Challenges and Opportunities Experienced among Middle-Aged Badminton Players during the Home Confinement

Emma B. Asistio¹, Aries N. Furog¹, Jet C. Longakit¹
¹Department of Physical Education, MSU-Iligan Institute of Technology, Philippines

Corresponding Author: Jet C. Longakit; Email: jet.longakit@g.msuiit.edu.ph

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ABSTRACT

This study explores the challenges and opportunities encountered among middle-aged badminton players during home confinement. The study employed a descriptive-exploratory qualitative approach. The researcher used semi-structured interviews and non-participatory observation to collect data from six middle-aged badminton players who met the researcher's criteria. The study's findings revealed that the participants were challenged during home confinement, influencing their athletic performance and health condition. They pointed out that during home confinement, middle-aged badminton players encountered challenges that included barriers to improving skills, playing the sport, and health risk factors such as poor lifestyle, seclusion, anxiety, and stress. Playing the sport was hindered by limited experience with peers and limited access to facilities and equipment. More time and practice impeded skill improvement. However, the challenges faced during home confinement motivated the players to seek self-improvement opportunities and enhance their physical and social well-being. The study's results emphasize the need to recognize the effects of pandemics on middle-aged badminton players' performance and well-being. This information is crucial for future research to develop appropriate solutions for individuals facing similar challenges during the pandemic or similar events.

INTRODUCTION

Physical activity and exercise are two examples of rapid lifestyle changes during the pandemic (Hammami et al., 2020; Kaur et al., 2020; López-Valenciano et al., 2021). People have been compelled to stay home due to the closure of fitness facilities and public parks, disrupting their daily routines and affecting their exercise activities (Evans et al., 2020; Kaur et al., 2020). Thus, practical coping skills, psychological resources, and regular physical activity, on the other hand, might be beneficial in dealing with such health-related issues during the Coronavirus Disease 2019 (Covid-19) pandemic (Brooks et al., 2020; Cao et al., 2020). Long-term COVID-19 social constraints significantly affect the body makeup of young badminton players (Pagaduan et al., 2022; Silva et al., 2022). The limited availability of specialist facilities, technical coaching, sports science assistance, and medical personnel have constrained athletes' daily activities, including training and rehabilitation (Ammar et al., 2020; Romdhani et al., 2022). Ambrozy et al. (2021) found that Covid-19-related sports club closures and physical activity restrictions decreased players' fitness and increased their body mass. The athletes' health and resistance to illness suffer, and they perform poorly in subsequent competitions.

A study by Silva et al. (2022) found that young badminton athletes who stopped training for eight months due to the Covid-19 pandemic but resumed four months earlier than those who took a year-long break had a decrease in fat mass and an increase in fat-free mass. This alteration affects the quality and quantity of training, isolating athletes from their daily training in traditional preparation locations and increasing concern about the future. Andreato et al. (2020) found that technological, psychological, and physical harm is inevitable.
Lockdown measures have also limited access to sports facilities and high-intensity training for low-income and male athletes. The correlation shows that this modification increases stress. Female athletes had more mood disturbances due to perceived stress and unstable psycho-bio social situations than male athletes. During a lockdown, females were more likely than males to feel apprehensive and vulnerable (Hermassi, 2021; di Fronso, 2022; Milan & Lemana II, 2023; Tee, 2020).

Athletes use social media to learn about virtual fitness tactics and online workout training (Ammar et al., 2020; Kaur et al., 2020). During COVID-19 confinement, people used information and communications technology (ICT) 15% more, likely for home-based fitness and physical exercise, on social media and mobile apps (Tate et al., 2015; Ammar et al., 2020). This predicts more social media and mobile app use for home workouts. Cinthuja et al. (2015) discovered that keeping a healthy body mass index (BMI) and practicing improves badminton skills. Thus, badminton players gain no advantage from playing other sports.

Although previous study has shed light on the negative impacts of the pandemic on various groups' levels of physical activity and mental health (Hasson et al., 2021; Hermassi et al., 2021), however, there is scant research in understanding the experiences of middle-aged badminton players when they are confined to their homes due to pandemic. Thus, this study examined the challenges and opportunities among middle-aged badminton players faced during home confinement.

