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Social Distancing and Quality of Life Among Candidates for the Sports Science Degree During the Covid-19 Pandemic

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ABSTRACT

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This study aimed to examine the relationship between the level of compliance with COVID-19 social distancing measures and the COVID-19 impact on the quality of life of the candidate students in the Faculty of Sports Sciences, based on their gender, whether they are athletes or non-athletes, and whether they are individual athletes or team athletes. The study included 1083 candidate students, including 364 females and 719 males. The Social Distancing Scale and the COVID-19 Impact on Quality of Life Scale were used to collect data. The results showed that the degree of compliance with COVID-19 social distancing measures between athletes and non-athletes was also discovered to differ in favor of non-athletes; and the COVID-19 impact on the quality of life of athletes and non-athletes was similar, being below the average. The level of compliance with COVID-19 social distancing measures in individual or team athletes was higher, and the negative impact of COVID-19 on the quality of life of both groups was below the average. There was no relationship between the level of compliance with COVID-19 social distancing measures and the COVID-19 impact on the quality of life of athletes, and there was a weak negative relationship between the level of compliance with COVID-19 social distancing measures and the quality of life of non-athletes. Because these findings show that people who engage in movement and sports are less affected by COVID-19-related negatives, it is essential not to restrict people's movement and sports activities while taking precautions for COVID-19 and similar emergencies.

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INTRODUCTION

The COVID-19 pandemic has caused changes in almost every field, from social life to the economy, from health to education, in more than 200 countries since its emergence in December 2019 (Ciotti et al., 2020; Daniel, 2020; Hamid et al., 2020; Phelps & Sperry, 2020; Yalnız et al., 2020). Governments have taken various measures to prevent or slow down the spread of COVID-19 in meetings, travel, sports competitions, recreational activities, workplaces, and schools (Ward, 2020). One of these measures taken is the "social distance," which everyone is expected to follow during the COVID-19 pandemic. The concept of "social distance," which began to be used more as a method of protection from pandemic with the spread of COVID-19, has been defined as the physical distance of approximately two meters between two or more individuals in order to prevent the airborne droplets from passing to another person (Centers for Disease Control and Prevention, 2022; Özşenler, 2021; Sun & Zhai, 2020).

With the COVID-19 pandemic, it has become obligatory to comply with these social distance measures in areas where people do activities based on movements, such as sports, physical activity, and exercise (Carmody et al., 2020; Varea et al., 2022). Although various studies have shown that physical activity is attempted to be maintained in places such as homes, workplaces, and isolated sports fields during the COVID-19 pandemic (Mutz et al., 2021; Ravalli & Musumeci, 2020), it is emphasized that COVID-19 restrictions negatively affected the duration or quality of physical activity causing people to be more inactive than before the pandemic (Wilke et al., 2021; Yeo, 2020).

Studies have shown that this state of inactivity, which emerged with the COVID-19 pandemic, adversely affects the quality of life of individuals physically, mentally, socially, and emotionally (Evans et al., 2020; Mutz & Gerke, 2021; Ratten, 2020; Schinke et al., 2020). Although limited, studies examining how the COVID-19 social distancing measures applied almost all over the world during the COVID-19 pandemic and the effect of COVID-19 on people's quality of life differ in different genders, athletes and non-athletes, team athletes, and individual athletes stand out in the literature. In one of these studies, Graupensperger et al. (2020) conducted a study with the participation of 234 university-level student-athletes and found that the COVID-19 social distancing measures increased the depression tendencies of student-athletes; however, female student-athletes were more concerned about social distancing measures than male student-athletes. In the study conducted with the participation of over 13.000 student-athletes in the USA, it was reported that female athletes were affected

