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Recreational Facilities and Usage among Guests: Evidence from Ikogosi Warm Springs Resort, Ekiti State, Nigeria

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Abstract
This study assessed the availability, functionality and usage of recreational facilities at Ikogosi Warm Springs Resort, Ekiti State, Nigeria. A descriptive survey research design was adopted. Data was collected from 52 guests through a semi-structured questionnaire using a random sampling technique. Data was analyzed using descriptive statistics (frequencies, percentages and mean scores) and inferential statistics (Chi-square and Pearson correlation analyses) at a 5% level of significance. The findings revealed that the resort provides a range of recreational facilities, although their functionality and usage varied across facilities. Pearson correlation analysis showed a significant positive relationship between the availability and functionality of recreational facilities ($r = 0.764$, $p < 0.001$). However, no significant relationship was found between facility availability and guest usage ($r = 0.255$, $p = 0.068$), or between functionality and guest usage ($r = 0.128$, $p = 0.366$). Chi-square analysis further indicated significant associations between guests' usage of recreational facilities and gender ($\chi^2 = 15.920$, $p = 0.042$), educational level ($\chi^2 = 76.796$, $p = 0.001$) and occupation ($\chi^2 = 82.630$, $p = 0.001$). The findings suggest that the presence and operational condition of recreational facilities alone do not necessarily translate into higher guest usage, indicating the potential influence of guest-related characteristics and other contextual factors. The study concludes that improving recreational facility provision should be complemented by strategies that enhance accessibility, awareness, attractiveness and utilization, while considering the diverse characteristics of resort guests. These measures could strengthen the contribution of recreational services to guest experience and the overall performance of the resort.

Keywords: Facility availability, Facility functionality, Recreational facilities, Resorts, Guest usage.

1. Introduction

Recreational facilities make up an important component of the hospitality product because they provide the physical settings through which guests can partake in leisure, relaxation, exercise, entertainment and other non-core accommodation activities. Recreational facilities may be of greater importance because the resort experience is not only limited to lodging and food services but is also composed of a broader combination of physical, environmental and experiential resources. The physical environment has consequently received considerable attention in hospitality research, particularly through the servicescape perspective, which emphasizes the role of physical surroundings in shaping customer perceptions and behaviours (Bitner, 1992). Recent evidence has shown that physical-environment research remains a very important stream within hospitality scholarship, although its dominant concerns have included servicescape quality, design, ambience, biophilic elements and customer experience rather than the operational assessment of individual recreational facilities (Dedeoğlu *et al*., 2015; Ali *et al*., 2024; Nanu *et al*., 2024). Nanu *et al*. (2024) identified physical environment, servicescape and quality as major research themes and empasized continuing opportunities for research which cuts through different hospitality contexts, guest groups and environmental dimensions in a systematic review of 199 hospitality studies. Contemporary empirical studies have also shown that physical and servicescape attributes have varying effects on guest responses. Ali *et al*. (2024) also developed a servicescape–value–engagement framework using data from 619 hotel customers in China, the study observed that servicescape elements influenced customer engagement through functional and wellness values. Research has affirmed that servicescape affects customer experience and subsequent customer engagement. Liang *et al.* (2024) also did a demonstration through field and experimental studies that showed that substantive servicescape can stimulate customers motivation, which subsequently affects satisfaction. These studies confirmed that physical environments are not passive components of hospitality establishments but can affect how customers perceive, experience and respond to hospitality settings.

Availability and functionality represent analytically

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different dimensions of facility provision. The presence of any recreational facility does not necessarily make it operational. A swimming pool, gymnasium, sports court, leisure area or nature trail may be physically present but unavailable because of closure or operational restrictions, or it may be available but poorly maintained and therefore only partially functional. Functionality of any facility is particularly important because physical resources are meaningful to customers only when they can be used for the purpose of which they were designed for. A facility being listed as "available" does not establish that it is usable, available facility might not be functional, however for the fact that a facility is functional does not automatically connote usage by the guest. A functional facility can also be underutilized. This distinction is theoretically consistent with Bitner's servicescape framework and with the recognition of spatial layout and functionality as distinct physical-environment dimensions (Bitner,1992). This study contributed to the existing theory by extending the empirical application of servicescape theory by demonstrating that the physical environment can be examined through the operational progression from resource provision to functionality and behavioural utilization. The recent systematic review by Nanu *et al.* (2024) likewise identifies spatial layout and functionality as a distinct stream within hospitality physical-environment research.

