or sports (Lirgg, 1991). One of the oldest and most persistent myths and one of the main deterrents to female sports participation is the notion that vigorous physical activity tends to masculinize girls and women (Boutilier & SanGiovanni, 1983). Some cultures perceive women as good for only and should be limited to child-rearing and other domestical works. Women are seen as baby factories. Women who participate in sports are seen as violating the cultural expectations of womanhood.

Societal stereotyping of gender role had made sports and physical exercises to be perceived more appropriate for men. Women and girls are systematically excluded from participation in physical activities that are thought to be more appropriate for men. Lack of time largely because of family responsibilities is responsible for low physical exercise participation rates for women (Bryant & McElroy, 1997). In a traditional Nigerian society, it is believed that the primary assignment of a married woman is childrearing, taking care of the husband and executing all domestic chores with no physical exercise programme. The cultural belief that a woman's place is in the kitchen is still a problem for most women in their sports life. Some cultures or group of people do not allow girls and women to appear in public places as they have been placed indoors to keep the home and raise children (Orunaboka & Kemebradikumo, 2007). In some traditional Nigerian society, an extension of a woman's domestic responsibility is involvement in farm or agricultural work and never to be seen jogging or doing other forms of physical exercises.

In traditional Nigerian society, house-helps or housemaids are mostly girls and women because of the expected domestic assistance and up-keep of the home. Young girls and women receive scolding and discouragement from parents and older members of the society for participating in physical exercise with the cultural belief that it has negative effects on their reproductive system. The activities of most young girls and women are restricted in the kitchen activities such as cooking, washing, and bedroom activities like sex gratification of the husband, caring of the husband and children. Some religion and culture restrict their women in participating in outdoor activities. The dressing pattern for physical exercises and some sports which reveal the sensitive body parts are discouraged by some religion and culture.

## 7. Implications for National Productivity and Economy

The health and fitness of a woman especially pregnant woman is the health of a nation because what a woman does or fails to do can affect her health, and that of the unborn babies, thereby affecting the nation. The Ancient Greeks had the philosophy and belief of having a strong nation through strong women as they participate in physical training and exercises. Greeks' participation in physical exercises helped them to develop physical fitness components such as strength, endurance, agility, flexibility, reaction time, and power which are required for their nation's security and productivity. Spartan women were exposed to physical exercises in order to be strong. They believed that it is only strong women that can give birth to strong babies who can defend the nation in case of any external aggression and be productive for the nation. Sterfield (1997) stated that fetuses of exercising mothers tolerate the stresses of labour well and are more alert and less irritable in the immediate postpartum. Exercise increases maternal cardiovascular fitness (Sterfield, 1997). Likewise, Nigerian women who are strong and fit through physical exercises are bound to be productive and equally give birth to strong male and female children who may be productive to the nation thereby contributing the national economy.

The limitations faced by Nigerian women in their involvement in sports and physical exercises affect their physical fitness capacity and other values associated with participation in physical exercise. As such, women's productivity and contribution to national economy through sports and physical exercise are hampered. Limiting women to the childrearing, kitchen and other domestic responsibilities provide no opportunity for them to express their God-given sports potentials and skills that may lead to national productivity and economy. Even as it pertains to childrearing, women who are physically inactive have shown to experience some pregnancy-related complications, morbidity and mortality, and these affect their productive capacity. This is not far from the findings of Sterfield (1997) that during pregnancy, women who exercise experience fewer musculoskeletal problems and less back and pelvic pain than their non-exercising counterparts. Exercise increases maternal cardiovascular fitness, body image, and wellbeing, and prevents gestational, or pregnancy-related diabetes. Moderate exercise during pregnancy can reduce delivery time and complications (Sterfield, 1997). A physically active nation where women especially pregnant women participate in sports and physical exercises is likely to experience less maternal and child morbidity and mortality cases than a nation where women do not engage in physical exercises. Much medical cost due to diseases that would have been put in the national economy is incurred by women who are physically inactive. Incidences of morbidity and mortality of citizens of a nation drain the economy rather than boosting it. Productivity level of women who participate in physical exercises improves the nation's economy.

Fear of injury as a psychological constraint has implications on what task a woman can take, how she will carry out the task, when she will carry out the task, where she will carry out the task, and with whom to carry out the task in her chosen career or occupation. A woman who is easily scared of taking risk and sustaining injury may not take productive steps even if the work will contribute to national productivity and economy.

## 8. Conclusion

Involvement in sports and physical exercises is one of the preventive medicine practices. Participation in sports and physical exercises is a disease prevention strategy. Participation in sports and physical exercises is a globally recognized right of everyone including women. However, this right is not totally observed in some societies as exemplified in some socio-cultural limitations directly or indirectly imposed on women. The female folk are disadvantaged in physical exercises with the limitations. These socio-cultural limitations (social, environmental, psychological, anatomical and physiological, and cultural) have negative implications on women's productivity and contributions to national economy.

