

THE EFFECTS OF ANXIETY LEVELS OF PHYSICAL EDUCATION AND SPORT TEACHERS ON THEIR HEALTHY LIFESTYLE BEHAVIORS ¹

BEDEN EĞİTİMİ VE SPOR ÖĞRETMENLERİNİN SAĞLIKLI YAŞAM BİÇİMLERİ VE KAYGI DÜZEYLERİNİN BELİRLENMESİ

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Öz: Bu çalışmanın amacı Beden Eğitimi ve Spor öğretmenlerinin sağlıklı yaşam biçimleri ve kaygı düzeylerinin belirlenmesidir. Bu araştırmanın evrenini Adana il merkezinde görev yapan Beden Eğitimi ve Spor öğretmenleri oluşturmuştur. Bu amaç için araştırmaya 208 Beden Eğitimi ve Spor öğretmeni gönüllü olarak katılmıştır. Araştırma sonuçlarının nitelikli olabilmesi için katılan denek sayılarının (Bay:104 – Bayan:104) eşit sayıda olmasına dikkat edilmiştir. Çalışmada katılımcıların Sağlıklı yaşam biçimini belirlemek amacıyla Walker ve arkadaşları (1996) tarafından geliştirilen Yaşam Profili ölçeği ve sürekli kaygı düzeylerini belirlemek amacıyla Spielberger ve Gorsuch (1964) tarafından geliştirilen Durumluk Sürekli Kaygı Envanteri kullanılmıştır. Veriler SPSS 16.0 paket programı kullanılarak analiz edilmiştir ve anlamlılık düzeyi $p>0.05$ olarak belirlenmiştir. Katılımcıların verdikleri cevaplar Yaşam Profili II Teşvik Sağlık ölçeğinin 5, 6, 14, 38, 48 ve 52 maddeleri arasında faktörler açısından incelenmiştir. Bu maddelerin sonuçlarına göre, kadınlar ve erkekler arasında $p>0.05$ düzeyinde anlamlı bir ilişki tespit edilmiştir ancak ölçeğin diğer maddeleri arasında anlamlı farklılık tespit edilememiştir. Katılımcıların sürekli kaygı ölçeğinin 3., 7., 9., 10., 13., 15., 16., 28., 31, 32., 33. ve 34. maddelerine verdikleri cevaplara göre kadınlar ve erkekler arasında $p>0.05$ düzeyinde anlamlı farklılıklar tespit edilmiştir ancak ölçeğin diğer maddeleri arasında anlamlı farklılıklara rastlanmamıştır. Ayrıca, yaş ve sağlıklı yaşam davranışları arasında anlamlı bir ilişki bulunmuştur ($p<0.01$). Beden eğitimi ve spor öğretmenlerinin sürekli kaygı sıklığı arasında, spor sıklığı ve sağlıklı yaşam biçimi davranışları ($p<0.01$) arasında anlamlı farklılıkların olduğu tespit edilmiştir. Sonuç olarak bu çalışmada elde edilenler dikkate alındığında; normal kaygı düzeyine sahip insanların, daha yüksek kaygı düzeyine sahip olan insanlara göre daha sağlıklı yaşam biçiminin olduğu tespit edilmiştir. Bu bağlamda, sağlıklı yaşam profili ve kaygı düzeyleri arasında pozitif bir ilişki olduğu belirtilmiştir, ve kaygı düzeyleri insanların sağlıklı yaşam profillerine etkisinin olduğunu söylenebilmektedir. Bu bağlamda beden eğitimi ve spor öğretmenlerinin kaygı düzeylerini düşürmek amacıyla çeşitli sosyolojik ve psikolojik destekler sağlanabilir ve imkanları daha artırabilir böylelikle kaygı düzeylerinin düşebileceği ifade edilebilir.