When checking out guest usage of any facility, the distinction between availability and functionality is very important. The ultimate recreational value of a facility is not established simply by its presence or operational status; it is also reflected in whether guests are able to make use of it. Recent hospitality research has increasingly considered customer engagement with physical environments. Ali *et al.* (2021), for instance, indepthly examined the relationship between servicescape and customer engagement, NasarAmini *et al*. (2022) also investigated the role of servicescape in customer experience and engagement. However, these studies conceptualize engagement as a broader customer response rather than specifically examining actual usage of recreational facilities as an outcome of their availability and functionality.

Nanu *et al.* (2024) specifically noted that most studies in their review were conducted in developed countries, with relatively few studies from some regions. There is limited empirical evidence from Nigerian resort settings that integrates facility availability, functionality and actual guest usage within a single analytical framework. Though, Arowosafe (2017) established useful evidence on availability and utilization of recreational facilities in the research on assessment of selected hotels in Akure. Also, Onigbogi *et al*. (2021) also did a research on users' satisfaction with post-construction facilities in selected resort hotels in southwestern Nigeria, drawing attention to the condition and maintenance of resort facilities. These studies are very useful in the sense that they establish the Nigerian relevance of recreational facility provision and facility condition. However, they do not provide the same integrated empirical assessment of availability, functionality and guest usage as interconnected dimensions at a specific nature-based resort. This issue is particularly important to Ikogosi Warm Springs Resort, Nigeria, where recreational and nature-based resources form an important part of the resort experience. The resort combines its natural warm and cold spring attraction with built recreational and wellness facilities. Recent documentation of the ikogosi resort's development also indicates continuing investment in recreational infrastructure and the enhancement of its tourism and wellness offerings (Ayodele, 2022; Osho *et al*., 2025; Obaisi, 2026). Such developments make a factual review of the facilities which are available to guests, their operational functionality and actual usage especially relevant for fact based facility management.
This study focused on a resort destination while making functionality as a distinct analytical dimension, examining availability, functionality and usage together, thereby providing more recent empirical evidence and eventually confirming the relationships between three dimensions. The study adopts a three-dimensional assessment that differentiates between the presence of facilities, their operational condition and guests' actual use, rather than treating recreational facilities merely as an inventory of amenities. This approach is adopted in response to an important gap in the hospitality literature by shifting attention from the broader consequences of servicescape to the operational pathway through which recreational resources become usable guest experiences. In other words, the study tried to determine the availability, functionality and guest usage of the facilities with the following hypotheses tested.

1. Socio demographic characteristics of guests have no significant relationship with guests' usage.
2. Recreational facility availability has no significant relationship with functionality
3. Recreational facility availability has no significant relationship with guests' usage
4. Recreational facility functionality has no significant relationship with guests' usage.

The conceptual framework as depicted in figure 1 proposes that the availability and functionality of recreational facilities are important determinants of guest usage in hospitality and resort settings. The framework is informed by the Servicescape Theory, which is of the belief that the physical environment in which services are delivered can have an impact on customers' perceptions, responses and behaviours (Bitner, 1992). For this study, recreational facilities constitute the physical amenities, spaces and supporting infrastructure while availability reflects the extent to which the facilities are actually provided and presented for use, and functionality represents their operational condition and ability to perform their intended purpose. These two dimensions are consequently expected to influence the extent to which

guests utilize recreational facilities. The distinction between the availability and functionality is important because the existence of a facility does not guarantee its utilization. A facility may be physically present but non-functional, thereby making it unavailable for guest participation. This argument is supported by Onigbogi *et al*. (2021), who found that poorly maintained recreational facilities in selected resort hotels in Southwest Nigeria tended to affect the users' satisfaction and patronage. Similarly, Dong and Siu (2013) demonstrated that servicescape elements significantly affected visitors' evaluations of their tourism experiences. Therefore, the framework conceptualizes availability and functionality as independent variables while guest usage serve as the dependent variable thereby, providing the basis for examining whether the provision and operational condition of recreational facilities translate into actual guest utilization.