METHODS

Design

The researcher sought solutions to the abovementioned difficulty and justified and met the study's aims. Researchers applied a descriptive exploratory approach as the research method of the study. This study also involves interviews and a non-participant observation method that allows the researchers to evaluate the players' performance. The researchers, in particular, used descriptive-exploratory research to comprehend better an existing problem that had yet to be well explored and characterized.

Participant

The participants of this study were six middle-aged badminton players based on the following criteria: (1) They must be constituents or residents of Iligan City (2) Middle-aged badminton players with more than five years of experience competing in any tournaments, with 21 the level of expertise. The data was gathered entirely in person through semi-structured interviews and non-participant observation. The researchers employed purposive sampling based on specific criteria to pick individuals.

Data Collection Procedures

Data provides information about a phenomenon. Any empirical research requires systematic data gathering and analysis. A research study must have sufficient data collection procedures so that specified study variables can be effectively assessed and reliable conclusions can be formed. This research is based on a purposive sampling technique. The researchers personally administered the interview and directly observed the players. The researchers individually interviewed and observed the players. This study's data was acquired by obtaining research venues and participant, executing a pilot study, and gathering information.

This study used semi-structured interviews and non-participant observation. Researchers interview participants to identify their challenges and rising opportunities under home confinement. The researcher delivers a consent form, introduces themselves, and discusses the study before the interview. They discussed and secured the study's confidentiality and ethics. After selecting their subjects, the researchers were fascinated by what they learned. The researcher observed each respondent's performance to see if home confinement had affected their physical performance as middle-aged badminton players. The results will be analyzed after the interviews have been successfully conducted and followed by an observational method. This data becomes the basis of thematic analysis and interpretation.

Data Analysis

Descriptive exploratory research methods like interviews and direct observation allow researchers to employ thematic analysis to evaluate experiences, ideas, and actions across a data set. They were transcribed, coded, and interpreted.
interview guide data. The thematic analysis classifies and interprets emergent themes based on frequency. They are grouping comparable words and phrases. To determine relationships, these categories are replaced and reevaluated. The analysis involves identifying relevant keywords and comments from transcribed interviews.

**RESULTS AND DISCUSSION**

The researcher selected the themes of this study through data analysis, which was taken from the participant's responses and transcripts that were structured with the research objectives. These themes were utilized to identify middle-aged players' primary challenges and opportunities.

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**Challenges Experienced during Home Confinement**

As Covid prevails, badminton players are confined at home for a while. The participants in the study have experienced and recognized these challenges that can affect their performance in playing badminton. The study participants identified two pressing challenges they encountered during home confinement: 1) health risk factors, 2) barriers to improving skills, and the first challenge the participants discussed when they experienced home confinement, the “health risk factors”, which they identified poor lifestyles and seclusion, anxiety, and stress-inhibiting factors that affect their health domains. The second challenge the participants identified as the foremost challenge is the “barriers to improving skills”, wherein insufficient time and practice were believed to be the primary concerns affecting their skill improvement.

1. **Health-Risk Factors**

Health Risk Factors, on the other hand, involve health changes. The first sub-theme is essential for players since health can affect performance. Practice, workouts, and games put athletes' bodies under tremendous stress. Consider the body a machine for health. Peak performance requires
meeting physical, mental, and emotional needs. Anxious players cannot perform well. Players must know their bodies’ demands and focus on nutrition, mindfulness, and other wellness techniques (Jowarder, 2023; Pillay et al., 2020). To perform well, people must take care of themselves. Home confinement denies participants freedom and self-direction. For instance, the need for autonomy does not mean a desire to act independently of others; instead, it is a need to act with a sense of choice and decision, even if that means conforming with others or events (Ryan & Deci, 2020).

Participants of the study have observed that home confinement is also targeting their health and lifestyle, which affect them as a player in terms of their skills performance. Not being physically active might lead to any life risk conditions. There has been a tremendous increase in the adaptation to a poor lifestyle (Hallgren et al., 2020). Many individuals think this is harmful to their health and should be an intervention step. Studying this condition aims to determine what causes people to live an unhealthy lifestyle. Hence, being confined at home can lead to sedentary feelings that a participant experienced and revealed that this is a significant challenge during the pandemic (da Silva Santos et al., 2021).

