
The Influence of Perceived Psychological, Social, Environmental and Policy Factors on Leisure–Time Physical Activities: Special Reference to Western Province, Sri Lanka

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“Lack of activity destroys the good conditions of every human being, while movement and methodological physical exercise save it and preserve it” -Plato-

This study focused on to how the influence of perceived psychological, social, environmental and policy factors on leisure-time physical activities among Sri Lankans and find the underlined factor what enables and inhibits leisure-time physical activities in the certain domain. There is a substantial evidence demonstrating as a significant determinant of health-related quality of life is regular physical activities (PA) which providing both physical and psychological benefits. Escalating healthcare cost with rising rates of non-communicable diseases (NCD) one of the main challenges currently Sri Lanka is facing. One main factor is “insufficient physical activities” (Global Health Report). Hence there is a gap to fulfil in the knowledge of studies regarding physical activity involvement. The questionnaire was developed through using three existing instruments namely; International Physical Activity Questionnaire (IPAQ) short version, Behavioural Risk Factor Surveillance (NHIS) and Barriers for Physical Activity Questionnaire (BPAQ) included in previous studies and set a theoretical foundation of Ecological Model. The data collection was based on the online survey and through distributing questionnaire manually, filled by 206 participants, age between 18-64 (Male=100, Female= 106) country labour force age category who lives in Western Province, Sri Lanka in order to find answers to RQ1 and RQ 2. Panel discussion had been used to find answers for RQ 3. Factor Loading, Cross tabulation and appropriate analysis have performed to find out any significant relationship with taking medicine for NCD and exercise involvement (RQ 1). The study identified there is no statistically significant relationship with NCD towards LTPA though a strong association between participation in LTPA and taking medicine. Self-efficacy as a factor which was underlined with a high level of sample adequacy 0.77 and taking as a more important factor for a better change (RQ 2). Building self-efficacy through the education system, Integrate interdisciplinary subjects, Creating a brand message, Magnetism of the built environment were main recommendations by the panel (RQ 3).

Keywords: ecological model; leisure; non-communicable diseases; physical activities