more negatively than male athletes by the measures taken due to the COVID-19 pandemic; female athletes showed more severe anxiety and depression symptoms than male athletes; and team athletes showed more severe anxiety and depression symptoms than individual athletes (McGuine et al., 2021a). Apart from all these groups interested in sports and physical activity, there are candidate students who want to register and study in higher education institutions in the field of Sports Sciences (Physical Education Teacher Education, Sport Management, Coaching Education, and Recreation), which accept students who are successful in the special talent exam, and who train for this purpose were also adversely affected by the COVID-19 pandemic. Although the candidates applying for the special talent exam in the field of sports sciences have not yet been qualified to receive education in one of the relevant field departments, it can be said that they are motivated to study in the relevant departments and they apply with this motivation (Toprak & Saraç, 2014). These candidates, who apply for the special talent exam, are appointed to professions such as physical education teachers, trainers, sports managers, and sports specialists after graduating from sports science departments. It is also emphasized that sports scientists take responsibility for the protection and improvement of the public health of individuals, the dissemination of physical education and sports to large masses, training of talented students in the country's sports, and they are managers in sports institutions in the country (Karademir et al., 2010). In the preparation process for the special talent exam that will shape their future (a process that takes months and sometimes years), it is a matter of curiosity how much this group complies with the COVID-19 social distancing measures and the COVID-19 impact on their quality of life.

As a result of the related literature review, it has been determined that the studies focusing on the relationship between the level of compliance with COVID-19 social distancing measures and the COVID-19 impact on the quality of life of the candidate sports scientists were limited. Considering the restrictions due to the COVID-19 epidemic and the possibility of transmission, participating in various movement activities by observing social distance in sports facilities, although various difficulties arise for individuals, those who will take a physical performance-based exam such as a special talent exam, have overcome these difficulties and continued their training. It highlights the significance of the study, which will inform decision-makers who take the necessary precautions in the field of sports and will reveal the extent to which those taking part in these required movement activities during the COVID-19 process comply with the social distance and the degree to which this situation affects their quality of life. Therefore, it was thought that it would be important to examine the relationship between the level of compliance with COVID-19 social distancing measures and

the COVID-19 impact on the quality of life in the field of sports sciences. The purpose of this study, which was conducted within the context of the related literature, was to examine the relationship between the level of compliance with COVID-19 social distancing measures and the quality of life of candidate students in the Faculty of Sports Sciences, according to their gender, athletic license status, and team or individual, whether they are licensed athletes or non-athletes, and whether they are individual athletes or team athletes.

METHODS

Research Design

This study used a cross-sectional descriptive research design and self-reported data collection tools in examining the relationship between the level of compliance with COVID-19 social distancing measures and their COVID-19 impact on the quality of life of candidate students in the Faculty of Sports Sciences.

Study Group

The participants of this study were candidate students who registered for the Special Talent Examination of Physical Education and Sports Teaching, Coaching Education, Sports Management, and Recreation departments at the Faculty of Sports Sciences for the 2021-2022 academic years. Of the 1083 participants, 33.6% were females and 66.4% were males; 36.2% were licensed athletes and 63.8% were non-athletes; 29.87% were individual athletes, and 70.13% were team athletes. All participants admitted to the study were 18 years of age or older. The mean ages of participants were 19.16 (SD = 1.31), and 18.96 (SD = 1.16) years for females, and 19.27 (SD = 1.38) years for males, respectively.

Data Collection Tools

Demographic Information Form

In the study, the researcher-designed Demographic Information Form, which included questions about gender (female and male), age, whether they were licensed athletes or non-athletes (have an athlete license and have no athlete license), and the sports branches of licensed athletes (athlete of an individual sport or team sports), was used.

The Social Distancing Scale

In order to examine whether the participants in the research comply with COVID-19 social distancing measures, the Social Distance Scale (SDS), which was developed by Van Rooij et al. (2020) and translated into Turkish by Oral and Günlü (2021), was used. The SDS consisted of four items, with each item rated on a 5-point self-administered Likert scale: never (1), rarely

(2), sometimes (3), often (4), and always (5). On the scale, the participants were asked to indicate their level of agreement or disagreement with each item. The total SDS score is calculated by summing the scores of the four items. The lowest score that can be obtained from the scale is 4 and the highest score is 20. The high score that an individual will get on the scale is considered an indication that the participant complies with COVID-19 social distancing measures. Oral and Günlü (2021) calculated Cronbach's Alpha reliability coefficient of the scale to be .70. The reliability coefficient obtained in this study is .66.