Anahtar Kelimeler: Sağlıklı Yaşam, Kaygı, Beden Eğitimi ve Spor Öğretmeni, Spo

Abstract: The purpose of this study is to investigate the effects of anxiety levels of physical education and sport teachers on their healthy lifestyle behaviors. For that purpose, a total of 208 (Bay:104 – Bayan: 104) physical education and sport teachers who have been working at the center of Adana province participated in this study voluntarily. Health Promoting Lifestyle Profile II developed by Walker et al., (1996), and State Trait Anxiety Inventory developed by Spielberger and Gorsuch (1964) were used in the study. The data were analyzed by using SPSS 16.0 Package Program, and the significance level was determined to be 0.05. According to results of this study, when the answers were examined for 5th, 6th, 14th, 38th, 48th and 52nd items of the Health Promoting Lifestyle Profile II, it has been found that while there is a significant relationship between men and women, there isn't a significant relationship between men and women in terms of other items. When the answers were examined for 3rd, 7th, 9th, 10th, 13th, 15th, 16th, 28th, 31st, 32nd, 33rd and 34th items of the State Trait Anxiety Inventory, it has been stated that while there is a significant relationship between men and women, there isn't a significant relationship between men and women in terms of other items. Also, it has been found that there is a significant relationship between age and healthy lifestyle behaviors ($p<0.01$), between frequency of sports and healthy lifestyle behaviors ($p<0.01$), between frequency of sports and state-trait anxiety ($p<0.01$), between healthy lifestyle behaviors and state-trait anxiety ($p<0.05$). In conclusion, taking into consideration the results of this study and current literature, it has been established that people with higher anxiety levels have lower profile of healthy lifestyle than the people with normal anxiety levels. In this context, it has been specified that there is a positive relationship between healthy lifestyle profile and anxiety levels, and anxiety levels can affect people's healthy lifestyle profiles. Improving the opportunities provided to physical education and sport teachers can decline their anxiety levels and it is also thought that they can make various sociological and psychological contributions to physical education and sport teachers.

Key Words: Learning style, Curriculum, Individual differences in education, Physical Education and Sports School

Doi: 10.17363/SSTB.20161919747

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SSTB

www.sstbdergisi.com

International Refereed Academic Journal of Sports, Health and Medical Sciences

April / May / June Spring Summer Issue: 19 Year: 2016

GEL CODE: I0-I14-I23-I24 ID:285 K:346

ISSN Print: 2146-8508 Online 2147-1711

(ISO 9001-2008 Document No: 12879 ISO 14001-2004 Document No: 12880)

(TRADEMARK)

(2015/04315- 2015-GE-18972)

INTRODUCTION

While some situations improve the quality of life, some situations negatively affect the quality of life. In order to improve the quality of life, it is important for the individual to have the economic and social security, to live in safety and to have necessary comfort. At the same time having a meaningful and active life, establishing positive relations with inner circle, participating in the fun activities, being given value to privacy, expressing oneself and functionally being adequate are required (Akdemir, 2005; Basaran, Guzel, & Sarpel, 2005; Akyuz, 2006).

Burger (2006) defines anxiety as an unlovely emotional situation that a healthy person needs to avoid, Bakircioglu (2006) defines it as trouble, suffocation and worry without unclear reason, being out of conscious and stemming from fears or unrelieved demands. Looking at the definitions, anxiety breaks down the inner balance of human and it makes the feeling like ambiguity, horror, sadness, panic, pressure, tension, boredom, suffocation (Esen, 2012). Diverse conditions and circumstances create psychological complications in the individual being in a situation to show reaction to the various stimulants coming from the surroundings in which humans live. This stimulant – reaction relation affect humans in various ways and this can be a reason for some behavior disturbances. This tension and manner of anxiety situation which occurs as a result of the interaction human with the surrounding is

