

Assess the Knowledge and Practice Regarding Healthy Lifestyle Pattern among Non Teaching Staff in Selected Colleges'

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Abstract: Background And Objectives Of Study: A study to assess the knowledge and practice regarding healthy lifestyle pattern among Non teaching staff in selected colleges. Objectives of study were to assess the knowledge and practices regarding healthy lifestyle pattern among Non Teaching staff and to find association of knowledge and practices with selected demographic variables.

Methods: Non-experimental Survey Research design was conducted among non teaching staff using demographic Proforma, structured knowledge questionnaire and self reported checklist.

Results: The study results revealed that 62% of the Non Teaching staff had Good knowledge, 36% of them had average knowledge and 2% of Non Teaching staff had poor knowledge regarding healthy life style pattern. Whereas Practices regarding healthy life style pattern section 68% of the Non teaching staff had Average Practices, 23% of them Non teaching staff had good Practices, 9% of the Non teaching staff had poor Practices regarding healthy life style pattern. There was Significant association found between knowledge and practices and (demographic variable) Education and Monthly income regarding Healthy lifestyle pattern among Non teaching staff, Since p-value corresponding to Education and Monthly income are small (less than 0.05).

Conclusion: Study findings revealed that Non teaching staff has good knowledge and average practices regarding healthy life style pattern. The good knowledge regarding healthy lifestyle pattern and average practices of healthy lifestyle pattern is half done are not of standard for good health. To improve their behaviour and reduce the risk factors for major diseases among Non teaching staff they should have good knowledge with good practices of healthy lifestyle.

Key words: Healthy lifestyle; Non teaching staff; Assess

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I. Introduction

“Health is Wealth” goes the saying. Health is an essential factor for a happy contented life. In 2020 AD, 2.6 million Indians are predicted to die due to coronary heart disease which constitutes 54.1 % of all CVD deaths. Nearly half of these deaths are likely to occur in young and middle aged individuals (30-69 years). The contributing factors for the growing burden of CVDs are increasing prevalence of cardiovascular risk factors especially hypertension, dyslipidemia, diabetes, overweight or obesity, physical inactivity and tobacco use. It is an area where major health gains can be made through the implementation of primary care interventions and basic public health measures targeting diet, lifestyles and the environment¹

Term ‘lifestyle’ is a relatively common theory that often is used to refer to the way people live and is the full range reflection of social values, attitudes and activities. Lifestyle includes behaviors such as food habits, sleeping and resting, physical activity and exercising, weight controlling, smoking and alcohol consumption, immunization against disease, coping with stress and ability to use family and society supports.²

There were 20 million obese women in India in 2016 as compared with 9.8 million obese men, according to a study published in the British medical journal, the Lancet. Worldwide, the number of obese people rose to 641 million in 2016 from 105 million in 1975. According to the study, Global obesity rates almost tripled for men to 11% of the total from 3.2% in 1975, while among women it nearly doubled to 15% from 6.4% in 1975. India saw a more significant rise in obesity from its 19th position for both men and women in 1975 to rankings 5th and 3rd respectively in 2016, reflecting increasing obesity rates among women worldwide. Obesity has been linked to a host of illnesses including diabetes, cardiovascular disease and breathing disorders. Rapid urbanization along with rising income and sedentary lifestyles has all been associated with rising levels of obesity.³

Hypertension is an iceberg disease. It is continually disturbed variable in population. W.H.O. survey (2016) showed that in India the prevalence was 59.9 and 69.9 per 1000 in males and females in urban area and 35.5 and 35.9 per 1000 in male and female in rural area. In order to reduce the high incident rate now the health

system is giving more emphasis on life style modifications along with other measures. Life style is important because how we live determine our choices and this choice decide how healthy we are. Our daily routine may lead us to many risk factors. Habits like eating out at restaurant ant eating fast foods drinking alcohol, smoking staying up late and not get in enough sleep spending more time in front of TV, computer and more use of vehicles rather than walking.⁴

Lifestyle pattern helps to control non communicable diseases and prevent the further complications and chronic diseases. Basic nutritional pattern and physical activities aids a person in many different ways. Therefore to explore the major lifestyle factors among Non Teaching staff, in an effort to improve their behaviour and reduce the risk factors for major diseases healthy lifestyle should be measured.

Objectives Of The Study:

1. To assess the knowledge regarding healthy lifestyle pattern among Non Teaching staff.
2. To assess the practices regarding healthy lifestyle pattern among Non Teaching staff.
3. To find association of knowledge and practices with selected demographic variables.