### 9. Recommendations

In order to ensure that women contribute to national productivity and economy through the inherent values of sports and physical exercises, the following recommendations were made.

1. Women should be given social support from members of the society ranging from spouse, parents, peers, friends, and government to enable them participate in sports and physical exercises.

2. Conducive environment such as adequate, accessible physical exercise facilities and equipment, and finance for transportation to sports and physical exercise venue should be made available to women at homes, workplaces and schools to encourage them.

3. Sports psychologists and counselors should volunteer to assist women overcome psychological problems (such as fears of injury, low self esteem and negative self perception) affecting their participation in sports and physical exercises.

4. Sports and exercise scientists like exercise physiologists should assist women in improving their body structures and functioning through regimented sports and physical exercise programmes to meet the physiological requirements of different exercises.

5. Cultural institutions especially traditional leaders or rulers should be educated on the benefits of women participating in sports and physical exercises, as it may help to correct certain societal misconceptions, wrong beliefs and negative attitude towards women's involvement in sports.

#### References

Bernstein, L., Henderson, B. E., Hanisch, R., Sullivan-Halley, J., & Ross, R. K. (1994), "Physical exercise and reduced risk of breast cancer in young women. *Journal of the National Cancer Institute*, **86**, 1403 - 1408.

Bouchard, C., Shephard, R. J., & Stephens, T. (1994), "*Physical activity, fitness, and health international proceedings and consensus statement*". Champaign, IL: Human Kinetics Publishers, Inc.

Boutilier, M., & SanGiovanni, L. (1983), "The sporting woman". Champaign, IL: Human Kinetics Press.

Bryant, J. E., & McElroy, M. (1997), "Sociological dynamics of sport and exercise". Eaglewood, CO: Morton publishing Co.

Clapp, J. F., Rokey, R., Treadway, J. L., Carpenter, M. W., Artal, R. M., & Warmes, C. (1992), "Exercise in pregnancy". *Medicine and Science in Sports and Exercise*, **24**, S294 - 300

Elendu, I. C., & Chigbata, I. J. (2007), "Determinants of participation in physical exercises among female undergraduates of University of Nigeria, Nsukka". *Journal of Kinetics and Health Education Perspectives*, **1**(2), 55 – 64.

Gill, K., Overdorf, V., & College, W. P. (1992), "Incentives for exercise in younger and older women". *Journal of Sport Behaviour*, **17**(2), 87 - 97.

Jones, P. B. (1987), "Facilitating women's fitness: A scientifically-based model program designed to overcome socioeconomic barriers to women's involvement in fitness". *Doctoral Dissertation*, Temple University, Philadelphia.

Lirgg, C. A. (1991), "Gender differences in self-confidence in physical activity: A meta-analysis of recent studies". *Journal of Sport and Exercise Psychology*, **18**, 294 - 310.

Lonsdale, S. (1990), "Women and disability: The experience of physical disability among women". New York: St. Martin's Press.

McAuley, E., & Jacobson, L. (1991), "Self-efficacy and exercise participation in sedentary adult female". *American Journal of Health Promotion*, **5**(3), 185 - 191.

Orunaboka, T. T. & Elendu, I. C. (2009), Introduction to human kinetics. In I. M. Aminigo (Ed.). "*Model Essays in Education*" (pp. 138 - 155). Port Harcourt: University of Port Harcourt Press.

Orunaboka, T. T., & Kemebradikumo, N. Y. (2007), "Gender issues in physical education and sports in Nigeria". *Journal of Kinetics and Health Education Perspectives*, **1**(2), 74 - 87.

Rauzon, T. A. (2002), "Barriers to participation in physical activity/exercise for women with physical disabilities". *Doctoral Dissertation*, The University of Utah.

Shimer, P. (1996), "Too busy to exercise". Pownal, VT: Storey Communications Inc.

Stephens, T., Jacobs, D., & White, C. A. (1985), "A descriptive epidemiology of leisure-time physical activity". *Public Health Reports*, **100**, 147 - 158.

Sterfield, B. (1997), "Physical activity and pregnancy outcome: review and recommendations". *Sports Medicine*, 23, 33 - 47.

Sturgeon, S. R., Brinton, L. A., & Berman, M. L. (1993), "Past and present physical activity and endometrial cancer risk". *British Journal of Cancer*, **68**, 584 - 589.

US Department of Health and Human Services, (2000), "*Healthy people 2010: Understanding and improving health*". Washington, D.C.: US Government Printing Office.

Yoshida, K., Allison, K., & Osborn, R. (1988), "Social factors influencing perceived barriers to physical exercise among women". *Canadian Journal of Public Health*, **79**, 104 - 109.

Zhang, J., Feldblum, P. J., & Fortney, J. A. (1992), "Moderate physical activity and bone density among perimenopausal women". *American Journal of public Health*, **82**, 736 - 738.