defined as stress (Ozguven, 2000). Anxiety is classified by scientists in few ways. According to Spielberger (Oner and Compete, 1998), anxiety is accepted as one of the basic feelings of human. Everybody feels some anxiety in some situations in which s/he perceives danger. This kind of anxiety created by dangerous conditions is a temporary condition generally experienced by every individual. This is called state anxiety. State anxiety stems from perceiving and interpreting the conditions in a way to threat and create danger for the situation humans are in. This situation creates suffering, not a lovely situation of affection. This affection situation is perceived, understood and felt. In this process the conscious is open, aware and awake. Another kind of anxiety is trait anxiety. Trait anxiety is the manner of displeasure and unhappiness formed as a result of perceiving the situations that are harmless and neutral by individual as harmful. Being not satisfied with the situation, behaving like something bad will happen in any moment are the characteristics of the individuals whose anxiety levels are high. Anxieties not correlating the situation directly which the individual is in, the anxieties with reasons not understood clearly by others are trait anxieties. Trait anxiety is named as neurotic anxiety too. The intensity and duration of this kind of anxiety differs from according to structure of personality. Having the structure of personality inclined to anxiety affects the trait anxiety level. Trait anxiety level affects threatening the humans according to the features



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International Refereed Academic Journal of Sports, Health and Medical Sciences

April / May / June Spring Summer Issue: 19 Year: 2016

GEL CODE: I0-I14-I23-I24 ID:285 K:346

ISSN Print: 2146-8508 Online 2147-1711

(ISO 9001-2008 Document No: 12879 ISO 14001-2004 Document No: 12880)

(TRADEMARK)

(2015/04315- 2015-GE-18972)

of personality structure, increasing the dangerous situational anxiety level, perceiving, understanding, analyzing, and interpreting the environment (Koknel, 1998).

Health is defined by different individuals in different ways. The most used and the most accepted definition has been made by World Health Organization (WHO) in the year 1946. According to WHO health; “is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity”. The contemporary and modern aspect of this definition is that it doesn’t not squeeze the illness to the dimensions of symptoms and it discusses the human as a whole with psychologic and social aspects. So there is a convenient definition formed according to the developing medico-social model (Baltas, 2008). Lifestyle is the total of the personal decisions on which the individuals have control. The healthy lifestyle means that individuals control all the behaviors affecting their health and arrange the daily activities by choosing the appropriate behaviors suitable for their health statue. According to another statement, it is not merely being protected from illnesses, the struggle of the behaviors for improving well-being a lifetime. Healthy lifestyle behaviors are affected from many factors such as gender, age, environment, level of income, having social security, smoking or alcohol consumption, the presence of social activities (Yıldırım, 2005; Karadeniz et al., 2008). Behavior is an important

variable for health education. When the health behaviors are separated as those improving the health and giving harm to health, the behaviors giving harm to health include the behaviors like smoking, excessive consumption of alcohol, excessive consumption of fatty meal and bakery products and fast food eating. The behaviors improving the health contain such behaviors as sports, adequate and balanced nutrition that protect individual from illnesses (Molina et al., 2009).

Sports is a competition-oriented activity surrounded by harsh rules requiring the physiological, psychological, aesthetic, technic features when performed at high level which has become concrete in different branches by customizing physical education activities (Sisko, 2002). The diversity of expectations from sports life brings the requirement that sports lives must be leaded in an ordered composition. The purpose of physical education and sports activities being one of the most important education means applied by developed societies is to contribute to the physical, social, psychologic, cultural and mental development of humans and to raise healthy generations in the society (Ozer and Aktop, 2003).

METHOD

The subject of this study is to determine the healthy lifestyle and anxiety levels of the Physical Education and Sports Teachers working in Adana province. The Physical Education and



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International Refereed Academic Journal of Sports, Health and Medical Sciences

April / May / June Spring Summer Issue: 19 Year: 2016

GEL CODE: I0-I14-I23-I24 ID:285 K:346

ISSN Print: 2146-8508 Online 2147-1711

(ISO 9001-2008 Document No: 12879 ISO 14001-2004 Document No: 12880)

(TRADEMARK)

(2015/04315- 2015-GE-18972)

Sports Teachers working in central Adana province constitute the population of this study. For this purpose, a total of 208 Physical Education and Sports Teachers participated in the study voluntarily. For the results to be qualified, equal numbers (Male:104-Female:104) of the subjects have been ensured.