2. Barriers to Improving Skills

Understanding and overcoming skill improvement hurdles may assist players in enhancing physical activity. Learning and performing are different. Regardless of talents, tactics, or match chances, badminton players require physical training to increase their general fitness (Xu, 2015). The study's participants see skill improvement barriers as one of the biggest challenges. During the pandemic, learning and improving badminton abilities have made people avoid going to court or doing more complicated activities.

In badminton, as in any sport, repetition is vital to becoming a better player, but home confinement hinders participants' skills, making them struggle and deteriorate. Time and practice are needed to meet the BPNT of competence, which requires mastery over one's environment and new skills. SDT researchers initially studied competence to explain how extrinsic verbal praise could boost intrinsic motivation (Deci & Ryan, 2000; 2013). Players fear this type of task because it drains their skills.

The top two issues identified by participants were health risk factors and barriers to improving skills. Due to being duped, participants are adopting destructive lifestyles and trying to preserve good ones, which makes them doubt what will happen next. Participants prefer resting and eating—no sports involvement. da Silva Santos et al. (2021) predicted that athletes during the COVID-19 pandemic would have poorer sleep measures, more excellent sedentary time, and lower PA.

Silva et al. (2022) found that young badminton athletes who returned to daily training four months earlier than those who stopped for a year due to Covid-19 social restriction had lower fat mass and higher fat-free mass but no significant differences in cardiorespiratory fitness, nutritional behavior, or mood state response proficiency. They emphasized that social constraints on athletes cause physiological and psychological concerns. The Covid-19 pandemic increased anxiety, OCD, and sadness in athletes. Lockouts worry, stress, depression, and dissatisfy badminton players. They were lonely, especially badminton players. Pandemic-canceled tournaments were noted. They feel lonely because the global health crisis forces house confinement, and badminton is just a sport.

Pagaduan et al. (2022) observed that household lockdowns decreased exercise and sports. These restrictions canceled or postponed the Philippine National Games, Southeast Asian Games, and ASEAN Para Games. The pandemic has taxed athletes and the public emotionally, socially, and physically. Athletes' training and recovery were hampered by a lack of specialized facilities, technical coaching, sports science assistance, and medical experts (Ammar et al., 2020). Sports are vital to pandemic containment, as shown by the cancellation of badminton, basketball, football, and the Olympic Games. Thus, participants were affected. Training and drills help participants use their skills. Home-deceived people need more training space and execute poorly. The limitation also makes them do poorly compared to their peers in typical curriculum or advanced training. Participants struggled but used it, which may have helped skill development. Participants did not feel accessible, effective, and connected.
Home Confinement Opportunities

While middle-aged badminton players are confined at home for a while, the participants in the study have experienced and recognized these opportunities to improve their holistic badminton ability, which will develop their performance in playing badminton. Considering the various challenges middle-aged badminton players face, they still see its positive aspect in connection with home confinement. The study participants identified two opportunities during home confinement: 1) Self-Improvement; and 2) Physical and Social Wellness.

1. Self-Improvement

Efforts to improve knowledge, prestige, or character. The drive to improve in all facets of life. Homebound people may become sedentary. This limited engagement may adversely affect athletic skills. There are benefits to home confinement, such as strengthening badminton skills. Due to confinement restrictions, it is hard to improve talent. The study participants reported that online lessons and webinars helped them understand the sport and themselves. They learned a lot about post-incarceration skills and tactics online. However, players have the self-determination to seize possibilities. Because of how they handled problems, participants in this study recognized an opportunity to improve their abilities.

The players' learning materials allow them to continue learning new knowledge, abilities, and practices when confined at home. Modern technologies entangle formal and informal learning, and learners are expected to use ICT for learning actively. Online learning resources (learning material and learning technology) allow informed use and construction of a learning environment that meets their needs (Mosquera-González et al., 2022; Lebeniecinik et al., 2015; Tate et al., 2015).

