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An Examination of Quality of Work Life of Fitness Professionals

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Abstract

The aim of this study was to examine the quality of work life of fitness professionals. This study was applied to fitness professionals in health and fitness facilities in Ankara. A total of 194 voluntary fitness professionals (95 male and 99 female) were participated in the study. Data were collected through "Quality of Work Life Scale for Healthcare Personnel". In the data analysis; descriptive statistics was used to investigate the frequency and percentage distribution of the participants' demographic information. After the analysis of normality and homogeneity, T-Test and one-way analysis of variance (ANOVA tests were used to determine the differences in the quality of work life level. Tukey HSD test was used to determine the differences between groups. In the findings, significant differences were found between variables of age, gender, marital status, perceived personal income rate, work status, years in the sector and scores of the quality of work life of fitness professionals. The fitness professionals who were male, married, older, have high perceived income rate, work fulltime and freelance in the sector had higher scores of the quality of work life. As a result, some socio-demographic and working characteristics increase the quality of work life. The results of the research show that fitness professionals need to see their work as a part of their career, increase their perceived income level, have regular family life, and find enough time outside of work life in order to increase their work life quality.

Keywords: Quality of work life, Fitness professional, Sport centers, Fitness facilities

1. Introduction

People's interest in exercise is increasing day by day with an increase societal emphasis on an individual's physical being, mental health, and individuals being more actively aware of the disastrous consequences regarding poor physical and mental robustness. Both acquired social achievements and advancements apropos citizens inhabiting and populating the Republic of Turkey, has made it feasible for the masses to access the appropriate fitness facilities and be

intertwined with fitness specialist (Eraslan, Alvurdu, & Bıyıklı, 2020), accommodating the new social movement trend emphasizing mind, body, and soul. Scrupulously articulated analytical reports promulgated that the health and fitness industry exceeded 87.8 billion dollars according to 2018 figures, and it's highly speculated and estimated that the revenue obtained by the industry in 2023 will reach a colossal 113.16 billion dollars (Parasannan, 2018). For this reason, the investment attractiveness of the sector causes the market volume to increase every year (Chekhovska, 2017). This situation of the health and fitness sector around the world is similar in Turkey. Moreover, Turkey stands out as the fastest growing market among 48 countries in Europe with its growth potential in this sector (Rutgers et al, 2018). Although each facility is designed individually with diversified characteristics, distinguishing them from their respective counterparts, they are conceived and originated to foster an attractive environment with an emphasis on safety and effectiveness that motivates and invigorates clients to adopt a health consciousness lifestyle dictated by exercise. Preparatory to becoming a member and enrolling as a registered client for a particular facility, consumers relentlessly and thoroughly evaluate four quality factors before deriving to a decision, encompassing the configuration of the establishment, programs provided, the quality and credentials of personnel employed (Çimen, 2002; Maclntosh & Law, 2015). The most important of these factors is fitness professionals, who directly affect the service quality (Eraslan & Çimen, 2016). Because human resources are the most important asset of an organization (Isfahani et al., 2012).

Several recent surveys, including the "Success Profiles" published annually by IHRSA, show that health and fitness facilities dedicate more than 40% of their gross income to wages, salaries, and employee benefits. The fact that businesses allocate 40% or more of their resources to a certain expenditure item is an indication that this area has a vital importance for the success of the organization (ACSM, 2012). Employees who work at critical points in terms of these values in health and fitness facilities are fitness professionals. Therefore, fitness professionals have a direct and indirect impact on the operating success of a facility (ACSM, 2012).

Fitness professionals' importance for the satisfaction and retention of clients has been reported in several studies to be essential for the growth of the sector (Papadimitriou & Karteroliotis, 2000; Murray & Howat, 2002; Makover, 2003; Theodorakis et al., 2004; Tsitskari et al., 2014; Campos et al., 2016). Therefore, the quality of work life of fitness professionals is very important in the health and fitness sector, which is a labor-intensive sector.