The COV19-Impact on Quality of Life

The Turkish version of the COV19–Impact on Quality of Life (COV-19-QoLTR) was used to measure participants' perception of the impact of the COVID-19 pandemic on their quality of life. The COV-19-QoLTR was developed originally by Repisti et al. (2020) and translated into Turkish by Sümen and Adıbelli (2021). The scale consists of six items, which cover basic areas of quality of life related to the mental health of individuals. Each item on the scale was measured using a 5-point Likert-type scale that ranged from 1 to 5 (1= strongly disagree, 2= disagree, 3= neither agree nor disagree, 4= agree, 5= strongly agree). An overall COV-19-QoLTR is calculated by adding up the scores of the individual items, all the items scored, and dividing the score by six. The scale has a minimum score of one and a maximum score of five. High scores on the scale indicate that COVID-19 affects the quality of life of individuals more negatively. Results of the reliability test carried out on different samples showed Cronbach's coefficient alpha for COV-19-QoLTR was .91, .91, and .86 (Sümen & Adıbelli, 2021). The reliability coefficient was also calculated for this study, and Cronbach's alpha was found to be .89.

Data Collection Procedures

Before the study, Ethical approval was obtained from the Social Sciences and Humanities Research Ethics Committee, and additional permission was obtained from the board of the Faculty of Sports Sciences All the eligible participants were fully informed about the study and asked to participate in it voluntarily. Participants were approached in the area where they came to register for the Special Talent Examination of the Faculty of Sports Sciences, and the data was collected before their registration. Researchers were present in the data collection area during the data collection phase in order to answer any possible questions that participants might have about the study or data collection instruments. The data collection tools were self-administered and took about seven minutes to complete.

Data Analysis

The statistical computer package IBM SPSS, Version 20 was used to perform a quantitative analysis of the collected data. As the data collected did not follow a normal distribution, a nonparametric Mann-Whitney U test was used to compare the SDS and COV-19-QoLTR scores from two groups (gender: female and male; possession of a license: licensed athlete and non-athlete; and the sports branches of licensed athletes: individual athlete and team athlete). In addition, the Spearman rank correlation coefficient was used to identify the association between SDS and COV19-QoLTR scores. The significance level was set at 0.05.

RESULTS

The results of the Mann-Whitney U test applied to determine whether there was a statistically significant difference between the SDS scores of female and male candidate students on the Faculty of Sports Sciences Special Talent Exam revealed that there was no statistically significant difference between the two groups, U= 128940.50, p= .69. These findings revealed that the SDS scores of female ($\bar{x}$= 14.49) and male ($\bar{x}$= 14.46) candidates were similar and found to be higher than the average score of the SDS Scale (range 4-20) (Table 1).

Similarly, the results of the Mann-Whitney U test, which was applied to determine whether there was a difference between the COV-19-QoLTR scores of female and male candidates, revealed that there was no statistically significant difference, U= 123449.00, p= .13. The results of the analysis revealed that the COV-19-QoLTR scores of female ($\bar{x}$= 2.34) and male ($\bar{x}$= 2.42) candidates were similar and below the average (Table 1).

Table 1. Comparison of SDS and COV19-QoLTR Scores According to the Gender of the Participants

		N	$\bar{x}$	*SD*	*Med.*	*U*	*z*	*p*
SDS	**Female**	364	14.49	2.82	15.00	128940.50	-.40	.69
	Male	719	14.46	2.89	15.00			
COV-19-QoL$_{TR}$	**Female**	364	2.34	1.06	2.17	123449.00	-1.53	.13
	Male	719	2.42	1.00	2.33			

p<.05

The Mann-Whitney U test, which was used to see if there was a difference between the SDS scores of the licensed athletes and non-athletes, revealed a statistically significant difference between the two groups, U= 121983.00, p= .01. According to the findings, non-athletes had higher SDS scores ($\bar{x}$= 14.65) than licensed athletes ($\bar{x}$= 14.15) (Table 2).