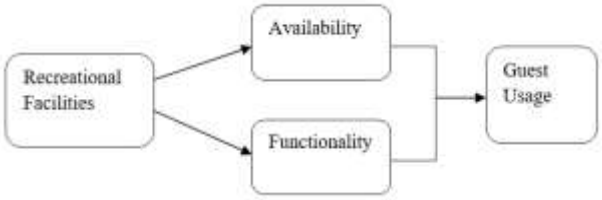


Figure 1: conceptual model for the study

2. Methodology

The study adopted a cross-sectional survey design to assess the availability, functionality, and usage of recreational facilities among guests at Ikogosi Warm Springs Resort, Ekiti State, Nigeria. The cross-sectional design was considered appropriate because the data were collected from respondents at a single point in time. The study population comprised mainly of, guests of the resort. Based on the information given to the researcher during reconnaissance survey, resort's estimated average population of 60 guests per weekdays was used as the accessible study population. The required sample size was determined using the Krejcie and Morgan sample size determination table (appendix), resulting in a sample size of 52 respondents using simple random techiques. Data was collected using a semi-structured questionnaire developed in line with the objectives of the study. The questionnaire consisted of various sections covering respondents' socio-demographic characteristics and the three major study variables: facility availability, functionality, and usage**.** Facility availability was measured across ten (10) identified recreational facilities using a dichotomous response format, where each facility was coded Yes = 1 and No = 0. The scores for the 10 facilities were summed up to obtain an overall facility availability score for each respondent. Functionality was assessed for the same 10 facilities using four categories: Not Applicable = 0, Not Functional = 1, Semi-functional = 2, and Fully Functional = 3**.** The functionality scores across the 10 facilities were summed up to obtain an overall functionality score**.** Similarly, guest usage of the 10 facilities was assessed using Never = 0, Sometimes = 1,and Regularly = 2**,** with the individual item scores summed up to derive an overall usage score for each respondent. These composite scores were subsequently used in the statistical analyses. The questionnaires were administered to guests at the resort, with participation being voluntary. Respondents were informed of the purpose of the study, and confidentiality and anonymity of the information provided were maintained throughout the data collection process. The completed questionnaires were coded and analyzed using the Statistical Package for the Social Sciences (SPSS)**.** Descriptive statistics, including frequencies and percentages, were used to summarize respondents' socio-demographic characteristics and describe the availability, functionality, and usage of recreational facilities. The Pearson Product-Moment correlation coefficient and Chi square were employed to examine the relationships while statistical hypotheses were evaluated at the 5% level of significance ($p < 0.05$)**.**

3. Result and Discussion

3.1 Socio demographic characteristics of the respondents

The findings from table 1 shows that 52 respondents were sampled and the gender representation was observed to be 46.2% females and 53.8% males. The results show that more males responded to the questionnaire. The research revealed that 23.1% of the respondents were in the age range of 18 – 25 years, while 34.6% of them were in the age range of 26 – 35 years. 35.0% of the respondents were in the age range of 36– 45 years, while it was noted that only 17.3% were in the 46 years and above age range.

The marital status of the respondents was noticed to be 53.8% single while 46.2% of the respondents were noted to be married. The educational level of the respondents was observed to be as follows: those with no formal education were 11.5%, while those that studied to the secondary level were 3.8%. 11.5% of the respondents were noted to have studied to the OND/NCE level. 69.2% of the respondents were noted to have studied to the HND/BSc level, while 3.8% of the respondents were noted to have studied to the MSc and above level. Four categories of respondents were noted. They were the students, civil servants, private sector workers and business owners or traders. The respondents who were students were 19.2%, while the civil servants were 11.5%, the private sector workers were in the highest proportion with a respondent percentage of 53.8%, while the business owners/traders were noted to be 15.4%. The study revealed that 11.5% of the respondent earned estimated income of ₦50.000-₦100.000, the study revealed that 21.2%of the respondents were receiving a monthly income of ₦100,001 – ₦ 200,000. 28.8% of the respondents also revealed that they their monthly income was in the range of ₦ 200,001 - ₦ 300,000, 13.5% also stated that their monthly income was in the range of ₦ 500,001-₦1,000,000 while 3.8% claimed to earn above ₦1,000,000. The table also shows that 90.4% of the