The quality of work life emphasizes the importance of people in the organization and emphasizes that the employee should not be sacrificed for the organization or to make a lot of profit (Taşdan & Erdem, 2010). The quality of work life refers to the physical and psychological perception that an organization's working environment and working conditions create on its employees (Lee et al., 2014). The quality of work life emphasizes the importance of people in the organization and emphasizes that the employee should not be sacrificed for the organization or to make a lot of profit (Taşdan & Erdem, 2010). Working life quality refers to the physical and psychological perception that an organization's working

environment and working conditions create on its employees (Lee et al., 2014). The quality of working life is a system that deals with all aspects of work. It includes the physical working conditions of the work environment such as wages, lighting, ventilation and heat, relations with managers and colleagues, participation in decisions, opportunities for promotion, social opportunities, vocational training, job security, etc. (Toplu, 1999). A high quality of work life in the workplace can contribute to a person's healthy emotional and mental state and thus result in a positive attitude towards the organization. On the other hand, the lack of quality of work life can cause worse performance of the employee and negatively affect the organization (Aziri, 2011). In short, employees spend most of the day at work, so the work environment is very important for employees (Bozyiğit & Durmuş, 2018).

Some issues inherent to fitness professional occupation seem to affect, in some studies, their quality work life as well as other factors, such as the intention to leave the organization (Can, 2020). Issues related to excessive hours of physical exercise have been identified as one of the problems associated to these professionals, resulting in injuries and/or musculoskeletal pain (Malliou et al., 2014; Bratland-Sanda et al., 2015). The hours of work and the range of the working time, sometimes extended from the opening hours (*e.g.*, 7 AM) to closing (*e.g.*, 10 PM), can also be a problem for fitness professionals (Franco, 2020). This subject has already been the target of several studies, some of which have compared also sociodemographic and other characteristics that can affect fitness professionals' quality work life.

However, when it comes to the quality of work life of fitness professionals in Turkey, not much information was found. Taking into consideration the importance of these professionals within the industry, there is a gap in the existing research. Higher levels of quality of work life can prevent dropout and result in better service, and better service, in consequence, provide superior client satisfaction and retention, increasing the number of people that practice exercise and contributing to lower levels of physical inactivity in Turkey (Eraslan & Çimen, 2022). Therefore, the aim of this study is to examine the quality of work life of fitness professionals.

2. Method

2.1 Research Model

The unrelated question model, which is one of the quantitative methods, was used in the research.

2.2 Data Collection Tool

In this study the "Quality of Work Life Scale for Healthcare Personnel" developed by Aydın et al. (2011) was used as a data collection tool. The collection tool consists of 6 dimensions and 27 items. The dimensions of scale titled as: "occupational accident, risk of occupational diseases and physical working conditions at the workplace (6 items)", "workplace discrimination (5 items)", "continuous improvement and development opportunities (5 items)", "social integration into the organization (5 items)", "work stress and time pressure (3 items)", "laws in the organization (3 items)". The questionnaire is on a five-point Likert scale

ranging from 1-strongly disagree to 5-strongly agree. Each of the dimensions was found to be internally consistent. Cronbach's alpha coefficients ranged from .60 to .88 for this study. Due to the Covid-19 pandemic, data was collected by google forms.

2.3 Participants

In this study simple random sampling method was used. The participants were selected randomly from health and fitness facilities with different features in Ankara. The research group consists of 194 fitness professionals (49.7% male, n = 95) and 50.3% female, n = 99) selected by random sampling.

2.4 Research Publication Ethics

This study was approved by the decision of Gazi University, Assessment and Evaluation Ethics Sub-Working Group, dated 07/12/2021 and numbered E.77082166.

2.5 Data Analysis

In data analysis, descriptive statistics was used to investigate the frequency and percentage distribution of the participants' demographic variables. Firstly, skewness and kurtosis analysis methods were used to test the normality. In the analysis of the data, in order to determine the differences between the variables, t-test and one-way analysis of variance (ANOVA) tests were performed for related samples. Cronbach's Alpha analysis was applied to determine the reliability of the measurement tools. Statistical Package for Social Sciences (SPSS) was used for all these statistical procedures.