However, the results of the Mann-Whitney U test, which was applied to determine whether there was a difference between the scores on COV-19-QoLTR of licensed athletes and

non-athletes participating in the research, revealed that there was statistically no significant difference between athletes ($\bar{x}$= 2.39) and non-athletes ($\bar{x}$= 2.39), U= 134341.50, p= .83 (Table 2).

Table 2. Comparison of SDS and COV19-QoLTR Scores According to the Athletic License Status of the Participants

		N	$\bar{x}$	SD	Med.	U	z	p
SDS	**Licensed athletes**	392	14.15	2.94	14.00	121983.00	-2.74	.01
	Non-athletes	691	14.65	2.80	15.00			
COV-19-QoL$_{TR}$	**Licensed athletes**	392	2.39	1.00	2.33	134341.50	-.22	.83
	Non-athletes	691	2.39	1.04	2.26			

p<.05

The results of the Mann-Whitney U test, which was conducted to determine whether there is a difference in SDS scores according to the status of being an individual or team athlete, showed that there was no statistically significant difference between the two groups, U= 16356.00, p= .80. According to these findings, the SDS scores of the candidates who are individual athletes ($\bar{x}$= 14.09) and those who are team athletes ($\bar{x}$= 14.18) were similar, and above the average.

Similarly, the results of the Mann-Whitney U test were applied to determine whether there was a difference between the COV19-QoLTR scores of licensed individual athletes ($\bar{x}$= 2.29) and licensed team athletes ($\bar{x}$= 2.43) revealed that there was statistically no significant difference between the two groups, U= 15315.00, p= .21 (Table 3).

Table 3. Comparison of SDS and COV19-QoLTR Scores According to the Status of an Individual Athlete or a Team Athlete

		N	$\bar{x}$	*SD*	*Med.*	*U*	*z*	*p*
SDS	**Individual athlete**	124	14.09	2.96	14.00	16356.00	-.08	.80
	Team athlete	268	14.18	2.94	15.00			
COV-19-QoL$_{TR}$	**Individual athlete**	124	2.29	.99	2.17	15315.00	-1.25	.21
	Team athlete	268	2.43	1.00	2.33			

p<.05

A Spearman rank correlation coefficient analysis was used to examine the relationship between SDS and COV19-QoLTR scores of the candidates. The datasets of the licensed athletes and non-athletes were analyzed separately, as statistically significant differences were found between the SDS scores of these two groups of participants. The results of the analysis revealed that there was a statistically no significant relationship between the SDS and COV19-QoLTR scores of licensed athletes, r_s= -.096, p= .06 (Table 4).

In addition, as a result of the analysis, a statistically weak negative relationship between non-athletes' SDS and COV19-QoLTR scores was noted, r_s= -.217, p= .001 (Table 4).

Table 4. The Correlation Between SDS and COV19-QoLTR Scores of Licensed Athletes and Non-Athletes

Licensed athletes	Correlations	COV19-QoL$_{TR}$
SDS	***Spearman Correlation***	-.096
	P	.056
	N	392
Non-athletes		
SDS	***Spearman Correlation***	-.217*
	P	.001
	N	691

*p<.01

DISCUSSION

In this study, the relationship between the level of compliance with COVID-19 social distancing measures and the quality of life of candidate students in the Faculty of Sports Sciences according to gender, athletic license status, and the status of being an individual or team athlete was explored. The results of the research showed that the level of compliance with COVID-19 social distancing measures of female and male candidates is high, and the effect of COVID-19 on the quality of life of female and male candidates is below the average scale score. Additionally, it has been found that licensed athletes and non-athletes differ in their levels of compliance with COVID-19 social distancing measures, favoring non-athletes, COVID-19 similarly affects the quality of life of licensed athletes and non-athletes below a moderate level. In the study, it was found that the level of compliance with COVID-19 social distancing measures of licensed athletes, who are both team athletes and individual athletes, is high, and the effect of COVID-19 on the quality of life of both groups is below the scale average. It was concluded that there was no relationship between the level of compliance with COVID-19 social distancing measures and the effect of COVID-19 on the quality of life of licensed athletes. However, there was a statistically negative and low-level relationship between the level of compliance with COVID-19 social distancing measures and the effect of COVID-19 on the quality of life of non-athletes.

