The comprehensive sports club as a supportive environment for active aging

長寿社会における高齢者のアクティブエイジングとその支援：総合型地域スポーツクラブを対象として

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With the coming of super-aged society, maintaining health and activity in old age is an important issue. Engaging in sports and leisure activities is potentially a crucial factor in increasing the likelihood of active and successful aging, but studies have generally neglected how older people engage in sports activity and how they cope with their aging status through sports. The purpose of this study was to illustrate how older people age actively utilizing community sports clubs (CSC), and to determine how a sports organizational environment influences CSC in providing services for older members. Three studies were conducted to investigate these aims. Based on the different purposes of this study, (1) self-administered questionnaires: the overall sample size was 545 memberships (urban = 439, rural = 106; response rate: 70.32%), (2) semi-structured interviews: 31 participants of older people (urban = 19, rural = 12) and 13 CSC leaders and managers (urban = 8, rural = 5) were chosen as interviewees through purposive sampling, (3) participatory observation: three CSCs allowed for participatory observation, and (4) document research were conducted between July 2012 and February 2013.

The first aim of this study was to demonstrate the heterogeneity among older people and their adaptation toward aging. It was found that active aging includes psychological, social, positive, and morale dimensions. Significant differences in active aging status were revealed for age, gender, health rating, sports participation, and location. To examine the deeper meaning of active aging, it is suggested that urban and rural members differ in their aging adaptation. Older people in urban areas tended to be goal-oriented, have close friends, innovate new roles in the CSC, and encounter the problem of ageism. Conversely older people in rural areas tended to be family-oriented, have tight community bonds, participate in many activities, and feel lonely. The words related to active aging most often mentioned by participants included “activity,”
“family,” “friends,” “health,” and “freedom”. In general, members began to feel old at age 70. Older people with strong psychological well-being who exercised regularly, maintained a balanced diet, and engaged socially tended to age actively and successfully.

The second aim of this study was to analyze the relationship between sports service evaluation and active aging in order to determine predictors of continued utilization. Service quality of sports was composed of benefits, access, interaction, and management. Significant differences in service quality evaluation were found for age, gender, health rating, sports participation, location, and active aging group. The interaction dimension was demonstrated as the best predictor of service quality evaluation. Regarding urban-rural differences, urban members valued interactions with members and staff above all other factors, whereas rural members valued access. Moreover, the relationship between active aging and service quality revealed a positive relationship: low active aging status is related to low evaluation of service.

The third aim of this study was to investigate management behavior and inter-organizational relationships among CSCs. The results highlighted the impact of a top-down hierarchical organizational structure and the supportive power of the bottom level. Regarding inter-organizational relationships, CSCs depended on resource exchange with foundations and the government. CSCs had an interdependent relationship with government, but they cooperated or confronted with other CSCs and organizations based on the consistency of goals and operating means. Administratively, CSCs in rural areas are under the governance of the prefectural education commission, while CSCs in urban areas are affiliated with the Tokyo Bureau of Sports. This executive difference resulted in substantial budget differences and differences in policy making. Rural CSCs only share 3% of the financial support for urban CSCs.