3. Results

3.1 Demographics

Table 1. Demographics of the participants

Demographics	**Group**	**f**	**%**
Gender	Female	95	49
	Male	99	51
Age	19 or less	2	1
	20-24	38	19.6
	25-29	72	37.1
	30 or more	82	42.3
Marital status	Single	135	69.6
	Married	59	30.4
Level of education	Elementary-High School	17	8.8
	Bachelor	134	69.1
	Postgraduate	43	22.2
Perceived personal income rate	Low	143	73.7
	Intermediate	35	18.0
	High	16	8.2
Work status	Part time	30	15.5
	Full time	105	54.1
	Freelance	59	30.4
Years in the sector	< 1	36	18.6
	1-2	21	10.8
	3-4	17	8.8
	5 or more	120	61.9

Table 2. T-test analysis results according to "gender"

Dimensions	Gender	n	$\bar{x}$±SD	t	p*
Occupational accident, risk of occupational diseases and physical working conditions at the workplace	Female	95	2.09±0.94	-3.08	**.002**
	Male	99	2.57±1.18		
Workplace discrimination	Female	95	1.73±0.91	-4.16	**.000**
	Male	99	2.41±1.11		
Continuous improvement and development opportunities	Female	95	4.51±0.51	-.567	.571
	Male	99	4.55±0.51		
Social integration into the organization	Female	95	4.22±0.73	-1.92	.056
	Male	99	4.40±0.59		
Work stress and time pressure	Female	95	1.62±0.84	-6.89	**.000**
	Male	99	2.56±1.03		
Laws in the organization	Female	95	4.01±1.11	-.445	.657
	Male	99	4.07±0.97		

As a result of the t-test analysis applied on the average of the opinions of the participants a significant difference was found according to gender in the dimensions of "occupational accident, risk of occupational diseases and physical working conditions at the workplace" ($t = -3.08$; $p < 0.05$), "workplace discrimination" ($t = -4.16$; $p < 0.05$) and "work stress and time pressure" ($t = -6.98$; $p < 0.05$). Considering the mean rank, the scores of male participants are higher than that of females (Table 2).

Tablo 3. T-test analysis results according to "marital status"

Dimensions	Marital status	n	$\bar{x}$±SD	t	p*
Occupational accident, risk of occupational diseases and physical working conditions at the workplace	Single	135	2.19±0.98	-2.85	**.005**
	Married	59	2.67±1.26		
Workplace discrimination	Single	135	1.97±1.05	-2.16	**.032**
	Married	59	2.33±1.09		
Continuous improvement and development opportunities	Single	135	4.52±0.51	-.459	.647
	Married	59	4.56±0.50		
Social integration into the organization	Single	135	4.38±0.61	2.29	**.023**
	Married	59	4.14±0.77		
Work stress and time pressure	Single	135	1.99±1.05	-2.30	**.023**
	Married	59	2.36±1.02		
Laws in the organization	Single	135	4.12±0.96	1.64	.101
	Married	59	3.85±1.19		

As a result of the t-test analysis applied on the average of the opinions of the participants a significant difference was found according to marital status in the dimensions of "occupational accident, risk of occupational diseases and physical working conditions at the workplace" ($t = -2.85$; $p < 0.05$), "workplace discrimination" ($t = -2.16$; $p < 0.05$), "social integration into the organization" ($t = -2.29$; $p < 0.05$) and "work stress and time pressure" ($t = -2.30$; $p < 0.05$). Considering the mean rank, the scores of married participants are higher than women in significant dimensions, except for the "social integration into the organization" dimension (Table 3).