In this study, it was determined that there was no difference between the level of compliance with COVID-19 social distancing measures of female and male sports sciences degree candidates and that the level of compliance with COVID-19 social distancing measures of both females and males was above the average and high. Since the COVID-19 pandemic spread rapidly all over the world from the moment it emerged and caused severe health problems and death in many people, the World Health Organization (WHO) proposed a series of measures to prevent the spread of the pandemic and invited all countries to comply with

these measures (WHO, 2020). One of the reasons for the high level of compliance with COVID-19 social distancing measures among female and male candidates may be due to their consideration of the WHO's (2020) warnings regarding social distancing. In addition, the fact that people put this rule into practice, believing that one of the most effective ways to protect themselves from the pandemic is to maintain social distance, supports the current study findings (Aslan, 2020). In addition, the literature has also stressed how athletes are concerned about contracting the COVID-19 disease during the pandemic and that, if they do, they won't be able to recover physically (Mehrsafar et al., 2020). The high level of compliance with social distancing measures for COVID-19 of the candidates participating in this study may have resulted from the fear of being infected and the fear of not being able to recover physically if they become infected, as well as the thought that they could endanger the health of other people (McGuine et al., 2021a). The high level of compliance with COVID-19 social distancing measures of the sports sciences degree candidates may be due to their sense of social responsibility towards society and their sensitivity not to endanger other people's lives.

It has been determined that there is no difference between the COVID-19 impact on the quality of life of female and male sports sciences degree candidates, and that the COVID-19 impact on the quality of life of both females and males is below the average. In a study conducted with athletes in the Norwegian sample, it was found that the COVID-19 pandemic reduced the quality of life of athletes (Pensgaard et al., 2021). Similarly, in a study conducted in a Norwegian sample, it was determined that 2205 adolescents aged between 16 and 19 had very low quality of life levels in the period of the COVID-19 pandemic (Riiser et al., 2020). These findings from the literature are not in line with the low level of impact of COVID-19 on the quality of life of female and male participants in this study. Although COVID-19's impact on the quality of life of both female and male athletes is low, studies have shown that the quality of life of individuals who do sports is higher than those who do not do sports (Dahab et al., 2019; Houston et al., 2016; Lam et al., 2013). From the previous related literature, it can be inferred that the low level of COVID-19 impact on the quality of life of female and male participants in this study might be due to their active participation in sports and physical activity during the preparation stage for the special talent exam (Mcguine et al., 2021b).

The research findings have shown that there is a significant difference between the level of compliance with COVID-19 social distancing measures of licensed athletes and non-athletes and that the non-athletes' level of compliance with COVID-19 social distancing measures was found to be higher than licensed athletes. However, it has been reported that the level of compliance with COVID-19 social distancing measures of both licensed athletes

and non-athletes was high. In the studies conducted to support this, it is emphasized that the social distancing measures, which have become the "new normal" during the COVID-19 pandemic, have begun to take place in the lives of all individuals from 7 to 70, and that these measures might become a part of people's lives (Nyenhuis et al., 2020). The high level of compliance with COVID-19 social distancing measures of licensed athletes and non-athletes may be due to the fact that the social distancing measures have become a part of their lives. During the COVID-19 pandemic, sports clubs ensured their athletes trained in isolated environments so that they would be less affected by the negative effects of the pandemic; measured their body temperatures regularly and frequently; ensured that they wore masks during training sessions; and constantly checked the health status of their athletes with digital applications, which were developed to provide information about the COVID-19 related health status, so that their athletes could continue to play sports, do exercise, and healthily cope with life (Aydın, 2020; Ünver et al., 2021). The fact that the candidates who are licensed athletes participating in this research complied with the COVID-19 social distancing measures relatively less than the non-athletes may be due to these reasons. In support of these findings, studies have revealed that professional athletes showed fewer symptoms of depression and less anxiety compared to non-professional athletes during the COVID-19 pandemic (Uroh & Adewunmi, 2021; Di Fronso et al., 2022). Based on the finding that non-professional athletes felt more anxiety and depression during the COVID-19 pandemic, it can be said that the non-athletes in this study, who are thought to have similar conditions, might have paid more attention to the social distancing measures due to these negative feelings.