Table 1: Socio demographic characteristics of the respondents

Variables		Frequency(f)	Percentage(%)
Gender	Male	28	53.8
	Female	24	46.2
Age	18-25	12	23.1
	26-35	18	34.6
	36-45	13	35.0
	46 and above	9	17.3
Marital status	Single	28	53.8
	Married	24	46.2
Education	No formal education	6	11.5
	Secondary	2	3.8
	OND/NCE	6	11.5
	HND/BSc	36	69.2
	MSc and above	2	3.8
Occupation	Student	10	19.2
	Civil servant	6	11.5
	Private sector worker	28	53.8
	Business owner/trader	8	15.4
Estimated income	Less than50,000	6	11.5
	50,000-100,000	11	21.2
	100,001-200,000	15	28.8
	200,001-500,000	11	21.2
	500,001-1M	7	13.5
	1M and above	2	3.8
Religion	Christianity	47	90.4
	Islam	5	9.6

Source: Field Survey (2026)

Table 2: Availability of the facilities

Recreational Facilities		Frequency (f)	Percentage (%)
Swimming pool	Yes	52	100
	No	-	-
Modern gym / fitness centre	Yes	52	100
	No	-	-
Nature trail	Yes	52	100
	No	-	-
Blood pressure machine	Yes	52	100
	No	-	-
Body weight checker	Yes	48	92.3
	No	4	7.7
Yoga	Yes	42	80.8
	No	10	19.2
Glucometer	Yes	38	73.1
	No	14	26.9
Pulse oximeter	Yes	36	69.2
	No	16	30.8
Vision screening tools	Yes	2	3.8
	No	50	96.2
Hearing test booth	Yes	2	3.8
	No	50	96.2

respondents practiced Christianity as their religion while 9.6% of the respondents practiced Islam as their religion.

3.2 Discussion on availability of recreational facilities

The table 2 presents the availability of recreational facilities and medical equipment in the recreational

centre as reported by the 52 respondents surveyed.

The findings revealed that certain facilities were universally available within the recreational centre. All the respondents (52; 100%) indicated the presence of a swimming pool, modern gym/fitness centre, nature trail, and blood pressure machine. This suggests that these facilities are well-established and form the core recreational and health-support infrastructure of the centre. The availability of recreational and preventive health facilities contributes significantly to improved physical health, wellness promotion, and disease prevention among individuals.

Furthermore, the study showed that a body weight checker was also highly available, as confirmed by 48 respondents representing 92.3%, while only 4 respondents (7.7%) reported its absence. Similarly, yoga facilities/services were available according to 42 respondents (80.8%), whereas 10 respondents (19.2%) indicated otherwise. This implies that the recreational centre places considerable emphasis on physical fitness, wellness, and preventive healthcare activities. Regular participation in physical activities such as yoga and fitness exercises has been associated with improved cardiovascular health, stress reduction, and enhanced quality of life (Warburton & Bredin, 2017).

In relation to medical equipment, the availability of a glucometer was reported by 38 respondents (73.1%), while 14 respondents (26.9%) stated that it was not available. Also, 36 respondents (69.2%) confirmed the availability of a pulse oximeter, whereas 16 respondents (30.8%) disagreed. These findings indicate a moderate presence of basic medical diagnostic equipment within the recreational centre, which may contribute positively to health monitoring and emergency preparedness among users. The inclusion of simple health-monitoring devices in recreational settings supports early detection and management of health conditions, especially chronic diseases such as hypertension and diabetes (American Medical Association, 2021).

However, the results further revealed that some specialized health screening facilities were largely unavailable. Only 2 respondents (3.8%) reported the availability of vision screening tools, while an overwhelming majority of 50 respondents (96.2%) indicated their absence. Likewise, only 2 respondents (3.8%) confirmed the availability of a hearing test booth, whereas 50 respondents (96.2%) reported that such a facility was not available. The absence of these specialized facilities may reduce opportunities for early diagnosis of sensory impairments, which are important components of comprehensive public health services. Overall, the findings suggest that the recreational centre is adequately equipped with major recreational and basic health-monitoring facilities, particularly those related to physical fitness and routine health checks. Nevertheless, the centre appears deficient in specialized medical screening equipment such as vision and hearing assessment facilities. This may limit the centre's capacity to provide comprehensive health evaluation services to users. Adequate provision of recreational and health-support facilities is essential for promoting holistic wellbeing and improving users' satisfaction and health outcomes (Veal, 2025).

3.3 Discussion on functionality of the facilities

The result from table 3 presents the respondents' assessment of the functionality of recreational and medical facilities available within the recreational centre.