Table 4. ANOVA analysis results according to "age"

Dimensions	Age	n	$\bar{x}$±SD	F	p*
Occupational accident, risk of occupational diseases and physical working conditions at the workplace	19 or less	2	2.83±0.41	6.18	**.000**
	20-24	38	2.24±1.15		
	25-29	72	1.97±0.81		
	30 or more	82	2.69±1.19		
Workplace discrimination	19 or less	2	1.20±0.28	1.37	.251
	20-24	38	2.13±0.96		
	25-29	72	1.92±1.02		
	30 or more	82	2.21±1.16		
Continuous improvement and development opportunities	19 or less	2	4.30±0.14	11.39	**.000**
	20-24	38	4.16±0.53		
	25-29	72	4.71±0.39		
	30 or more	82	4.56±0.51		
Social integration into the organization	19 or less	2	4.30±0.14	0.29	.829
	20-24	38	4.23±0.68		
	25-29	72	4.36±0.50		
	30 or more	82	4.30±0.80		
Work stress and time pressure	19 or less	2	1.33±0.47	0.87	.457
	20-24	38	2.28±1.18		
	25-29	72	2.02±1.04		
	30 or more	82	2.10±1.00		
Laws in the organization	19 or less	2	3.50±0.70	2.04	.110
	20-24	38	3.92±1.06		
	25-29	72	4.27±0.73		
	30 or more	82	3.91±1.23		

As a result of the ANOVA analysis applied on the average of the opinions of the participants a significant difference was found according to age in the dimensions of "occupational accident, risk of occupational diseases and physical working conditions at the workplace" [$F(2, 191) = 6.18$, $p < .05$], and "continuous improvement and development opportunities" [$F(2, 191) = 11.39$, $p < .05$]. In the Tukey HSD test that conducted to determine which group causes this difference, the participants' scores of the group "30 or more" are higher than '25-29' in the "occupational accident, risk of occupational diseases and physical working

conditions at the workplace" dimension. The participants' scores of the group "30 or more" and "25-29" are higher than '20-24' in the "continuous improvement and development opportunities" dimension (Table 4).

Table 5. ANOVA analysis results according to "perceived personal income rate"

Dimensions	**Perceived personal income rate**	**n**	**$\bar{x}$±SD**	**F**	**p***
Occupational accident, risk of occupational diseases and physical working conditions at the workplace	Low	143	2.56±0.99	2.26	.082
	Intermediate	35	2.10±1.46		
	High	16	2.33±1.09		
Workplace discrimination	Low	143	2.25±0.98	1.94	.124
	Intermediate	35	1.74±0.87		
	High	16	2.25±1.06		
Continuous improvement and development opportunities	Low	143	4.28±0.58	12.77	**.000**
	Intermediate	35	4.85±0.26		
	High	16	4.66±0.21		
Social integration into the organization	Low	143	3.95±0.63	12.06	**.000**
	Intermediate	35	4.54±0.43		
	High	16	4.57±0.41		
Work stress and time pressure	Low	143	2.37±1.01	2.58	.055
	Intermediate	35	1.96±0.79		
	High	16	2.18±0.59		
Laws in the organization	Low	143	3.58±0.89	7.62	**.000**
	Intermediate	35	4.32±1.00		
	High	16	4.16±0.94		

As a result of the ANOVA analysis applied on the average of the opinions of the participants a significant difference was found according to perceived personal income rate in the dimensions of "continuous improvement and development opportunities" [$F(2, 191) = 12.77$, $p < .05$], "social integration into the organization" [$F(2, 191) = 12.06$, $p < .05$] and "laws in the organization" [$F(2, 191) = 7.62$, $p < .05$].

In the Tukey HSD test that conducted to determine which group causes this difference, the participants' scores of the group "Intermediate, High" are higher than "Low" in the dimension of "continuous improvement and development opportunities", "social integration

into the organization" and "laws in the organization" (Table 5).