Data Collection Tools

State and Trait Anxiety Inventory (STAI)

Two kinds of anxiety having different features from each other are state and trait anxiety. This mentality is being put forward twice by the factor analysis studies of Cattell and Scheier, later it has become the basis of the two factorial anxiety theory developed by Spielberger et al. The purpose of this inventory started to be developed by Spielberger and Gorsuch to measure trait and anxiety levels of being normal and abnormal individuals 89. In the trait anxiety inventory the answer options gathered in the four categories are (1) Never, (2) Some, (3) Very (4) Completely; in the Trait Anxiety Inventory, the options are (1) Almost Never, (2) Sometimes, (3) Mostly, (4) Almost Always. There are two kinds of statements in the inventories. We can say that these are first-hand or straight (direct) and reverse statements. Direct statements utter negative feelings; the reverse statements express positive feelings. When these second type of statements are scored, those weighing 1 are changed into those weighing 4 and vice versa. 4. In the direct

statements, the answers weighing 4 shows that the anxiety is high. In the reverse statements, the answers weighing 1 indicates high anxiety and those weighing 4 shows low anxiety. The statement "I am anxious" can be shown as an example to the reverse statements and the one "I feel myself calm" for direct statement. In this case, if the option weighing 4 is marked for "I am anxious" and the one weighing 1 is marked for "I feel myself calm", these answers reflect high anxiety. There are ten reverse statements in the state anxiety inventory. These are 1st, 2nd, 5th, 8th, 10th, 11th, 15th, 16th, 19th and 20th items. In the trait anxiety inventory, the number of the reverse statements are seven and these are 21st, 26th, 27th, 30th, 33rd, 36th and 39th items (Oner, 1997).

The Scale of Healthy Lifestyle Behaviors

Health promoting lifestyle scale has been developed by Walker and colleagues to measure the health promoting behaviors of the individuals by basing on the Pender's model of promoting health. The first version of the scale is composed of 48 items and six factors. The measurements are studied on 952 industrial workers including white, western and middle class. Sub-factors and Cronbach Alpha coefficients are; self-realization (13 items-0.94), health responsibility (10 items-0.81), exercise (5 items -0.80), nutrition (6 items -0.75), inter-individuals support (7 items -0.80), stress management (7 items -0.70). The general coefficient of the scale is 0.92. The variance explained by the six factors is 47.1% (Walker and Hill,



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International Refereed Academic Journal of Sports, Health and Medical Sciences

April / May / June Spring Summer Issue: 19 Year: 2016

GEL CODE: 10-I14-I23-I24 ID:285 K:346

ISSN Print: 2146-8508 Online 2147-1711

(ISO 9001-2008 Document No: 12879 ISO 14001-2004 Document No: 12880)

(TRADEMARK)

(2015/04315- 2015-GE-18972)

1996). The scale was revised in the year 1996 and was renamed as HLBS-II. The scale is composed 52 items and six factors.