The findings revealed that the swimming pool was fully functional according to all the respondents (52; 100%). This indicates that the facility was operating effectively and adequately meeting users' recreational needs. Properly maintained swimming facilities are important for promoting physical activity, relaxation, and general wellbeing among users (Sumartana & Setiaji, 2025).

Similarly, the modern gym/fitness centre was considered fully functional by 40 respondents (76.9%), while 12 respondents (23.1%) rated it as semi-functional. None of the respondents considered the facility non-functional. This suggests that although the gym facility was generally operational, certain aspects may still require improvement or upgrading to achieve optimal performance. Functional fitness centres contribute significantly to healthy lifestyles and disease prevention through regular exercise participation (Warburton & Bredin, 2017).

The nature trail was reported as fully functional by 44 respondents (84.6%), whereas 8 respondents (15.4%) rated it as semi-functional. This implies that the trail was largely accessible and useful for recreational and wellness activities such as walking, jogging, and relaxation in a natural environment.

With regard to the blood pressure machine, 30 respondents (57.7%) indicated that it was fully functional, while 18 respondents (34.6%) described it as semi-functional. However, 4 respondents (7.7%) considered the equipment not applicable. The result suggests that the blood pressure machine was available and operational to a moderate extent, although improvements in maintenance and accessibility may still be necessary. The availability of functional blood pressure monitoring devices supports routine health checks and early detection of cardiovascular conditions (American Heart Association, 2022).

The body weight checker was perceived as fully functional by 36 respondents (69.2%), while 16 respondents (30.8%) rated it as semi-functional. This indicates that the equipment was generally effective for monitoring body weight and supporting fitness assessments within the recreational centre.

The findings further showed that yoga facilities/services were fully functional according to 34

Table 3: Functionality of the facilities

Recreational Facilities		Frequency (f)	Percentage (%)
Swimming pool	Not applicable	-	-
	Not functional	-	-
	Semi functional	-	-
	Fully functional	52	100
Modern gym / fitness centre	Not applicable	-	-
	Not functional	-	-
	Semi functional	12	23.1
	Fully functional	40	76.9
Nature trail	Not applicable	-	-
	Not functional	-	-
	Semi functional	8	15.4
	Fully functional	44	84.6
Blood pressure machine	Not applicable	4	7.7
	Not functional	-	-
	Semi functional	18	34.6
	Fully functional	30	57.7
Body weight checker	Not applicable	-	-
	Not functional	-	-
	Semi functional	16	30.8
	Fully functional	36	69.2
Yoga	Not applicable	8	15.4
	Not functional	-	-
	Semi functional	10	19.2
	Fully functional	34	65.4
Glucometer	Not applicable	8	15.4
	Not functional	2	3.8
	Semi functional	12	23.1
	Fully functional	30	57.7
Pulse oximeter	Not applicable	10	19.2
	Not functional	2	3.8
	Semi functional	6	11.5
	Fully functional	34	65.4
Vision screening tools	Not applicable	36	69.2
	Not functional	4	7.7
	Semi functional	-	-
	Fully functional	12	23.1
Hearing test booth	Not applicable	46	88.5
	Not functional	4	7.7
	Semi functional	2	3.8
	Fully functional	-	-

respondents (65.4%), semi-functional according to 10 respondents (19.2%), and not applicable according to 8 respondents (15.4%). This implies that yoga activities were relatively effective and accessible to a majority of users, although some respondents may not have utilized the service.

For the glucometer, 30 respondents (57.7%) indicated that it was fully functional, 12 respondents (23.1%) reported it as semi-functional, while 2 respondents (3.8%) rated it as non-functional and 8 respondents (15.4%) considered it not applicable. This suggests that the glucometer was moderately functional and capable of supporting blood sugar monitoring for users, especially those requiring routine glucose checks.