Table 6. ANOVA analysis results according to "work status"

Dimensions	Work status	n	x̄±SD	F	p*
Occupational accident, risk of occupational diseases and physical working conditions at the workplace	Part time	30	2.84±0.98	13.24	**.000**
	Full time	105	2.50±1.16		
	Freelance	59	1.78±0.77		
Workplace discrimination	Part time	30	2.22±1.15	8.70	**.000**
	Full time	105	2.30±1.11		
	Freelance	59	1.61±0.80		
Continuous improvement and development opportunities	Part time	30	4.44±0.54	6.51	**.002**
	Full time	105	4.45±0.57		
	Freelance	59	4.73±0.26		
Social integration into the organization	Part time	30	4.19±0.72	.612	.543
	Full time	105	4.32±0.79		
	Freelance	59	4.35±0.34		
Work stress and time pressure	Part time	30	2.17±1.01	21.02	**.000**
	Full time	105	2.45±1.08		
	Freelance	59	1.44±0.64		
Laws in the organization	Part time	30	3.71±1.14	4.49	**.012**
	Full time	105	3.96±1.15		
	Freelance	59	4.35±0.63		

As a result of the ANOVA analysis applied on the average of the opinions of the participants a significant difference was found according to work status in the dimensions of "occupational accident, risk of occupational diseases and physical working conditions at the workplace" [$F(2, 191) = 13.24$, $p < .05$], "workplace discrimination" [$F(2, 191) = 8.70$, $p < .05$], "continuous improvement and development opportunities" [$F(2, 191) = 6.51$, $p < .05$], "work stress and time pressure" [$F(2, 191) = 21.02$, $p < .05$] and "laws in the organization" [$F(2, 191) = 4.49$, $p < .05$].

In the Tukey HSD test that conducted to determine which group causes this difference, the participants' scores of the group "Part time" are higher than "Freelance" in the dimensions of "occupational accident, risk of occupational diseases and physical working conditions at the workplace" and "laws in the organization". The participants' scores of the groups "Part time"

and “Full time” are higher than “Freelance” in the dimensions of “workplace discrimination”, “continuous improvement and development opportunities” and “work stress and time pressure” (Table 6).

Table 7. ANOVA analysis results according to “years in the sector”

Dimensions	Years in the sector	n	$\bar{x}$±SD	F	p*
Occupational accident, risk of occupational diseases and physical working conditions at the workplace	Less than 1	36	2.36±0.96	.519	.670
	1-2	21	2.16±0.77		
	3-4	17	2.10±1.17		
	5 or more	120	2.39±1.17		
Workplace discrimination	Less than 1	36	2.49±0.83	8.73	**.000**
	1-2	21	2.80±1.41		
	3-4	17	2.27±1.27		
	5 or more	120	1.80±0.94		
Continuous improvement and development opportunities	Less than 1	36	4.12±0.59	22.14	**.000**
	1-2	21	4.16±0.55		
	3-4	17	4.61±0.45		
	5 or more	120	4.71±0.36		
Social integration into the organization	Less than 1	36	3.76±0.59	12.00	**.000**
	1-2	21	4.35±0.55		
	3-4	17	4.56±0.45		
	5 or more	120	4.44±0.36		
Work stress and time pressure	Less than 1	36	2.24±0.89	7.85	**.000**
	1-2	21	2.95±1.41		
	3-4	17	1.47±0.87		
	5 or more	120	2.00±0.96		
Laws in the organization	Less than 1	36	3.43±0.87	6.25	**.000**
	1-2	21	4.23±1.19		
	3-4	17	3.82±0.75		
	5 or more	120	4.22±1.03		

As a result of the ANOVA analysis applied on the average of the opinions of the participants a significant difference was found according to years in the sector in the dimensions of "workplace discrimination" [F (2, 191) = 8.73, p < .05], "continuous improvement and development opportunities" [F (2, 191) = 22.14, p < .05], "social integration into the organization" [F (2, 191) = 12.00, p < .05], "work stress and time pressure" [F (2, 191) = 7.85, p < .05] and "laws in the organization" [F (2, 191) = 6.25, p < .05].