Consistent practice involves repeating a task under the same conditions. Competence includes both talent and the mindset of an athlete. It requires self-confidence and studying to improve. In sports and life, competency is essential. Competence promotes confidence in athletic performance. Self-confidence encourages skill development. Most participants have satisfied the urge to feel competent in interactions with the environment, demonstrating their self-determination to overcome the world health problem under home confinement (Legault, 2017; Van den Broeck et al., 2016).

2. Physical and Social Wellness

Physical well-being involves a person's nutrition, exercise, and health habits. Much evidence on the relationship between physical activity and health shows that physical fitness lowers sickness development and delays or prevents disease progression (Odrovakavula & Mohammadnezhad, 2021; Warburton & Bredin, 2017). Social well-being comes from non-family relationships. Peer support improves happiness, performance, and well-being (Papaioannou et al., 2020; Jolly et al., 2019; Puschner et al., 2019). This study found that “fitness management” and “developed relationships” are the most potential for badminton improvement during and after home confinement.

The label fitness management ensures that athletes or players may participate in sports. On the other hand, fitness management experts are as passionate about sports as they like about controlling the mechanics of playing sports and exercising. Personal trainers, group fitness instructors, gym managers, fitness facility proprietors, and life coaches are all examples of fitness managers. Middle-aged badminton players have shown that they have this self-determination to maintain fitness in sports that can optimize their health in playing effectively on the court (Van den Broeck et al., 2016). Participants see these opportunities as very important for physical health. They are crucial if corrupted by mental health, but then participants claim that this aspect also enhances their performance as badminton players, for it affects them positively.

Healthy connections make people happier and more fulfilled. Healthy relationships reduce physical and mental health issues. Solid relationships, even with significant others, boost self-esteem and reduce loneliness (Hasson et al., 2021). This helps the player and others. According to the study's theory, participants feel meaningfully connected. Nurturing, mutual, and self-accepting relationships satisfy the need for relatedness. Participants say that studying badminton and thinking about the limits during home confinement strengthens family bonds.

Participants reported opportunities for self-improvement, physical and social wellness during and after home confinement, and reasonable changes in their badminton play, given their age.
Kaur et al. (2020) employed social media to learn about virtual fitness and online exercise instruction. Social media and fitness applications were used 15% more during COVID-19 confinement (Tate et al., 2015; Ammar, 2020; Lebenčík et al., 2015). They eventually transitioned from gym activities to other exercises, which enhanced their mental and physical health. Participants learned badminton online. Many badminton players use technology to learn new skills, concepts, and strategies after being scammed at home. However, participants are independent in solving problems to improve their skills and feel adequate. Participants are learning online. They watch video badminton tutorials and Asian players to learn new methods. Participants study the basic movements online to help them overcome problems and improve their badminton skills.

Participants enjoy badminton after home confinement. Middle-aged badminton players train constantly after home confinement. Competence shows self-confidence. Athletics improves confidence. Confidence improves skills. Home confinement improves footwork. Stamina and competition enhance others daily. Footwork and home training precede essential badminton rallies and hand execution. The researchers saw middle-aged badminton players develop with their new knowledge, abilities, and strategies. Home confinement exercise increased endurance and airway management, enabling athletes to recover faster after games. Participants reported weight maintenance and stress reduction. Stress-management self-determination creates opportunities. The study participants received several valuable opportunities. Physical, social, and self-improvement are available.

CONCLUSION

The study's results showed that the people who took part were challenged at home, which affected their athletic success and mental health. It was found that their biggest problems were not being able to play the sport, not being able to get better at it, and having health risks like a lousy lifestyle and feeling alone, anxious, or stressed. The research showed that these barriers and factors harm the problems that middle-aged badminton players face. This could lead to poor performance and health problems.

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Their capacity for self-determination increased as a result of the pandemic. Because the players were determined to continue pursuing these opportunities despite the challenges brought on by the pandemic, they could take control of their athletic careers and maintain a positive attitude. As a result, their capacity for resiliency, determination, and flexibility increased, which enabled them to overcome obstacles and maintain their concentration on their goals. Opportunities presented by pandemics have a significant impact on both the well-being and athletic performance of middle-aged badminton players.