These are; spiritual development, inter-individual relations, nutrition, physical activity, health responsibility and stress management. Data have been obtained from 712 individuals aged between 18 and 92. Literature has been reviewed for the content validity and expert assessment was resorted. Factor analysis is made for the content validity. Cronbach Alpha value being the reliability coefficient of the inventory is 0.94 for the total inventory and varies between 0.79-0.87 for the six sub-factors. Sub-inventories are; health responsibility (3, 9, 15, 21, 27, 33, 39, 45, 51), physical activity (4, 10, 16, 22, 28, 34, 40, 46), nutrition (2, 8, 14, 20, 26, 32, 38, 44, 50), spiritual development (6, 12, 18, 24, 30, 36, 42, 48, 52), inter-individual relations (1, 7, 13, 19, 25, 31, 37, 43, 49) and stressmanagement(5, 11, 17, 23, 29, 35, 41, 47)

The value was determined as 0.89 with test retest with three weeks interval. All of the items of the inventory are positive, it has no reverse items. Marking is done on the Quattro-Likert type inventory. The inventory is scored as never (1), sometimes (2), often (3), regularly (4). The lowest score for the entire inventory is 52, the highest score is 208. It is stated that the revised scale can be used in determining the behaviors of improving health and evaluating the effectiveness of the programs planned accordingly (Walker et al., 1987).

Data Analysis

Data gathered from the research groups are coded and analyzed in SPSS 16.0 package program. T test is used in the independent groups to compare two groups, One Way ANOVA test for the comparison of the multi groups and Spearman correlation test is used to measure the relations among the variables. The significance level is accepted as $p < 0.05$.



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International Refereed Academic Journal of Sports, Health and Medical Sciences

April / May / June Spring Summer Issue: 19 Year: 2016

GEL CODE: I0-I14-I23-I24 ID:285 K:346

ISSN Print: 2146-8508 Online 2147-1711

(ISO 9001-2008 Document No: 12879 ISO 14001-2004 Document No: 12880)

(TRADEMARK)

(2015/04315- 2015-GE-18972)

FINDINGS

Table 1. Pearson Correlation Test Results

		Healthy Lifestyle Behaviors (Total Score)	State Anxiety (Total Score)	Trait Anxiety (Total Score)
Age	Pearson Correlation	,190(**)	-,095	-,112
	Sig. (2-tailed)	,006**	,176	,111
Gender	Pearson Correlation	,008	,087	,061
	Sig. (2-tailed)	,910	,055	,387
Tenure?	Pearson Correlation	,109	-,128	-,132
	Sig. (2-tailed)	,117	,066	,060
Do you smoke?	Pearson Correlation	,141	,083	,089
	Sig. (2-tailed)	,045	,234	,206
How often do you do sports?	Pearson Correlation	,344(**)	,144(*)	,158(*)
	Sig. (2-tailed)	,000***	,040*	,024*
Healthy Lifestyle Behaviors (Total Score)	Pearson Correlation	1	-,178	-,168
	Sig. (2-tailed)		,009	,017
State Anxiety (Total Score)	Pearson Correlation	-,178	1	,908(**)
	Sig. (2-tailed)	,009		,000***
Trait Anxiety (Total Score)	Pearson Correlation	-,168	,908(**)	1
	Sig. (2-tailed)	,017	,000***	

When table 1 is analyzed, the relations between the items are as follows; positive significant relations at a level of $p < 0.01$ between Healthy lifestyle behaviors and age, at a level of $p < 0.001$ between the question How often do you do sports? and healthy lifestyle behaviors, at a level of

$p < 0.05$ between the question How often do you do sports? And state anxiety total score, at a level of $p < 0.05$ between the question How often do you do sports? and trait anxiety total score, and at a level of $p < 0.01$ between the trait anxiety total score and state anxiety total score; negative



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International Refereed Academic Journal of Sports, Health and Medical Sciences

April / May / June Spring Summer Issue: 19 Year: 2016

GEL CODE: I0-I14-I23-I24 ID:285 K:346

ISSN Print: 2146-8508 Online 2147-1711

(ISO 9001-2008 Document No: 12879 ISO 14001-2004 Document No: 12880)

(TRADEMARK)

(2015/04315- 2015-GE-18972)

significant relations at a level of $p < 0.01$ between Healthy lifestyle behaviors total score and state anxiety total score, at a level of $p < 0.05$ between the healthy lifestyle behaviors total score and trait anxiety total scores.