In the Tukey HSD test that conducted to determine which group causes this difference, the participants' scores of the groups "Less than 1" and "1-2" are higher than "5 or more" in the dimension of "workplace discrimination". In the dimension of "continuous improvement and development opportunities", the average score of the participants in the "Less than 1" group is lower than the "3-4" and "5 or more" groups. In addition, the average score of the participants in the "1-2" group is lower than the "5 or more" group. In the dimension of "social integration into the organization", the average score of the participants in the "Less than 1" group is lower than the "1-2", "3-4" and "5 or more" groups. In the dimension of "work stress and time pressure", the average score of the participants in the "Less than 1" group is higher than the "3-4" group. In addition, the average score of the participants in the "1-2" group is higher than the "3-4" and "5 or more" groups. In the dimension of "laws in the organization", the average score of the participants in the "Less than 1" group is lower than the "1-2" and "5 or more" groups (Table 7).

4. Discussion

4.1 The Quality of Work Life According to "Gender" Factor

According to the results obtained, there is statistically significant difference in the dimensions of "occupational accident, risk of occupational diseases and physical working conditions at the workplace", "workplace discrimination" and "work stress and time pressure". As for that this difference, the quality of work life of male fitness professionals is higher than that of females.

Most people take for granted safety issues associated with employees. when someone is working out at a fitness facility, they often are more concerned about their own personal safety or the safety of another patron. Rarely, does the safety of employees come into view or consideration (Fried, 2009). However, it is inevitable for fitness trainers to be injured because they are constantly active due to their profession. Waryasz et al. (2016) in a study on personal trainers, it is expressed that in exercise females had more accidental types of injuries, while males had more exertional related injuries. Alamgir et al. (2008) on occupational injuries of healthcare workers, it was stated that male participants had a higher risk of occupational injury than female participants. However, there are also studies stating that female employees have a higher risk of occupational injury (Alamgir et al., 2009). Additionally, fitness professionals generally are dissatisfied with the working conditions, and the total space of life (Ramos et al., 2019).

Discrimination is a social phenomenon that includes factors such as gender, ethnicity, religion, sexual orientation, and race (Malkiel & Malkiel, 1973). Discrimination in the workplace is

now one of the most discussed issues in the world. There are many findings and strong accusations against discrimination (Bilkis et al., 2010). In particular, gender bias has become a common occurrence in most of the developing countries (Batool, 2020). One of the discriminations is gender discrimination. In this study, male fitness professionals stated that they were exposed to discrimination more than women. However, studies reporting that women are discriminated against in the workplace are more common. For example, Barret et al. (2018), it is seen that female athletic trainers face sexual discrimination throughout their professional lives.

In a study on discrimination, women more often reported experiencing discrimination, and they typically identified this as general discrimination against women. Fewer men perceived any discrimination. Those men who did claimed to be the victims of affirmative action programs favoring women (Frieze et al., 1990). The reason for the discrimination experienced by men in this study may be positive discrimination for women.

4.2 The Quality of Work Life According to "Marital Status" Factor

According to the results obtained, there is statistically significant difference in the dimensions of "occupational accident, risk of occupational diseases and physical working conditions at the workplace", "workplace discrimination", "social integration into the organization" and "work stress and time pressure". As for that this difference, the quality of work life of married fitness professionals is higher than that of single.

When the literature is examined, it is seen that there is a connection between marital status and quality of working life in some studies (Argentero et al., 2007; Salami, 2008; Dolan et al., 2008). In a study by Panisoara and Serban (2013) on marital status and work-life balance, it is seen that the average scores of work-life balances of married employees are higher than those of single employees. Some studies also showed that worker who has been married more able to survive in a work environment than unmarried. Those who are married and have children have a higher level of quality of work life as compared to the singles (Gaither et al., 2007). This may be because a happy family life is associated with high levels of job satisfaction and objective career success (Rose et al., 2006).

4.3 The Quality of Work Life According to "Age" Factor

According to the results obtained, there is statistically significant difference in the dimensions of "occupational accident, risk of occupational diseases and physical working conditions at the workplace" and "continuous improvement and development opportunities". As for that this difference, the quality of work life of relatively older fitness professionals is higher than that of younger in general.

