

A PRELIMINARY STUDY ON QUALITY STANDARD LEVEL OF THE DESIGNING OF FACILITIES OF FITNESS CENTERS IN COLOMBO CITY

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The fitness trade has become a booming industry in the world and also in Sri Lanka, and Fitness Centers (FC) are most prominent in fitness industry. Due to this investors are keener on investing their capital for FCs. Although there were limited studies carried out about the facility designing in fitness centers, there are many things to be considered when staging a fitness center. The main objective of this study was to determine the quality standard level of facility design of the fitness centers in Colombo municipal areal. Several Community-FCs (30) were identified in 2 divisional secretariat areas (Colombo and Thimbirigasyaya). A Pre-structured Pilot-tested questionnaire was administered to identify the facility designing and was divided in to four major Sections; “Administration”, “Accessibility & facility”, “Facility for Disabled people”, and “Safety”. These scales were assessed using sub items. Each part were analyzed separately by using weighted scale method to categorize the level of the facility design and finally categorized them in to four group as “Good”, “Average”, “Poor”, “Very Poor”. Weighted averages were assigned based on international designing standards with the sufficient congeniality to the indigenous conditions. Results showed that, only 10% of FCs can be categorized in to “Good” category and most of the FCs (56.7%) was in “Average” category in providing overall facilities of FCs. When considered the “accessibility & facility” and “safety”, results indicated that only 26.7% of FCs was in “good” category. It was found that 20% of the FCs was in “very poor” category in the level of safety while 26.7% was in poor category. It was really dispiriting that, none of the FCs (0%) was able to provide sufficient facilities for disabled people. Moreover, results clearly showed that investments on FC have been rapidly change after year 2000 and 40% of the investments were done by Privet organizations and 36% were done by groups of companies while government invested only for 2%. Although major requirement of the FCs is to provide better facilities to enhance the health status of people, most of the FCs were not having optimal facilities. We conclude that the involvement of the government for this industry should increase as well as a National Policy and Regulations to maintaining the quality standard level of the facility design of FCs should be introduced.