II. Material And Method

Quantitative Non-experimental Survey Research design was used to assess knowledge and practice regarding healthy lifestyle pattern among Non teaching staff in selected colleges. 100 Non teaching staff (Accountant, clerk, Librarian, Administrative officers) were selected using Non probability Purposive Sampling technique after getting Permission from Principal, Head of the department of selected colleges (i.e. Dr. D. Y. Patil Arts, Commerce and Sciences College, Pimpri Pune, Dr. D. Y. Patil College of Education, Pimpri Pune, Dr. D. Y. Patil Ayurvedic College, Pimpri Pune, Dr. D. Y. Patil College of Homeopathy and Research center, Pimpri, Pune, Dr. D. Y. Patil College of Pharmacy, Akurdi, Pune).Data was collected for period of 04 weeks. The tool used in this study was A Structured knowledge Questionnaire and Self Reported Checklist and demographic Proforma. Questionnaire consists of 20 questions and 4 options and Self reported checklist consists of 12 practices. The demographic Proforma consist of 5 questions to collect baseline data. After getting informed consent from the non teaching staff, structured knowledge Questionnaire and Self Reported Checklist and demographic Proforma was provided and they were assured that their identity would not be revealed in any case.

III. Results

The major findings of the study were based on the objective of the study.

Section I:-Description of samples (non teaching staff) based on their personal characteristics.

Table 1, shows that The study shows that 31% of the Non Teaching staff were aged between 20-30 years, 43% of them were of 31-40 years of age, another 20% of them age 41-50 years, 6% of them age 51-60 years. 61% were males , and 39 % were female , where as 6% were educated up to 12th ,58% were educated up to graduation,36% were post graduated,73% were Hindu,12 % were muslim,10% were Christians and 5% were others. 12% of their monthly family income was less than Rs10000, 43% of their monthly family income was Rs 10,001-15,000, 34% of their monthly family income was Rs 15,001-20,000, 11% of their monthly family income was above Rs 25,000.

Table 1: Description of samples (Non teaching staff) based on their personal characteristics in terms of frequency and percentages.

SR.N O	Demographic variable	Frequency (f)	Percentage (%)
1	Age		
	21-30 years	31	31.0
	31-40 years	43	43.0
	41-50 years	20	20.0
2	51-60 years	6	6.0
	Gender		
3	Male	61	61.0
	Female	39	39.0
3	Monthly family income(in rupees)		
	<Rs10,000	12	12.0
	Rs10,001-15,000	43	43.0
	Rs15,001-25,000	34	34.0
	>Rs25,000	11	11.0

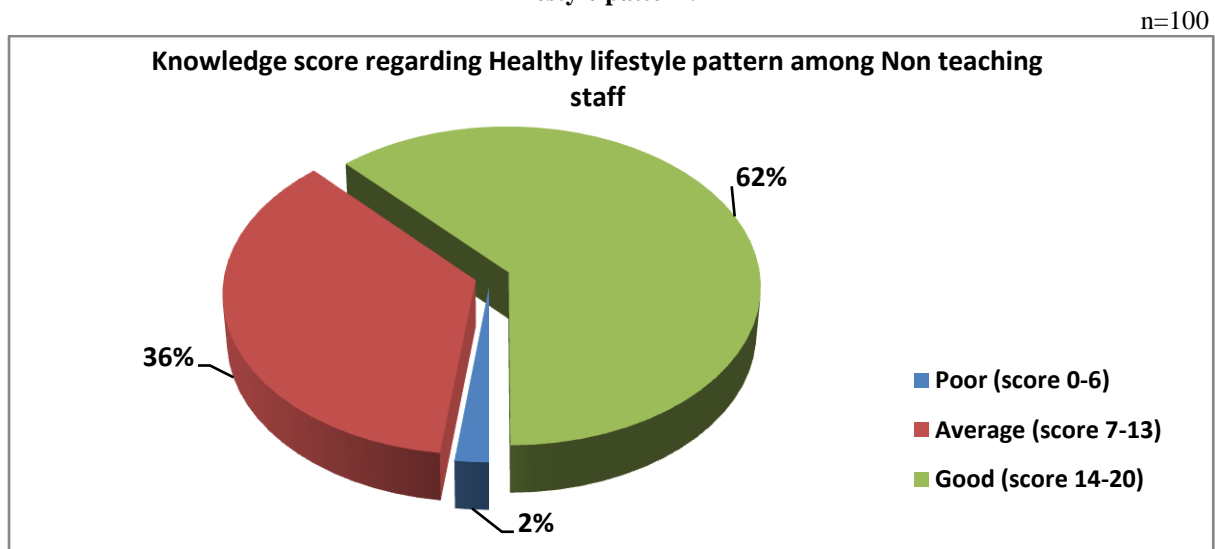
n=100

4	Religion		
	Hindu	73	73.0
	Muslim	10	10.0
	Christian	12	12.0
5	Education		
	12 th	06	6.0
	Graduation	58	58.0
	Post Graduation	36	36.0