In this study, it was determined that there was no difference between COVID-19's impact on the quality of life of licensed athletes and non-athletes, and the impact level was below the average for both groups of candidates. Studies have emphasized that there were serious decreases in the quality of life of children, adolescents, adults, and the elderly during the COVID-19 pandemic (Cullen et al., 2020; De Matos et al., 2020; Ferreira et al., 2021; Pfefferbaum & North, 2020; Suryavanshi et al., 2020; Özcan & Saraç, 2021; Zhang & Ma, 2020). These research findings in the literature do not coincide with these research findings. For a long time after the outbreak of COVID-19, people have been required to stay at home with partial or full closure practices for a long period (Ministry of Interior, 2021a). The fact that COVID-19 precautions were reduced (Ministry of Interior, 2021b), and vaccination studies and vaccinations were expedited (WHO, 2021) at the time the research data were collected might have reduced the negative impact of COVID-19 on the participants' quality of life. Furthermore, it has been reported in the study that approximately 96% of the athletes actively

trained during the COVID-19 pandemic, and two-thirds of these athletes carried out their training with professional physical education specialists by adapting them to socially isolated areas (da Silva et al., 2021). The fact that the quality of life of the candidates in this study was less affected during the COVID-19 pandemic may also have resulted from these adaptations.

It has been determined that there is no difference between the level of compliance with COVID-19 social distancing measures of individual athletes and team athletes, and the level of compliance with COVID-19 social distancing measures of both individual athletes and team athletes is above the average. In a study examining the opinions of coaches about the training they offered to their athletes during the COVID-19 pandemic, it was revealed that both individual and team sports coaches changed their training plans in terms of health priority during the COVID-19 pandemic and that the coaches chose to reduce contact as much as possible during the training sessions of the athletes (Aydın, 2020). These findings obtained from the literature explain the high level of compliance with COVID-19 social distancing measures of the candidates who are individual athletes and team athletes. In addition, due to the COVID-19 pandemic being a global health problem, athletes complied with the social distancing measures recommended by health authorities at a high level, considering both their health and the community's health (McGuine et al., 2021a; WHO, 2020).

The current study findings reveal that there is no difference between the COVID-19 impact on the quality of life of individual athletes and team athletes and that the COVID-19 impact on the quality of life of both individual athletes and team athletes is below the average level. In several studies, it has been reported that most athletes altered their training routines with alternative practices and made various adaptations to overcome the difficulties brought by the COVID-19 pandemic (Mehrsafar et al., 2021). This explains the fact that the COVID-19 impact on the quality of life of the athletes participating in this study was relatively less affected during the COVID-19 pandemic. Supporting these findings, the psychologist states that doing sports during the pandemic will make a significant contribution to the improvement of mental health (Kar et al., 2020; Kecmanovic, 2020). It has been reported in research that elite athletes experienced many health problems such as depression, insomnia, and anxiety during the COVID-19 pandemic, and these athletes also needed physical and psychological support both during the COVID-19 pandemic and during the competitions (Ciddi & Yazgan, 2020; Mehrsafar et al., 2021; Pensgaard et al., 2021; Reardon et al., 2021). It is thought that the reason why these results do not coincide with the findings of this research is that the athletes participating in the research are not elite athletes, do not practice sports as a profession, and do not feel financial anxiety.