The quality of work life associated with personal factors such as age (Haque, 1992; Haque & Rahman, 1999). As individuals advance in age to the maturity stage of their career, they have been found to place a greater emphasis on a balance between their work and family lives that individuals place on their family role as they age (Amin, 2013). Some research indicates that a happy family life correlates with high levels of job satisfaction and objective career achievement (Rose et al., 2006).

4.4 The Quality of Work Life According to "Perceived Personal Income Rate" Factor

According to the results obtained, there is statistically significant difference in the dimensions of "continuous improvement and development opportunities", "social integration into the organization" and "laws in the organization". As for that this difference, it is seen that the quality of work life of fitness professionals with "Intermediate, High" perceived personal income rate is higher than those with "Low" income.

Income level allowed to work pressure, job dissatisfaction, strike, skipping, changing jobs and so on can affect and cause phase decreased quality of work life (Amin, 2013). In a study by Bolhari et al. (2011) on the quality of work life, it is seen that there is positive significant correlation between income and the quality of work life. When the literature is examined in terms of the dimensions of the study, it is seen that high income level provides more social integration (Schmid & Gazier, 2002) and continuous improvement (Wang et al., 2002). In addition, Increasing the quality of work life ensures better inter-organizational relations. This is very important for the social environment in the organization (Mullins, 1996). In several empirical studies, the implementation of the quality of work life led to increased compliance and employee satisfaction, increase confidence, improve relationships between workers and supervisors, improving safety and health (Amin, 2013).

4.5 The Quality of Work Life According to "Work Status" Factor

According to the results obtained, there is statistically significant difference in the dimensions of "occupational accident, risk of occupational diseases and physical working conditions at the workplace", "workplace discrimination", "continuous improvement and development opportunities", "work stress and time pressure" and "laws in the organization". As for that this difference, in general, fitness professionals who work relatively longer have a higher quality of work than those who work shorter hours or freelancers.

In the literature, full-time workers reported being more stressed than those in part-time work (Stranks, 2005). According to the Data from the US National Study of the Changing Workforce (a nationally representative sample of working adults), employees with time-flexible work policies reported less stress, higher levels of commitment to their employer, and reduced costs to the organization because of fewer absences, fewer days late, and fewer missed deadlines (Halpern, 2005). On the other hand, lower-level part-time employment might facilitate the better juggling of employees' lives due to its combination of shorter hours and lower workplace responsibilities (Warren, 2004). This causes employees to experience less work stress (Kirkcaldy, 1997). In addition, in the study conducted by Dembe et al. (2005) on the impact of overtime and long work hours on occupational injuries, it has been obtained because of increasing the risk of occupational injury as the working hours increase.

4.6 The Quality of Work Life According to "Years in the Sector" Factor

According to the results obtained, there is statistically significant difference in the dimensions of "workplace discrimination", "continuous improvement and development opportunities", "social integration into the organization", "work stress and time pressure" and "laws in the

organization". As for that this difference, fitness professionals who work longer year in the sector have a higher quality of work than those who work shorter year in the dimensions of "continuous improvement and development opportunities", "social integration into the organization" and "laws in the organization". However, fitness professionals who work longer year in the sector have a lower quality of work than those who work shorter year in the dimensions of "workplace discrimination" and "work stress and time pressure".

Working in a sector for a longer time will change career goals related to that sector (Eraslan, 2021). Therefore, the fact that fitness professionals work in the sector for a long time will also affect the understanding of "continuous improvement and development opportunities". In addition, the working year is one of the most important factors that determine the salaries of the employees (Abele et al., 2011). This is very important for motivating employees in terms of "social integration into the organization" and "laws in the organization". In general, it is seen that employees who work longer in a sector have higher positions (Yaktin et al., 2003; Abele et al., 2011). This may explain why fitness professionals with fewer years of work have higher scores of quality of work life on "workplace discrimination" and "work stress and time pressure".

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