Section II: Analysis of data related to Knowledge among non teaching staff regarding healthy lifestyle pattern

The study results revealed that 62% of the Non Teaching staff had Good knowledge, 36% of them had average knowledge and 2% of Non Teaching staff had poor knowledge regarding healthy life style pattern.

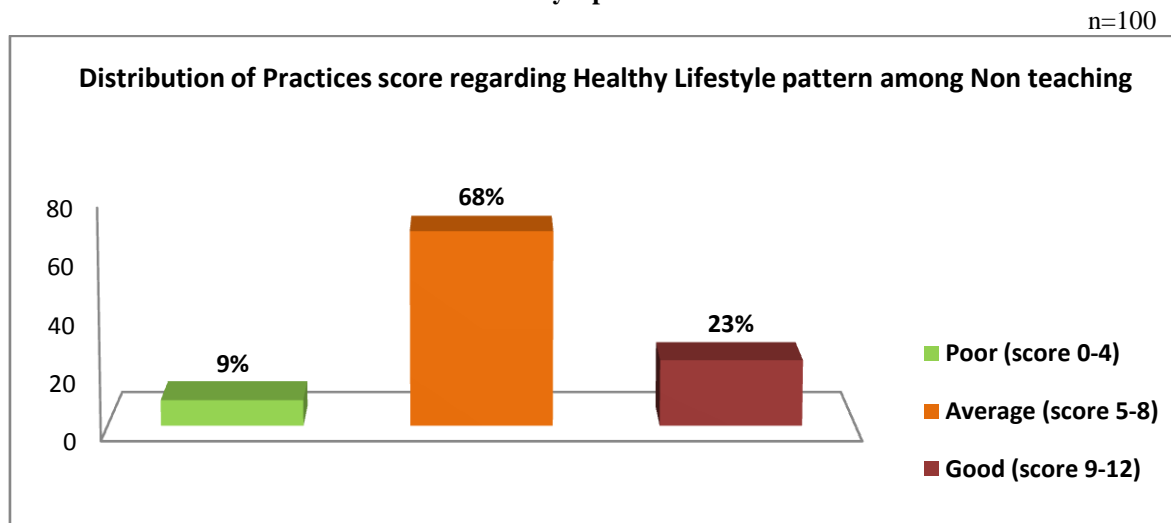
Figure 1: Pie diagram showing analysis of Knowledge among Non teaching staff regarding Healthy lifestyle pattern.



Section III: Analysis of data related to the practices among non-teaching staff regarding healthy lifestyle selected colleges.

Practices regarding healthy life style pattern section 68% of the Non teaching staff had Average Practices, 23% of them Non teaching staff had good Practices, 9% of the Non teaching staff had poor Practices regarding healthy life style pattern

Figure No 2: Bar diagram showing analysis of practices among Non teaching staff regarding Healthy lifestyle pattern.



Section IV (A): Analysis of data related to association of knowledge healthy lifestyle pattern and practices of healthy lifestyle pattern adopted by non teaching staff with selected demographic variable.

Table 2: Fishers exact test for association between Knowledge of healthy lifestyle among Non teaching staff and demographic variables

n=100

Sr. No	Demographic variable		Knowledge of Healthy lifestyles			p-value
			Average	Good	Poor	
1	Age	21-30 years	13	16	2	0.224
		31-40 years	16	27	0	
		41-50 years	5	15	0	
		51-60 years	2	4	0	
2	Gender	Male	23	36	2	0.714
		Female	13	26	0	
3	Religion	Hindu	31	40	2	0.629
		Muslim	2	8	0	
		Christian	3	9	0	
		Other	0	5	0	
4	Education	10 th	0	0	0	0.050*
		12 th	3	3	0	
		Graduate	25	31	2	
		Post Graduate	8	28	0	
5	Monthly family income	<Rs10000	7	4	1	0.004*
		Rs10001-15000	18	29	1	
		Rs15001-25000	6	26	0	
		>25000	5	3	0	

(* - Significant, NS- Not Significant)

Table no. 2, the association of knowledge of healthy lifestyle pattern among non teaching staff with demographic variable was assessed using Fishers exact test. The summary of Fishers exact test was tabulated as below: Since p-value corresponding to Education and Monthly income are small (less than 0.05), Education and Monthly income is the demographic variable which was found to have significant association with knowledge of Non teaching staff regarding Healthy lifestyle

Section IV (B): Analysis of data related to association of Practices healthy lifestyle pattern and practices of healthy lifestyle pattern adopted by non teaching staff with selected demographic variable.