Understanding the challenges and opportunities of home confinement for middle-aged badminton players is important for their physical and mental health during a crisis. The article aims to improve sports psychology, public health, and crisis management by filling the research deficit in this population. The findings can help design tailored interventions and support mechanisms to keep middle-aged badminton players and other athletes engaged through challenging times.

Theoretical Implications. In this study, the researchers drew an implication on how the study's findings relate to the existing SDT literature. The SDT has been widely employed in a variety of research fields. SDT refers to human personality and motivation as it relates to how an individual interacts with and is influenced by his or her social environment. SDT defines intrinsic and extrinsic motivation and explains how these motives impact situational reactions in several areas, as well as social and cognitive development and personality. Most SDT-guided research has also examined environmental factors hindering or undermining self-motivation, social functioning, and personal well-being. Although numerous particular negative impacts have been investigated, research shows that
these disadvantages can be most succinctly defined in terms of opposing the three basic psychological demands. As a result, SDT studies not just the precise nature of positive developmental tendencies but also the social environments that are hostile to these tendencies.

Based on the results from the participant's responses in the study, they revealed that they had encountered opportunities despite the challenges they faced during home confinement. Health risk factors significantly impact the need to feel free and self-directed. This does not fulfill one of the Basic Psychological Needs Theory (BPNT) components, which involves an individual's desire to have ownership over their actions and feel psychologically independent (Deci & Ryan, 2000). Despite the situation, middle-aged badminton players manage to look for the bright side of these challenges and identify opportunities. They believe that they can exercise their free will because autonomy does not necessarily mean doing things alone. People frequently opt to engage in activities with others, and what matters most is the sense of making a choice and feeling like it is their own decision. With these, it results see an avenue of self-improvement through online tutorials and webinars about the sport.

The study participants raised that the current phenomena also triggered their mastery and effectiveness in badminton because people like to feel good at what they do. This particular BPNT is the growing sense of mastery at a task that engages motivation from within, driving the rigorous reflective practice necessary to build competence. Middle-aged badminton players have shown that despite the barriers to improving their skills in badminton because of the insufficient time and practice that cause skill deterioration, they still manage to see opportunities from it. Through constant practice, they can address their challenges, considering their level of self-determination and the influence of intrinsic and extrinsic motivations.

Along with home confinement, participants struggle to connect with their peers, which will trigger their sense of relatedness in BPNT. This sense of belonging might be felt on an interpersonal level. It can also be cultivated by connecting to a group or its ideas or aims. Participants then handled it with the influence of their level of self-determination. They have developed strong relationships with their family and experienced enhancing their social wellness in the sense of extending social circles among peers and neighbors.

Fulfilling these basic human needs fosters what is known as autonomous motivation. This is not an all-or-nothing occurrence; rather, there are degrees of relative autonomy since extrinsic motivation may be internalized to varying degrees. Encouraging autonomous motivation improves functioning and well-being, as evidenced by research findings of middle-aged badminton players. People who are more autonomous in their behaviors are more likely to persist and feel better overall. In sum, the findings of this study demonstrated that a person's level of self-determination is determined by autonomy, competence, and relationships with others. The basic psychological needs of humans, if met, have a favorable impact on overall badminton performance. As a result, these needs should be prioritized for a badminton player to be more effective.

Limitations and future research. It is important to note that the findings of this study are limited to a specific group of middle-aged badminton players in Iligan City and may only be representative of some of the demographic. The research may have been biased by its location or badminton community. Future studies should use more extensive and more diverse samples.

The study's focus on home confinement's immediate challenges and opportunities may not capture middle-aged badminton players' long-term effects. Follow-up studies should explore how these people adjust to lifestyle changes and return to normal after the pandemic. Future research suggests longitudinal examinations of middle-aged badminton players' pre-pandemic, confinement and post-pandemic experiences help determine their long-term physical and emotional health. Also, future research on Middle-aged badminton players should be compared to other age groups or sports enthusiasts during home confinement to understand age-specific obstacles and coping techniques better. Understanding age-related reactions could inspire demographic-specific assistance initiatives. The scientific community can better support middle-aged badminton players during home confinement by addressing these limitations and focusing on these future research directions.
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