Similarly, the pulse oximeter was rated fully functional by 34 respondents (65.4%), semi-functional by 6 respondents (11.5%), non-functional by 2 respondents (3.8%), while 10 respondents (19.2%) considered it not

Table 4: Usage of the facilities

Recreational Facilities		Frequency (f)	Percentage (%)
Swimming pool	Never	-	-
	Sometimes	30	57.7
	Regularly	22	42.3
Modern gym / fitness centre	Never	-	-
	Sometimes	30	57.7
	Regularly	22	42.3
Nature trail	Never	-	-
	Sometimes	44	84.6
	Regularly	8	15.4
Blood pressure machine	Never	2	3.8
	Sometimes	43	82.7
	Regularly	7	13.5
Body weight checker	Never	-	-
	Sometimes	43	82.7
	Regularly	9	17.3
Yoga	Never	9	17.3
	Sometimes	39	75.0
	Regularly	4	7.7
Glucometer	Never	10	19.2
	Sometimes	35	67.3
	Regularly	7	13.5
Pulse oximeter	Never	12	23.1
	Sometimes	36	69.2
	Regularly	4	7.7
Vision screening tools	Never	52	100
	Sometimes	-	-
	Regularly	-	-
Hearing test booth	Never	50	96.2
	Sometimes	-	-
	Regularly	2	3.8

applicable. This indicates that the equipment was largely operational and useful for monitoring oxygen saturation and related health conditions.

In contrast, vision screening tools appeared to have limited functionality and availability. While 12 respondents (23.1%) considered the tools fully functional, 4 respondents (7.7%) rated them non-functional, and the majority of respondents (36; 69.2%) indicated that the facility was not applicable. This finding suggests inadequate provision or utilization of vision screening services within the recreational centre.
Furthermore, the hearing test booth was the least functional facility identified in the study. A large majority of respondents (46; 88.5%) reported that the facility was not applicable, while 4 respondents (7.7%) rated it as non-functional and only 2 respondents (3.8%) considered it semi-functional. None of the respondents reported the hearing test booth as fully functional. This indicates a major deficiency in auditory health screening services within the recreational centre.

The findings suggest that the recreational centre possesses a relatively high level of functionality in major recreational and basic health-monitoring facilities such as the swimming pool, gymnasium, nature trail, and body monitoring equipment. However, specialized medical screening facilities, particularly vision and hearing assessment tools, were either inadequately functional or largely unavailable. This may limit the centre's ability to provide comprehensive physical fitness and wellness services to users.

3.4 Discussion on usage of the facilities

Table 4 presents the respondents' level of usage of the recreational and medical facilities available within the recreational centre.

The findings revealed that the swimming pool was actively utilized by the respondents, as 30 respondents (57.7%) indicated that they used the facility sometimes, while 22 respondents (42.3%) reported using it regularly. None of the respondents indicated that they never used the swimming pool. This suggests a high level of patronage and acceptance of the swimming facility among users. Swimming activities are widely

Table 5: Chi square and correlation analysis between visitors' demographic characteristics and usage of the facilities

Socio demographic characteristics	χ^2	P value
Gender	15.920	0.042
Marital status	10.287	0.245
Education	76.796	0.001
Occupation	82.630	0.001
Religion	13.645	0.091
	R	P value
Age	0.210	0.135
Income	0.099	0.483

recognized for promoting cardiovascular fitness, relaxation, and overall physical wellbeing.

Similarly, the modern gym/fitness centre recorded high usage among respondents. Thirty respondents (57.7%) reported using the gym sometimes, while 22 respondents (42.3%) used it regularly. No respondent indicated never using the facility. This finding implies that the gymnasium is an important component of the recreational centre and contributes significantly to users' fitness and health maintenance. Regular exercise participation has been linked to improved physical health and reduced risk of chronic diseases (Warburton & Bredin, 2017).

The nature trail was also utilized by respondents, although at a lower frequency of regular use. A majority of respondents, 44 (84.6%), stated that they used the nature trail sometimes, while only 8 respondents (15.4%) used it regularly. None reported never using the facility. This suggests that the trail is appreciated mainly for occasional recreational activities such as walking, jogging, and relaxation.

With regard to the blood pressure machine, 43 respondents (82.7%) reported using it sometimes, 7 respondents (13.5%) used it regularly, while 2 respondents (3.8%) indicated that they never used it. This finding suggests moderate utilization of the equipment for periodic health monitoring. A regular check of blood pressure is important for early detection and management of hypertension and cardiovascular conditions (American Heart Association, 2022).

The body weight checker also recorded substantial usage among respondents. Forty-three respondents (82.7%) indicated using it sometimes, while 9 respondents (17.3%) used it regularly. No respondent reported never using the equipment. This indicates that body weight monitoring is a common practice among users of the recreational centre, likely due to increased awareness of fitness and weight management.