Table 3: Fishers exact test for association between Practices of healthy lifestyle among Non teaching staff and demographic variables

n=100

Sr. No	Demographic variable		Practices of Healthy lifestyles			p-value
			Average	Good	Poor	
1	Age	21-30 years	21	10	0	0.052
		31-40 years	28	11	4	
		41-50 years	15	1	4	
		51-60 years	4	1	1	
2	Gender	Male	43	13	5	0.759
		Female	25	10	4	
3	Religion	Hindu	54	12	7	0.120
		Muslim	6	4	0	
		Christian	5	5	2	
		Other	3	2	0	
4	Education	10 th	0	0	0	0.327*
		12 th	4	1	1	
		Graduate	43	10	5	
		Post Graduate	21	12	3	
5	Monthly family income	<Rs10000	8	4	0	0.075*
		Rs10001-15000	36	6	6	
		Rs15001-25000	21	8	3	
		>25000	3	5	0	

(* - Significant, NS- Not Significant)

Table no. 3, the association of Practice of healthy lifestyle pattern among non teaching staff with demographic variable was assessed using Fishers exact test shows that p-values corresponding to the demographic variable Education and Monthly income were small (less than 0.05), demographic variables Education and Monthly income were found to have significant association with practices of healthy lifestyle of non teaching staff.

IV. Discussion

The present study showed that majority of non teaching staff has good knowledge regarding healthy lifestyle but average practices regarding healthy lifestyle pattern. A similar study was conducted to assess dietary practices and physical activity among medical students of a teaching hospital in South India conducted by Saranya SV et al.(2016). A study was conducted among 438 medical students from a teaching hospital in South India. A predesigned questionnaire was used to assess diet and current physical activity levels] among consenting medical students. Result confined among 438 medical students, 97% were aware of balanced diet, but only 42.9% were following it. Study Concluded unhealthy eating habits were prevalent among medical students, practice of physical activity was good. It is, therefore, essential to identify and take corrective actions to promote healthy lifestyle practices.²⁸ the present study reveals that Non teaching staff had good knowledge of healthy life style pattern and average practices healthy life style pattern, it is necessary to adopt healthy life style measures.

Implications

The findings present study have implications on nursing in Nursing practice, Nursing education, Nursing administration and Nursing research.

Community Nursing Practice

Nurses need to conduct ongoing assessment of healthy lifestyle of every person residing in the community for their good health. Nurses need to identify lifestyle factors among individual and promote the benefits of healthy lifestyles in community health services

Nursing Education

The nursing curriculum should consist of knowledge related healthy lifestyle by using different methods of teaching. Nursing students should be made aware of their role in health promotion in the present and future year, which may help in achieving the goal of Health for All

Nursing Administration

The nurse administrator should take interest in providing the information on health related prevention programs beneficial to public planning. Organization of such programs requires efficient teamwork, planning for manpower, money, material, methods and minutes to conduct successful education programs, both at the hospital and community level.

Nursing Research

There is a need of extensive and intensive research in this area, so that strategies for assessing healthy lifestyle pattern among every individual can be developed. The nurses should conduct research on various aspects healthy lifestyles which provide more scientific data and adds more scientific body of information to the nursing profession.

V. Conclusion

Study findings revealed that Non teaching staff has good knowledge and average practices regarding healthy life style pattern. The good knowledge regarding healthy lifestyle pattern and average practices of healthy lifestyle pattern is half done are not of standard for good health. To improve their behaviour and reduce the risk factors for major diseases among Non teaching staff they should have good knowledge with good practices of healthy lifestyle.

VI. Recommendations

- A similar study may be replicated on larger samples; there by findings can be generalized for a larger population.
- A comparative study may be conducted on all general consumers.
- An experimental study may be conducted to assess the effect of healthy lifestyle pattern.
- A similar kind of study can be undertaken in different settings and different target population.

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