It has been determined that there is no relationship between the level of compliance with COVID-19 social distancing measures and the COVID-19 impact on the quality of life of the licensed athletes participating in this research. However, as a result of the analysis, it was revealed that there is a weak negative relationship between the level of compliance with COVID-19 social distancing measures and the COVID-19 impact on the quality of life of non-athletes. In the literature, it has been determined that professional athletes show fewer depression and anxiety symptoms during the COVID-19 period than non-professional athletes (Uroh & Adewunmi, 2021; Di Fronso et al., 2022). There was no relationship between the level of compliance with COVID-19 social distancing measures of licensed athletes and the impact of COVID-19 on the quality of life of these athletes, and the weak negative relationship between the compliance with COVID-19 social distancing measures and the COVID-19 impact on the quality of life of the non-athletes can be explained by this situation. In addition, it has been reported that approximately 96% of the athletes actively worked out during the COVID-19 pandemic and adapted their training routines to socially isolated areas (da Silva et al., 2021). These adaptations explain the unrelated findings between the level of compliance with COVID-19 social distancing measures and the negative impact of the COVID-19 pandemic on the quality of life of licensed athletes in this study. In the research, it has been reported that licensed athletes survived the COVID-19 pandemic with less physical and mental discomfort due to the training programs offered by their coaches. The coaches applied training programs that increased the performance of the athletes in accordance with the COVID-19 social distancing measures, and the club managers implemented measures to protect the health of their athletes (Aydın, 2020; Ünver et al., 2021). These findings explain the unrelated level of compliance with COVID-19 social distancing measures and the level of the negative impact of COVID-19 on the quality of life of licensed athletes in this study. The fact that non-athletes continued their training during the COVID-19 pandemic without the guidance and support of coaches and continued their activities by following social distancing rules. These factors explain the weak negative relationship between their level of compliance with COVID-19 social distancing measures and the COVID-19 impact on their quality of life.

CONCLUSION

It has been determined that the level of compliance with COVID-19 social distancing measures of the female and male candidates for the sports sciences degree was high, and the COVID-19 impact on the quality of life of female and male candidates was below the average. It has been concluded that there was a difference in favor of non-athletes between the level of

compliance with COVID-19 social distancing measures of licensed athletes and non-athletes, and that the COVID-19 impact on the quality of life of licensed athletes and non-athletes was similar to the average. According to the status of being an individual or team athlete, the level of compliance with COVID-19 social distancing measures was found to be high, and the COVID-19 impact on the quality of life of these two groups was below the average. In the study, it was also concluded that there was no relationship between the level of compliance with COVID-19 social distancing measures and the COVID-19 impact on the quality of life of the licensed athletes, but there was a weak negative relationship between the level of compliance with COVID-19 social distancing measures and the quality of life of the non-athletes.

Different from this research, research can also be conducted on how the COVID-19 pandemic affects the depression and anxiety levels of individuals in the field of sports sciences. Since student candidates from departments other than the faculty of sports sciences have not experienced the preparation process for the special talent examination, their level of adaptation to COVID-19-related social distancing measures and the impact of the COVID-19 pandemic on their quality of life may be different. Based on this, in future research, the relationship between the level of compliance with COVID-19 social distancing measures and the COVID-19 impact on the quality of life among candidate students in the field of sports sciences and student candidates preparing for other departments can be examined. This research can also be carried out with the participation of sports science majors or with student-athletes studying in other departments. For individuals in the field of physical education and sports to continue their active lives, relevant institutions (municipalities, sports clubs, universities, etc.) should take the necessary precautions and create safe sports environments for cases of COVID-19 and similar situations. In addition, for individuals in the field of physical education and sports to be affected by the COVID-19 pandemic at a minimum level, psychological support can be provided in cooperation with the Ministry of Health to minimize the negative impact on the quality of life of individuals in this field. Physical training practices can be developed in alternative digital formats that individuals in the field of physical education and sports can apply individually and outside of public sports environments (at home or in their personal living spaces) to emergencies like the COVID-19 crisis.

Authors' Contributions

Both authors carried out the research design together. The first author was involved in the data collection process. The second author took responsibility for data analysis and

interpretation of the data. Both authors contributed to the discussion of the results and the manuscript's preparation.

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Declaration of Conflict Interest

The authors have no conflicts of interest to declare.

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