The findings further showed that yoga activities were moderately utilized. Nine respondents (17.3%) indicated that they never participated in yoga activities, 39 respondents (75.0%) participated sometimes, while only 4 respondents (7.7%) participated regularly. This suggests that although yoga services were available, regular participation was relatively low, possibly due to differences in personal interests, schedules, or awareness of the benefits associated with yoga practice. For the glucometer, 10 respondents (19.2%) reported never using the equipment, 35 respondents (67.3%) used it sometimes, while 7 respondents (13.5%) used it regularly. This indicates moderate utilization of blood glucose monitoring services, especially among respondents concerned about diabetes and general health monitoring.

Similarly, the pulse oximeter was used sometimes by 36 respondents (69.2%), regularly by 4 respondents (7.7%), while 12 respondents (23.1%) reported never using it. This finding suggests relatively low regular utilization of the equipment, possibly because oxygen saturation checks are often carried out only when health concerns arise.

The results further revealed that vision screening tools were not utilized at all by the respondents, as all 52 respondents (100%) indicated that they never used the facility. This strongly suggests that the vision screening tools were either unavailable, inaccessible, or non-functional within the recreational centre.

Likewise, the hearing test booth recorded the lowest level of utilization. Fifty respondents (96.2%) reported never using the facility, while only 2 respondents (3.8%) indicated regular usage. No respondent reported occasional use. This indicates extremely poor utilization of hearing assessment services within the recreational centre.

Overall, the findings suggest that respondents frequently utilized major recreational and basic health-monitoring facilities such as the swimming pool, gymnasium, nature trail, blood pressure machine, and body weight checker. However, specialized health screening facilities such as vision screening tools and hearing test booths were either poorly utilized or not utilized at all. This may reflect inadequate availability, poor awareness, or limited accessibility of these specialized facilities within the recreational centre.

3.5 Discussion on Chi square and correlation analysis between visitors' demographic characteristics and usage of the facilities

Table 5 presents the relationship between visitors' socio-demographic characteristics and their usage of the available facilities. Gender, education and

Table 6: Correlation analysis between availability and functionality of the facilities

	R	P value
Availability/Functionality	0.764	0.001

Table 7: Correlation analysis between availability, functionality and usage of the facilities

Variable	R	P value
Availability	0.255	0.068
Functionality	0.128	0.366

occupation showed statistically significant associations with facility usage at 5% significance level, but marital status and religion did not. Gender had a significant association with facility usage ($\chi^2 = 15.920$, $p = 0.042$). Since the p-value is less than 0.05, the null hypothesis of no association between gender and facility usage was rejected. This suggests that male and female visitors differed significantly in their patterns of facility usage**.** The finding indicates that gender may influence how visitors interact with recreational facilities, potentially reflecting differences in preferences, perceived suitability, comfort, social expectations or accessibility. Education also demonstrated a significant relationship with facility usage ($\chi^2 = 76.796$, $p = 0.001$). Similarly, occupation was significantly associated with facility usage ($\chi^2 = 82.630$, $p = 0.001$). These results indicate that visitors' educational and occupational backgrounds may shape their engagement with recreational facilities. Visitors with different educational backgrounds may have varying awareness, preferences and expectations regarding recreational services, while occupational differences may influence available leisure time, lifestyle and the types of facilities visitors are inclined to use.

In contrast, marital status ($\chi^2 = 10.287$, $p = 0.245$) and religion ($\chi^2 = 13.645$, $p = 0.091$) were not significantly associated with facility usage. Although differences may exist among categories, the observed differences were not sufficiently large to establish a statistically significant relationship at the 5% level. The correlation analysis further showed that age ($r = 0.210$, $p = 0.135$) and income ($r = 0.099$, $p = 0.483$) were not significantly correlated with facility usage**.**

3.6 Discussion on correlation analysis between availability of facilities and functionality

Table 6 reveals a strong, positive and statistically significant relationship between facility availability and functionality ($r = 0.764$, $p = 0.001$). The magnitude of the correlation indicates a strong association, while the positive direction implies that higher levels of facility availability tended to correspond with higher levels of functionality.