There isn't any positive and negative relations found among other variables ($p > 0.05$).

DISCUSSION and CONCLUSION

As a result of our study, it is seen that there is a positive significant relation between age and healthy lifestyle behaviors (HLSB) in physical education teachers. Besides, there is not found any significant relations between age and state and trait anxiety.

In a study performed on taekwondo athletes, a statistically significant difference hasn't been found between biological age of athletes, training ages, gender, education level of their families, the level of attendance on competitions, upbringing environment and state anxiety and trait anxiety (Yucel, 2003). In another study done by Oshagbemi in the year 2000, a significant relation hasn't been found between the demographic variable stated as in the form of age and trait and state anxiety levels (Oshagbemi, 2000). Yiğiter et al. (2013) haven't found a significant relation between genders of the participants. When the age parameter is taken into consideration, there are findings available supporting our study.

Kaya and colleagues couldn't find a significant relation between the healthy lifestyle behaviors of lecturers and gender (Kaya, 2008). Similarly in the Ozgul's (2003) study titled Students of Physical Education and Sports Academy State and Trait Anxiety Levels, a difference couldn't been found between State Anxiety by gender. Researchers have suggested that this situation stems from being in emotional reactions such as difficulties of education experiences of female students, distrust to environment, because of being away from the families, dereliction, restlessness, over sentimentalism and showing over sensitivity under stress. Again, in the study of Develi (2006) being in parallel to our study, the trait anxiety levels of physical education teachers have been compared. A significant relation couldn't be found between gender and trait anxiety.

The role of achievement motivation on pre competitive anxiety was examined in 73 days comprising youth athletes and a parent of each athlete. Thus, parental definitions of competence held for the child were related to their young athlete's emotional state and vice versa. Physical activity is a good way of getting rid of depressive disorders (Carta et al., 2008). Santos et al., (2005) have examined the effects of aerobic exercises to the depression, anxiety and life quality of old people. It was stated that after the exercise program was applied, their life quality increased, depression and anxiety levels decreased considerably. Depending on these data, they have



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International Refereed Academic Journal of Sports, Health and Medical Sciences

April / May / June Spring Summer Issue: 19 Year: 2016

GEL CODE: I0-I14-I23-I24 ID:285 K:346

ISSN Print: 2146-8508 Online 2147-1711

(ISO 9001-2008 Document No: 12879 ISO 14001-2004 Document No: 12880)

(TRADEMARK)

(2015/04315- 2015-GE-18972)

suggested that aerobic exercise programs should be used in old individuals to improve the life quality. Yohannes et al., (2010) conducted a study on the benefits of long term cardiac rehabilitation on depression, anxiety, physical activity and life quality.

As a result; it is thought that improving the opportunities offered to Physical Education Teachers and their working conditions can decrease the trait anxiety levels and contribute to healthy lifestyle behaviors and more efficient and success life psychologically and sociologically. It has been determined that there is a positive relation between anxiety level and healthy lifestyle behaviors. So anxiety affects healthy lifestyle behaviors.

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International Refereed Academic Journal of Sports, Health and Medical Sciences

April / May / June Spring Summer Issue: 19 Year: 2016

GEL CODE: 10-114-123-124 ID:285 K:346

ISSN Print: 2146-8508 Online 2147-1711

(ISO 9001-2008 Document No: 12879 ISO 14001-2004 Document No: 12880)

(TRADEMARK)

(2015/04315- 2015-GE-18972)

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International Refereed Academic Journal of Sports, Health and Medical Sciences

April / May / June Spring Summer Issue: 19 Year: 2016

GEL CODE: I0-I14-I23-I24 ID:285 K:346

ISSN Print: 2146-8508 Online 2147-1711

(ISO 9001-2008 Document No: 12879 ISO 14001-2004 Document No: 12880)

(TRADEMARK)

(2015/04315- 2015-GE-18972)

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