3.7 Discussion on relationship between availability of facilities, functionality and usage of the facilities

Based on the result presented in table 7, availability was positive but weakly correlated with facility usage ($r = 0.255$), although, the relationship was not statistically significant ($p = 0.068$). Since $p > 0.05$, there is insufficient evidence to conclude that facility availability was significantly related to visitors' usage. Similarly, functionality had a very weak positive relationship with facility usage ($r = 0.128$, $p = 0.366$), which was also statistically insignificant. The results of this study do not prove statistical evidence that functionality was associated with how frequently visitors used the facilities although one would have expected that functional facilities might encourage usage.

This finding is practically necessary because it suggests that the mere provision of facilities, or even in when they are effectively operating may not automatically translate into increased visitor usage. Therefore, visitors' decisions to use recreational facilities may depend on other factors beyond physical provision and functionality. These may include perceived accessibility, cost, personal preferences, awareness, time availability, privacy, comfort, safety, facility attractiveness and the extent to which the facilities correspond with visitors' recreational needs. Consequently, facility management should not evaluate the effectiveness of recreational facilities solely on the basis of whether they are available and functional; attention should also be given to factors that influence actual visitor engagement.

In summary, the hypotheses results confirmed that selective visitors characteristics (gender, education and occupation) are important determinants of facility usage while marital status, religion, age and income were not. Also, availability and functionality were strongly related**,** indicating that the physical provision of facilities is closely connected with their operational condition and lastly, neither availability nor functionality had a statistically significant relationship with actual usage which suggests that having facilities available and ensuring that they are functional represents only one part of effective recreational facility management. The transition from *availability → functionality → actual usage* is not automatic. Visitor-oriented factors may intervene between facility provision and actual utilization. This indicates that the provision and operational status of recreational facilities alone may be insufficient to stimulate visitor utilization. Rather, usage may be shaped by additional visitor-centred factors, including perceived accessibility, affordability, awareness, preferences, comfort and time constraints. The findings therefore underscore the need for facility managers to move beyond a supply-oriented approach towards a more visitor-responsive management strategy, in which the availability and functionality of facilities are

complemented by measures designed to encourage and facilitate actual usage.

4. Conclusion

The study found that the resort provides a range of facilities, although their functionality and usage vary. Availability was significantly and positively related to functionality, but neither availability nor functionality was significantly related to guest usage which implies that providing and maintaining recreational facilities does not necessarily guarantee their utilisation. The significant associations between educational level, occupation and facility usage further suggest that guest characteristics may influence recreational engagement. The study contributes empirical evidence from a Nigerian resort context by demonstrating that availability and functionality do not automatically translate into usage, highlighting the importance of behavioural and contextual dimensions alongside physical infrastructure. Sustainable improvement in recreational services requires more than increasing facility quantity or functionality. An integrated approach linking provision of facilities, functionality and guest-centred utilisation strategies can enhance guest experience thereby, maximising existing investments and supporting the long-term competitiveness and sustainability of the resort. Consequently, recreational service effectiveness should be assessed not only by facility availability and condition but also by how visible, accessible, appealing and relevant facilities are to different guest groups. The resort management should adopt a guest-centred strategy by strengthening awareness and communication, improving accessibility, providing guidance and promotional information, and regularly evaluating guest preferences and usage patterns. Low-use facilities should be assessed to identify possible barriers and guide more strategic investment and maintenance decisions.

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Appendix

Table 3.1

Table for Determining Sample Size of a Known Population

N	S	N	S	N	S	N	S	N	S
10	10	100	80	280	162	800	260	2800	338
15	14	110	86	290	165	850	265	3000	341
20	19	120	92	300	169	900	269	3500	346
25	24	130	97	320	175	950	274	4000	351
30	28	140	103	340	181	1000	278	4500	354
35	32	150	108	360	186	1100	285	5000	357
40	36	160	113	380	191	1200	291	6000	361
45	40	170	118	400	196	1300	297	7000	364
50	44	180	123	420	201	1400	302	8000	367
55	48	190	127	440	205	1500	306	9000	368
60	52	200	132	460	210	1600	310	10000	370
65	56	210	136	480	214	1700	313	15000	375
70	59	220	140	500	217	1800	317	20000	377
75	63	230	144	550	226	1900	320	30000	379
80	66	240	148	600	234	2000	322	40000	380
85	70	250	152	650	242	2200	327	50000	381
90	73	260	155	700	248	2400	331	75000	382
95	76	270	159	750	254	2600	335	1000000	384

Note: N is Population Size; S is Sample Size *Source: Krejcie & Morgan, 1970*